

September 2022

Response to the proposed amendment to the Tobacco and Related Products Order prohibiting almost all nicotine vape flavors' as specified in Article 2.12

Preamble:

INNCO is a global community of ex-smokers helping smokers quit and defending the rights of 112 million adult People Who Use Safer Nicotine (PWUSN) to avoid toxic forms of tobacco. In our view, current global efforts to prevent or discourage the 1.3 billion people who smoke cigarettes (or use toxic oral smokeless forms of tobacco) from shifting to safer alternatives is equivalent to mass murder. Safer alternatives include nicotine patches, nicotine gum, nicotine lozenges, prescription nicotine inhalers, nicotine pouches, nicotine vapes, snus and HTPs.

Nicotine has been demonised by old-school "experts" in the tobacco control field to discourage smoking (a very good goal). But violating Truth-Telling to achieve that goal is unethical. Smokers deserve the truth: Nicotine itself does not cause cancer, cardiovascular or lung disease. It's the smoke created from combustion that causes harm. Therefore, safer nicotine alternatives to toxic forms of tobacco should be promoted to save smokers' lives. Not doing so is negligent homicide.

To reduce the horrendous death toll from toxic forms of tobacco, people who use the toxic products should be incentivized to quit or switch to safer nicotine alternatives. To boost that switch rate, those alternatives must be appealing to smokers, and they must be accurately informed of the relative risks compared to cigarettes.

To save lives, safer nicotine alternatives must be Acceptable, Affordable and Available to people who use toxic forms of tobacco. These "three 'A's" now guide all efforts to ensure access to life-saving drugs and vaccines in low-income countries. They should also guide all regulatory efforts to reduce the horrendous disease and death toll from smoking.

Nicotine vapes ("e-cigarettes") are product substitutes for combustible tobacco cigarettes. Smokers' access to harm reduction alternatives is a human right, a social justice imperative and a life-or-death policy issue. We wish to thank the Government of The Netherlands for the opportunity to express our views on this important public health policy proposal to impose prohibition on almost all of the 'flavours' that adult ex-smokers use to stay smoke-free.

Our position, explained in more detail below, is based on both scientific evidence and our own lived-experience. We are ex-smokers. We are informed People Who Use Safer Nicotine (PWUSN). Nothing about us without us!

Proposed prohibition of nicotine vape 'flavours' in The Netherlands:

Almost all nicotine vape products are artificially flavoured (including those that are "tobacco flavoured"). This is because the molecule, nicotine, has almost no taste or smell. Tobacco flavour is as

artificial as the fruit, dessert or candy flavours that most adults prefer. INNCO objects to the very framing of the language that tries to distinguish 'flavour' vs. tobacco-flavour; it gets us off to a bad start because it's not accurate.

When harm reduction deniers refer to 'flavours,' what they really mean is fruit, dessert or candy flavours. One common claim is that such flavours only exist to lure teens, or that they have been added to "to mask the harsh taste of nicotine." Policies based on misinformation are likely to be bad policies.

Nicotine is a plant-derived molecule. It has no discernable taste or smell (other than a faint peppery smell that some people perceive).

INNCO members are accustomed to this level of mendacity in our opponents. We, in contrast, adhere to peer-reviewed evidence and logic. Let us turn first to simple logic.

In the USA, 85% of teen nicotine vapers use 'flavours.' 96% of Americans who actually own an e-cigarette device and buy products are adults. 90% of adult vapers prefer 'flavors.' So 86% of all nicotine vape products are 'flavored' (due to adult demand).

Imagine if 8 in 10 bicycles are red. And researchers discover that 8 in 10 teen bicycle riders ride red bicycles. No sane person would claim that the colour red causes teen bicycle riding. Or that prohibiting the red bicycles will reduce teen bicycle riding (obviously, they can all just shift to blue, green, orange or yellow bicycles).

INNCO notes further that in many cases, the same organizations that claim under-age use of 'flavoured' nicotine vapes is a gateway to smelly, stinky, deadly, combustible tobacco cigarettes... also claim that prohibiting flavours (other than tobacco flavour) will reduce under-age use. This is a profound logical contradiction. They are claiming that (a) vaping a gateway to tobacco cigarettes and (b) tobacco flavour a teen-repellent.

It can't be both. In fact, it's neither.

Beyond pure logic, there is also evidence from the real world. INNCO wishes to bring the Government of The Netherlands' attention to our official <u>Position Statement on Potential Bans of 'Flavoured' Nicotine</u> Vapes.

In this document, we recommend that no vast prohibition experiment should be implemented without first conducting a careful Health Impact Assessment. This assessment should be based on peer-reviewed evidence. Our recommendation is comparable to the environmental impact assessments required before building a bridge, a building or a factory.

The evidence-based health impact assessment that we recommend should endeavor to estimate the following. If nicotine vape 'flavours' are prohibited, how many:

- Fewer teens will vape nicotine?
- Teen vapers will shift to combustible tobacco cigarettes?
- Teen vapers will shift to other drugs (e.g., cannabis)?
- Adult vapers will relapse to smoking?
- Fewer adult smokers will quit?

Illicit products will arise and be sold with no excise revenue, quality control or age checks?

Our position statement provides links to government surveys and peer-reviewed science that can be a good starting point for that Health Impact Assessment. If anyone cares about evidence, they should be concerned by what the evidence actually shows. 'Flavour' prohibition may-or-may-not reduce teen nicotine vaping. It will cause some teen vapers to switch to deadly cigarette smoking, and cause a significant number of adult vapers to relapse to smoking. It will also reduce smoking cessation rates.

Ignoring this evidence from peer-reviewed studies is equivalent to ignoring evidence on climate change, vaccine safety, and the roundness of the Earth. There is a legitimate tension between the laudable goal of reducing under-age <u>use</u> vs. reducing adult <u>death</u> from toxic forms of tobacco. However, INNCO notes that use (which can, and does, change) carries a different moral weight than death (which is final).

The stated goal of any nicotine vape 'flavour' ban is to reduce under-age use and protect children. This is the first question in the Health Impact Assessment that we recommend you conduct. INNCO notes that the answer to each of the other five questions is very likely to show that the prohibition you are considering will, literally, kill people. In healthcare ethics, killing people is generally considered to be bad.

INNCO respectfully wishes to remind the Government of The Netherlands that we already know cigarettes kill people. We wish to point out, further, that all efforts to make safer nicotine alternatives less acceptable to adult smokers (e.g., 'flavour' bans); less affordable to adult smokers (taxes); and less available to adult smokers (e.g., online sales and mail shipment prohibitions that are now being imposed in some parts of the USA) will - inevitably - be seen by history as a form of mass murder.

We are ex-smokers. Saving smokers' lives matters. We are informed ex-smokers who use safer nicotine alternatives. We have lived-experience (our health has improved dramatically). Finally, we note that it is now ethically ideal to include people in the LGBTQ community and People Living with HIV/AIDS, in high-level discussion of policies that affect them. We stand ready to contribute to respectful debate.

Respectfully and on behalf of users, INNCO member organisations and INNCO Secretariat

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About us: INNCO is a global community of ex-smokers helping smokers quit, and defending the rights of 112 million People Who Use Safer Nicotine (PWUSN). We believe that current global efforts to deny 1.3 billion people — who use toxic forms of tobacco — access to consumer-satisfactory safer nicotine alternatives is a form of mass murder. Safer alternatives include nicotine patches, nicotine gum, nicotine lozenges, prescription nicotine inhalers, nicotine pouches, nicotine vapes, snus and heated tobacco products. Almost all of us have lost a loved one to smoking. Almost all of us experienced health improvements after we quit smoking. This is neither a game nor a personal affectation. Access to harm reduction for as long as the vastly more dangerous combustible products are legal and widely sold is a human right, a social justice imperative, and a life-or-death issue. INNCO is a non-profit alliance of 35 independent volunteer-led Member Organizations around the world. We are funded by individual inkind contributions and small donations from thousands of adult ex-smokers. INNCO's Secretariat (but not our Member Organizations or Governing Board) is supported by a grant from the Foundation for a Smoke-Free World (FSFW), a US non-profit 501(c)(3) private foundation with a mission to end smoking in this generation. The FSFW is funded by a tobacco company. We are not comfortable with that. But we are transparent about it. INNCO is independent. We were founded in 2016, two years before FSFW came into existence. Our mission, purpose and goals are driven solely by our Members and Governing Board. Our Member Organizations are led by unpaid volunteers who, as a condition of membership, accept no funding from industry. In contrast, numerous organizations around the world oppose safer nicotine alternatives. Many, if not most, are funded by wealthy harm reduction deniers. None declare this as a conflict of interest (COI). And that is a profound violation of public trust. The contents, selection and presentation of facts in this document are the sole responsibility of the author.