

The Regulation of E-Cigarettes in the Netherlands

Dear colleagues, I have read your proposals to limit the appeal of electronic vaping devices, and I have to say, if I had investments in tobacco, I'd be delighted to see what you plan to do.

I am writing as an expert in smoking cessation, and as someone who passionately wants to see the end of smoking in my lifetime. Vaping has the potential to achieve that, as part of a framework that should include other tobacco control measures. As you will have many submissions to read, I am going to make very short and concise statements based on my experience in this field.

1. Vaping is displacing smoking in all countries where a permissive approach to vaping is taken. As vaping rates rise, smoking rates fall. Every effort should be made to maintain this trend.
2. Banning vaping where smoking is banned misses an opportunity to show citizens that there are benefits to switching.
3. A display ban of vaping devices means that fewer smokers will consider that vaping might be a good alternative for them. It also means that people do not see that one may be a lot less harmful than the other, as they are both treated as 'dangerous' items.
4. Flavours are very important to adults, and in my experience as a stop smoking service manager, almost every quitter we saw used fruit or dessert flavours, not tobacco. They said that tobacco kept them 'in love with' smoking, and that using a different flavour helped them commit to never smoking again. Restrict the names of flavours by all means, but please keep a choice available.
5. The EVALI crisis was never about vaping nicotine, and I'm sure you know that. This was about illicit, street-bought, unregulated substances. The UK has widespread use of well-regulated vaping products, and we have not had any EVALI cases.
6. The Committee on Toxicity report supports the Public Health England view that vaping is substantially less harmful than smoking cigarettes.
7. Everyone who helps sow the seeds of doubt shares the blame for people continuing to both smoke and vape. If clearer messages were communicated to the public, and fewer baseless theories about possible harms, more people would switch completely.
8. Young people experiment with all sort of substances – tobacco, alcohol, cannabis, vaping, sex, fast cars – experimentation does not necessarily mean that regular use is established. In the UK where vaping is regarded permissively, there is no significant increase in the use of vaping by young people who had never smoked, and fewer young people than ever are smoking.
9. If it were true that nicotine harms the developing brain, we wouldn't have seen all the scientists, mathematicians, writers, teachers, artists from the generations when smoking was commonplace.
10. Neutral packaging should be required, and may satisfy those who are alarmed at the imagery on some products. The warning labels should be moderated however, to encourage smokers to try the product rather than conveying the message that vaping and smoking are equally harmful because they both contain nicotine. It's the smoke that kills, not the nicotine.

11. In smoking cessation services and healthcare settings, ALL patients who smoke should be encouraged to switch to vaping as a first line treatment method. Most will have tried other methods, including nicotine replacement therapy. There is no time to waste on making them go through another round of a treatment that has already failed. They should be strongly encouraged to try vaping. Many of my patients said this was the first thing that had worked for them, and they described it as a revelation.
12. Finally, I repeat my opening statement, that attempts to curb or extinguish the appeal of switching from smoking to vaping simply protect the interests of the tobacco companies. I sincerely hope that your government will remain open-minded to the possibilities of developing the Netherlands' approach to tobacco harm reduction, and not crush it with a policy that looks in the wrong direction.

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