ASK ME SESSION

Informative Session on Science and Harm Reduction

> Tuesday 5th September, 2023 8.00 to 9.30 hrs (Dakar time) 9.00 to 10.30 hrs (Lagos time)





Clives Bates

DIRECTOR OF ACTION ON SMOKING AND HEALTH UK

Panel 1 – Tobacco Harm Reduction and Smoke Free Products



MEDICAL DOCTOR AND HEALTHCARE EXPERT SOUTH AFRICA

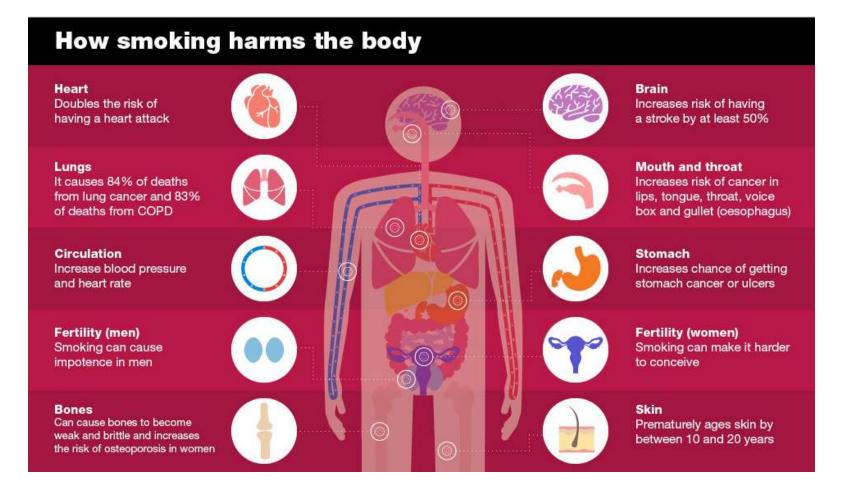
Panel 2 – Policies, Regulation and the Science behind Tobacco Harm Reduction

Panel 1: Tobacco Harm reduction and Smoke-free Products

Clive Bates

Counterfactual Consulting Former Director, Action on Smoking and Health UK Smoking, nicotine and harm

Well researched toll of harm from smoking...



Smoking prematurely kills around 8 million annually

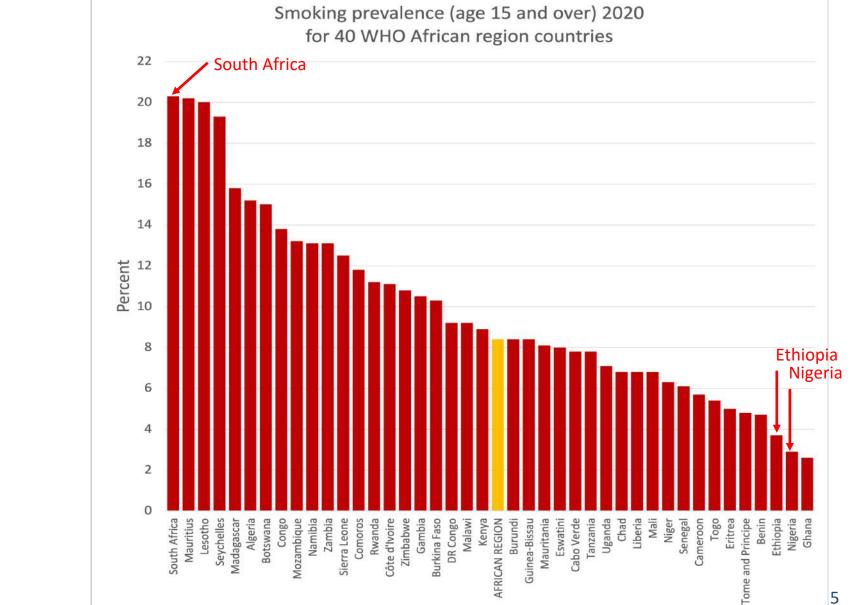
...more than obesity, alcohol, road accidents, drug misuse and HIV *combined*

...similar to COVID-19, but *every year*

Harm is the currency of tobacco control



Smoking prevalence in Africa – WHO (2021)



Published November 2021

WHO global report on trends in prevalence of tobacco use 2000-2025

Fourth edition



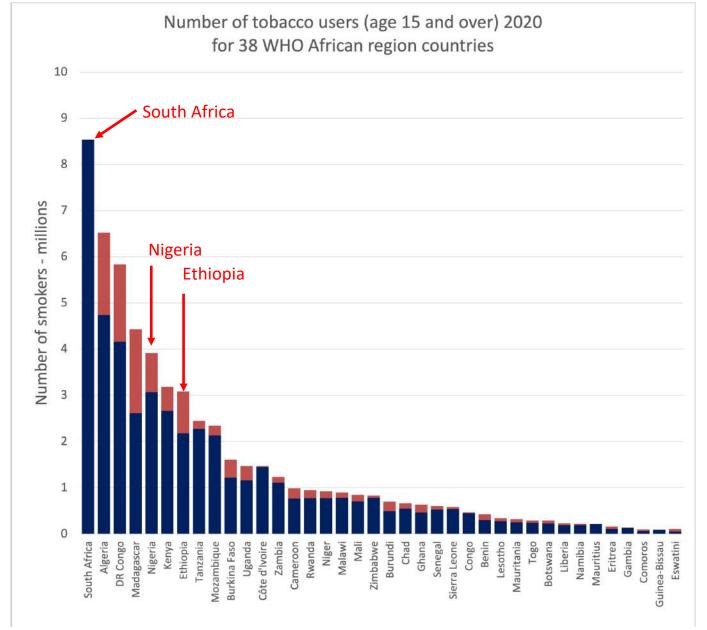
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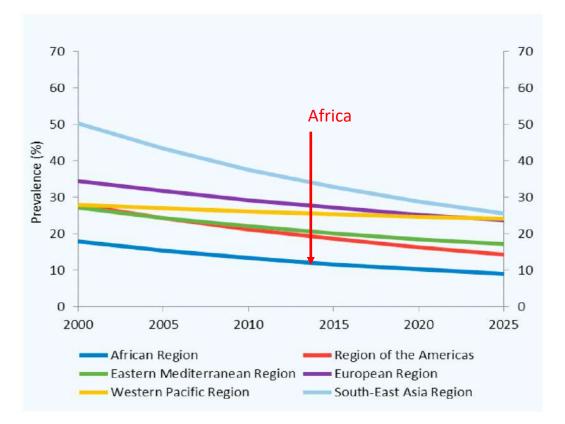
WHO global report on trends in prevalence of tobacco use 2000–2025

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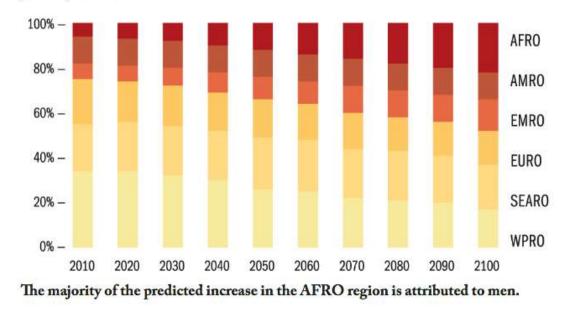


Declining prevalence but increasing population will increase African share

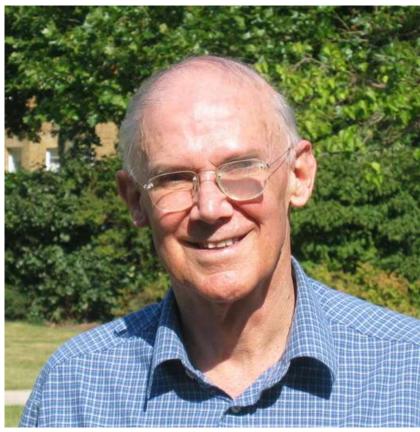


REGIONAL FORECAST

Combined male and female smokers by WHO region with current tobacco control policies, 2010–2100



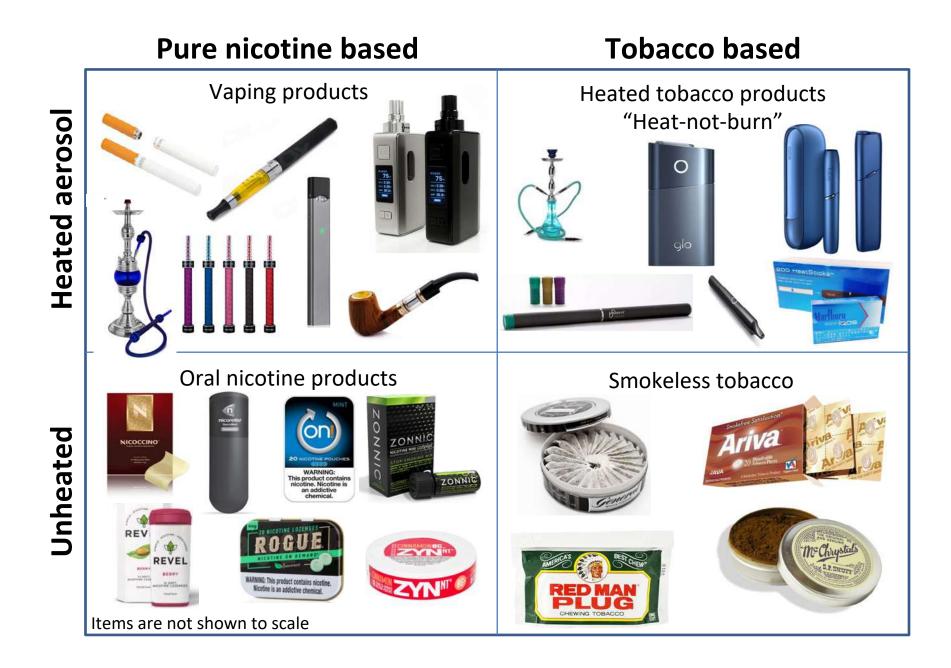
But harms are associated with the delivery system, not the drug



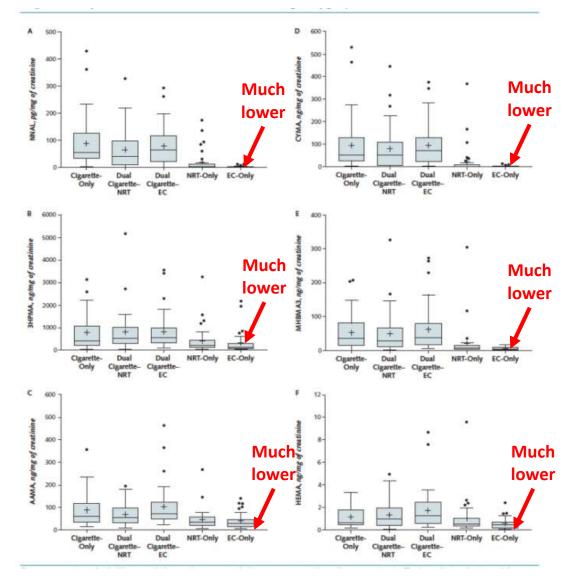
Professor Michael Russell 1932-2009

"People smoke for the nicotine but die from the tar".

Russell MJ. Low-tar medium nicotine cigarettes: a new approach to safer smoking. BMJ 1976;1:1430–3



The strongest evidence for deeply reduced harm is reduced exposure



Royal College of Physicians – on relative risk



Nicotine without smoke Tobacco harm reduction

A report by the Tobacco Advisory Group of the Royal College of Physicians

April 2016

"Although it is not possible to precisely quantify the longterm health risks associated with e-cigarettes, the available data suggest that they are unlikely to exceed 5% of those associated with smoked tobacco products, and may well be substantially lower than this figure".

US National Academies of Sciences, Engineering and Medicine

The National Academies of SCIENCES • ENGINEERING • MEDICINE

CONSENSUS STUDY REPORT

Public Health Consequences of **E-Cigarettes**

"While e-cigarettes are not without health risks, they are likely to be far less harmful than combustible tobacco cigarettes."

Contraction of the second seco

1,400-page assessment concludes very low risks compared to smoking

Nicotine vaping in England: an evidence update including health risks and perceptions, 2022 NIHR National Institute for Health Research International A report commissioned by the Office for Health Improvement and Disparities A systematic review of the health risks and health Published 29 September 2022 Debbie Robson, Leonie Brose, Robert Calder, Eve Taylor, Linda Bauld, Ar Review methods were amended after registration. Please see the revision r Citation Debbie Robson, Leonie Brose, Robert Calder, Eve Taylor, Linda Bauld, Ann systematic review of the health risks and health effects of vaping. PROSPER from: https://www.crd.vork.ac.uk/prospero/display_record.php?iD=CRD42 **Review** question 1. What effect does vaping (active and second-hand) have on the risk of getti cardiovascular disease and other health conditions? 2. Among people with existing health conditions (as above), what are the effe Searches We will search the following databases: CINAHL, Embase, MEDLINE, Psych August 2017 to August 2021. A search strategy comprising terms to identify all the literature on e-cigarette full range of health implications and outcomes are included. We will include peer-reviewed published papers and those in press. English, French, German language publications will be included. We will exclude non-peer reviewed literature (e.g. posters, conference abstract Authors: Ann McNeill, Erikas Simonavičius, Leonie Brose, Eve Taylor, Katherine East, Elizabeth Zuikova, Robert Calder, Debbie Robson Types of study to be included We will include randomised controlled trials, controlled and uncontrolled trial King's College London and after studies, cohort, case control and cross-sectional and longitudinal s and case series. We will exclude qualitative studies We will include peer-reviewed published papers and those in press. English, French, German language publications will be included. We will exclude non-peer reviewed literature (e.g. posters, conference abstr Condition or domain being studied Exposure to vaping (first and second hand) in humans, cells and animals. We use the term 'vaping' as the act of using an e-cigarette or vaping product, and the term 'vaping products' to describe e-cigarettes and refill containers (e-liquids): We use the term 'vapers' to refer to people who regularly use vaping products or e-cigarettes and we use the term 'vapour' for the aerosol resulting from use. Our terms do not include cannabis vaping or the vaping of other illicit substances and are not the subject of this

"...vaping poses only a small fraction of the risks of smoking"

McNeill, A, Simonavičius, E, Brose, LS, Taylor, E, East, K, Zuikova, E, Calder, R and Robson, D (2022). Nicotine vaping in England: an evidence update including health risks and perceptions, September 2022. A report commissioned by the Office for Health Improvement and Disparities. London: Office for Health Improvement and Disparities.

The end of smoking

U.S Annual Review of Public Health

A ANNUAL REVIEWS

Annual Review of Public Health

Harm Minimization and Tobacco Control: Reframing Societal Views of Nicotine Use to Rapidly Save Lives

David B. Abrams,¹ Allison M. Glasser,² Jennifer L. Pearson,³ Andrea C. Villanti,⁴ Lauren K. Collins,² and Raymond S. Niaura¹

¹College of Global Public Health, New York University, New York, NY 10012, USA; email: David B.Ahrann@Myu.eth, niurr@Myu.eth ²Schroeder Institute for Tobacco Research and Policy Studies, Truth Initiative, Washington, DC 20001, USA; email: ng50¹⁰@Myu.eth, kart.Jaurend@gmail.com ³School of Community Health Sciences, University of Nevada, Reno, Nevada 89537, USA; email: jennipearson@anr.ethu ⁴Vermoont Center on Behavior and Health, University of Vermont, Burlington, Vermont 05401, USA; email: anter avillant@www.osda

Annu, Rev. Public Health 2018, 39:193-213

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First published as a Review in Advance on January 11, 2018

The Annual Review of Public Health is online at publicalth annual reviews.org

https://doi.org/10.1146/annurev-publikealth-040617-013849

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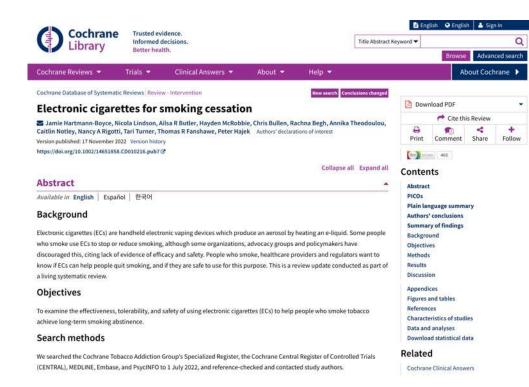
Keywords

harm minimization, nicotine, e-cigarettes, smoking, tobacco

Abstract

Inhalation of the toxic smoke produced by combusting tobacco-products, primarily cigarettes, is the overwhelming cause of tobacco-related disease and death in the United States and globally. A diverse class of alternative nicotine delivery systems (ANDS) has recently been developed that do not combust tobacco and are substantially less harmful than cigarettes. ANDS have the potential to disrupt the 120-year dominance of the cigarette and challenge the field on how the tobacco pandemic could be reversed if nicotine is decoupled from lethal inhaled smoke. ANDS may provide a means to compete with, and even replace, combusted cigarette use, saving more lives more rapidly than previously possible. On the basis of the scientific evidence on ANDS, we explore benefits and harms to public health to guide practice, policy, and regulation. A reframing of societal nicotine use through the lens of tharm minimization is an extraordinary opportunity to enhance the impact of tobacco control efforts. "Alternative nicotine delivery systems have the potential to **disrupt the 120-year dominance of the cigarette**....

Evidence from randomised controlled trials



"There is high-certainty evidence that e-cigarettes with nicotine increase quit rates compared to NRT"

Evidence for beneficial population effect 'triangulates'











- Also, user testimony
- And... it is what you would expect!!

Policy considerations (see Panel 2)

The public health mechanism



Royal College of Physicians – perverse unintended consequences

Royal College of Physicians



Nicotine without smoke Tobacco harm reduction

A report by the Tobacca Advisory Group of the Royal College of Physicians

April 2016

12.10 Regulation and harm reduction

It is difficult to determine, and more difficult still to apply, the right level of regulation for reduced-harm products. The wide range of different regulatory approaches adopted in different countries in relation to e-cigarettes, which spans a spectrum from freedom to market as a consumer product to complete prohibition, reflects a desire, on the one hand, to encourage as many smokers as possible to switch from tobacco to e-cigarettes and, on the other, to prevent harm to users or others from e-cigarette use. A risk-averse, precautionary approach to e-cigarette regulation can be proposed as a means of minimising the risk of avoidable harm, eg exposure to toxins in e-cigarette vapour, renormalisation, gateway progression to smoking, or other real or potential risks. However, if this approach also makes e-cigarettes less easily accessible, less palatable or acceptable, more expensive, less consumer friendly or pharmacologically less effective, or inhibits innovation and development of new and improved products, then it causes harm by perpetuating smoking. Getting this balance right is difficult.

Royal College of Physicians – perverse unintended consequences





Nicotine without smoke Tobacco harm reduction

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April 2016

...if a risk-averse, precautionary approach makes e-cigarettes:

- less easily accessible
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- inhibits innovation ...

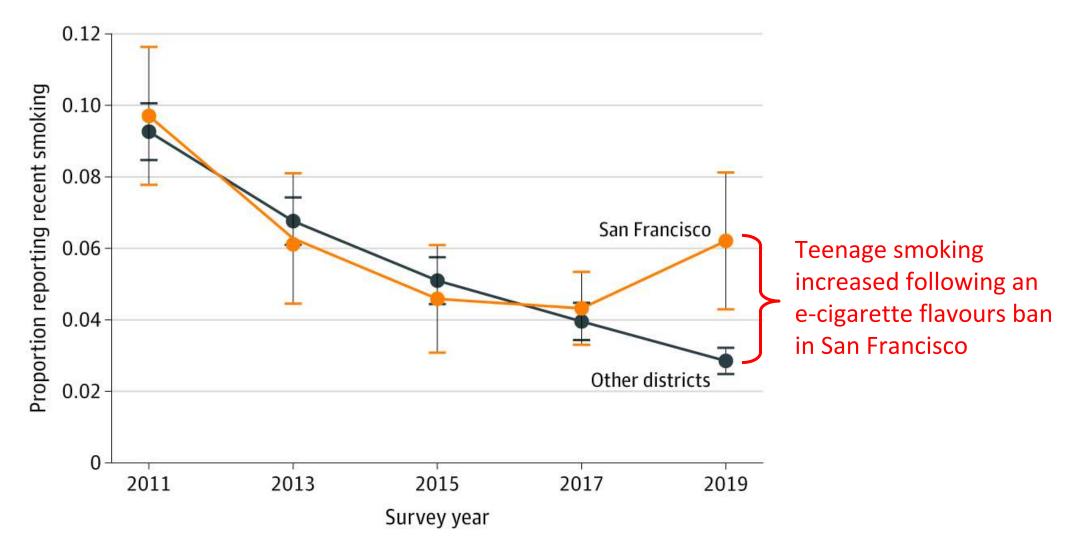
...then it causes harm by perpetuating smoking.

1. Prohibition of vaping and other smokefree products



2. Banning e-liquid flavours

Past-30-Day Smoking Trends Among High School Students Younger Than 18 Years



Friedman AS. A Difference-in-Differences Analysis of Youth Smoking and a Ban on Sales of Flavored Tobacco Products in San Francisco, California. *JAMA Pediatrics*. 2021

The solution: Risk-Proportionate Regulation

Measure	Cigarettes, hand-rolling tobacco and other combustibles	Vaping, heated tobacco smokeless and oral nicotine
Taxation	Relatively high taxes	Low or zero tax (sales tax only)
Advertising	Prohibit other than within trade	Control themes and placement
Warnings	Graphic warnings depicting disease	Messages encouraging switching
Public places	Legally mandated controls	Up to the discretion of the owner
Plain packaging	Yes	Νο
Ingredients	Control reward-enhancing additives	Blacklist material health hazards
Age restrictions	No sales to under-21s	No sales to under-18s
Internet sales	Banned	Permitted with age controls
Product standards	Control risks and reduce appeal	Control risks

Why do people use nicotine?

Nicotine acts on nicotinic cholinergic receptors, triggering the release of dopamine, producing rewarding psychoactive effects. Nicotine acts on nicotinic cholinergic receptors, triggering the release of dopamine producing rewarding psychoactive effects.

Why do people use nicotine? Mood control

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Pharmacology of Nicotine: Addiction, Smoking-Induced Disease, and Therapeutics

Annual Review of Pharmacology and Toxicology

Vol. 49:57-71 (Volume publication date 2/10/2009) First published online as a Review in Advance on October 3, 2008 https://doi.org/10.1146/annurev.pharmtox.48.113006.094742

Neal L. Benowitz

Departments of Medicine and Biopharmaceutical Sciences, Division of Clinical Pharmacology and Experimental Therapeutics, Medical Service, San Francisco General Hospital Medical Center, University of California, San Francisco, California 94143-1220; email: NBenowitz@MedSFGH.ucsf.edu In humans, nicotine from tobacco induces stimulation and pleasure, and reduces stress and anxiety. Smokers come to use nicotine to modulate their level of arousal and for mood control in daily life.

Why do people use nicotine? Mood control

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Neal L. Benowitz

Departments of Medicine and Biopharmaceutical Sciences, Division of Clinical Pharmacology and Experimental Therapeutics, Medical Service, San Francisco General Hospital Medical Center, University of California, San Francisco, California 94143-1220; email: NBenowitz@MedSFGH.ucsf.edu In humans, nicotine from tobacco induces stimulation and pleasure, and reduces stress and anxiety. Smokers come to use nicotine to modulate their level of arousal and for mood control in daily life.

Why do people use nicotine? Cognitive enhancement

Cognitive improvement is one of the bestestablished therapeutic effects of nicotinic stimulation.

Nicotine improves performance on attentionally and cognitively demanding vigilance tasks and response inhibition performance, suggesting that nicotine may act to optimize attention/response mechanisms as well as enhancing working memory in humans.

Article Navigation

JOURNAL ARTICLE

Therapeutic Applications of Nicotinic Stimulation: Successes, Failures, and Future Prospects

Paul A Newhouse, MD 🐱

Nicotine & Tobacco Research, Volume 21, Issue 3, March 2019, Pages 345–348, https://doi.org/10.1093/ntr/nty189 Published: 08 September 2018

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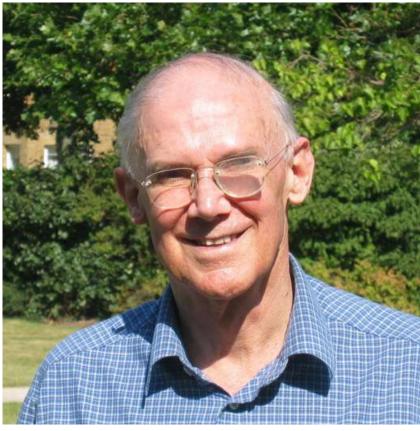
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Socially acceptable psychoactive substances



Nicotine as a recreational drug



Professor Michael Russell 1932-2009

There is no compelling objection to the recreational and even addictive use of nicotine provided it is not shown to be physically, psychologically, or socially harmful to the user or to others.

The Lancet, 1991

Russell, M. A. H. (1991). Nicotine use after the year 2000. *The Lancet*, *337*(8751), 1191–1192.

A technology transition

A technology transition - cars





Innovation and its enemies...

"Claims about the promise of new technology are at times greeted with skepticism, vilification or outright opposition—often dominated by slander, innuendo, scare tactics, conspiracy theories and misinformation.

"The assumption that new technologies carry unknown risks guides much of the debate. This is often amplified to levels that overshadow the dangers of known risks."

Thankyou!



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