

Smokefree NHS / Treating Tobacco Dependency Task Force position statement on the use of E-cigarettes - April 2019

Background:

Smoking is the **biggest avoidable cause** of death, disability, and social inequality in health in the UK.¹ The provision of the nicotine, to which smokers are addicted without the harmful components of tobacco smoke can prevent most of the harm from smoking. Smoking cessation, including provision of medication such as nicotine replacement therapy (NRT), is one of the most effective health interventions. E-cigarettes are battery-powered devices that allow the user to inhale nicotine in a vapour rather than smoke. Unlike tobacco cigarettes, e-cigarettes do not contain cancer-causing tobacco or involve combustion. So there is no smoke, tar or carbon monoxide. E-cigarettes are proving much more popular than NRT as a substitute and competitor for tobacco cigarettes.

The Royal College of Physicians has concluded that the hazard to health arising from long-term e-cigarette use is unlikely to exceed 5% of the harm from smoking, and switching completely from smoking to e-cigarettes conveys both substantial short-term and probable longer-term health benefits.² E-cigarettes appear to be effective when used by smokers as an aid to quitting smoking³. E-cigarettes are not currently available on prescription in the UK, and there are no e-cigarettes licensed as medicines available commercially in the UK. It is unlikely that there will be a medically licensed product available for prescription in the near future, however, e-cigarettes are available commercially and are regulated under the EU Tobacco Products Directive (TPD).

There is public misunderstanding about nicotine and the risks from e-cigarettes and this has led to healthcare professionals delivering variable advice in relation to e-cigarettes.

This statement describes the position of the Smokefree NHS/Treating Tobacco Dependency Task Force in seeking to address concerns and provides guidance to healthcare professionals and NHS Trusts within the North East in relation to adopting a harm reduction approach to e-cigarettes and their use within NHS Trust grounds.

¹ Peto, Lopez, et al. Mortality from smoking in developed countries 1950-2020 (updated September 2015). <http://gas.ctsu.ox.ac.uk/tobacco/>

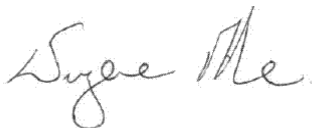
² RCP (2016), Nicotine without smoke: tobacco harm reduction

³ Hajek, Phillips-Waller, Przulj, Pesola et al (2019) A Randomized Trial of E-Cigarettes versus Nicotine-Replacement Therapy. <https://www.nejm.org/doi/10.1056/NEJMoa1808779>

Recommendations:

1. All Health Care Professionals should routinely discuss smoking with patients, including relative risks of continuing to smoke, and be open to e-cigarette use in patients who are keen to try them.
2. Patients should be advised that e-cigarettes are deemed to be substantially less harmful than smoking and that switching completely from tobacco to e-cigarettes will substantially reduce health risks. Using e-cigarettes without stopping smoking (dual use) does not provide health benefits; anyone who is using both should be strongly encouraged to stop smoking tobacco as soon as they can.
3. E-cigarette use does not meet the legal or clinical definition of smoking and there is no evidence of harm from exposure to second hand Vape. E-cigarettes are almost exclusively used by smokers and ex-smokers to help smokers stop smoking and stay Smokefree. Vapers should not be required to use the same space as smokers. All Trusts should have clear policy as to where e-cigarettes can be used within the grounds.
4. There are no known additional specific risks to charging e-cigarettes per se – the risks associated with charging e-cigarettes and vape devices should be considered alongside the charging of any other battery-operated device such as a mobile phone.
5. Patients should be advised that 'Heat-not-Burn' products contain tobacco, so are not recommended and use of these products should not be allowed on NHS premises and grounds.

Chairs Signature:



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Frequently Asked Questions⁴

Are e-cigarettes less harmful than smoking?

Yes. Based on what we know so far, experts think that e-cigarettes are very significantly less harmful than cigarettes. Smoking is one of the biggest causes of death and preventable illness. Every year around 78,000 people in England die from smoking, while many more live with debilitating smoking-related illnesses. Smoking increases your risk of developing more than 50 serious health conditions including coronary heart disease, stroke, chronic obstructive pulmonary disease (COPD), and 16 types of cancers. Exposure to tobacco smoke during pregnancy increases the risk of complications such as miscarriage, premature birth, low birth weight baby, still birth and sudden infant death. Switching from tobacco to e-cigarettes will substantially reduce the risks to health.

Is nicotine dangerous?

Nicotine doesn't cause smoking-related diseases, such as cancers and heart disease, but it is addictive. However, there's a common misconception that you can overdose on nicotine using e-cigarettes. But you are in no danger of poisoning yourself, nor have there been any cases of overdose from inhaling the nicotine-containing fluid that an e-cigarette vaporises, known as e-liquid. So you can use your e-cigarette as often as you need to help manage nicotine withdrawal and urges to smoke.

Much the same as with NRT, if you do have more nicotine than you're used to, then you might feel a little nauseated or lightheaded, both of which pass quickly. If this happens, you can switch to an e-liquid with a lower nicotine concentration or use the e-cigarette less.

Can I use e-cigarettes with NRT?

Yes. The most important thing for the smoker (whether quitting or managing temporary abstinence) is getting sufficient nicotine to alleviate the withdrawal symptoms that accompany stopping or reducing smoking tobacco. It doesn't matter whether the smoker obtains nicotine from e-cigarettes alone, NRT (nicotine replacement therapy) alone or from a combination of both

Is switching to vaping just swapping addiction?

Switching to vaping from smoking cigarettes does not involve swapping one addiction for another. It is nicotine that is addictive and e-cigarettes typically contain nicotine - so there is no swap in addiction.

But with e-cigarettes, there is no burning and therefore no tar, carbon monoxide and other harmful constituents that are inhaled from tobacco smoke.

This question is often posed by smokers who are uncertain if they want to stop smoking completely, or uncertain if they will be successful if they try to quit. It is important that we offer reassurance about the safety of long-term nicotine use and that e-cigarettes offer a significantly less harmful way of consuming nicotine than smoking.

⁴ NCSCT E-cigarettes: A Guide for Health Professionals. http://elearning.ncsct.co.uk/e_cigarettes-launch

Are e-cigarettes re-normalising smoking?

It seems highly unlikely that the popularity of e-cigarettes is 're-normalising' smoking, and there is increasing evidence that suggests e-cigarettes are not a gateway to smoking tobacco. Survey data from ASH (Action on Smoking and Health) indicates that the vast majority of e-cigarette users in the UK are either ex-smokers or current smokers, and regular use among 'never smokers' remains very low, at less than one per cent. Quitting smoking remains the main reason for using e-cigarettes and e-cigarette use should be seen as normalising quitting.

Are e-cigarettes a plot to keep people smoking?

Most e-cigarettes are not produced by tobacco companies, but they are a presence in the market and this throws up issues because of how the tobacco industry has behaved in the past.

As a party to the World Health Organization's Framework Convention on Tobacco Control (FCTC), the UK government has a stated commitment to protecting public health policy from the vested interests of the tobacco industry. Monitoring tobacco industry involvement in the e-cigarette market, and acting to mitigate any risks that emerge, is an important part of that responsibility.

How do I cope in vape-free venues?

Vaping is not included in the Smokefree legislation; it is up to individual businesses policies as to whether they allow vaping in buildings. In places where vaping is banned (e.g. at work, or in school or hospital) other nicotine-containing products can be used for temporary abstinence. Faster-acting NRT products such as the mouth and nasal sprays or 4mg lozenges can be purchased over-the-counter in pharmacies. It is important not to let nicotine levels drop too much or withdrawal symptoms, including strong urges to smoke, can take hold and increase the likelihood of smoking.

Where vaping is not banned but discretion is needed, lower powered devices used with e-liquid high in propylene glycol create less vapour. People can also reduce the amount of vapour they exhale by waiting a few seconds before breathing out.

How effective are e-cigarettes for quitting smoking?

There is growing evidence that e-cigarettes can help people stop smoking, with similar or better results than nicotine replacement therapies (NRT) such as patches.

E-cigarettes are particularly effective when combined with expert support from a trained stop smoking practitioner. In 2016-17, around two-thirds of smokers were successful quitting with an e-cigarette and with support from a stop smoking service, compared with around half who used NRT alongside behavioural support.

Should ex-smokers be using e-cigarettes in the long term?

Over 1.5 million vapers in Britain have managed to quit smoking completely, with another 770,000 people who now neither vape nor smoke.

Some people will choose to stop using e-cigarettes after quitting smoking, while others may continue to use them as an aid to staying Smokefree in the long term, or because they simply enjoy vaping.

When making a decision about whether to continue vaping after quitting smoking, the most important thing is to weigh up the risk of stopping vaping but relapsing back to smoking.

Do e-cigarettes have / pose a fire risk or explosion?

As with any rechargeable device, such as mobile phones and laptops, it's important to charge e-cigarettes with the right charger, and not to leave it unattended while charging. Devices should be bought from reputable suppliers and users should avoid generic charging equipment. There have been reported cases of e-cigarettes causing fires, but far fewer than the number caused by cigarettes, which are the most common cause of lethal house fires.

What are 'Heat-not-Burn' products?

The latest alternative nicotine delivery systems are called "Heat-not-Burn" products. Heat-not-Burn or 'heated tobacco' products are electronic devices that, unlike e-cigarettes, contain tobacco leaf and heat it to a high temperature, without setting it alight. They heat a small plug of tobacco, often contained in a 'pod' or a stick which looks like a very small cigarette, to below 300 degree Celsius, producing an inhalable vapour.

Because these devices heat, rather than burn the tobacco, they are likely to produce far fewer toxicants than traditional cigarette smoking. It is likely that these will be attractive to some smokers who like the taste of real tobacco and do not find other consumer products such as e-cigarettes appealing.

These devices are manufactured almost exclusively by the tobacco industry. At the moment, there is very little independent evidence about the safety or effectiveness for cessation of Heat-not-Burn products. Because the devices contain tobacco, they come with all the long-term health concerns of tobacco, so we recommend these should not be used.

How do I report a safety concern about an e-cigarette?

There are two types of safety concerns associated with e-cigarettes:

- a fault with an e-cigarette device that could make it unsafe to use;
- side-effects of using an e-cigarette that may affect the health of the user.

It is important that any e-cigarette safety concerns are reported and monitored, and this can be done through the Medicines and Healthcare Regulatory products Agency 'Yellow Card Scheme'.

More information is available on the MHRA website: <https://yellowcard.mhra.gov.uk>

E-cigarettes: evidence reviews and useful resources

1) PHE evidence reviews

[Vaping in England: an evidence update February 2019](#) (PHE, 2019)

[Evidence review of e-cigarettes and heated tobacco products 2018: a report commissioned by Public Health England](#) (PHE, 2018)

[E-cigarettes: an evidence update: a report commissioned by Public Health England](#) (PHE, 2015)

[Electronic cigarettes: a report commissioned by Public Health England](#) (PHE, 2014)

[E-cigarette uptake and marketing: a report commissioned by Public Health England](#) (PHE, 2014)

Associated publications / articles / blogs

2018 evidence review:

Lancet commentary: '[Making sense of the latest evidence on e-cigarettes](#)' by John Newton, Martin Dockrell and Tim Marczylo (2018)

Public Health Matters blog: '[Key questions and findings from our e-cigarette evidence update](#)' by John Newton (2018)

Public Health Matters blog: '[Clearing up some myths around e-cigarettes](#)' by Martin Dockrell (2018)

Public Health Matters blog: '[Creating a smokefree NHS: how e-cigarettes can help](#)' by Rosanna O'Connor (2018)

2015 evidence review:

[Underpinning evidence for the estimate that e-cigarette use is around 95% safer than smoking: authors' note](#) (PHE, 2015)

[E-cigarettes: a new foundation for evidence-based policy and practice](#) (PHE, 2015)

2) Royal College of Physicians report

[Nicotine without smoke: tobacco harm reduction](#) (RCP, 2016)

[Hiding in plain sight: Treating tobacco dependency in the NHS](#) (RCP, 2018)

3) Public health consensus statements

[E-cigarettes: a developing public health consensus](#), July 2016

[E-cigarettes: an emerging public health consensus](#), September 2015

4) Key stakeholder policies / position statements

[Royal College of Physicians](#)

[Cancer Research UK](#)

[British Medical Association](#)

[Royal College of General Practitioners](#)

[Royal Society for Public Health](#)

[Royal College of Physicians and Surgeons of Glasgow](#)

[Royal College of Psychiatrists](#)

5) Guidance for healthcare professionals

NCSCT online training module: [E-cigarettes: a guide for healthcare professionals](#) (February 2018)

NCSCT briefing: [Electronic cigarettes: A briefing for stop smoking services](#) (2016)

NCSCT/NNA: [‘What does an ‘e-cigarette friendly’ stop smoking service look like?’](#)

Smoking in Pregnancy Challenge Group: [Use of electronic cigarettes in pregnancy: A guide for midwives and other healthcare professionals](#)

Mental Health and Smoking Partnership [Statement on Electronic Cigarettes](#)

[The National Fire Chiefs’ Council guidance on the use of E-cigarettes in Smokefree NHS.](#)

6) PHE advice on vaping policies

PHE: [‘Use of e-cigarettes in public places and workplaces: Advice to inform evidence-based policy-making’](#)

PHE: [5-point guide to policy making](#)

7) NCSCT video resources

[E-cigarettes: the facts explained](#) (long version)

[E-cigarettes: the facts explained](#) (short version)

[The Switch](#)

[An independent introduction to vaping for smokers](#)

[Top tips for safer vaping](#)

8) House of Commons Select Committee on Science and Technology [inquiry into e-cigarettes](#), November 2017

[PHE/MHRA joint submission](#)

9) UK E-Cigarette Research Forum (UKECRF)

PHE, Cancer Research UK & UKCTAS: [UK E-Cigarette Research Forum](#)

10) NHS Estates and Facilities Alert EFA/2018/007, 05/12/18

[Fire risk from personal rechargeable electronic devices](#)