

Letters to the Editor

The Effectiveness of E-Cigarettes for Smoking Cessation

A Comparison With Nicotine Replacement Therapy and No Use of Evidence-Based Cessation Aids in the German Population

by Prof. Dr. Daniel Kotz, PhD MSc MPH, Sarah Jackson, PhD, Prof. Jamie Brown, PhD, and PD Dr. rer. nat. Sabrina Kastaun, Dipl.-Psych. in issue 17/2022

Unsafe Lifestyle Product

High hopes were placed on e-cigarettes as a smoking cessation aid. A recently published Cochrane review identified four randomized controlled trials that compared the effectiveness of e-cigarettes with that of nicotine replacement therapy. Only one single study, which has not been replicated to date, indicates superiority for e-cigarettes as regards tobacco abstinence (1). A new meta-analysis, that in addition to tobacco abstinence studied freedom from nicotine as a primary endpoint in randomized controlled trials, showed that only 3–4 in every 100 smokers completely ceased nicotine consumption by means of e-cigarettes—significantly fewer than the 7 smokers in the nicotine replacement group (2). The observational study by Kotz et al. confirms this finding if the reported results are considered accordingly (3).

Of those persons who attempted to stop smoking more than 6 months ago, 15.6% of the e-cigarette group (17 out of 109) and 13.8% of the nicotine replacement group (12 out of 87) had stopped smoking tobacco (not significant). Only 5.5% of the e-cigarette group (6 out of 109) completely abstained from tobacco. By comparison, 19.3% of smokers in the e-cigarette group started using tobacco simultaneously (21 out of 109). This simultaneous

consumption of tobacco and e-cigarettes is classed as a particular health hazard (4). The ethical question arises of why doctors should recommend their patients an unsafe, in many cases an addiction-prolonging and health-harming lifestyle product when simultaneously, safe, evidence based medical products/preparations are available. DOI: 10.3238/arztebl.m2022.0264

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Conflict of interest statement

Prof. Hanewinkel is the deputy chair of the Aktionsbündnis Nichtraucher e. V. (ABNR, the Action Alliance for Non-smoking).

In Reply:

The proportion of smokers in the population of Germany is high, and this proportion has grown again in recent months, to 32.9% ([www.debra-study.info](http://www.debra-study.info)). Only 15% of these people attempt to stop smoking every year, and only a small proportion of such attempts is supported by methods that are currently recommended in medical guidelines, such as individual or group counseling (1.2%), nicotine replacement therapy (7.6%), or pharmacotherapy with varenicline or bupropion (<0.5% each) (1). On this background new methods are helpful that motivate people to make a quit attempt, support such an attempt effectively, and that are actually used. The most popular smoking cessation method currently used in Germany is the e-cigarette: 10.2% of quit attempts are aided in this way (1). The effectiveness of e-cigarettes is supported by evidence from randomized controlled trials (2) and now also from our population-based study (3). E-cigarettes are not risk-free, but much less harmful to health than tobacco (4). They should not be used by non-smokers, especially young people. In view of 127 000 tobacco-related deaths in Germany every year, however, it would be a wasted opportunity not to use e-cigarettes as a method of tobacco cessation. Many smokers in Germany are motivated to stop smoking with the support of e-cigarettes, for whom other methods are out of the question. We therefore think it is ethically justifiable if physicians in such cases recommend e-cigarettes to support tobacco ces-

sation while considering possible risks and providing information about these. Patients can then be informed about the correct use of e-cigarettes, including cessation of e-cigarette consumption after successfully giving up tobacco. DOI: 10.3238/arztebl.m2022.0265

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The author declares that no conflict of interest exists.