

**Netherlands consultation – prohibition of nicotine pouches: NNA Response**

Thank you for allowing the opportunity to submit to the consultation on proposals to prohibit the sale of nicotine pouches.

We are the New Nicotine Alliance (NNA), a consumer association and educational charity which represents consumers of low-risk alternatives to cigarettes such as vaping products, nicotine pouches, smokeless and heated tobacco products. As consumers, we have a direct interest in the regulation of these products and the personal and public health consequences of policy choices made by governments. We are not affiliated with or supported by the tobacco or e-cigarette industries. Our comments draw on academic research and our own experience of the benefits of novel nicotine delivery products for smokers who cannot or have no urge to quit smoking by other means.

We are encouraged to see that the Netherlands government seeks support people who wish to quit smoking, but alarmed that one of the proposals is to prohibit the sale of nicotine pouches. To remove from sale a valid alternative nicotine product which can attract cigarette consumers to a far safer product is a counterproductive measure. There is no evidence-based justification for this proposal, and it merely protects the cigarette trade from competition. This eradicates a promising means for smokers to reduce harm from nicotine use and can only have a negative effect on public health.

The proposal is not evidence-based

The Integrated Assessment Framework for Policy and Regulations (IAK) details the government's goal to achieve a smoke free generation by 2040. Nicotine pouches have the potential to play a role in both driving down smoking rates and present a far safer, smoke free, means of consuming nicotine. It is, therefore, baffling why the Netherlands wishes to remove them from the market. Encouraging people who smoke to switch to lower-risk nicotine products has been successful in reducing rates of smoking in many jurisdictions where reduced risk options are legally sold.

The government's explanatory memorandum cites concerns about youth use of nicotine pouches, however a study led by the Centre for Health Protection, National Institute for Public Health and the Environment (RIVM) in 2021ⁱ found that "There is no current use of these products among adolescents in this sample". Instead, users of nicotine pouches are almost all adults and predominantly smokers or ex-smokers.

The explanatory memorandum also raises irrational health concerns. The German Federal Institute for Risk Assessment (BfR) published a health assessment of nicotine pouches in October 2022ⁱⁱ, concluding that, aside from nicotine, the products contain no substances presenting health concerns. Furthermore, the report confirmed that "switching from cigarettes to nicotine pouches could represent a reduction in health risks for a person who smokes."

Swedish-led research in 2020 concluded that nicotine pouches "deliver nicotine as quickly and to a similar extent as existing smokeless products, with no significant adverse effects."ⁱⁱⁱ While in 2021, a study found that nicotine pouches "can provide nicotine in amounts sufficient to replicate cigarette smokers' nicotine uptake following a switch from conventional cigarettes."^{iv}

Additionally, a May 2022 study assessed that if nicotine pouches had hypothetically been introduced into the US in 2000, there would have been around 700,000 fewer deaths by 2050^v.

It is indisputable that nicotine pouches are orders of magnitude less harmful than smoking and, considering that a majority of pouch users have a history of combustible tobacco use, it is reckless to prohibit the products based on hypothetical and unproven harms. This can only perpetuate smoking among sections of the Dutch population and smoking-related disease that this will entail.

Restrictions protect the cigarette trade

Restrictions on reduced risk tobacco and nicotine products obstruct smokers' access to alternatives which can help them quit. This effectively protects the combustible cigarette trade against competition from far safer nicotine delivery methods. This is counterproductive to public health and is contrary to the aim of tobacco control to counter the harms of tobacco smoke.

The World Health Organization has recognized that vaping is an alternative to smoking, it states that "ENDS/ENNDS and cigarettes are substitutes – higher cigarette prices are associated with increased ENDS/ENNDS sales."^{vi} This is equally true of other non-combustible nicotine products such as snus, heated tobacco and nicotine pouches. As substitutes to smoking, burdens placed on reduced risk products inevitably favour sales of traditional cigarettes.

Conclusion and policy recommendations

Nicotine is the primary reason people smoke, but nicotine itself is not the cause of smoking-related disease. Low-risk nicotine alternatives all share a common characteristic – they do not involve combustion and there is no smoke. They do, however, provide nicotine and can satisfy smokers who would not otherwise wish to quit or would find it hard to quit. Though not harmless, they are *much less harmful* – with likely risk reductions of one to two orders of magnitude. When smokers completely switch from smoking to a low-risk product, they avoid nearly all the incremental health risks of continued smoking. This allows for 'harm reduction', a well-established concept in public health policy, for example, in drugs, alcohol and HIV. This concept should be central to tobacco control policy in the Netherlands.

We do not believe traditional tobacco control measures are effective without also recognising the potential benefits of harm reduction. We are concerned that consensus positions of tobacco control and medical organisations reflect the measures they find agreeable, not necessarily what will work to maximise the number of smokers who quit combustible tobacco or switch to safer forms of nicotine use.

In our view, the key strategy for reducing smoking prevalence in the Netherlands, especially in individuals and communities where smoking is deeply entrenched, is switching from high-risk smoked products to low-risk smoke-free products. This is a more straightforward pathway to follow for many smokers because it does not demand the user gives up nicotine or many of the sensory or behavioural aspects of smoking.

We believe the Netherlands government's plan to prohibit nicotine pouches is extremely reckless and risks deterring many Dutch adults from switching as an alternative to smoking, may drive current pouch users back to combustible tobacco use, may create a sizeable black market and increase, rather than reduce, risks to young people who may otherwise smoke or continue to smoke in the absence of viable smokeless alternatives such as pouches.

ⁱ Anne Havermans, Jeroen L.A. Pennings, Ingrid Hegger, Jan M. Elling, Hein de Vries, Charlotte G.G.M. Pauwels, Reinskje Talhout, Awareness, use and perceptions of cigarillos, heated tobacco products and nicotine pouches: A survey among Dutch adolescents and adults, December 2021:

<https://www.sciencedirect.com/science/article/pii/S0376871621006311>

ⁱⁱ Health risk assessment of nicotine pouches Updated BfR Opinion no. 023/2022, 7 October 2022,

<https://mobil.bfr.bund.de/cm/349/health-risk-assessment-of-nicotine-pouches.pdf>

ⁱⁱⁱ Lunell E, Fagerström K, Hughes J, Pendrill R. Pharmacokinetic Comparison of a Novel Non-tobacco-Based Nicotine Pouch (ZYN) With Conventional, Tobacco-Based Swedish Snus and American Moist Snuff. *Nicotine Tob Res.* 2020 Oct 8;22(10):1757-1763. doi: 10.1093/ntr/ntaa068 <https://academic.oup.com/ntr/article-abstract/22/10/1757/5823724>

^{iv} McEwan, M., Azzopardi, D., Gale, N. *et al.* A Randomised Study to Investigate the Nicotine Pharmacokinetics of Oral Nicotine Pouches and a Combustible Cigarette. *Eur J Drug Metab Pharmacokinet* **47**, 211–221 (2022).

<https://doi.org/10.1007/s13318-021-00742-9>

^v Lee, P.N., Fry, J.S. & Ljung, T. Estimating the public health impact had tobacco-free nicotine pouches been introduced into the US in 2000. *BMC Public Health* **22**, 1025 (2022). <https://doi.org/10.1186/s12889-022-13441-0>

^{vi} WHO (2016). Electronic Nicotine Delivery Systems and Electronic Non-Nicotine Delivery Systems (ENDS/ENNDs). Conference of the Parties to the WHO FCTC Seventh session. FCTC/COP/7/11 November 2016.