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POSITION STATEMENT ELECTRONIC CIGARETTES (E-CIGARETTES)

The National Association of Local Boards of Health (NALBOH) supports new interventions that are designed to help smokers quit. Currently, little scientific evidence is available to illustrate that electronic cigarettes (e-cigarettes) are effective cessation devices. Additionally, in 2010 a court ruled that e-cigarettes could not be regulated as drugs or drug delivery devices; this is how other cessation products such as nicotine gum and nicotine replacement therapies are regulated.¹

E-cigarettes are battery-operated products designed to deliver nicotine, flavor (candy-, mint-, menthol-, and fruit-flavored), and other chemicals through a vapor inhaled by the user.² The e-cigarette typically has an LED light to mimic the glow of a burning cigarette, a lithium-ion rechargeable battery, an atomizer to vaporize a nicotine solution, and a cartridge filled with liquid nicotine or other chemicals/flavors.¹ Most e-cigarettes are designed to resemble other tobacco products including conventional cigarettes, cigars, and pipes. Some e-cigarettes are even designed to appear as everyday objects including pens and USB memory sticks.² A recent survey conducted by the Centers for Disease Control and Prevention estimates the use of e-cigarettes among Americans has quadrupled from 2009 to 2010, resulting in nearly 3 million current adult users.³

E-cigarettes were first marketed in China in 2004 and have since become a worldwide product largely due to Internet sales.⁴ In addition to online sales, e-cigarettes are also available for sale at American mall kiosks, gas stations, and novelty stores. Both of these sales venues allow youth to breach current restriction laws and purchase the product more readily.^{4,5} Because e-cigarettes are not taxed as tobacco products, they may be particularly attractive to price-sensitive youth.

Manufacturers of e-cigarettes claim the product is safer, more convenient, and more affordable than current tobacco products. However, the science behind these safety claims is limited. In fact, public health authorities generally agree on the need for more clinical studies on these products. At least one study has found that e-cigarette users inhale as much nicotine as smokers of traditional cigarettes.⁶ Also, the Food and Drug Administration (FDA), the federal agency responsible for regulating tobacco products, reported its laboratory analysis of e-cigarettes indicated carcinogens (cancer-causing agents) and toxic chemicals such as diethylene glycol (ingredient found in antifreeze).⁷ The safety of the product is also dependent on the amount of nicotine inhaled in each “puff”⁷ and the quality/components of the cartridge. Due to the current design and regulation of the e-cigarette, users can refill their own cartridges with higher doses of nicotine or other harmful substances including marijuana hash oil.⁸

Due to the similar appearances between e-cigarettes and traditional tobacco products, it can also be difficult to quickly decipher between the products in public environments. This challenge may make it more difficult for business owners and officials to enforce new or existing smoke-free air laws.⁹ People may become confused about the legality of using tobacco products in smoke-free environments.

In April 2011, the FDA announced its intention to develop e-cigarette regulations.¹⁰ Until the FDA can enact strict legislation to regulate the sale and use of e-cigarettes and complete research on the product's health impact, the National Association of Local Boards of Health (NALBOH) encourages boards of health to support and/or adopt the following legislative measures in their communities:

- Use broadly-defined language to include e-cigarettes in smoke-free legislation for indoor and outdoor venues
- Amend existing definitions of “smoke” or “smoking” to include e-cigarettes and e-cigarette vapor
- Oppose legislation that exempts e-cigarettes from the smoking policy/regulation
- Prohibit the sale of e-cigarettes to minors
- Ban the sale of e-cigarette components that may appeal to minors (e.g., flavored cartridges)
- Require tobacco retailer licenses to sell e-cigarettes
- Establish proper enforcement procedures for e-cigarette policies and regulations
- Prohibit e-cigarette manufacturers and retailers from stating unsubstantiated marketing claims about the safety and benefits of the product⁴

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Approval Process:

NALBOH position statements are reviewed and approved by the Chronic Disease and Tobacco Use Prevention and Control Subcommittee, Education & Training Committee, and Board of Directors. The position statements relate to specific issues that are time sensitive or are in the process of being defined for NALBOH policy. Position statements are not voted on by the full NALBOH membership or other committees.

Reviewed and approved by: NALBOH Board of Directors – March 2012