

The need for an evidence-based and rational debate on e-cigarettes

The inaccuracies and misinformation in *The Lancet's* editorial on e-cigarettes¹ do a major disservice to evidence-based public health.

The latest evidence from the USA indicates that the outbreak there of acute lung injury is strongly linked to vaping of contaminated illicit marijuana products.² Although a small minority of affected individuals had not reported using cartridges with cannabis oil, it is possible that they did not wish to reveal such information or had been using other illicit contaminated products. The outbreak appears limited to North America where, unlike the EU including the UK, vaping products are relatively free from regulatory oversight. The EU also imposes strict marketing controls on e-cigarettes, which perhaps explains why uptake of regular vaping (as opposed to experimentation) by UK youth is low, confined predominantly to smokers, and is accompanied by a continuing decline in youth smoking to record low levels.³

Equating the dangers of vaping with those of smoking ignores dozens of studies that show substantial differences in the risks associated with cigarette and e-cigarette use.⁴ The evidence of efficacy of e-cigarettes in helping smokers quit is not weak; the results of a randomised controlled trial⁵ have shown two times higher quit rates by people using e-cigarettes than in people using medicinal nicotine replacement therapy, confirming similar findings from population data. E-cigarettes have an important role to play in preventing death and disability from tobacco use, and, while it is vital to remain vigilant over potential adverse effects, the effect on public health of denying smokers the choice to use them could be devastating.

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*see supplementary file

References

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