

- **e-cigarette**  
**core messages**

It is essential to stay on message and be consistent with your messages in every opportunity to successfully make your case for tobacco prevention and cessation.

The following are the key electronic cigarette (e-cigarette) messages developed to date for Alaska. While you do not need to deliver these messages verbatim, it is important that they be conveyed in every interaction, whether in face-to-face interviews, public speaking opportunities, or written communication in its many forms.

# ● core messages

## Overarching Statement

**E-cigarettes are neither harmless nor healthy.**

***E-cigarettes are not approved by the FDA for smoking cessation, they are not regulated for safety, numerous studies raise concern for their negative impact on health, and the long-term health implications of e-cigarette use are unknown.***

## Background on E-Cigarettes

***E-cigarettes—also known as electronic nicotine delivery systems (ENDS), e-hookahs, hookah pens, vape pens, vaporizers, e-cigars, and e-pipes—allow users to inhale a heated aerosol containing nicotine and other substances<sup>1</sup>, an activity commonly referred to as “vaping.”***

- There are more than 450 different brands of e-cigarettes on the market today, and e-cigarettes come in over 7,500 different flavors.<sup>2</sup>
- Several brands are owned by major tobacco companies, such as Mark Ten (Altria), “blu” (Imperial Tobacco) and “Vuse” (Reynolds American).

## Alaska E-Cigarette Use

***E-cigarette use in Alaska is higher among youth (18%) than smoking (11%)<sup>3</sup> and has grown significantly among adults.<sup>4,5</sup>***

- Among Alaska adults, the prevalence of e-cigarette use has grown significantly from less than 1% in 2010 to 7% in 2014.<sup>4,5</sup>
- In Alaska, the prevalence of e-cigarette use is higher among high school students, with 18% reporting current use of e-cigarettes in 2015.<sup>3</sup>

## **Federal Regulation**

***E-cigarettes are not approved by the FDA for smoking cessation, although they have issued a proposed rule to regulate them.***

- There are no federal regulations or quality control measures for e-cigarettes and their contents, which may vary widely.<sup>6,7</sup>
- Some research indicates that e-cigarette nicotine levels differ from those claimed on the packaging.<sup>1</sup>
- E-cigarettes meet the FDA's legal definition of a tobacco product, and the FDA has issued a proposed rule to regulate them.<sup>8</sup>

## **Health Impacts and Safety**

***E-cigarettes have not been proven safe to use—research to date on their health effects show possible health harms and the need for further study.***

- Nicotine is a highly addictive drug<sup>9</sup> and most e-cigarettes contain nicotine. Some research indicates that e-cigarette nicotine levels differ from those claimed on the packaging.<sup>1</sup>
- Nicotine is toxic to developing fetuses and impairs fetal brain and lung development.<sup>9,10</sup>
- Poisonings have resulted among users and non-users due to swallowing of nicotine liquid, absorption through the skin, and inhalation. Nationally, e-cigarette exposure calls to poison centers increased from one per month in September 2010 to 215 per month in February 2014, and over half of those calls were regarding children ages 5 and under.<sup>11</sup>
- Because the adolescent brain is still developing, nicotine use during adolescence can disrupt the formation of brain circuits that control attention, learning, and susceptibility to addiction.<sup>10</sup>
- Short term use of e-cigarettes has been shown to impair lung function, resulting in difficulty breathing.<sup>12</sup>

## Secondhand Aerosol

*E-cigarette aerosol is not harmless “water vapor” and is not as safe as clean air.<sup>13</sup>*

- E-cigarettes generally emit lower levels of dangerous toxins than combusted cigarettes.<sup>14</sup> However, in addition to nicotine, **e-cigarette aerosols can contain propylene glycol, glycerin, flavorings, heavy metals, ultrafine particulate, and cancer-causing agents like acrolein.**<sup>15</sup> The long-term effects of exposure to these substances, even at low concentrations, are unknown.<sup>16</sup>
- Some e-cigarette manufacturers claim that the use of propylene glycol, glycerin, and food flavorings is safe because they meet the FDA definition of “Generally Recognized as Safe” (GRAS). However, **GRAS status applies to additives for use in foods, NOT for inhalation.** The health effects of inhaling these substances are currently unknown.

## Clean Indoor Air Policies

*It is imperative that comprehensive smokefree workplace policies, as well as smokefree homes and vehicles, include protection against secondhand e-cigarette aerosol.*

- E-cigarette emissions are not toxin-free and a case can be made that the public should be protected from secondhand aerosol.<sup>15,17</sup>
- Prohibitions on e-cigarette use in indoor areas where conventional smoking is not allowed could:<sup>13</sup>
  1. Preserve clean indoor air standards and protect bystanders from exposure to secondhand e-cigarette aerosol.<sup>13</sup>
  2. Support tobacco-free norms.<sup>13</sup>
- Communities have come to expect clean indoor air. E-cigarette use threatens this standard and makes enforcement confusing.
- Instead of comparing aerosol from e-cigarettes to secondhand smoke, we should be comparing it to clean air.

## Cessation

***E-cigarettes are not approved by the FDA for smoking cessation and currently the evidence is insufficient to conclude that e-cigarettes are effective for smoking cessation.<sup>1,18</sup>***

- Seven medicines are approved by the FDA for smoking cessation, and are proven safe and effective when used as directed. The effectiveness of such FDA-approved medications are enhanced when used in combination with counseling support programs, such as those held in local health services or through a quitline.<sup>18,19</sup>
- Tobacco and e-cigarette users can access FREE quitting help and FDA-approved nicotine replacement therapy (NRT) by calling Alaska's Tobacco Quit Line at 1-800-QUIT NOW (1-800-784-8669) or logging on to [alaskaquitline.com](http://alaskaquitline.com).

## Impact on Youth/Youth Initiation

***The prevalence of e-cigarette use is higher among Alaska high school youth than adults. Youth e-cigarette use may increase nicotine addiction among young people and may lead kids to try other tobacco products.***

- The high rate of e-cigarette use is a cause for concern since nicotine is a highly addictive substance and may have harmful effects on developing adolescent brains.<sup>9, 20, 21</sup>
- New data are showing that e-cigarettes have the potential to addict youth to nicotine and increase their uptake of tobacco products.<sup>22</sup>
- In 2015, 18 percent of Alaska high school students use e-cigs compared to 11 percent of Alaska teens who currently smoke cigarettes.<sup>3</sup>

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- In 2015, 34 percent of Alaska Hispanic high school students currently use e-cigarettes, compared to 18 percent in non-Hispanic white students.<sup>3</sup>
- Nationally, the use of e-cigarettes among youth more than tripled from 4.5% in 2013 to 13.4% in 2014.<sup>21</sup>
- Nationally, more youth reported using e-cigarettes than conventional tobacco products.<sup>21</sup>

## Unrestricted Marketing

***E-cigarette advertising is unrestricted. Marketing tactics mirror strategies used in the past by tobacco companies, which are no longer allowed because of its appeal to youth.***

- Although the advertisement of cigarettes has been banned from television in the United States since 1971, e-cigarettes are now marketed on television and other mainstream media channels.<sup>23</sup>
- E-cigarettes are aggressively marketed using similar tactics as those proven to lead to youth cigarette smoking. Tactics include: candy-flavored products; youth-resonant themes such as rebellion, glamour, and sex; celebrity endorsements; and sports and music sponsorships.<sup>24,25</sup>
- In a randomized controlled trial, adolescents who viewed e-cigarette TV advertisements reported a significantly greater likelihood of future e-cigarette use compared with the control group. They were also more likely to agree that e-cigarettes can be used in places where smoking is not allowed.<sup>26</sup>
- Spending on advertising of e-cigarettes tripled each year from 2011 (\$6 million) to 2013 (\$82 million). Sales of e-cigarettes also increased dramatically over a similar period.<sup>24,27,28</sup>





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- <sup>15</sup> Schober, W., et al., Use of electronic cigarettes (e-cigarettes) impairs indoor air quality and increases FeNO levels of e-cigarette consumers. *Int J Hyg Environ Health*, 2014. 217(6): p. 628-37.
- <sup>16</sup> Alaska Department of Health and Human Services, E-cigarettes: a review of the literature. 2015, Section of Chronic Disease Prevention and Health Promotion, Division of Public Health, Alaska Department of Health and Social Services: Anchorage, Alaska.
- <sup>17</sup> Lippi, G., et al., E-cigarettes and cardiovascular risk: beyond science and mysticism. *Semin Thromb Hemost*, 2014. 40(1): p. 60-5.
- <sup>18</sup> U.S. Food and Drug Administration. FDA 101: Smoking Cessation Products. February 19, 2016; Available from: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm198176.htm#learn>.
- <sup>19</sup> Fiore, M., et al., Treating tobacco use and dependence: 2008 update U.S. Public Health Service Clinical Practice Guideline executive summary. *Respir Care*, 2008. 53(9): p. 1217-22.
- <sup>20</sup> National Youth Tobacco Survey, 2013.
- <sup>21</sup> National Youth Tobacco Survey, 2014.
- <sup>22</sup> Leventhal, A.M., et al., Association of Electronic Cigarette Use With Initiation of Combustible Tobacco Product Smoking in Early Adolescence. *Jama*, 2015. 314(7): p. 700-7.
- <sup>23</sup> Bunnell, R.E., et al., Intentions to smoke cigarettes among never-smoking US middle and high school electronic cigarette users: National Youth Tobacco Survey, 2011-2013. *Nicotine Tob Res*, 2015. 17(2): p. 228-35.
- <sup>24</sup> Legacy, Vaporized: E-cigarettes, advertising, and youth. 2014.
- <sup>25</sup> U.S. Department of Health and Human Services, Reports of the Surgeon General. Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General. 2012, Centers for Disease Control and Prevention: Atlanta, Georgia.
- <sup>26</sup> Farrelly, M.C., et al., A Randomized Trial of the Effect of E-cigarette TV Advertisements on Intentions to Use E-cigarettes. *Am J Prev Med*, 2015. 49(5): p. 686-93.
- <sup>27</sup> Kim, A.E., K.Y. Arnold, and O. Makarenko, E-cigarette advertising expenditures in the U.S., 2011-2012. *Am J Prev Med*, 2014. 46(4): p. 409-12.
- <sup>28</sup> Loomis, B.R., et al., National and State-Specific Sales and Prices for Electronic Cigarettes-U.S., 2012-2013. *Am J Prev Med*, 2016. 50(1): p. 18-29.
- <sup>29</sup> Maloney, E.K. and J.N. Cappella, Does Vaping in E-Cigarette Advertisements Affect Tobacco Smoking Urge, Intentions, and Perceptions in Daily, Intermittent, and Former Smokers? *Health Commun*, 2016. 31(1): p. 129-38.