

# E.cigarettes

An alternative to a uniquely deadly product that kills one in two of its regular users?

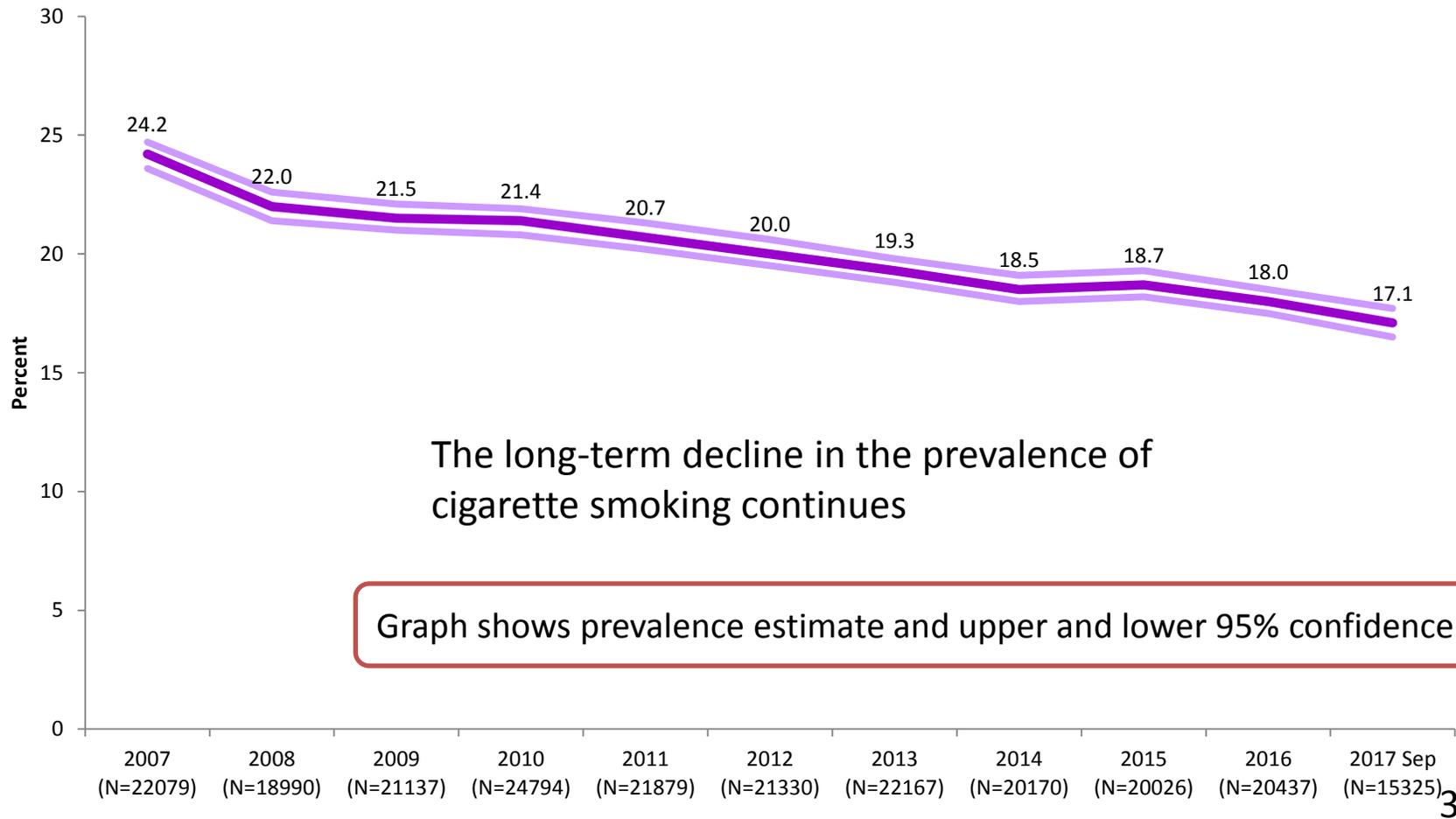


**Paul Lambert** – Public Health, Leeds City Council

# Background

- First came to market about 10 years ago, with use substantially increasing in 2012.
- Electronic cigarette use has become prevalent in many countries.
- In England, electronic cigarettes are currently regulated as consumer products.
- Initial concerns continue:
  - Renormalise cigarette
  - Gateway to smoking
  - Discourage quitting via encouraging dual use (big tobacco involvement)

# Cigarette smoking prevalence



Base: All adults

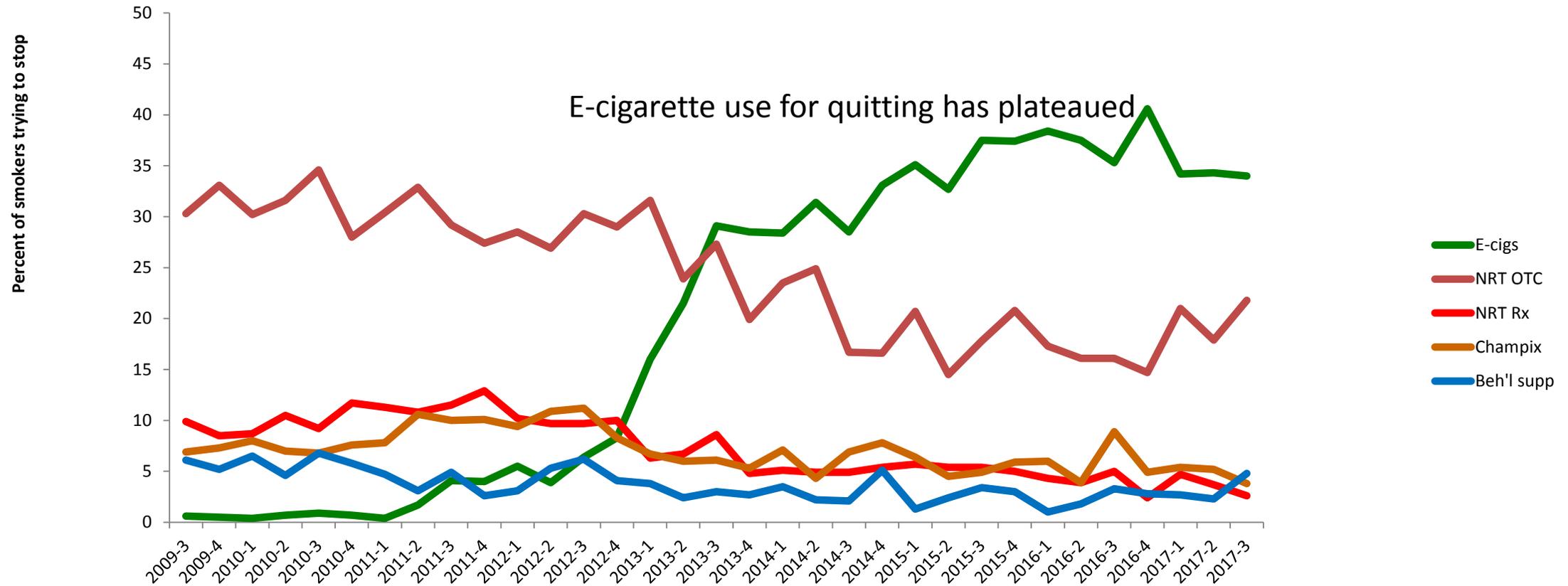
# E.cigarette devices

- The e.cigarette market is continuing developing and there is no single model.
- Numerous brands, flavours and models exist, each with their own technology, delivery and nicotine concentrations.
- Users also differ in how they use them

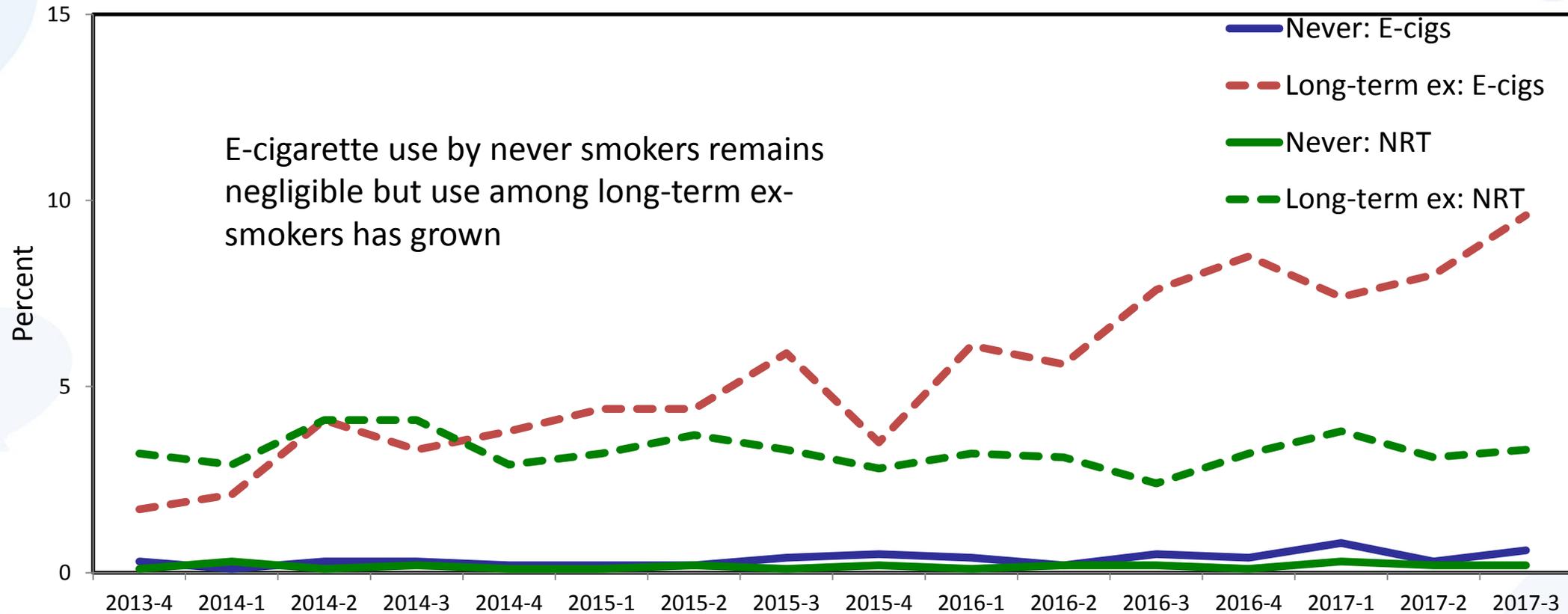


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# Aids used in most recent quit attempt



## Nicotine use by never smokers and long-term ex-smokers



# Safety?

- Large consensus among national health organisations including ASH, RCP, CRUK that they pose a fraction of the harm compared to smoked tobacco. If smokers cannot quit, e-cigarettes offer a substantially less harmful means for smokers to inhale nicotine (95% less harmful, PHE).
- Last year additional organisations, like the Royal College of General Practitioners and the British Medical Association issued new reports also pointing to e-cigarettes as a positive choice for smokers trying to quit..
- Public Health England included e-cigarettes in its advertising for 'Stoptober' an annual stop smoking campaign.
- In Scotland, a large number of organisations led by Health Scotland issued a statement making clear that vaping is definitely safer than smoking that was also supported by Scotland's Chief Medical Officer
- A recent study funded by CRUK suggested a cancer risk from vaping of around 1% of that to smoking<sup>1</sup>.
- Some health risk may still emerge – more research is need regarding the 5% risk – long term affect of inhaling flavours and others compounds found in vapor.



Public Health  
England

Protecting and improving the nation's health

**Evidence review of e-cigarettes and  
heated tobacco products 2018**  
A report commissioned by  
Public Health England

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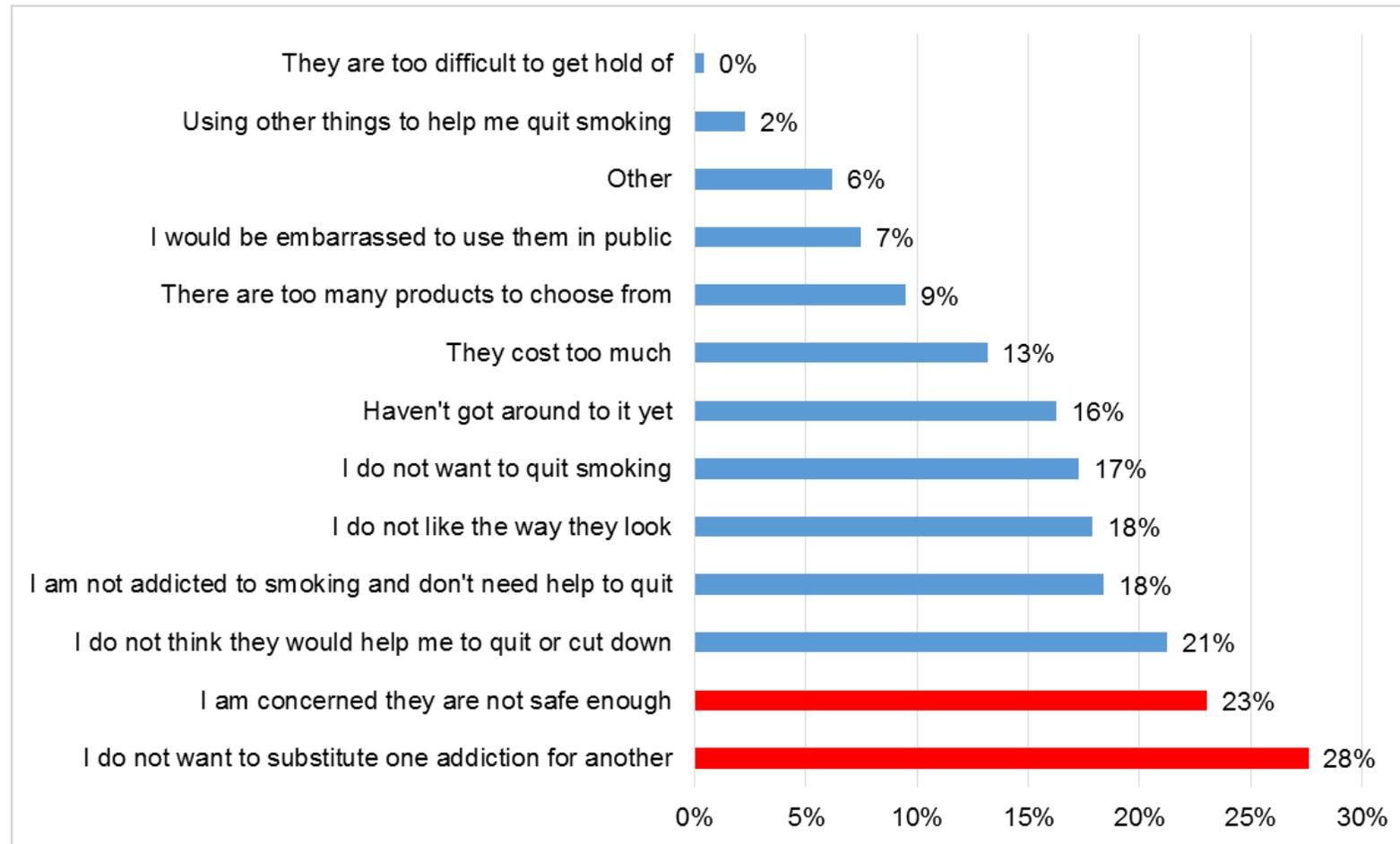
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<sup>4</sup>Cancer Research UK

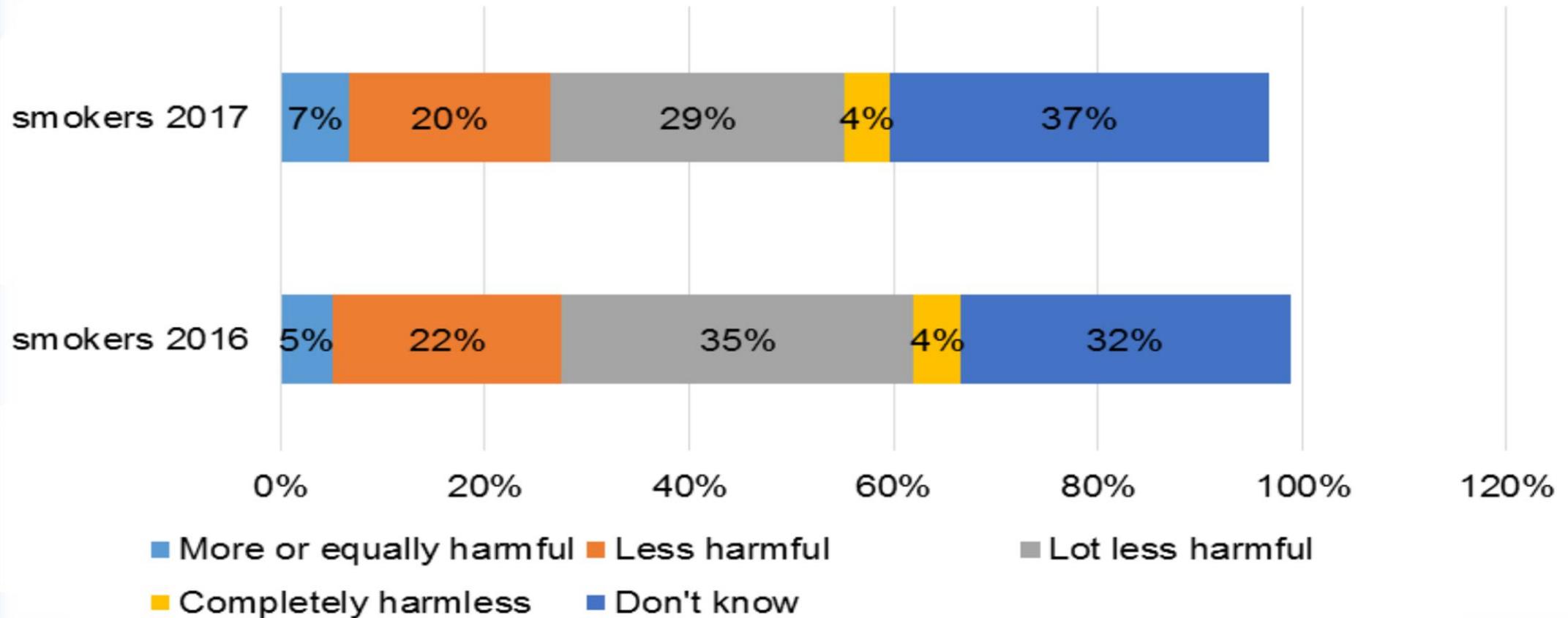
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[breathe2025.org.uk](https://breathe2025.org.uk)

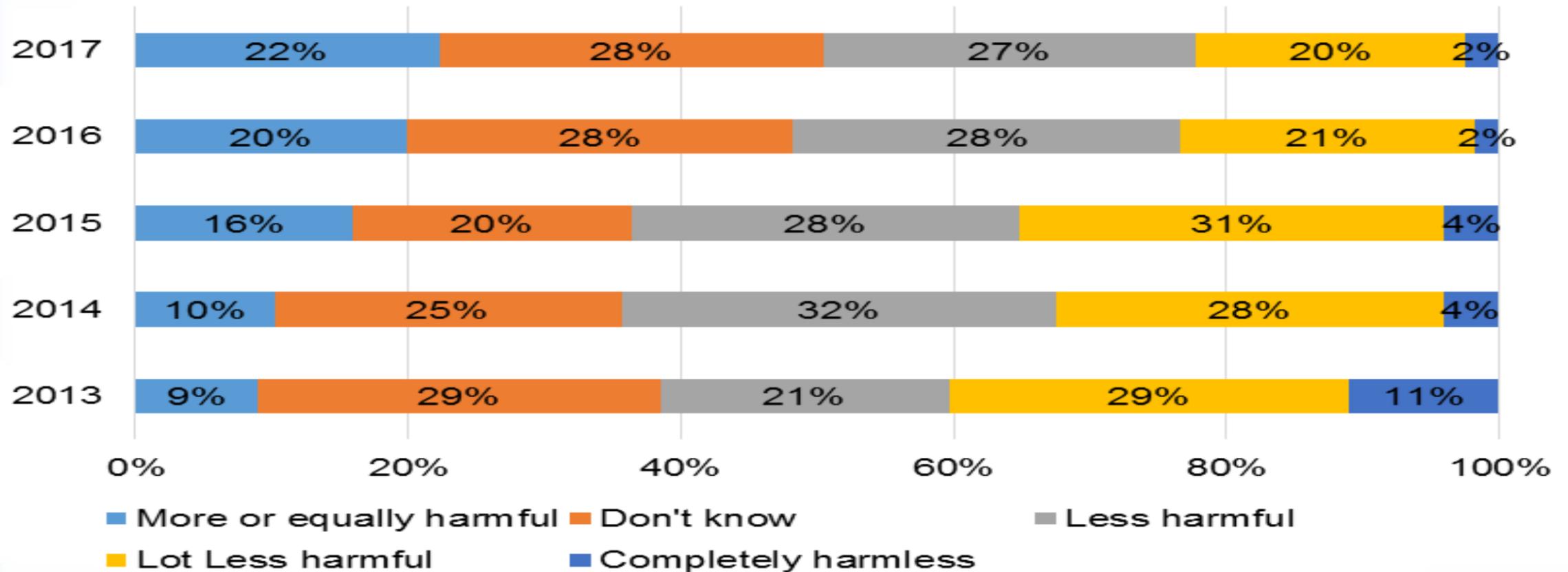
## Reasons for not trying an e-cigarette among smokers (ASH, 2017)



# Is NRT more or less harmful than regular cigarettes? (ASH, 2017)



# Proportion of smokers believing e-cigarettes less harmful than cigarettes



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N=10844 current smokers

11

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E-cigarettes could raise risk of cancer and heart disease, warn scientists



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Scientists found that e-cigarette vapour damages DNA and also prevents the genetic code from repairing itself. CREDIT: JANE MINGAY

By Sarah Knapton, SCIENCE EDITOR



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Vaping may raise the risk of certain cancers and heart disease, according to a team of scientists who studied the effects of e-cigarette smoke on healthy mice and human cells.

Researchers found evidence that nicotine inhaled from e-cigarettes could be converted into chemicals that damage DNA in the heart, lungs and bladder, and

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# Passive smoking and Vaping

- Unlike second-hand smoke from cigarettes – which is known to cause cancer – there's no evidence that second-hand e-cigarette vapour is dangerous to others. Some studies have found traces of toxic chemicals in second-hand vapour, but at such low levels that they're not harmful to those around you.
- Vaping is significantly less harmful than from active smoking
- Passive exposure to vaping is likely to be much less harmful than exposure from active vaping

# Marketing

## Permitted

- Outdoor advertising, including digital outdoor advertising
- Posters on public transport (not leaving the UK)
- Cinema
- Direct hard copy mail
- Leaflets
- Publications / websites etc. targeted exclusively to the trade
- Activities by private individuals (blogs, tweets etc.)

## Prohibited

- TV & radio
- Newspapers, magazines and periodicals
- Online advertising of all types
- Paid-for search
- Marketers' online sales promotions / prize promotions
- Email
- Text message

# E-cigarettes use by you people

Data from 5 large scale surveys conducted between 2015-2017 involving over 60,000 11-16 year-olds, showed a consistent pattern

## Smokers

- ever smoking ranged from 11% to 20%; regular (at least weekly) smoking between 1% and 4%;
- ever use of e-cigarettes 7% to 18%; regular (at least weekly) use 1% to 3%;
- among regular smokers, ever e-cigarette use ranged from 67% to 92% and regular use 7% to 38%

## Never smokers

- among never smokers, ever e-cigarette use ranged from 4% to 10% with regular use between 0.1% and 0.5%;

ASH surveys showed a rise in the prevalence of ever use of e-cigarettes from 7% (2016) to 11% (2017) but prevalence of regular use did not change remaining at 1%

# Main conclusion from YP surveys

**Most e-cigarette experimentation does not turn into regular use, and levels of regular use in young people who have never smoked remain very low.**

# Final thoughts

- The best thing a smoker can do for their health is quit smoking
- Over 1.3 million UK e-cigarette users have completely stopped smoking and almost 1.4 million others continue to smoke. We have a responsibility to provide clear information on the evidence we have, to encourage complete smoking cessation and help prevent relapse to smoking
- The latest ASH Smokefree GB survey (conducted by YouGov) found that only 13% of respondents recognised that electronic cigarettes are a lot less harmful than smoking, with 26% thinking they are more or equally harmful.<sup>15</sup>
- Primary care providers should take a more positive approach to supporting those smokers who want to quit using an e-cigarette
- We know that e-cigarettes are the most popular quitting tool in the country with more than 10 times as many people using them than using local stop smoking services. However, we also know that using local stop smoking services is by far the most effective way to quit.

# Further information

- [ncsct.co.uk](https://ncsct.co.uk)
- [ash.org.uk/home](https://ash.org.uk/home)
- [cancerresearchuk.org](https://cancerresearchuk.org)
- [smokinginengland.info](https://smokinginengland.info)
- [gov.uk/government/organisations/public-health-england](https://gov.uk/government/organisations/public-health-england)

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# Table discussions

1. How do we maximise the benefits & minimise the risk?
2. What can we do to change the current misperception of e.cigarettes?
3. Where should e.cigarettes be allowed?
4. What further evidence do we want to see in the future?