



Association Of State And Territorial Health Officials
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Ms. Margaret Hamburg, Commissioner
Food and Drug Administration
Division of Dockets Management (HFA-305)
5630 Fishers Lane, Room 1061
Rockville, Maryland 20852

Docket ID: FDA-2013-N-0521

Re: Menthol in Cigarettes, Tobacco Products; Request for Comments

Dear Commissioner Hamburg:

The Association of State and Territorial Health Officials (ASTHO) thanks you for the opportunity to highlight the role of the state health officials as key partners in the elimination of health disparities and to urge the FDA to address menthol in cigarettes.

ASTHO is the national nonprofit organization representing public health agencies in the United States, the U.S. Territories, and the District of Columbia. ASTHO members, the chief health officials of these jurisdictions, formulate and influence sound public health policy and ensure excellence in state-based public health practice. ASTHO members, along with our key public health partners and 20 affiliate organizations, represent the leaders in state, territorial, and local health departments.

ASTHO's Tobacco Prevention and Control project provides support to state public health agencies in their role in the development of policies that encourage healthy environments and reduce tobacco use. ASTHO serves as a resource to state health agencies and national and federal partners on perspectives, capacities, challenges, and opportunities to implement state-based tobacco prevention initiatives. ASTHO's tobacco and chronic disease projects also provide national leadership in linking and aligning tobacco control with other chronic disease prevention issues such as obesity, cancer, heart disease, and stroke, as well as alignment with the National Prevention Strategy.

ASTHO supports the regulation of tobacco products by the Food and Drug Administration (FDA). Such a move would give FDA the necessary tools and resources to effectively regulate the manufacturing, marketing, labeling, distribution, and sale of tobacco products. The public

health community has long supported strong FDA tobacco regulation that protects the health and well-being of the public.

FDA should have the authority to regulate the manufacturing, marketing, labeling, distribution, and sale of tobacco products since it is the only agency with both the scientific expertise and regulatory authority to accomplish this mission. ASTHO members support the passage of strong legislation for FDA regulation of tobacco.

Tobacco use remains the leading preventable cause of death in the United States, accounting for approximately one of every five deaths (438,000) each year. More deaths are caused by tobacco use than from HIV/AIDS, illegal drug use, alcohol use, motor vehicle injuries, suicides, and murders combined. Each year, tobacco use results in \$157 billion in direct and indirect medical costs.

To most effectively combat tobacco-related morbidity and mortality and ensure significant program outcomes, tobacco use prevention and control programs must be fully integrated and supported within state health agencies. Infrastructure must be built and maintained for these programs, as well as adequate organizational and financial support. ASTHO members have a strong history of supporting programs that improve tobacco prevention and control efforts in their states.

As a nation, the United States must take meaningful action to achieve health equity by eliminating the health inequities and disparities experienced by significant segments of the population and creating a more equitable society. Health inequities exist among groups based on gender, sexual orientation, race, ethnicity, education, income, disability, and geographic location. Health disparities occur when groups of people experience more disease, death, or disability than what would be normally expected based on their relative size in the population. We often characterize health disparities, or the disproportionate burden of diseases or health conditions, by such measures such as incidence, prevalence, and mortality rates. For example, in the case of menthol, African Americans are 10 to 11 times more likely than Caucasians to smoke menthol cigarettes,ⁱ and almost one in five African Americans smokes menthol cigarettes.ⁱⁱ The burden of health inequities and health disparities constitutes a huge financial and social cost to our nation in terms of both quality and quantity of life.

In 2007, ASTHO made “promoting health equity” a crosscutting goal of the organization, in alignment with the World Health Organization’s position that “the objective of good health is ... twofold: the best attainable average level—goodness—and the smallest feasible differences among individuals and groups—fairness.” ASTHO acknowledges that the United States has made little and inconsistent progress in achieving fairness in health and that public health’s body of knowledge regarding effective health equity promotion practices is currently

insufficient. ASTHO plans to incorporate health equity as an overarching theme in all of the project goals, objectives, and activities proposed, and will support our members in advocating for policies and programs that reduce and address conditions that contribute to disparities. ASTHO's Tobacco Prevention and Control Project seeks to assist state health officials in identifying solutions and collaborating with partners to develop activities that increase awareness, support, and adoption of best practices for health protection, health equity, and primary prevention.

Comprehensive tobacco control is a key policy priority for ASTHO. ASTHO recognizes the Family Smoking Prevention and Tobacco Control Act as a supplement to bolster states' tobacco prevention and control efforts.

Sincerely,

A handwritten signature in black ink that reads "Paul E Jarris, MD". The signature is written in a cursive, flowing style.

Paul Jarris, MD, MBA
Executive Director
Association of State and Territorial Health Officials

ⁱ Lawrence D, Rose A, Fagan P, Moolchan ET, Gibson JT, Backinger CL. "National patterns and correlates of mentholated cigarette use in the United States." *Addiction*. 2010;105 (Suppl 1):13–31.

ⁱⁱ Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. *The NSDUH Report: Recent Trends in Menthol Cigarette Use*. Rockville, MD; 2011. Available at http://www.samhsa.gov/data/2k11/WEB_SR_088/WEB_SR_088.htm. Accessed 9-12-2013.