Electronic cigarettes: what we know so far

Robert West, University College London (robert.west@ucl.ac.uk); Peter Hajek, Queen Mary University of London; Ann McNeill, Kings College London; Jamie Brown, University College London; Deborah Arnott Action on Smoking and Health

Version 1 of this document was presented to the UK All Party Parliamentary Group on Pharmacy: 10th June 2014.

Version 3 is being presented to the UK’s All Party Parliamentary Group on Smoking and Health: 4th March 2015


Current version: 2nd March 2015

This paper summarises evidence relating to key issues surrounding e-cigarettes. It will be updated as new information emerges. Updated versions are made available on www.smokinginengland.info

Safety: E-cigarettes are much less harmful than smoking but not 100% safe

1. From the concentrations of potentially harmful inhalants in vapour, e-cigarette use from brands that have been tested so far would be expected much less harmful to health than smoking tobacco cigarettes (1-3). Well publicised reports of potential harmfulness of e-cigarette vapour have typically not compared this with tobacco cigarettes and/or have set up unrealistic conditions, e.g. (4). The precise extent of harm from long-term use is not known but from the toxicological evidence to date it would be expected to be 95% less than that of smoking tobacco cigarettes (5).

2. Case reports suggest that a small proportion (estimated at less than 1/100,000) of e-cigarette users appear to suffer from serious though reversible acute adverse reactions to the vapour (5).

3. A substantial minority of e-cigarette users experience minor adverse reactions to the vapour (predominantly dry throat) (5).

4. Cases of poisoning from consuming the nicotine liquid from e-cigarettes have been reported; so far one unconfirmed case of fatal poisoning in a small child has been reported by media and one case of fatal poisoning in an adult drinking estimated 10,800 mg of nicotine has been documented (6).

5. Several cases of the lithium-ion battery in an e-cigarette ‘exploding’ has been reported; the rate of such events is estimated at less than 1 per million e-cigarettes sold (5, 6).

6. The vapour exhaled by e-cigarette users contains chemicals such as nicotine which are below concentrations expected to cause significant harm to health of bystanders (5).

Use among never-smokers: Use of e-cigarettes by never smokers is rare in the UK and US

7. US surveys suggest there has been an increase in experimentation and recent (past 30-day) use by never smokers in recent years (7-9). However, there is no evidence of regular use by never smokers (7).

8. Surveys of 11-14 year olds in Britain have shown 1-2% of never smokers have tried e-cigarettes in 2013, with almost no never smokers reporting current use (10, 11).

9. In England, prevalence of e-cigarette current use among never smokers aged 16+ is currently 0.2% which is similar to use of licensed nicotine products (12).

10. In the UK and US, the proportion of adolescents who smoke traditional cigarettes has continued to decline at least as fast as previously making it unlikely that e-cigarettes are acting as a gateway into smoking at a population level (13, 14).

Use among smokers: Use of e-cigarettes is common (10-20%) but in England it has not increased over the past 12 months

11. Surveys in different countries have put prevalence of current e-cigarette use among smokers at 10-20% (5); prevalence in England is currently 18% and has not increased since the third quarter of 2013. In the final quarter of 2014 there was a reduction in prevalence of e-cigarette use among people continuing to smoke conventional cigarettes (12).
12. In England (which has the most comprehensive data) nearly 30% of attempts to stop smoking in the past year have involved e-cigarettes (12). This is higher than use of any other aid to cessation.

13. The most common reason for using e-cigarettes is to reduce health risks of smoking (by stopping smoking completely and or reducing smoking) (15, 16).

**Product types: E-cigarettes vary widely in appearance and nicotine delivery**

14. There are a wide variety of e-cigarettes currently being used ranging from those that look like cigarettes to ones that bear little resemblance to cigarettes; the characteristics of these devices differ markedly, appealing to different types of smokers; most appear to deliver lower nicotine doses than from smoking but some e-cigarette users can obtain doses of nicotine similar to those typically found with smoking (5, 17)

**Effect on attempts to stop smoking: The advent of e-cigarettes does not appear to have had a major impact on quit attempt rates**

15. Smokers who currently also use e-cigarettes are more likely to have tried to stop in the recent past than those who have not used either e-cigarettes or a licensed nicotine product (5, 16) The growth in e-cigarette prevalence in England has been accompanied by a very small increase in the rate at which smokers try to stop smoking, though this may be due to other factors (12)

**Effectiveness as an aid to smoking cessation: Use of e-cigarettes in a quit attempt is associated with increased abstinence rates compared with using no aid or licensed nicotine product bought from a store or placebo (nicotine-free) e-cigarettes**

16. Smokers in England who use e-cigarettes in a quit attempt are approximately 50% more likely to remain abstinent from cigarettes for at least a few months than those who try to quit unaided or using a licensed nicotine product bought from a store, but probably less likely than those who attend high quality specialist stop-smoking support of the kind available in England (18). This may mask marked individual differences in chances of success with different methods.

17. Randomised controlled trials of now obsolete e-cigarettes in the context of some professional support suggest that those had a significant effect on cessation compared to placebo (e-cigarettes without nicotine) and had broadly similar levels of efficacy to licensed nicotine replacement products (19).

18. The increase in e-cigarette use to aid quitting in England has been associated with an increase in the population smoking cessation rate, though this could be due to other factors (12).

**Effect of use while continuing to smoke: Use of e-cigarettes while smoking appears to be associated with a small reduction in cigarette consumption; its effect on subsequent smoking cessation is not clear**

19. Despite studies purporting to show that dual e-cigarette use and smoking may reduce the probability of future smoking cessation, e.g. (20), these do not address the issue, which has yet to be resolved.

20. Smokers who use e-cigarettes smoke slightly fewer cigarettes than when they did not use them (21). In two RCTs smokers allocated to e-cigarettes were more likely to reduce their cigarette consumption by 50% or more than smokers allocated to placebo e-cigarette or to nicotine patches (5)

**User groups: There are highly active e-cigarette user groups who oppose highly restrictive regulation**

21. There are several active e-cigarette user groups with enthusiastic advocates who share information about products and techniques for use, and argue to protect e-cigarette use against regulation that is as, or more, restrictive than regulation of cigarettes.

**Marketing: E-cigarettes are being strongly promoted using the full range of marketing tools, with some branding and imagery being similar to that currently or previously used for conventional cigarettes**
A wide range of marketing approaches are being used in the UK; at least some of the advertising and branding has resembled that previously used for cigarettes (22, 23) but this should no longer be permitted under new regulations by the Advertising Standards Authority.

Sources