

## **Communication from Public**

**Name:**

**Date Submitted:** 08/01/2019 03:55 PM

**Council File No:** 18-1104

**Comments for Public Posting:**



14931 Gwenchris Court, Paramount, CA 90723

Tel: (310) 637-5020 Fax: (310) 637-5090 Email: [info@alfakherus.com](mailto:info@alfakherus.com)

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July 31, 2019

Attn: Herb Wesson, President  
Los Angeles City Council  
200 North Spring Street, Room 430  
Los Angeles, CA 90012

**RE: Letter in Opposition of a Flavored Tobacco Sales Prohibition**

Dear Mr. Wesson,

Al Fakher is a leading international Hookah tobacco company with a large and diverse workforce. Our USA headquarters and employees have called Los Angeles home since 2002. We are dedicated to fighting illegal trade and proudly support the communities where our people live and work. We believe that our products are good for the world in that they provide an opportunity for cultures to meet and come together.

Hookah is a part of a cultural heritage that has been around for thousands of years and has been a part of many Asian, Turkish, and middle eastern cultures for centuries. Today, Hookah smoking tends to be at the center of cultural, business and social meetings.

Like you, Al Fakher is very concerned about minors' access to tobacco. As a Hookah manufacturer, we continue to work to eliminate access and marketing to under aged youth. In addition, hookah by its very nature is not easily available to underage consumers due to the large water pipe apparatus, the time and complexity involved in order to set up a session and is difficult to conceal in a pocket or backpack.

The Food and Drug Administration (FDA) recently noted in their guidance that "waterpipe tobacco does not appear to have the same ease of use particularly on school grounds as [e-cigarette] products and cigars, due to the cumbersome nature of the related equipment." Additionally, the FDA has noted that these products "do not appear to have wide-spread, significant youth use at this time." Revised Compliance Policy Draft Guidance, at 19.

The State of California has the largest number of Arab Americans in any state, with the Los Angeles area constituting the largest cluster in the state. The Arab American Institute Foundation estimates that over 800,000 Arab Americans currently reside in California of which nearly 12% reside in Los Angeles. Additionally, California is home to the largest population of Armenian Americans. According to the 2017 American Community Survey, the highest concentration of Armenian descent is found in the Los Angeles area, where over 80,000 Armenians reside. According to the same survey, over 3,000 Turkish and



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37,000 Indian residents also reside in Los Angeles. And according to extrapolated U.S. Census data and other independent surveys done by Iranian-Americans themselves in 2009, there is an estimated one million Iranian-Americans living in the U.S., with the largest concentration-about 300,000 people- living in the greater Los Angeles area.

Many of these communities strive to maintain a semblance of their cultural heritage while also assimilating into California's rich diversity. Many of these persons would be affected by a tobacco flavor ban. A flavor ban would cut at the heart of many hookah using adults partaking in their culture and undermine businesses owned by immigrants who oftentimes support their entire family through their tobacco retail shops or hookah lounges.

A flavor ban would cause the flavor tobacco user to go underground to purchase products off the black market, whose participants are not concerned about checking IDs or complying with other health and safety regulations. This will result in an increase of resources used towards law enforcement and decrease in taxes from tobacco sales and may actually increase use of cigarettes.

Instead, we propose that the Los Angeles City Council consider responsible and reasonable legislation that focuses on preventing youth access and devise a plan to educate teens and their families about the harm of vaping and lastly, have better enforcement of retailers that do not properly ID. Alternatively, if an across-the-board flavor ban is considered, we ask that traditional Hookah tobacco be granted a cultural exemption for the reasons shared.

Respectfully Submitted,

Issa G. Abuita  
General Counsel  
Al Fakher USA

## **Communication from Public**

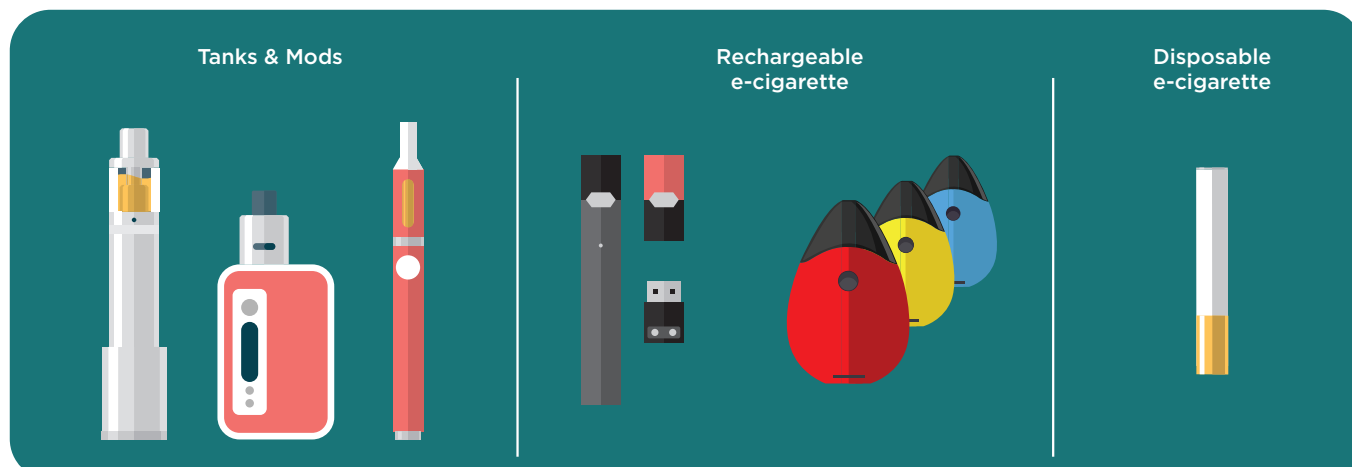
**Name:** American Cancer Society Cancer Action Network  
**Date Submitted:** 08/01/2019 04:53 PM  
**Council File No:** 18-1104  
**Comments for Public Posting:**

# ELECTRONIC CIGARETTES WHAT'S THE BOTTOM LINE?

- » E-cigarettes have the potential to benefit adult smokers who are not pregnant if used as a complete substitute for regular cigarettes and other smoked tobacco products.
- » E-cigarettes are not safe for youth, young adults, pregnant women, or adults who do not currently use tobacco products.
- » While e-cigarettes have the potential to benefit some people and harm others, scientists still have a lot to learn about whether e-cigarettes are effective for quitting smoking.
- » If you've never smoked or used other tobacco products or e-cigarettes, don't start.

## WHAT ARE E-CIGARETTES?

- » E-cigarettes are known by many different names. They are sometimes called “e-cigs,” “e-hookahs,” “mods,” “vape pens,” “vapes,” “tank systems,” and “electronic nicotine delivery systems.”
- » Some e-cigarettes are made to look like regular cigarettes, cigars, or pipes. Some resemble pens, USB sticks, and other everyday items.
- » E-cigarettes produce an aerosol by heating a liquid that usually contains nicotine—the addictive drug in regular cigarettes, cigars, and other tobacco products—flavorings, and other chemicals that help to make the aerosol. Users inhale this aerosol into their lungs. Bystanders can also breathe in this aerosol when the user exhales into the air.
- » E-cigarettes can be used to deliver marijuana and other drugs.



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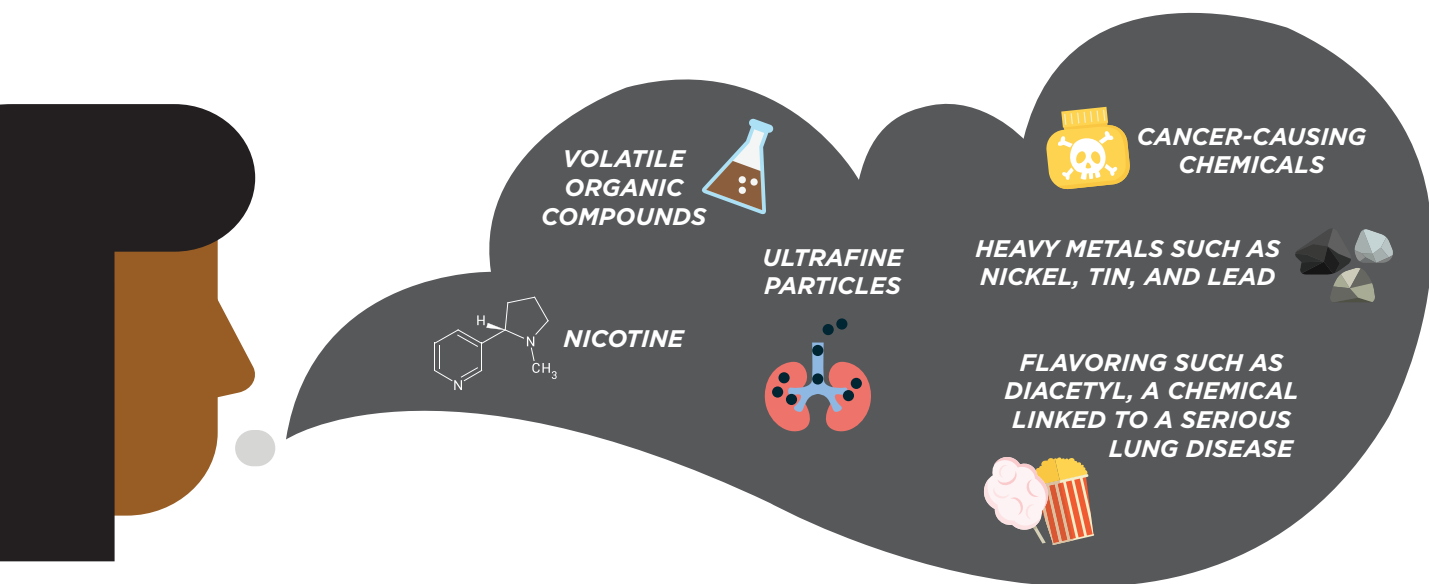


U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

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## WHAT IS IN E-CIGARETTE AEROSOL?

THE E-CIGARETTE AEROSOL THAT USERS BREATHE FROM THE DEVICE AND EXHALE CAN CONTAIN HARMFUL AND POTENTIALLY HARMFUL SUBSTANCES:



It is difficult for consumers to know what e-cigarette products contain. For example, some e-cigarettes marketed as containing zero percent nicotine have been found to contain nicotine.

## ARE E-CIGARETTES LESS HARMFUL THAN REGULAR CIGARETTES?



**VS**



**YES**, but that doesn't mean e-cigarettes are safe.

E-cigarette aerosol generally contains fewer toxic chemicals than the deadly mix of 7,000 chemicals in smoke from regular cigarettes. However, e-cigarette aerosol is not harmless. It can contain harmful and potentially harmful substances, including nicotine, heavy metals like lead, volatile organic compounds, and cancer-causing agents.

# WHAT ARE THE HEALTH EFFECTS OF USING E-CIGARETTES?

SCIENTISTS ARE STILL LEARNING ABOUT THE LONG-TERM HEALTH EFFECTS OF E-CIGARETTES. HERE IS WHAT WE KNOW NOW.

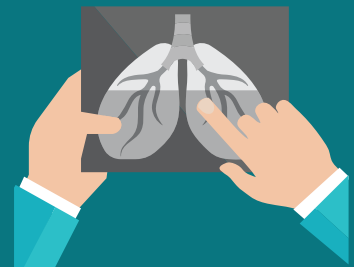
## 1 Most e-cigarettes contain nicotine, which has known health effects

- » Nicotine is highly addictive.
- » Nicotine is toxic to developing fetuses.
- » Nicotine can harm adolescent brain development, which continues into the early to mid-20s.
- » Nicotine is a health danger for pregnant women and their developing babies.



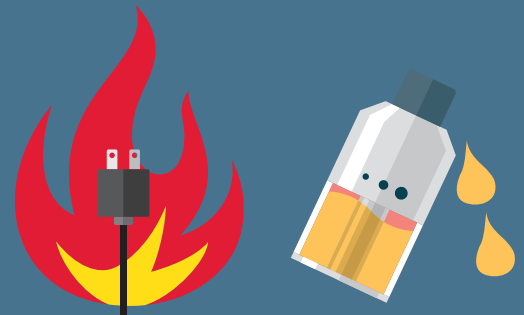
## 2 Besides nicotine, e-cigarette aerosol can contain substances that harm the body.

- » This includes cancer-causing chemicals and tiny particles that reach deep into lungs. However, e-cigarette aerosol generally contains fewer harmful chemicals than smoke from burned tobacco products.

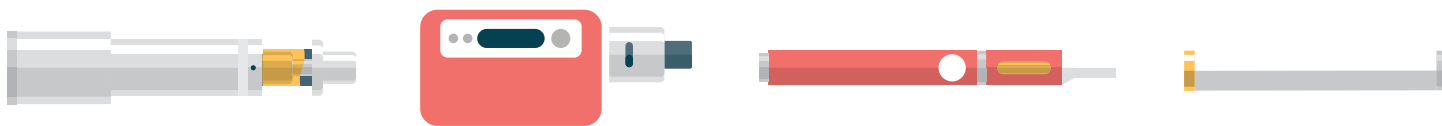


## 3 E-cigarettes can cause unintended injuries.

- » Defective e-cigarette batteries have caused fires and explosions, some of which have resulted in serious injuries.
- » In addition, acute nicotine exposure can be toxic. Children and adults have been poisoned by swallowing, breathing, or absorbing e-cigarette liquid.



## CAN E-CIGARETTES HELP ADULTS QUIT SMOKING CIGARETTES?



### E-CIGARETTES ARE NOT CURRENTLY APPROVED BY THE FDA AS A QUIT SMOKING AID.

The U.S. Preventive Services Task Force, a group of health experts that makes recommendations about preventive health care, concluded that the evidence is insufficient to recommend e-cigarettes for smoking cessation in adults, including pregnant women.



**HOWEVER,** e-cigarettes may help non-pregnant adult smokers if used as a complete substitute for all cigarettes and other smoked tobacco products.

### TO DATE, THE FEW STUDIES ON THE ISSUE ARE MIXED.

Evidence from two randomized controlled trials found that e-cigarettes with nicotine can help smokers stop smoking in the long term compared with placebo (non-nicotine) e-cigarettes.

A recent CDC study found that many adults are using e-cigarettes in an attempt to quit smoking. However, most adult e-cigarette users do not stop smoking cigarettes and are instead continuing to use both products (“dual use”). Because smoking even a few cigarettes a day can be dangerous, quitting smoking completely is very important to protect your health.



## WHO IS USING E-CIGARETTES?

E-CIGARETTES ARE THE MOST COMMONLY USED TOBACCO PRODUCT AMONG YOUTH.

IN THE U.S.,  
YOUTH ARE  
MORE LIKELY  
THAN ADULTS  
TO USE  
E-CIGARETTE



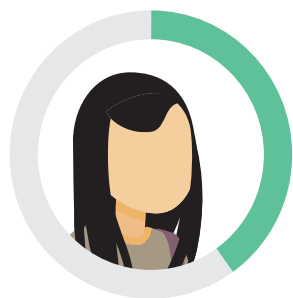
**4.9%**  
MIDDLE SCHOOL  
STUDENTS

In 2018, more than

**3.6 MILLION**

U.S. middle and high school  
students used e-cigarettes in  
the past 30 days, including:

**20.8%**  
HIGH SCHOOL  
STUDENTS



**AMONG CURRENT E-CIGARETTE USERS AGED 45 YEARS AND OLDER**  
in 2015, most were either current or former regular cigarette smokers, and  
1.3% had never been cigarette smokers.

**IN CONTRAST, AMONG CURRENT E-CIGARETTE USERS AGED 18–24 YEARS,**  
**40.0%** had **NEVER BEEN** regular cigarette smokers

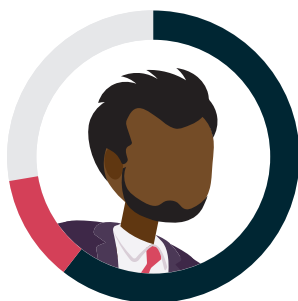
IN 2015, AMONG ADULT E-CIGARETTE  
USERS OVERALL:

**29.8%**

were former  
regular cigarette  
smokers

**11.4%**

had never been  
regular cigarette  
smokers



**58.8%**

were current regular  
cigarette smokers

ADULTS

In 2017, **2.8%**  
of U.S. adults were current  
e-cigarette users



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## **Communication from Public**

**Name:** The African American Tobacco Control Leadership Council  
**Date Submitted:** 08/01/2019 04:56 PM  
**Council File No:** 18-1104  
**Comments for Public Posting:**



## The African American Tobacco Control Leadership Council

March 25, 2019

**To:** Los Angeles City Council President Herb Wesson, President Pro Tempore Nury Martinez, Assistant President Pro Tempore Joe Buscaino, Councilmember Gil Cedillo, Councilmember Paul Krekorian, Councilmember Bob Blumenfield, David Ryu, Councilmember Paul Koretz, Councilmember Monica Rodriguez, Councilmember Marqueece Harris-Dawson, Councilmember Curren Price, Councilmember Mike Bonin, Councilmember Richard Englander, Councilmember Mitch O'Farrell, Councilmember Jose Huizar

**From:** The African American Tobacco Control Leadership Council

**Re: Adopt Citywide Restriction on the Sale of Menthol and all Other Flavored Tobacco Products, Including Flavored E-Juices in Los Angeles**

The African American Tobacco Control Leadership Council (AATCLC) strongly encourages the Los Angeles City Council to restrict the sale of menthol and all flavored tobacco products, including flavored e-juices citywide, with no adult venue exemptions. We already know that 80% of youth's 12-17 start smoking using flavored cigarettes (Ambrose et al., 2015). If the City Council truly wants a healthier Los Angeles, and we believe that you do, then it is imperative that the sale of menthol and all other flavored tobacco products be restricted and the predatory marketing of these products be recognized as a social injustice issue, an issue that disproportionately impacts poorer communities, marginalized groups, youths and communities of color.

**This is no minor matter.** Menthol and flavored tobacco products are driving tobacco-caused deaths and diseases nation-wide. While the use of non-flavored tobacco cigarettes has been decreasing, the use of menthol cigarettes is on the rise, among youth and adults; among Latinos, Blacks, and Whites (Villanti, 2016). Let's be clear, the majority of women smokers smoke menthol cigarettes; folks from the LGBTQ community disproportionately smoke these products; 47% of Latino smokers prefer menthol cigarettes, with 62% of Puerto Rican smokers using menthol; nearly 80% of Native Hawaiians; a majority of Filipinos; and a majority of smokers with behavioral health issues smoke menthol cigarettes. Frankly, most marginalized groups disproportionately use these "minty" products (CDC, 2010; Fallin, 2015; Forbes, 2013; Delnevo, 2011; Hawaii State Dept. of Health, 2009; Euromonitor, 2008; Hickman, 2015).

Moreover, 85% African American adults and 94% of Black youth who smoke are using menthol products (Giovino, 2013). These striking statistics arise from the predatory marketing of these products in the Black Community, where there are more advertisements, more lucrative

promotions, and *cheaper prices* for menthol cigarettes compared to other communities (Henriksen et al., 2011; Seidenberg et al., 2010). These predacious practices for the past 50 years have led to Blacks folks dying disproportionately from heart attacks, lung cancer, strokes and other tobacco related diseases (RSG, 2014).

The Council should be aware that menthol, as if to add insult to injury, masks the harsh taste of tobacco and allows for deeper inhalation of toxins and greater amounts of nicotine. Furthermore, the presence of menthol makes cigarettes harder to quit compared to other cigarettes (Ton et al., 2015; Levy et al., 2011). The “cool refreshing taste of menthol” heralded by the tobacco industry is just a guise; ultimately, menthol allows the poisons in cigarettes and cigarillos to “go down into the body” more easily.

We all have been reading in the papers about the “JUUL Explosion,” where a little thumb drive looking device is used more than regular cigarettes among youth (CDC, 2018). Frankly, the “JUUL Explosion” is really a “Flavors Explosion” given the fact that there are over 15,000 kid friendly flavors available in the marketplace! (<https://www.flavorshookkids.org/> 2018). The vaporist community would like you to believe that aerosol inhaled by e-cigarette users is only water vapor – nothing could be further from the truth. Here are the facts:

1. E-cigarettes are tobacco products that deliver nicotine, an addictive substance that especially in youth can compromise the brains executive functioning (Report of the Surgeon General, 2014).
2. The propylene glycol and vegetable glycerin that constitute a large portion of the e-juice and the resulting vapor **are not FDA approved for inhalation.**
3. The 15,000+ flavors available on the market may be Generally Recognized as Safe (GRAS) for **ingestion**, but they are not GRAS for **inhalation.**
4. There are as many, if not more, metals in the vapor of e-cigarettes than found in cigarette smoke (Williams et al., 2013).
5. Many of the same toxins and carcinogens found in regular cigarettes, like benzene, formaldehyde, and tobacco specific nitrosamines, can be found in e-cigarette vapor (Goniewicz et al., 2013). And yes, these toxins and carcinogens are at lower levels than in a regular cigarette; while these lower levels may be safer, this does not mean that e-cigarettes are **safe!**
6. The vapor from e-cigarettes activates platelet formation just like regular cigarettes; such platelet activity leads to arterial blockages (Hom et al., 2016).
7. E-cigarette aerosol consists of ultrafine particles at levels comparable to or higher than cigarettes. These particles can cause cardiovascular and pulmonary disease. In addition, the particle size in e-cigarettes is often smaller, and thus more dangerous, than those generated by cigarettes (Fuoco FC, Buonanno G, Stabile L, Vigo P. 2014).
8. Kids who start with e-cigarettes are more likely to become regular cigarette users, and unfortunately, in many cases dual users (Piper ME et al., 2019).
9. Here is a link to the European Public Health Association: Fact or Fiction on E-cigs: [https://eupha.org/repository/advocacy/EUPHA\\_facts\\_and\\_fiction\\_on\\_e-cigs.pdf](https://eupha.org/repository/advocacy/EUPHA_facts_and_fiction_on_e-cigs.pdf)

The AATCLC is calling upon the Los Angeles City Council to join a growing number of cities and counties around the country that are restricting, jurisdiction-wide, the sales of menthol cigarettes and all other flavored tobacco products, including flavored e-juices. In June 2018, San Francisco voters passed the first ever citywide restriction on the sales of all flavored tobacco products, including menthol cigarettes and flavored e-cigarette juices. This “strongest flavor ban law ever” was rapidly replicated in the City of Richmond the following month. Within weeks, Beverly Hills followed suit, with their own city wide restrictions. Since November the cities of Alameda, Santa Cruz, San Pablo, and Hermosa Beach all have adopted their own citywide restrictions. And the County of Marin approved a county-wide ban for its unincorporated areas. Even the Food and Drug Administration is finally talking about getting rid of menthol cigarettes and flavors in little cigars and cigarillos. Moreover, we also recognize that there has been legislation introduced in Sacramento to ban flavors state-wide. While these developments are welcomed, we know that the tobacco industry will use all its muscle to slow down and curtail these national and state efforts. Hence, it is imperative that Cities like Los Angeles, take the lead and join the growing movement to remove flavored tobacco products, especially menthol cigarettes, from the market place by adopting a City-wide ordinance to restrict their sale.

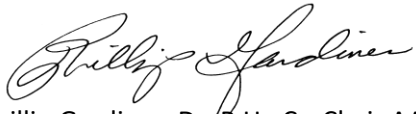
We should also mention that some groups, spurred on by the tobacco industry, have been spreading falsehoods, stating that restricting the sale of menthol and flavored tobacco products, including flavored e-juices will lead to the “criminalization” of particularly young Black men. Nothing could be further from the truth. The proposed ordinance would *prohibit the sale* of flavored products, it would *not prohibit the possession* of these products. Hence, this ordinance will not lead to police having any greater interaction with Black youth.

Formed in 2008, the African American Tobacco Control Leadership Council is composed of a cadre of dedicated community activists, academics, public health advocates and researchers. Even though based in California, we are national in our scope and reach. We have partnered with community stakeholders, elected officials, and public health agencies, from Chicago and Minneapolis to Berkeley and San Francisco. Our work has shaped the national discussion and direction of tobacco control policy, practices, and priorities, especially as they affect the lives of Black Americans, African immigrant populations and ultimately all smokers. The AATCLC has been at the forefront in elevating the regulation of mentholated and other flavored tobacco products on the national tobacco control agenda, including testifying at the FDA hearings when the agency was first considering the removal of menthol cigarettes from the marketplace.

We here at the AATCLC recognize that the Council may be under extraordinary pressure from the tobacco industry and the vaporist community to put profits above human life by limiting or curtailing restrictions on flavored tobacco products. Please join your sister cities and stand up to the tobacco industry and their allies – Call for: **No Selling of Menthol Cigarettes and All Other Flavored Tobacco Products, including Flavored E-Juices in the City of Los Angeles!** Say “**No**” to the continued predatory marketing of flavored tobacco products to our youth, and say “**Yes**” to the health and welfare of our kids, who are the most vulnerable. In fact, say “Yes” to the protection for **all** residents of the City of Los Angeles.

We are all counting on you!

Sincerely,

A handwritten signature in black ink that reads "Phillip Gardiner". The script is fluid and cursive.

Phillip Gardiner, Dr. P.H. Co-Chair AATCLC [www.savingblacklives.org](http://www.savingblacklives.org)

A handwritten signature in black ink that reads "Carol O. McGruder". The script is cursive and somewhat compact.

Carol McGruder, Co-Chair AATCLC

A handwritten signature in black ink that reads "Dr. Valerie Yerger". The script is cursive and elegant.

Valerie Yerger, N.D., Co-Chair AATCLC

## **Communication from Public**

**Name:** American Cancer Society Cancer Action Network  
**Date Submitted:** 08/01/2019 01:05 PM  
**Council File No:** 18-1104  
**Comments for Public Posting:**

# E-cigarettes & Youth

## Preventing use among youth and young adults



The U.S. Secretary of Health and Human Services (HHS), U.S. Surgeon General, and Commissioner of the Food and Drug Administration (FDA) have all declared youth e-cigarette use to be an epidemic.<sup>i</sup> E-cigarette use among high school students has risen by 78 percent in the last year and 48 percent among middle school students.<sup>ii</sup> Furthermore, e-cigarette use is most common among younger adults – not older adults.<sup>iii</sup> Action is needed to reverse these trends.

### E-cigarette Use

Nationwide, e-cigarette use has increased rapidly among youth. E-cigarettes are the most commonly used tobacco product by middle and high school students, surpassing cigarette use, according to the most recent data available.<sup>iv</sup> In 2011, 1.5 percent of high school students and 0.6 percent of middle school students reported using e-cigarettes. By 2018, those numbers rose to 20.8 percent of high school students and 4.9 percent of middle school students, totaling more than 3.6 million students. Frequent e-cigarette use, that is using the product on at least 20 of the past 30 days, increased by 38.5 percent among middle and high school students from 2017 to 2018; with 27.7 percent of youth e-cigarette users reporting frequent use. Furthermore, among current users of any tobacco product, 42.0 percent of high schoolers and 43.7 percent of middle schoolers exclusively used e-cigarettes.

Young adults (aged 18-24) were more likely to be current users of e-cigarettes (5.2 percent) than other adults in 2017. In fact, current use declined with age.<sup>v</sup> Young adults who have never smoked cigarettes were also more likely to have used e-cigarettes as compared to older adults. In 2015, 40 percent of current young adult e-cigarette users had never smoked cigarettes.<sup>vi</sup>

#### What Are E-cigarettes?

Electronic cigarettes, or e-cigarettes, are a diverse group of products that go by many names including vape pens, tank systems, e-hookah, and mods. E-cigarettes are battery-operated products designed to deliver an aerosol of nicotine and other chemicals, to the user. E-cigarettes can be disposable or consist of a rechargeable, battery-operated heating element; and can include a replaceable or refillable cartridge that for the e-liquid. E-cigarettes that resemble USB flash drives are popular among youth because they can be used discreetly and come in a variety of flavors. The high nicotine content and delivery of these USB-types of e-cigarettes is especially concerning

JUUL, a highly popular e-cigarette, currently accounted for 70 percent of the e-cigarette market (dollar share) in mass channel and convenience stores (not including online or tobacco or vape shop sales) in July 2018.<sup>vii</sup> In January of 2017, JUUL accounted for only 5 percent of that market. Altria, the parent company of Philip Morris, announced plans to acquire a 35 percent stake in JUUL in late 2018.<sup>viii</sup> The Truth Initiative completed a study in early 2018 to assess youth and young adult use of JUUL specifically.<sup>ix</sup> The study found ever and current JUUL use to be most popular with those under the age of 21. Ever use for those youth aged 15-17 was 9.5 percent and for youth aged 17-21 was 11.2 percent. In terms of frequency of use, 55.8 percent of current JUUL users aged 15-17 and 57.1 percent of current JUUL users aged 18-21 reported using JUUL on 3 or more days in the past month. Approximately one in four current JUUL users aged 15-21 reported using on 10 or more days in the past 30 days.



## E-cigarette & Cigarette Use

The 2016 Surgeon General's Report concluded that "e-cigarette use is strongly associated with the use of other tobacco products among youth and young adults, particularly combustible tobacco products."<sup>x</sup> In 2018, a National Academies of Science, Engineering, and Medicine report concluded that: "There is substantial evidence that e-cigarette use increases risk of ever using combustible tobacco cigarettes among youth and young adults."<sup>xi</sup> Furthermore, the report concluded that there was moderate evidence that e-cigarette use increases the intensity and frequency of cigarette smoking.

### SPOTLIGHT: Flavored E-cigarettes

Cigarette manufacturers have effectively used flavors, including menthol, to attract and addict new smokers, particularly young people. Flavored e-cigarettes have flooded the market with one study identifying more than 7,700 unique e-cigarette flavors as of January 2014, and more than 240 new flavors being added per month.<sup>xxviii</sup> The overwhelming majority of these e-cigarette flavors are fruit, candy, mint and dessert flavors, and are often paired with flashy marketing campaigns that appeal to youth. By 2017, another study found 15,500 unique e-cigarette flavors available online.<sup>xxix</sup>

Flavors play a major role in the high rates of youth and young adult use of e-cigarettes. Data from the 2016-2017 PATH study, the largest national longitudinal study looking at tobacco use and its effects, found that among teens who use e-cigarettes, 97.0 percent regularly used a flavored product.<sup>xxx</sup> Also, among those teens who had ever tried an e-cigarette, 96.1 percent used a flavor product for the first time. In 2018, among high school e-cigarette users, use of any flavored e-cigarette significantly increased from 60.9 percent to 67.8 percent and use of a menthol- or mint-flavored e-cigarette increased from 42.3 percent to 51.2 percent in just one year.<sup>xxxi</sup>

A more recent study concluded that youth who use e-cigarettes are more than 4 times as likely to try cigarettes and nearly 3 times as likely to currently smoke cigarettes than those youth who never tried e-cigarettes.<sup>xii</sup> Cigarette use by the end of the study was higher among prior e-cigarette users (20.5 percent) and prior users of other tobacco products (21.1 percent), compared with those who had not used tobacco before (3.8 percent). Also concerning, the link between prior e-cigarette use and trying cigarette smoking was stronger for youth who would be considered "low-risk" for smoking. The researchers estimated that more than 43,000 current smokers ages 12-15 years got their start with e-cigarettes.

## Industry Targeting of Youth & Young Adults

The 2012 Surgeon General's report concluded that tobacco industry advertising and promotions causes initiation and progression of use among youth and young adults.<sup>xiii</sup> Tobacco industry marketing increases the awareness of smoking, recognition of specific brands, positive attitudes about smoking, intention to smoke, and actual smoking behavior. Furthermore, as shown by tobacco industry documents, this marketing to youth and young adults was intentional. The tobacco industry uses images popular with youth and young adults, including images of independence, rebelliousness, social acceptability, and sexual attraction.

E-cigarette manufacturers are using the same marketing practices effectively used by the other tobacco manufacturers to target youth and mislead consumers about the effects of their products.<sup>xiv</sup> These practices include celebrity endorsements, sports and musical sponsorships, use of images of e-cigarettes as rebellious, sexy and cool, and the use of flavorings in their products.<sup>xv</sup> Particularly troubling is that e-cigarettes are not subject to the legal restrictions to which cigarettes and other tobacco products are required to adhere. E-cigarettes are advertised on television, radio, online, in print magazines, including those with high youth readership, and at sports and music events.

Youth are increasingly exposed to e-cigarette advertising. In 2016, almost 78.2 percent of middle and high school students – 20.5 million youth - reported seeing e-cigarette advertising and promotions.<sup>xvi</sup> Two-thirds of students reported seeing these advertisements in retail stores (68.0 percent), 40.6 percent on the Internet, 37.7 percent on TV, and 23.9 percent in newspapers and magazines. Another survey found even higher levels of exposure to e-cigarette advertising, with 82 percent of 13-17 years and 88 percent of 18-21 years reporting seeing e-cigarette advertising and promotions.<sup>xvii</sup> Exposure was even higher in youth who had ever used a cigarette, was a current smoker, or had ever used an e-cigarette. Recent research shows that youth exposed to e-cigarette advertising are more likely to ever and currently use e-cigarettes, with a dose-effect, even among youth who had never used an e-cigarette.<sup>xviii</sup>

## Health Effects of E-cigarettes

E-cigarette aerosol poses potential risk to users and nonusers. The most recent Surgeon General's report concluded that "e-cigarette aerosol is not harmless. It can contain harmful and potentially harmful constituents, including nicotine."<sup>xix</sup> Studies have found the aerosol to contain ultrafine particles that can be inhaled deeply into the lungs, heavy metals, volatile organic compounds and tobacco-specific nitrosamines, among other potentially harmful chemicals.<sup>xx,xxi,xxii</sup> E-cigarettes can vary on whether or how much of these chemicals are present in the products.<sup>xxiii</sup> One study found up to 31 constituents in the aerosol, including nicotine, acetaldehyde, and diacetyl, a chemical linked to serious lung disease.<sup>xxiv</sup> Studies have shown that the use of e-cigarettes can cause short-term lung changes and irritations.<sup>xxv</sup>

E-cigarettes can vary in the amount of nicotine present.<sup>xxvi</sup> Nicotine exposure during adolescence and young adulthood can affect the developing brain and may have lasting effects on cognitive function, decision-making, and impulse control.<sup>xxvii</sup> Exposure to nicotine during adolescence puts the user at greater risk for a lifelong addiction, as the developing brain is more susceptible to addiction than an adult brain. Nicotine exposure, through maternal use, can also negatively affect fetal development leading to sudden infant death syndrome (SIDS), brain alterations, deficits in auditory processing, and obesity.

## ACS CAN's Position:

The epidemic of e-cigarette use by youth and young adults, aggressive marketing tactics by their manufacturers, including the use of flavors appealing to youth, and under-regulation of these products requires the public health community to take action to protect youth and young adults, and the public health at-large. ACS CAN supports several evidence-based strategies to reduce youth use of e-cigarettes:

- ❖ **Strong Federal Regulation:** The FDA should act on its authority over e-cigarettes by requiring premarket review, restrict the marketing of these products to youth, prohibit all flavors because of their appeal to youth, enforce the prohibition on unsubstantiated health claims, and use sound scientific evidence when evaluating marketing applications and proposing product standards for the protection of public health.
- ❖ **Strengthen State and Local Tobacco Control Measures:** Many states and localities are enacting regulations on the sale and use of e-cigarettes. E-cigarettes should be included in evidence-based state and local tobacco control laws.
  - E-cigarettes should be defined as tobacco products and included in the definitions of smoking to:
    - Prohibit e-cigarette use where smoking and/or tobacco use is prohibited.
    - Prohibit the sale of e-cigarettes to persons under the age of 21.
    - Prohibit the sale of all flavored e-cigarettes and e-juices.
    - Include e-cigarettes in tobacco sales restrictions.
    - Tax e-cigarettes.
  - Include e-cigarettes in all evidence-based state tobacco control programs.

<sup>i</sup> Office of the Surgeon General, "Surgeon General's Advisory on E-Cigarette Use Among Youth," December 18, 2018. <https://e-cigarettes.surgeongeneral.gov/documents/surgeon-generals-advisory-on-e-cigarette-use-among-youth-2018.pdf> Statement from FDA Commissioner Scott Gottlieb, M.D., on new steps to address epidemic of youth e-cigarette use. September 12, 2018.

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