



[Response from the Royal College of Physicians of Edinburgh to the Scottish Government's "Vaping products - tightening rules on advertising and promotion: consultation 2022."](#)

The Royal College of Physicians of Edinburgh has no direct or indirect links to the tobacco industry.

Question 1. Do you agree that we should be seeking to limit use of these products as a cessation aid and restrict exposure to non-smokers?

Yes. The Royal College of Physicians of Edinburgh ("the College") has consistently urged a cautious approach to the use of vaping products since their introduction to the market, in the light of an incomplete evidence base and the 'do no harm' principle.

Vaping products may be useful for a minority of individual smokers as a route out of using combustible tobacco, however the wider public health picture needs to be considered. Access to these products needs to be controlled carefully; they are not products for children or non-smokers. There is still a lot we do not know about vaping products and further research is required. E-cigarettes are not a single standardised product, and are not without significant potential harm. The College urges the precautionary principle - in that studies on e-cigarettes are in the early days and researchers are still finding out new harms of smoking tobacco 60 years after it was first noted. The health profile of using tobacco and exposure to asbestos both took decades to become clear. We do not yet know the long-term effects of e-cigarettes on health and this should be recognised by government.

The College supports the WHO position on e-cigarettes, which states "Evidence reveals that these products are harmful to health and are not safe. However, it is too early to provide a clear answer on the long-term impact of using them or being exposed to them." <https://www.who.int/news-room/fact-sheets/detail/tobacco>

While a minority of individual smokers may find vaping products to be a way of ceasing tobacco smoking, this needs to be weighed carefully against the whole population impacts including the prevalence of dual use/relapse and impacts on the next generation.

New research, *Electronic cigarettes and health outcomes: systematic review of global evidence*, published in April 2022, which was commissioned by the Australian Department of Health and conducted by the National Centre for Epidemiology and Population Health found that "in Australia, in 2019, 53% of e-cigarette users were also smokers ("dual users"), 31% were past smokers and 16% had never smoked. Among people aged 18-24, **half of all current e-cigarette users had never smoked**. Hence, the majority of e-cigarette use is not for smoking cessation, particularly at young ages". <https://nceph.anu.edu.au/files/E-cigarettes%20health%20outcomes%20review%20summary%20brief%202022.pdf>

Question 2. Do you agree with proposal to extend restrictions on advertising these products in the ways described above?



Yes. There is great concern internationally that although the vaping/tobacco companies state the purpose is to help smokers quit, where the industry is allowed to advertise and promote, it is clearly aimed towards young people as an exciting and fun new way of smoking.

The WHO has stated its concern *“that children who use these products are up to three times more likely to use tobacco products in the future. The Organization recommends governments to implement regulations to stop non-smokers from starting to use them, to prevent renormalization of smoking in the community, and to protect future generations”*. <https://www.who.int/news/item/27-07-2021-who-reports-progress-in-the-fight-against-tobacco-epidemic>

Advertising, promotion and sponsorship of nicotine e-cigarettes is already banned in 22 countries. Partial regulations have been adopted by 53 countries. Specific regulations vary from country to country, with approaches including minimising misleading advertising, banning distinctive branding elements on packaging, focusing on regulating aspects that appeal to young people such as flavours and the use of cartoon images on packaging. Page 30, https://openresearch-repository.anu.edu.au/bitstream/1885/262914/1/Electronic%20cigarettes%20health%20outcomes%20review_2022_WCAG.pdf

As a result the College welcomes proposals to tighten the rules on advertising and promotion of vaping products in line with our belief in a precautionary principle.

Question 3. Do you agree with proposal that in-store promotional displays should be banned?

Yes.

Question 4. Do you support the proposal to make brand-sharing an offence?

Yes.

Question 5 a. Do you support the proposal to make free distribution of vaping products an offence?

Yes.

Question 5 b. Do you support the proposal that nominal pricing of vaping products should be an offence?

Yes.

Question 6. Do you support the proposal to make sponsorship agreements in respect of vaping products an offence?

Yes.

Question 7. Do you support the proposal to introduce exemptions to allow advertising at trade-only events?

The College has no particular view on this.

Question 8 a. Do you support the proposal that fines and penalties should mirror those already in place for tobacco products?

Yes. We consider that this would be a logical approach.

Question 8 b. Do you support the proposal that defences should be as laid out as above?

The College has no particular view on this.

Question 8 c. Do you support the proposal that officers of local authorities should be responsible for enforcement?

The College has no particular view on this.

Question 9 a. Please indicate the impact the proposed policy would have on individuals.

Positive impact.

Please explain further why you believe the proposed policy would impact on people in the way described above:

Implementing restrictions on vaping products, in the College's view, could help reduce the risk of children and young people going on to use tobacco products in the future. This is paramount from a public health perspective. The proposed policy would likely have a negligible impact on individual smokers who would consider vaping products as a route out of using combustible tobacco, due to the near-universal awareness of e-cigarettes: ASH (Action on Smoking and Health) reported that 95% of smokers and 93% of non-smokers had heard of e-cigarettes in 2015. <https://www.gov.scot/publications/young-people-e-cigarettes-scotland-survey-secondary-school-pupils/pages/3/>

Question 9 b. Please indicate your view on the impact of the proposed policy on people living with socio-economic disadvantage?

Don't know.

Please explain further:

The College has no particular view on the impact of restrictions on different socio-economic groups.

Question 9 c. Please identify communities or groups who may be impacted by these proposals

Positive impact.

Please explain further:

The wider population will benefit as we do not yet know enough about the full impacts of vaping on a person's health. The College is also concerned that vaping can lead to a higher chance of a child or young person going on to use tobacco products, which are proven to be harmful.

Question 10. Further comments

Please outline here:

The College notes with concern that there is confusion in the consultation paper between the Royal College of Physicians of Edinburgh and the Royal College of Physicians of London. The two Colleges are separate autonomous bodies and should not be referred to as the same organisation.

In paragraph 12 the Royal College of Physicians of London is referenced, in paragraph 19 the Royal College of Physicians of London is referenced and in paragraph 22 the Royal College of Physicians of Edinburgh is referenced, however all are referred to as "the Royal College of Physicians" in the consultation paper text. This is incorrect and the two separate organisations hold distinct and independent views. We ask that this is clarified in future publications in this workstream.