Written Communications
Item # 7 Name Vallarte

Flavored

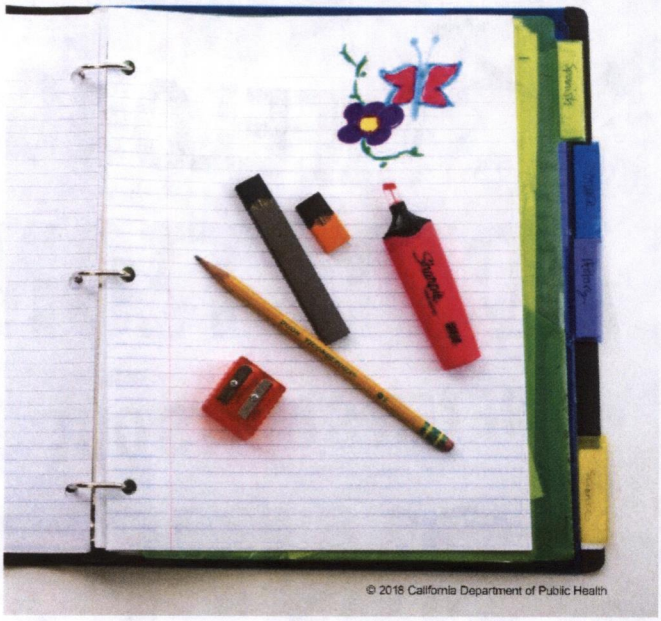
Tobacco Products

• Educational • Roundtable •

LIFELONG ADDICTION OFTEN STARTS OUT SWEET

80% of kids who ever tried tobacco started with a flavored product.

ABSTRACT



Sacramento has a higher tobacco use rate than the rest of the state. Tobacco costs Sacramento $870 million dollars in health care costs. The Surgeon General has called vaping a youth epidemic. Sac City Unified School District saw a 50% increase in 11th grade vaping in 2017-2018. Flavorings are the #1 reason kids start, and diacetyl in most flavorings can be harmful to lungs as a cause for bronchiolitis obliterans. Menthol is the only flavor still in cigarettes, but its chemicals make it easier to start and inhale but harder to quit. Targeted marketing has led to >70% African American smokers using menthol, and African Americans have one of the highest tobacco use rates in Sacramento and tobacco-related health disparities. Vaping is not approved for tobacco cessation, and has harmful chemicals that impact heart and lung health that is not just water vapor. Switching is not quitting with the risk of continued nicotine addiction, particularly with high potency nicotine.

Topics and Experts

UCD Comprehensive Cancer Center Smoke and Tobacco-Free Initiative

Primo Lara, Director of UC Davis Comprehensive Cancer Center, Professor of Medicine

Tobacco and Cancer- Sacramento and Beyond

Moon Chen, Professor of Medicine and Associate Director, Population Sciences & Community Outreach and Engagement, UC Davis Comprehensive Cancer Center

Landscape of Flavored Tobacco Products

Kim Homer-Vagadori, Project Director, California Youth Advocacy Network

Health and Cessation Concerns

Elisa Tong, Associate Professor, Department of Internal Medicine, UC Davis Health

African American Disparities including Menthol and Marketing

Kimberly Bankston-Lee, Senior Program Manager, The Saving Our Legacy Project: African Americans for Smoke-Free Safe Places

Impact on Sacramento Schools

Joelle Orrock, Tobacco Use Prevention Education Coordinator, Sacramento County Office of Education

Age Restriction Policies

Melanie Dove, Postdoctoral Fellow, Center for Healthcare Policy Research, UC Davis

Policies in Other Communities and Counties

Diana Cassady, Professor, Department of Public Health Sciences, UC Davis

Sacramento County Tobacco Education Program and Tobacco Control Coalition

Danica Peterson, Health Educator, Sacramento County Tobacco Education Program

UC Davis Comprehensive Cancer Center Mission

PRIMO LARA
Professor of Hematology/Oncology and Director, UC Davis

- UC Davis Comprehensive Cancer Center (UCD CCC) mission: cancer research, clinical care, and outreach and education.
- UCD CCC Community Outreach and Engagement program hosts our Smoke and Tobacco-Free Initiative. This initiative combines our patient, population, and policy education efforts. UC has a systemwide Smoke and Tobacco-Free policy across its 14 campuses since 2014, and UC Davis Health was among the first health campuses to implement a policy in 2008.
- Nationwide, Cancer Centers are taking action on tobacco. The Smoke and Tobacco-Free Initiative stems from being part of the National Cancer Institute's Cancer Center Cessation Initiative, which is integrating tobacco treatment into cancer care across 42 cancer centers.

Tobacco and Cancer: Sacramento and Beyond

MOON CHEN
Professor of Hematology/Oncology and Associate Director, Population Sciences & Community Outreach and Engagement, UC Davis Comprehensive Cancer Center

- Tobacco products cause cancer and worsen treatment. Tobacco causes 14 different cancers besides other chronic heart and lung disease and immune problems. Tobacco use worsens cancer treatment outcomes including wound healing after surgery or radiation, medication effectiveness, immune function, and development of secondary cancers.
- **Sacramento County has higher tobacco product use rates than the rest of California**. In 2016-7, cigarette and vaping use was 15.9% in Sacramento County and 13.7% in California. Among those using tobacco products, vaping rates were 25.7% in Sacramento County and 19.2% in California. The total amount of current tobacco users in Sacramento County is estimated at 179,000 people, and in California is estimated at 4,022,000. (2016-2017 California Health Interview Survey)
- Flavored tobacco product use has led to a national "epidemic" of youth use. The U.S. Centers for Disease Control and Prevention has reported that electronic cigarette use among high schoolers jumped by 80% in one year (1.5% in 2011, 11.7% in 2017, 20.8% in 2018), likely due to the flashdrive product Juul. Almost 80% of youth aged 12-17 years who have ever used tobacco started with a flavored tobacco product. Among adults who ever used tobacco, using a flavored tobacco product as their first product had a 32% higher prevalence of current tobacco product use. The concern is the creation of a new generation of tobacco users who may never have started, and also opening the gateway to using cigarettes.
- **High rates of using flavored tobacco products in California and stagnating teen tobacco use rates**. Among California adults who use other tobacco products besides cigarettes in 2016, 70% reported using flavors in the past 6 months. Among the subset of young adults aged 18-24, 80% reported using flavors. Among California teens, tobacco use rates have stagnated at 14% in 2016 despite less cigarette smoking (4% in 2016 and 14% in 2010).

Landscape of Flavored Tobacco Products

KIM HOMER-VAGADORI,
Project Director, California Youth Advocacy Network

- Rapidly growing variety of flavored tobacco products beyond cigarettes. Flavored tobacco products include liquids put into vaping devices, little cigars and cigarillos, and menthol cigarettes. E-cigarettes may also be called e-hookahs, hookah pens, vapes, vape pens, or mods. Some can only be used once, while others can be refilled or have tanks. Flavors had been removed from cigarettes except for menthol by the Food and Drug Administration (FDA) in 2009. Users may not identify as smokers, and asking about smoking only may not capture tobacco product use.
- Extremely high levels of nicotine. New flashdrive products use tobacco salts, which are bioabsorbed easier with much less vapor. 1 flashdrive pod = 1 pack of cigarettes for nicotine content. Some products are now even more concentrated. Youth and adults alike may be unaware of the high levels of nicotine and symptoms of addiction.
- Flavors, packaging, and marketing appeal to youth. The e-liquid is typically flavored, with over 15,500 unique flavors, which have doubled since 2014. Flavors that appeal to youth include fruit, candy, mint. Packaging that appeal to youth include bright colors, cartoons, toys. Kids are using products in the school classroom and bathroom, and rating them on YouTube videos.
- **Menthol is a starter flavor for California students**. Among California high school students who smoke cigarettes, 44% use menthol cigarettes.
- Tobacco industry is changing rapidly. Every tobacco company has a vaping product, and fall 2018 Altria (Philip Morris' parent company) bought a 35% stake in the most popular flashdrive product brand (75% of the market). Now there are dozens of knock-off versions of the product. Altria is also seeking to introduce a "heat-not-burn" cigarette product called iQOS that is popular overseas.

Health and Cessation Concerns

ELISA TONG,
Associate Professor,
Department of Internal Medicine, UC Davis

- Immediate and long-term health concerns for tobacco use and exposure. Immediate health effects occur within minutes for heart and lung function with fine particles and chemicals leading to inflammation. Long-term health effects occur over years for cancer risks, destruction of lung tissue, or atherosclerosis of the cardiovascular system.
- Nicotine is not harmless. Increasing nicotine poisonings of young children attracted to flavored tobacco products and packaging, and harmful if e-liquid gets on skin or eyes. Nicotine negatively affects the young developing brain which matures by 25 years, and is associated with prefrontal cortex ability for judgment, attention, and behavior contributing to mental health issues. High levels of nicotine (60 mg) could potentially kill an adult, as it affects the cardiovascular system and is used in insecticides. In contrast, nicotine medication doses range from 1 mg to 21 mg (patch for 24 hour absorption).
- Growing evidence of toxic effects from aerosol ingredients. Aerosol from electronic smoking devices: Polyethylene glycol is not water vapor and can irritate lungs; at least 10 toxic chemicals known to cause cancer or reproductive harm (e.g. formaldehyde, nickel, lead, benzene, cadmium, toluene, isoprene, acetaldehyde, N-Nitrosonornicotine). Flavorings: diacetyl is in 75% of flavored e-liquids and is associated with irreversible lung damage called bronchiolitis obliterans. Menthol: more likely to initiate, more likely to inhale deeper, less likely to quit; menthol acts on the nicotinic receptor which may affect addiciton. Heated chemicals react differently than burned chemicals, and chemicals have different effects when inhaled than eaten. Growing body of scientific evidence comes from FDA-funded Tobacco Centers of Regulatory Science (e.g. UCSF), which informs the FDA, and California's Tobacco-Related Disease Research Program.
- Vaping is not recommended for cessation. There are 7 FDA-approved medications for cessation that are not inhaled into the lungs and deliver less nicotine (nicotine patch, lozenge, gum, inhaler, nasal spray; bupropion and varenicline). The United States Preventive Services Task Force concluded there is "Insufficient" evidence to recommend electronic nicotine delivery devices for cessation. The FDA has not approved any vaping devices for cessation purposes. The risk of switching tobacco products, even for harm reduction purposes, is maintaining nicotine addiction and "dual use" of products.
- **Sacramento has a high health economic burden of $860 million for tobacco use and exposure**. Sacramento county's health economic costs from smoking are estimated at $860 million (see attachment). Immediate health effects like asthma and heart attacks create a significant health care burden and higher health care costs within 1 year. There are also significant indirect societal costs from loss of productivity.

African American Disparities including Menthol and Marketing

KIMBERLY BANKSTON-LEE,
The Saving Our Legacy Project: African Americans for Smoke-Free Safe Places

- Menthol makes it easier to inhale tobacco toxins and harder to quit. The anesthetic qualities of menthol numb the throat, masking the harsh taste and burn of tobacco that allows for deeper inhalation of toxins and greater amounts of nicotine. The presence of menthol makes cigarettes harder to quit compared to other cigarettes, despite more quit attempts, as it may affect nicotine receptors (Ton et al., 2015; Levy et al., 2011). "The 'cool refreshing taste of menthol' ultimately, allows the poisons in cigarettes and cigarillos to 'go down easier'."(Dr. Phil Gardiner, African American Tobacco Control Leadership Council; see op ed with Dr. David Cooke, Head of General Thoracic Surgery, UC Davis and Task Force Chair of the Comprehensive Lung Cancer Screening Program)
- **Sacramento African Americans have high tobacco use disparities due to menthol**. In California, 70% African American adults who smoke consume menthols, compared to 18% of white adults who smoke. In Sacramento County, African Americans have one of the highest smoking rates (19% or 20,000 people) (California Health Interview Survey 2015-2017).
- **Targeted marketing and pricing affects Sacramento neighborhoods**. Research has shown how the tobacco companies have heavily marketed menthol products to African Americans since the 1960s, and is not just a "flavor preference." Menthol cigarettes are 75 cents cheaper in Sacramento's lower socioeconomic neighborhoods that have more African Americans (Oak Park compared to East Sacramento). Direct-mail coupons, in-store price promotions and advertisings, retailer incentives are other key marketing strategies.
- Packaging sizes. While cigarettes can only be sold as a pack (20 in a pack), other tobacco products like little cigars are often sold in small packages for less than a dollar. This makes it easier for low socioeconomic populations including youth and young adults to purchase.

Age Restriction Policies

MELANIE DOVE, Postdoctoral Fellow, Center for Healthcare Policy Research, UC Davis

- State age restriction and enforcement for under 21 years old. Since 2016, California has been the second state to implement a "Tobacco 21" law which prohibits sales of tobacco products to under 21 years of age (except active duty military). In California, 64% of current cigarette smokers started by the age of 18, and 96.3% started by the age of 26, so delaying initiation is thought to be an effective tobacco control strategy. Enforcement is conducted through "sting" operations with penalties under the Stop Access to Kids Enforcement (STAKE) Act. However, online sales do not verify age beyond "agreeing" to adult status, and can include resale sites like eBay or Craigslist or local online exchange boards.

- **California illegal sales are rising including in tobacco-only stores**. In the California Youth Adult Tobacco Purchase Survey 2017-2018, retail violation rates are increasing for illegal sales to young adults 18-19 years: 13% to 22% for electronic smoking devices and 14% to 18% for tobacco. Among vape shops and tobacco store retailers, over 30% are still selling tobacco to 18-19 year olds.

- **Purchasing restrictions for California youth is not enough with widespread access**. Among 208 California high school students under 18 years old and currently using electronic cigarettes, 50.8% borrowed them, 9.3% bought them in a store, 8.9% reported someone else bought them, 6.9% reported an adult gave them an electronic cigarette, 3.9% got them online, and 20% reported some other way. (2017 California Youth Risk Behavior Surveillance System). Since vaping products are refillable and rechargeable, traditional youth purchasing restrictions as for cigarettes that have a one-time use have major limitations.

Impact on Sacramento Schools

JOELLE ORROCK, Tobacco Use Prevention Education Coordinator, Sacramento County Office of Education

- Sacramento County Office of Education coordinates Tobacco Use Prevention Education activities from California Department of Education funding with 5 school districts: Sacramento, Elk Grove, San Juan, Folsom, Twin Rivers. Through a competitive grant process, schools are funded to provide programs for grades 6-12 with evidence-based tobacco-specific prevention and cessation programs for adolescents within the school setting.
- Students are using products at school and seeing it in digital/social media. Local parents and educators are calling several times a week about students using these products. Parents and teachers may not be aware of these products which do not look like traditional cigarettes, as they can be put into hoodie strings or on top of water bottles. Bathrooms are a common place for use. With less aerosol and flavored odors, students are using tobacco products in the classroom and blowing it out under the desk or inside their shirts. Social influencers, including teens, promote products through YouTube product reviews, Instagram, and tweets which make it difficult to track.
- **Sacramento high school student vaping has risen by 50% despite cigarette use dropping**. Among 11th grade high school students in the Sacramento City Unified School District, electronic cigarette use increased by 50% (8% in 2016-2017 to 12% in 2017-2018), while cigarette use decreased (10% in 2016-2017 to 6% in 2017-2018). Almost half of the 11th grade students reported cigarettes were "very or fairly easy to obtain." (California Healthy Kids Survey).
- **Restricting sales are important as 75% of stores near Sacramento schools sell flavored tobacco products**. In the 2016 Healthy Stores for a Healthy Community survey, 74% of surveyed stores near schools in Sacramento County were found to sell flavored non-cigarette tobacco products. (healthystoreshealthycommunity.com/counties/sacramento) The density of tobacco retailers, particularly in neighborhoods surrounding schools, has been associated with increased youth smoking rates.(Henriksen) Youth are more likely to experiment with tobacco products when retailers are located near schools. (McCarthy)

Policies In Other Communities And Counties

DIANA CASSADY, Professor, Department of Public Health Sciences, UC Davis

- Cigarettes do not have flavors except menthol. In 2009 the federal Food and Drug Administration banned the sale of flavored cigarettes because of their appeal to children. After 2009, researchers found that there was a reduction in youth smoking, but also a shift among youth smokers to menthol cigarettes. After the ban on flavored cigarettes, the tobacco industry flooded the market with flavored cigarillos and e-cigarettes.
- Other countries do not allow flavored tobacco products. In response to these new flavored products and their appeal to youth, Brazil was the first country to prohibit flavored tobacco products in 2012. The European Union followed, covering 28 member countries. Turkey, with very high smoking rates, banned the sale of menthol flavored cigarettes in 2015 and will ban mint flavored products in 2020. Twenty-nine countries ban the sale of any type of e-cigarette.
- Other states have flavored tobacco product regulations. In the United States 182 cities and counties have some form of restriction on the sale of flavored tobacco products, including Chicago, New York City, Boston, and Minneapolis. Many smaller cities in Massachusetts and Minnesota also have adopted regulations on flavored tobacco products.
- **Other California cities and counties have flavored tobacco product regulations including Yolo County**. Twenty-five of those local policies have been passed in California as of November 2018 (see attachment). The City of Hayward was the first to regulate the sale of flavored tobacco products in 2014, with more policies passed each year: 11 California cities passed policies in 2018. Closest to Sacramento, the Yolo County Board of Supervisors passed their tobacco product regulation policy in October 2016 to prohibit the sale of flavored electronic cigarettes, menthol, little cigars, smokeless, components and accessories (e.g. blunt wrappers), and without exemptions.

Sacramento County Tobacco Education Program and Tobacco Control Coalition

DANICA PETERSON, Health Educator, Sacramento County Tobacco Education Program

- The Sacramento County Tobacco Education Program (TEP) is housed under the Sacramento County Department of Health Services, Public Health Division. The TEP is funded by the California Tobacco Control Program (CTCP), under the California Department of Public Health (CDPH) through a combination of Proposition 99 and 56 tobacco taxes.
- Focus to support education. The TEP focuses on providing tobacco-related information and education to individuals, organizations, and the community. Methods include presentations, creation of fact sheets and infographics, presentations, and resource sharing and technical assistance.
- Focus to support policy and social norm change. Another primary focus is on policy and social norm change. Methods include the pursuit of legislative policies; the pursuit of voluntary policies; providing staffing, training, and support for the local Tobacco Control Coalition (TCC); youth and adult engagement in tobacco control. Importantly, due to its funding source from tobacco taxes, the TEP is not allowed to lobby or openly support any specific legislation. However, they are able to provide information and education on the issues and support to the Tobacco Control Coalition (TCC), whose non Proposition 99/56 funded members are allowed to lobby.
- The Tobacco Control Coalition (TCC) currently meets 6 times per year, every other month, to discuss tobacco-related issues in the community. The vision of the Coalition is to "transform Sacramento County into a tobacco-free society in the 21st century." Currently, the Coalition also consists of 4 subcommittees/taskforces: The Equity and Diversity Subcommittee, The Youth and Young Adult (YYA) Subcommittee, the Cessation Taskforce, and the Policy Taskforce.

Health Burden and Economic Costs of Smoking in Sacramento

TOTAL COSTS:

2009 = $790,670,000
2019 = **$860 million**

DIRECT HEALTH CARE COSTS:

2009 = $416,692,000
2019 = **$491 million**

Sacramento

Cost of Smoking	Amount (1,000)	Per Resident	Per Smoker
Total	$790,670	$560	$4,386
Direct	416,692	295	2,311
Lost Productivity	373,978	265	2,074
Illness	57,368	41	318
Premature Death	316,610	224	1,756
Male	$476,355	$689	$4,720
Direct	219,634	318	2,176
Lost Productivity	256,721	371	2,544
Illness	30,702	44	304
Premature Death	226,020	327	2,240
Female	$314,315	$437	$3,961
Direct	197,058	274	2,483
Lost Productivity	117,257	163	1,478
Illness	26,667	37	336
Premature Death	90,590	126	1,142

Smoking Prevalence	Currently Smoke		Formerly Smoked		Never Smoked	
	Number	%	Number	%	Number	%
Total	180,279	15.4	242,234	20.7	749,237	63.9
Male	100,923	17.7	136,814	24.0	331,495	58.2
Female	79,355	13.2	105,420	17.5	417,742	69.3
Age 12-17	10,709	8.6	16,676	13.4	96,810	77.9
Male	7,469	11.6	13,853	21.6	42,803	66.7
Female	3,240	5.4	2,823	4.7	54,008	89.9
Age 18+	169,569	16.2	225,558	21.5	652,427	62.3
Male	93,455	18.5	122,961	24.3	288,693	57.2
Female	76,115	14.0	102,596	18.9	363,734	67.1

Deaths	Total	Due to Smoking	
		Number	%
Total	9,770	1,487	15.2
Male	4,880	812	16.6
Female	4,890	675	13.8

Direct Cost of Smoking	Amount (1,000)	Per Resident	Per Smoker
Total	$416,692	$295	$2,311
Hospital	192,811	137	1,070
Ambulatory	89,905	64	499
Nursing Home Care	52,875	37	293
Prescriptions	49,888	35	277
Home Health	31,213	22	173

Sacramento

Years of Potential Life Lost	Number of Years	Per Death
Total	26,534	17.8
Male	14,542	17.9
Female	11,992	17.8

Population 2009	All Ages	<18	18-34	35-64	65+
Total	1,411,402	363,848	344,798	545,767	156,989
Male	691,550	186,442	172,706	266,120	66,283
Female	719,852	177,407	172,093	279,647	90,705

Lost Productivity from Premature Death	Amount (1,000)	Per Death
Total	$316,610	$212,899
Male	226,020	278,377
Female	90,590	134,165

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Key Data Points on Flavored Tobacco Products

Flavored Tobacco Products Overall

- 81% of youth who have ever used a tobacco product initiated tobacco use with a flavored product.[1] (PATH Wave 1, 2013-2014)
- 80% of current youth tobacco users used a flavored tobacco product in the past month.[2] (PATH Wave 1, 2013-2014)

E-Cigarettes

- Among high school students, e-cigarette use more than doubled from 2017 to 2019, increasing from 11.7% to 27.5%. [3] (2019 NYTS)
- 5 million youth were current e-cigarette users in 2019 - an increase of nearly 3 million students since 2017.[4] (2019 NYTS)
- In 2018, 27.7% of high school e-cigarette users were frequent users, using e-cigarettes on at least 20 of the preceding 30 days.[5] (2018 NYTS)
- 1 in 9 of *all* high school seniors (11.7%) report that they vaped nicotine nearly daily, a strong indication of addiction.[6] (2019 Monitoring the Future Survey)
- As of 2017, researchers had identified more than 15,500 unique e-cigarette flavors available online.[7]
- 97% of current youth (ages 12-17) e-cigarette users had used a flavored e-cigarette in the past month.[8] (PATH Wave 4, 2016-2017)
- Current use of menthol or mint flavored e-cigarettes among high school e-cigarette users increased from 51.2% in 2018 to 63.9% in 2019. Mint and menthol flavors are about as popular as fruit flavors among high school e-cigarette users.[9] (2019 NYTS)
- 70.3% of current youth (ages 12-17) e-cigarette users say they use e-cigarettes "because they come in flavors I like."[10] (PATH Wave 4, 2016-2017)
- The spike in youth e-cigarette use is undermining recent progress in reducing youth tobacco use. The increase in e-cigarette use drove a 38% increase in use of any tobacco product among high school students, from 19.6% in 2017 to 27.1% in 2018.[11] (2018 NYTS)
- E-cigarette use is "strongly associated" with the use of other tobacco products among youth. One study found that from 2013 to 2016, youth e-cigarette use was associated with more than four times the odds of trying cigarettes and nearly three times the odds of current cigarette use.[12]

Cigars

- Sales of flavored cigars have increased by nearly 50% from 2008 to 2015, with more than 250 unique cigar flavors available.[13]
- 71.7% of current youth cigar smokers had used a flavored product in the last month.[14] (PATH Wave 1, 2013-2014)
- 73.8% of youth cigar smokers smoked cigars "because they come in flavors I like."[15] (PATH Wave 1, 2013-2014)

Menthol Cigarettes

- Data from the Federal Trade Commission (FTC) show that in 2017 (the most recent year for which data are available), menthol cigarettes comprised 36% of the market, the highest proportion on record since FTC began collecting this data in 1963.[16]
- Over half (54%) of youth smokers ages 12-17 use menthol cigarettes compared to one-third (32%) of older adult smokers.[17] Prevalence of menthol use is even higher among African Americans: 85% of all African-American smokers smoke menthol cigarettes and seven out of ten African-American youth smokers smoke menthol cigarettes.[18] (2014 NSDUH)
- TPSAC estimated that by 2020, 4,700 excess deaths in the African-American community will be attributable to menthol cigarettes, and over 460,000 African Americans will have started smoking because of menthol cigarettes.[19]

Flavored Tobacco Restrictions

- Over 200 localities have restricted the sale of flavored tobacco products, although laws differ in their application to specific products and store types
- Over 50 localities have restricted the sale of all flavored tobacco products, including menthol cigarettes
- Over two dozen localities have completely prohibited the sale of all flavored tobacco products, with no product or retailer exemptions

September 23, 2019

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Surgeon General's Advisory on E-cigarette Use Among Youth

I, Surgeon General of the United States Public Health Service, VADM Jerome Adams, am emphasizing the importance of protecting our children from a lifetime of nicotine addiction and associated health risks by immediately addressing the epidemic of youth e-cigarette use. The recent surge in e-cigarette use among youth, which has been fueled by new types of e-cigarettes that have recently entered the market, is a cause for great concern. ***We must take action now to protect the health of our nation's young people.***

KNOW THE RISKS. TAKE ACTION. PROTECT OUR KIDS.

The E-cigarette Epidemic Among Youth

Considerable progress has been made in reducing cigarette smoking among our nation's youth.[1] However, the tobacco product landscape continues to evolve to include a variety of tobacco products, including smoked, smokeless, and electronic products, such as e-cigarettes.[2] E-cigarettes are designed to deliver nicotine, flavorings, and other additives to the user via an inhaled aerosol.[2]

E-cigarettes entered the U.S. marketplace around 2007, and since 2014, they have been the most commonly used tobacco product among U.S. youth.[2] E-cigarette use among U.S. middle and high school students increased 900% during 2011-2015, before declining for the first time during 2015-2017.[3] However, current e-cigarette use increased 78% among high school students during the past year, from 11.7% in 2017 to 20.8% in 2018.[4] In 2018, more than 3.6 million U.S. youth, including 1 in 5 high school students and 1 in 20 middle school students, currently use e-cigarettes.[4]

E-cigarette aerosol is not harmless.[2] Most e-cigarettes contain nicotine – the addictive drug in regular cigarettes, cigars, and other tobacco products.[2] Nicotine exposure during adolescence can harm the developing brain – which continues to develop until about age 25.[2] Nicotine exposure during adolescence can impact learning, memory, and attention.[1,2] Using nicotine in adolescence can also increase risk for future addiction to other drugs.[1,2] In addition to nicotine, the aerosol that users inhale and exhale from e-cigarettes can potentially expose both themselves and bystanders to other harmful substances, including heavy metals, volatile organic compounds, and ultrafine particles that can be inhaled deeply into the lungs.[2]

Many e-cigarettes also come in kid-friendly flavors. In addition to making e-cigarettes more appealing to young people,[5] some of the chemicals used to make certain flavors may also have health risks.[2] E-cigarettes can also be used to deliver other drugs, including marijuana.[2] In 2016, one-third of U.S. middle and high school students who ever used e-cigarettes had used marijuana in e-cigarettes.[6]

For adults, e-cigarettes may have the potential to reduce risk for current smokers if they completely transition from cigarettes to e-cigarettes; however, a majority of adults who use e-cigarettes also smoke cigarettes.[7] For youth, the use of multiple tobacco products puts youth at even greater risk for addiction and tobacco-related harms.[1,2] Moreover, a 2018 National Academy of Sciences, Engineering, and Medicine report concluded that there was moderate evidence that e-cigarette use increases the frequency and intensity of cigarette smoking in the future.[7] But any e-cigarette use among young people is unsafe, even if they do not progress to future cigarette smoking.[2]

E-cigarettes Come in Many Shapes and Sizes

E-cigarettes are a rapidly changing product class, and are known by many different names, including "e-cigs," "e-hookahs," "mods," and "vape pens."[2] Recently, a new type of e-cigarette has become increasingly popular among our nation's youth due to its minimal exhaled aerosol, reduced odor, and small size, making it easy to conceal.[8] Many of these new e-cigarettes look like a USB flash drive, among other shapes. One of the most commonly sold

USB flash drive shaped e-cigarettes is JUUL, which experienced a 600% surge in sales during 2016-2017, giving it the greatest market share of any e-cigarette in the U.S. by the end of 2017.[9] Other companies are now also starting to sell e-cigarettes that look like USB flash drives.

All JUUL e-cigarettes have a high level of nicotine. A typical JUUL cartridge, or "pod," contains about as much nicotine as a pack of 20 regular cigarettes.[10] These products also use nicotine salts, which allow particularly high levels of nicotine to be inhaled more easily and with less irritation than the free-base nicotine that has traditionally been used in tobacco products, including e-cigarettes. This is of particular concern for young people, because it could make it easier for them to initiate the use of nicotine through these products and also could make it easier to progress to regular e-cigarette use and nicotine dependence. However, despite these risks, approximately two-thirds of JUUL users aged 15-24 do not know that JUUL always contains nicotine.[11]

You Can Take Action

We must take aggressive steps to protect our children from these highly potent products that risk exposing a new generation of young people to nicotine.[2,7] The bad news is that e-cigarette use has become an epidemic among our nation's young people. However, the good news is that we know what works to effectively protect our kids from all forms of tobacco product use, including e-cigarettes.[1,2,12] We must now apply these strategies to e-cigarettes, including USB flash drive shaped products such as JUUL. To achieve success, we must work together, aligning and coordinating efforts across both old and new partners at the national, state, and local levels. Everyone can play an important role in protecting our nation's young people from the risks of e-cigarettes.

Information for Parents

- **You have an important role to play in addressing this public health epidemic.**
- Learn about the different shapes and types of e-cigarettes and the risks of all forms of e-cigarette use for young people at https://e-cigarettes.surgeongeneral.gov/.
- Set a good example by being tobacco-free. If you use tobacco products, it's never too late to quit. Talk to a healthcare professional about quitting all forms of tobacco product use. For free help, visit smokefree.gov or call 1-800-QUIT-NOW.
- Adopt tobacco-free rules, including e-cigarettes, in your home and vehicle.
- Talk to your child or teen about why e-cigarettes are harmful for them. It's never too late.
- Get the Surgeon General's tip sheet for parents, Talk With Your Teen About E-cigarettes, at https://e-cigarettes.surgeongeneral.gov/. Start the conversation early with children about why e-cigarettes, including JUUL, are harmful for them.
- Let your child know that you want them to stay away from all tobacco products, including e-cigarettes, because they are not safe for them. Seek help and get involved.
    - Set up an appointment with your child's health care provider so that they can hear from a medical professional about the health risks of tobacco products, including e-cigarettes.
    - Speak with your child's teacher and school administrator about enforcement of tobacco-free school policies and tobacco prevention curriculum.
    - Encourage your child to learn the facts and get tips for quitting tobacco products at Teen.smokefree.gov.

Information for Teachers

- **You have an important role to play in addressing this public health epidemic.**
- Learn about the different shapes and types of e-cigarettes and the risks of all forms of e-cigarette use, including JUUL, for young people at https://e-cigarettes.surgeongeneral.gov/.
- Develop, implement, and enforce tobacco-free school policies and prevention programs that are free from tobacco industry influence, and that address all types of tobacco products, including e-cigarettes.

- Engage your students in discussions about the dangers of e-cigarette use. To help you, the Food and Drug Administration (FDA), and Scholastic, developed free resources for teachers. These materials can be found at www.scholastic.com/youthvapingrisks.

Information for Health Professionals

- **You have an important role to play in addressing this public health epidemic.**
- Learn about the different shapes and types of e-cigarettes and the risks of all forms of e-cigarette use, including JUUL, for young people at https://e-cigarettes.surgeongeneral.gov/.
- Ask about e-cigarettes, including small, discreet devices such as JUUL, when screening patients for the use of any tobacco products.
- Educate patients about the risks of all forms of tobacco product use, including e-cigarettes, for young people.
- Encourage patients to quit. For free help, patients can visit smokefree.gov or call 1-800-QUIT-NOW.

Information for States, Communities, Tribes, and Territories

- **You have an important role to play in addressing this public health epidemic.**
- Implement evidence-based population-level strategies to reduce e-cigarette use among young people, such as including e-cigarettes in smoke-free indoor air policies, restricting young peoples' access to e-cigarettes in retail settings, licensing retailers, implementing price policies, and developing educational initiatives targeting young people.
- Implement strategies to curb e-cigarette advertising and marketing that are appealing to young people.
- Implement strategies to reduce access to flavored tobacco products by young people.

KNOW THE RISKS. TAKE ACTION. PROTECT OUR KIDS.

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AMERICAN LUNG ASSOCIATION® IN CALIFORNIA

American Heart Association®

December 14, 2018

Within the past month, two big announcements were made regarding tobacco control at the federal and state levels:

- On November 15, the U.S. Food and Drug Administration (FDA) announced that it intends to prohibit the sale of menthol cigarettes and flavored cigars as well as implement certain restrictions on e-cigarette sales.[i] The FDA also intends to release a "best practices" guide for online tobacco retailers and may strengthen federal policies around youth access to flavored tobacco.
- On December 3, six members of the California legislature introduced bills banning the sale of flavored tobacco products, including menthol, and requiring age verification for tobacco products sold online.[ii]

While these announcements are good news, California cities and counties should continue taking steps to protect youth and vulnerable populations from flavored tobacco.

Our organizations have long advocated to prohibit the sale of all flavored tobacco products, including menthol cigarettes and flavored cigars, because flavors have been shown to encourage youth use.[iii] The FDA's own scientific advisory committee found that menthol increases youth initiation and makes it harder for people who smoke to quit.[iv] Menthol products have also been linked to higher degree of addiction among youth and priority populations.[v] The tobacco industry has for decades targeted the marketing and sale of menthol cigarettes disproportionately to the African American community.[vi]

E-cigarettes and other flavored tobacco products also contain harmful ingredients which can cause irreversible damage.[vii] The 2018 National Youth Tobacco Survey showed that 20% of high school students currently use e-cigarettes, which is 78% higher than the 2017 report.[viii] Of those, two thirds used flavored products and over half used menthol or mint flavored products.

We have already seen how long it takes for federal decisions surrounding tobacco to take effect, such as the corrective action statements which were decided in 2006 and implemented in 2017.[ix] The FDA has only announced its intention to take action – the proposal and other details of the plan have not yet been released. In addition, the process to finalize FDA regulations is a lengthy one that could take a decade or more. California cities and counties should adopt the strongest policies possible to ensure their communities are protected. We cannot wait.

Likewise, state legislation is a long process, and without the pressure of local adoption, could take years, if passed at all. The introduced legislation may also take amendments over time that weaken its protective measures. It is essential to continue to build momentum by adopting these policies at the local level.

The best way to prevent tobacco addiction is to prevent youth and young adults from ever starting to use it in the first place. This is done through comprehensive policies that limit access to tobacco products.[x] Since 80% of young people who have ever tried a tobacco product started with a flavored product, prohibiting the sale of flavored tobacco products, including menthol, will

remove youth's temptation to start.[xi] Local tobacco retail licensing with suspension and expulsion clauses have also shown to reduce the number of illegal sales.[xii]

It is critically important that local decision-makers go above and beyond the proposed FDA regulations, and not wait for the state or federal government to act. For more information, please contact Lindsey Freitas, American Lung Association in California (lindsey.freitas@lung.org), Tim Gibbs, American Cancer Society Cancer Action Network (tim.gibbs@cancer.org), or Jamie Morgan, American Heart Association (jamie.morgan@heart.org).

Sincerely,

American Lung Association in California
American Cancer Society Cancer Action Network
American Heart Association

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AMERICAN LUNG ASSOCIATION. IN CALIFORNIA

Matrix of Local Ordinances Restricting the Sale of Flavored Tobacco Products

THE CENTER for Tobacco Policy & Organizing

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MAY 2019

The tobacco industry has a long history of using flavored tobacco to target youth and communities of color. The majority of youth who start experimenting with tobacco begin with flavored tobacco.[1] These products come in a variety of candy-like flavors including bubble gum, grape, menthol and cotton candy and include e-cigarettes, hookah tobacco, cigars, smokeless tobacco, and even flavored accessories such as blunt wraps.

Since 2009, the United States Food and Drug Administration (FDA) has banned flavored cigarettes nationwide. However, this ban included an exemption for menthol flavored cigarettes and doesn't extend to non-cigarette tobacco products. There are currently no state laws in California restricting the sale of flavored tobacco products. It is up to local communities to take action to protect their youth from the lure of enticing flavored tobacco.

The first community to restrict the sale of flavored tobacco in California was Santa Clara County in 2010. Since then, thirty-five communities have passed similar policies.

What products may be included?

1. E-Cigarettes – Restricts the sale of flavored electronic cigarettes.

2. Menthol – Restricts the sale of tobacco products labelled as menthol, including cigarettes, smokeless tobacco, little cigars, etc.

3. Little Cigars – Restricts the sale of flavored little cigars, which are small, usually filtered cigars wrapped in brown paper containing tobacco leaf. Little cigars became a popular alternative following the FDA's ban on flavored cigarettes.

4. Smokeless Tobacco – Restricts the sale of flavored smokeless tobacco such as chewing tobacco, dip, snus and snuff.

5. Components & Accessories – Restricts the sale of flavored accessory products such as blunt wraps and e-juice additives. These products cannot be smoked alone and serve as a delivery system for smoked products.

6. Products Marketed as Flavored – Tobacco companies sometimes try to circumvent flavor restrictions by marketing products as flavored without directly labelling them as such. This policy option allows communities to broaden the definition of flavored tobacco to include these products.

What exemptions are allowed?

1. Adult-Only Stores Exempted – Adult-only retailers are limited to customers who are 21 and over. This limits sales of flavored tobacco to stores that youth do not have access to.

2. Grandfathered Retailers Exempted – Allows retailers that were in operation prior to a specifed date to continue selling flavored tobacco products.

3. Limited to Youth-Populated Areas – Retailers are required to be a certain distance away from schools, parks, or other youth-oriented locations. Since many flavored tobacco products target youth, including buffer zones is a way to limit their access to flavored products.

Resources

The Center has additional resources on tobacco retailer licensing ordinances, plug-in policies, and ordinances restricting menthol tobacco available at: http://center4tobaccopolicy.org/tobacco-policy/tobacco-retail-environment/ . ChangeLab Solutions has model ordinance language available for ordinances restricting flavored tobacco at: http://changelabsolutions.org.

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City/County Date Passed	Products Included						Exemptions		
	E-Cigs	Menthol	Little Cigars	Smokeless	Components & Accessories	Products marketed as flavored	Adult-Only Stores Exempted	Grandfathered Retailers Exempted?	Limited to Youth-Populated Areas?
San Carlos April 2019	X	X	X	X	X	X			
Larkspur April 2019	X	X	X	X	X	X			
Sacramento April 2019	X	X	X	X	X	X			
Albany April 2019	X	X	X	X	X	X			
Corte Madera March 2019	X	X	X	X	X	X			
Hermosa Beach Jan 2019	X	X	X	X	X	X	X		
San Pablo Dec 2018	X	X	X	X	X	X			
Alameda Nov 2018	X	X	X	X	X	X			
Santa Cruz Nov 2018	X	X	X	X	X	X			
Marin County Nov 2018	X	X	X	X	X	X			
Saratoga Oct 2018	X		X	X	X	X			
Half Moon Bay Oct 2018	X	X	X	X	X	X			
Portola Valley Sep 2018	X	X	X	X	X	X			
Beverly Hills August 2018	X	X	X	X	X	X			
Richmond July 2018	X	X	X	X	X	X			
Sausalito July 2018	X	X	X	X	X				
San Mateo County June 2018	X	X	X	X	X	X			
San Francisco June 2018	X	X	X	X	X	X			
Mono County July 2018	X								
Windsor March 2018	X		X**	X	X	X			

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E-cigarettes, which heat a nicotine solution into a vapor, are often promoted as a less harmful alternative to traditional cigarettes but the FDA has not approved any vaping product to help smokers quit. The makers of all vaping products face a May deadline to submit applications for government health and safety review.

Mike Chang, owner of Master Piece Smoke Shop in New York City, says most of his customers who buy disposables switched from Juul after the company pulled its mint, mango and dessert flavors last fall. The company took that voluntary step under pressure from multiple federal investigations and lawsuits from state and local authorities.

The San Francisco company's retail sales have fallen 35% since their peak last July, driven by the loss of flavors, according to Wall Street research firm Piper Sandler. Juul does not sell disposable e-cigarettes.

In a government survey last year, more than 1 in 4 high school students reported using e-cigarettes in the prior month. The next federal study begins this spring.

AP videojournalist Marshall Ritzel contributed to this report.

This article tagged under:

FDA • VAPING

Sales of disposable e-cigarettes and all other tobacco and vaping products are prohibited to teenagers under the government's new age limit, which went from 18 to 21 late last year.

High school student Philip Fuhrman says most of his New York classmates who vape have ditched Juul for disposables like Stig, a tiny e-cigarette sold in flavors like mighty mint and mango bomb.

They're easier to hide because "they're smaller and when you're done you can just throw it away," said the 16-year-old Fuhrman, who says he no longer vapes. He's now an anti-vaping activist and his mother is one of the founders of a parents' group opposed to youth vaping.

At $20 for a three-pack, Stig may not seem cheap. But Fuhrman and other teens say it's a smaller investment than the $40 or $50 needed to buy a Juul device and a four-pack of pods. Furhman says teens will instead buy a pack of Stigs "for the weekend and then just be done with it."

The makers of Stig, Puff Bar and Fogg disposables did not respond to requests for comment.

Analysts report that disposables are still just 5% of the nearly $15 billion global vaping market, according to the firm ECigIntelligence.

0:46

New York City Bans Flavored Vaping Products

1:52

Family Says Vaping Killed Their 28-Year-Old Son

An Orlando family is grieving the loss of their 28-year-old son, who died last week. They said he died as a result of vaping. Kyle Boyd's mother, Kimberly, said he was fine last Monday after he came... **Read more**

Researchers who study e-cigarette trash around high schools say they have noticed a shift in what teens are vaping. Jeremiah Mock, of the University of California, San Francisco, has been finding discarded Puff Bars in local school parking lots over the last three months.

Vape shop owners also say the market is changing.

Since the FDA announcement, distributors and manufacturers have ramped up their disposable offerings, according to Vapewerks owner Jeremy Gardner in Cumberland, Maryland.

"How do disposables get a free pass when they're essentially the same thing as a Juul or anything else that comes with a prefilled pod?" he asked.

Gardner doesn't stock his most requested brand, Puff Bar, but sells a rival disposable. Most of his business comes from larger, tank-based vapes, which are more popular with adults and allow users to customize flavors and nicotine concentrations. Those products are exempt from government flavor restrictions.

New York City becomes the first major U.S. city to ban flavored vaping products.

"They are very accessible and seem to be the new buzzy product," said Dr. Karen Wilson, a tobacco researcher and pediatrician at Mount Sinai's medical school in New York.

The FDA confirmed that the flavor restriction won't apply to "self-contained, disposable products," but only to rechargeable ones that use pods or cartridges prefilled with a nicotine solution.

The agency's rationale: Reusable vaping devices are far and away the most popular with underage users, preferred by more than 60% of high schoolers who vape, according to survey data collected last year.

The FDA's top tobacco regulator said it can still go after any vaping product that appeals to teenagers.

"If we see a product that is targeted to kids, we will take action," Mitch Zeller, who heads the agency's tobacco center, said in a statement.

Thursday was the deadline for makers of reusable e-cigarettes to stop selling fruity and candy flavors. Juul was already in compliance. It dropped its best selling mint and most other flavors before the ban was announced in early January and only sells tobacco and menthol.

At a congressional hearing Wednesday, the head of Fontem U.S., which makes blu vapes, was pressed to drop its vivid vanilla and cherry crush disposable e-cigarettes.

Fontem chief Antoine Blonde countered that its customers are adults, not children. Less than 3% of high school students who vape reported blu as their preferred brand, according to 2019 government data.

"We're not aware of any issue caused by our disposable flavors," Blonde said.

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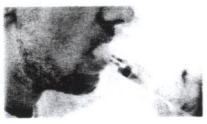

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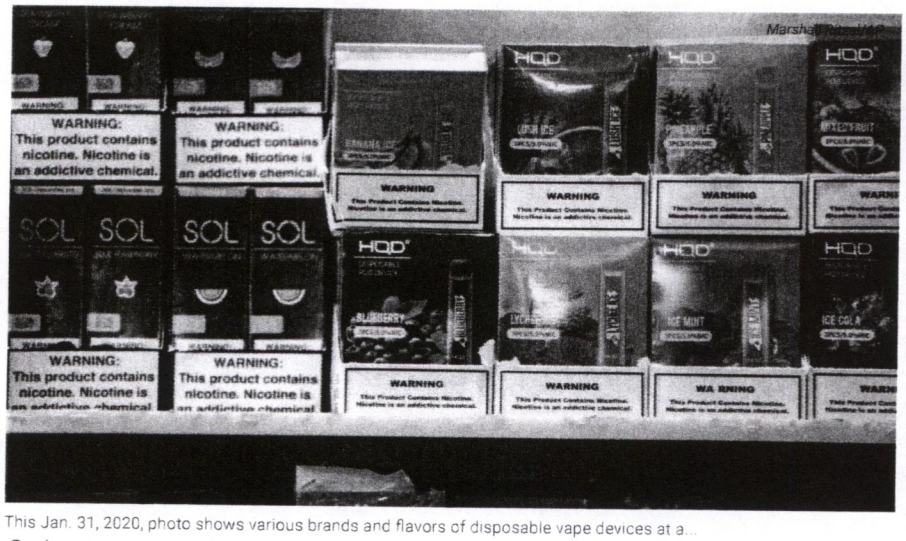
FDA Crackdown on Vaping Flavors Has Blind Spot: Disposables

The flavor restrictions that went into effect Thursday only apply to reusable e-cigarettes like Juul, the brand that helped trigger the teen vaping craze

By Matthew Perrone • Published on February 7, 2020 at 11:29 pm



This Jan. 31, 2020, photo shows various brands and flavors of disposable vape devices at a...
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The U.S. government on Thursday began enforcing restrictions on flavored electronic cigarettes aimed at curbing underage vaping. But some teenagers may be one step ahead of the rules.

Parents, researchers and students warn that some young people have already moved on to a newer kind of vape that isn't covered by the flavor ban.

These disposable e-cigarettes are sold under brands like Puff Bar, Stig and Fogg in flavors such as pink lemonade, blueberry ice and tropical mango.

The Food and Drug Administration's crackdown narrowly targets reusable vaping devices like Juul, the blockbuster brand that helped trigger the teen vaping craze in the U.S. Under the new policy, only menthol and tobacco flavors are allowed for those devices.

Critics of the FDA policy fear teens will simply switch to the cheaper disposables, which are widely available at convenience stores and gas stations.

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City/County Date Passed	Products Included						Exemptions		
	E-Cigs	Menthol	Little Cigars	Smokeless	Components & Accessories	Products marketed as flavored	Adult-Only Stores Exempted	Grandfathered Retailers Exempted?	Limited to Youth-Populated Areas?
Cloverdale Dec 2017	X		X	X		X			
Fairfax Dec 2017	X		X**	X	X	X			
San Leandro Oct 2017	X		X	X	X	X			
Palo Alto Oct 2017	X	X	X	X	X	X	X		
Oakland Sep 2017	X	X	X	X	X	X	X		
Contra Costa County July 2017	X	X	X	X	X	X			X 1000 ft
Los Gatos May 2017	X	X	X	X	X	X	X		
Novato Jan 2017	X		X**	X	X	X			
Santa Clara County Oct 2016	X	X	X	X	X	X	X		
Yolo County Oct 2016	X	X	X	X	X				
Manhattan Beach Dec 2015	X		X	X	X	X	X		
El Cerrito Oct 2015	X	X*	X	X	X	X			
Berkeley Sep 2015	X	X	X	X	X	X			X 600 ft
Sonoma June 2015	X		X**	X	X	X			
Hayward July 2014	X	X*	X	X	X	X		X	X 500 ft

[1] Ambrose, B.K., et al., Flavored Tobacco Product Use Among US Youth Aged 12-17 Years, 2013-2014. JAMA,2015: p.1-3.

*Does not include menthol cigarettes

**Exempts packages of at least 5 or more

***Doesn't apply to pipe tobacco

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