

### Our Position on Vapes and Vaping

This document has been created collaboratively with colleagues from across Lancashire and South Cumbria with the purpose of representing the agreed position of public health with regard to nicotine vaping. Our position has been informed by the evidence base around vaping and both local and national intelligence regarding vaping behaviours.



Smoking tobacco kills up to two out of three long term smokers and remains the single biggest cause of preventable illness and is responsible for the death of appropriately 7,500 people in Lancashire and South Cumbria each year from smoking.

Smoking tobacco products is a significant driver of health inequalities and our priority should remain on tobacco control and the need to reduce the number of people who smoke.

- We acknowledge that Medicines and Healthcare products Regulatory Agency (MHRA)<sup>1</sup> regulated vaping products have an important role in helping adults to quit smoking.
- We have significant concerns about the increasing use and documented harms of vapes amongst children and young people.
- We have significant concerns about the ease of access to vaping products particularly the direct and indirect advertising and marketing of these products to children and young people and the rise in availability of illicit products.
- We feel the need to act in order to combat the environmental harms associated with so called 'single-use' vapes and recommend tighter regulation including a ban.
- We acknowledge the urgent need to provide clarity to our NHS provider services and settings on the status of vapes in NHS Smokefree Policies.

# If you don't smoke, don't vape

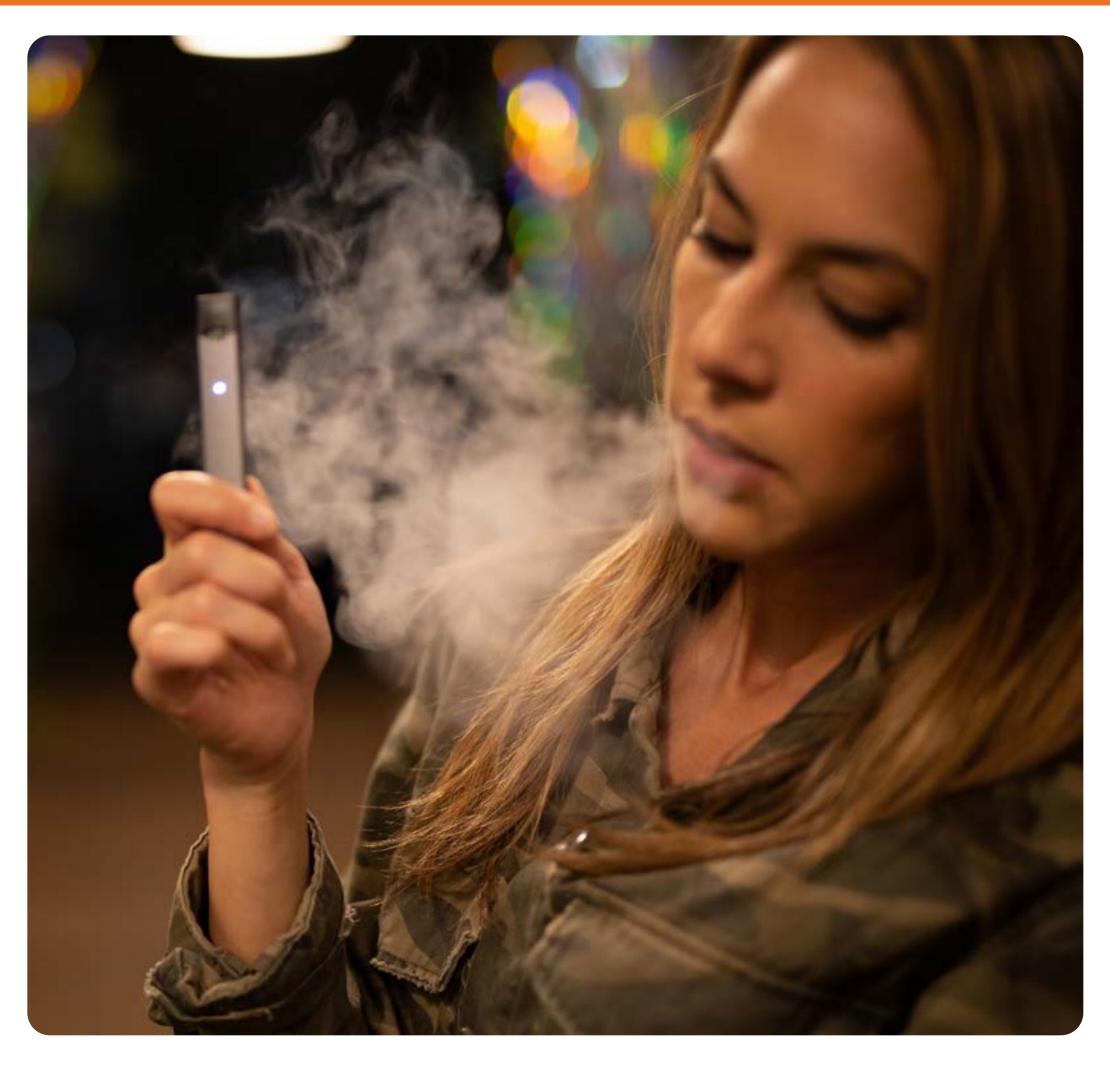
<sup>1</sup>The Medicines and Healthcare products Regulatory Agency (MHRA) is the competent authority for the UKs notification scheme for nicotine containing vaping products. Rules ensure minimum standards for the safety and quality of all e-cigarettes and refill containers and that information is provided to consumers so that they can make informed choices. More information can be found at: E-cigarettes: regulations for consumer products - GOV.UK (www.gov.uk)

### Vapes as a Quit Aid for Adults

- We acknowledge that in the short and medium term, evidence shows that vaping confers a much smaller risk to health than smoking. More information and evidence is needed regarding long-term use of vapes (over two years).
- We acknowledge the evidence around the effectiveness of vapes as an aid for quitting smoking and agree that short-term use of vapes for this purpose can be beneficial given the considerable health burden imposed by smoking.
- Individuals who independently source vapes to be used as a quit aid should be supported by our Smoking Cessation Services to use their devices for this purpose, alongside the offer of NRT and behavioural support.
- Where Smoking Cessation Services choose to commission vapes as part of smoking cessation programmes they should:
  - » Encourage vape use as a quit aid rather than as a long-term replacement for tobacco.
  - » Ensure that quitters are provided with a regime to gradually reduce and support to ultimately stop vape use.
  - » Ensure that advice is given on how to effectively use vapes to satisfy nicotine cravings.
  - » Ensure that suppliers of vapes do not have links with the tobacco industry in line with Article 5.3 of the WHO Framework Convention on Tobacco Control.
  - » Avoid using suppliers of vapes who market products to children and young people or encourage long-term vape use in their marketing.
  - » Use plain packaging where possible.
- Long-term use of vapes should be discouraged unless cessation of use would lead to a return to smoking. Long-term risks of vape use are not yet certain and nicotine addiction from vapes holds its own health harms.
- Vapes are a powerful tool for smoking harm reduction. However, when considering their widespread use in our communities, we do hold concern that this may further normalise vape use and contribute to increasing recreational use of vapes, especially amongst children and young people.
- Strategy to tackle vaping in children young people should be an integral component of plans where vapes are to be used as a quit aid.



# Vapes in Children and Young People



- Children and young people under the age of 18 should not take up vaping.
- Most vapes used by children and young people contain nicotine, which is highly addictive and use incurs various health risks, including negative impacts on brain development in young people.
- National data regarding increasing prevalence of use among children and young people is concerning.
   This concern is heightened by local intelligence which suggests that prevalence in Lancashire and South Cumbria may be much higher than national estimates.
- Vapes are too easily available. This is a particular issue for children and young people. We need to
  work closely with trading standards and enforcement to tackle underage sales and the availability of
  illicit products. We advocate for more resource to be invested in trading standards and enforcement
  to ensure they can effectively tackle illicit tobacco and vaping products.
- We advocate for further regulation around marketing of vapes and more severe sanctions for establishments who do not adhere to regulations, in order to better protect our children and young people.
- We feel that further education and awareness around smoking and vaping harms are important not only for children and young people but also for parents, carers and those that work with children and young people, including teachers and youth workers.
- Schools and colleges should be smokefree including tobacco and vaping. Schools and colleges should be supported to manage vaping and ensure that policy is in place regarding how to manage vaping.
- Work is needed to understand and address the drivers of vaping behaviours in children and young people. Local intelligence suggests that issues such as stress, anxiety, boredom and peer pressure may contribute to vape use. We feel that interventions to address these factors are an important component to plans to reduce vaping prevalence in these groups.

## Single-use/Disposable Vapes

- The rapid rise in single-use, disposable vape use is highly concerning with litter from such devices causing a considerable environmental burden.
- We hold significant concern that the low cost of these devices makes them very accessible to children and young people.
- Disposable vapes each contain a lithium battery. This creates a huge amount of lithium waste and constitutes a significant fire hazard when incorrectly disposed of in landfill sites.
- We support calls for legislation and regulation to stop the sale of single-use, disposable vapes to retail audiences.
- Services commissioning vapes for use as a quit aid should choose reusable devices where possible. Where single-use vapes are used as a quit aid by services, it should be ensured that facilities are in place to appropriately recycle devices.



## Vaping on Smokefree NHS Sites



The use of vapes on NHS sites is a complex issue. We are aware of discussions locally and across England regarding whether vaping should be allowed in certain spaces on NHS sites to facilitate use of vapes as a quit aid.

It is acknowledged that vaping is already in place as a treatment option at Lancashire and South Cumbria Foundation Trust (LCSFT) within mental health inpatient services to support those that wish to quit and to provide nicotine replacement for individuals to support smoking abstinence during inpatient stays. For these patients vaping is therefore permitted in patient rooms, and also in non-communal spaces and the ward outdoor space.

Further work is required with staff and patients in Lancashire and South Cumbria to determine the most effective way to manage vaping at our NHS sites.

We feel that development of a single Smokefree Policy that addresses tobacco, smoking and vaping across all NHS Acute and community sites would be the most effective way to manage the issue; giving a clear and consistent message to patients as they move around the region.

When developing a single Smokefree Policy for NHS sites, our position is:

- Vaping should not be permitted indoors in public areas
- Vaping should not be permitted around doorways or in high foot traffic-areas
- Clear signage should be used to indicate whether, and/or where, vaping is permitted on site, and that smoking on site is still not permitted.

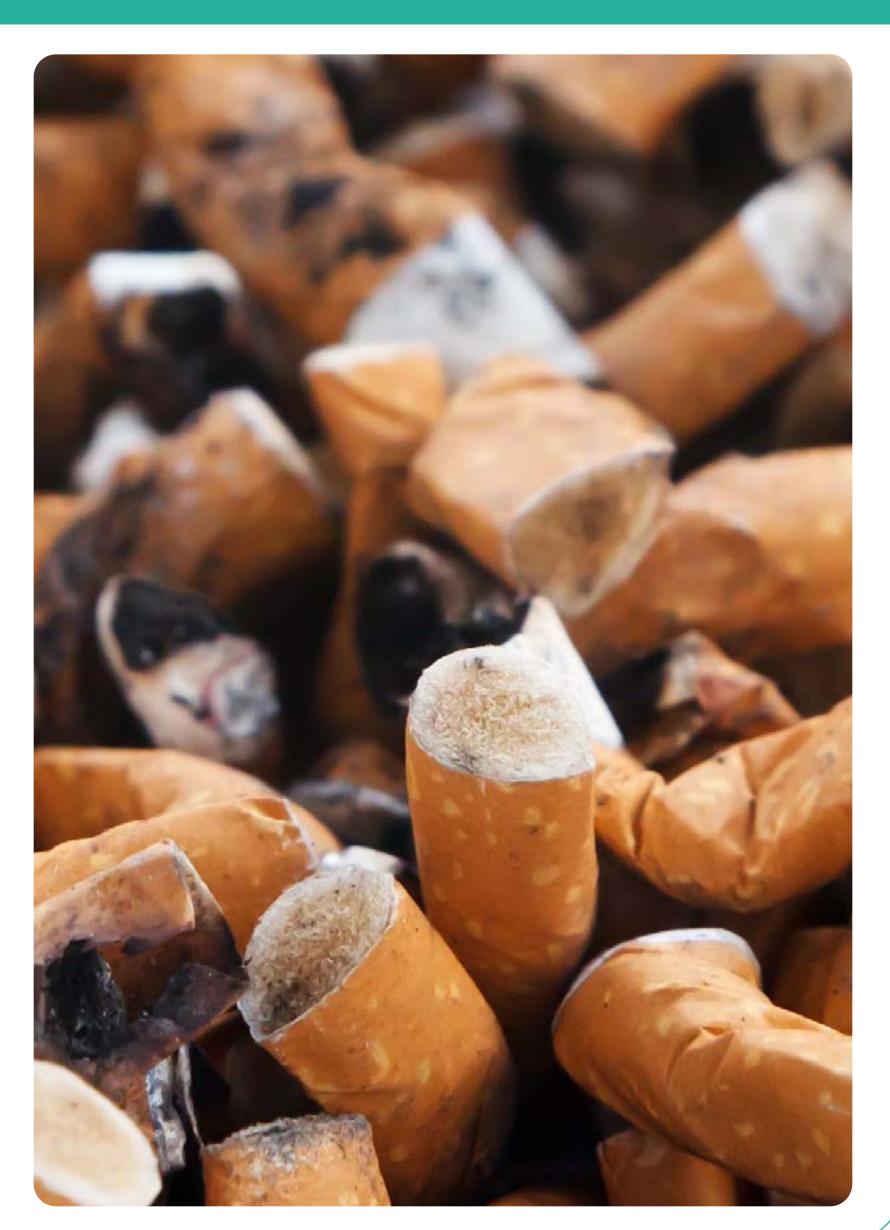
### **Smoking and Tobacco**

Smoking continues to kill almost 75,000 people in England every year and is the number one cause of preventable death, resulting in more deaths than the next five highest preventable causes of mortality combined (obesity, alcohol use, road traffic accidents, drug abuse and HIV infection<sup>1</sup>. Across Lancashire and South Cumbria Integrated Care System, smoking is estimated to cause over 17,150 hospital admissions and 7,600 deaths each year<sup>2</sup>.

Smoking is the most common way that tobacco is used in the UK. When a person smokes, they inhale a mixture containing not only highly addictive nicotine but also a variety of other substances, which have negative health consequences, such as tar, carbon monoxide and chemicals such as benzene and formaldehyde. Tobacco is also used in other forms, including chewing tobacco, pouches that sit in the mouth and through water pipes known as "shisha" or "hookahs".

Huge health inequalities exist within smoking. Life expectancy of smokers is at least 10 years lower than that in non-smokers with a disproportionate impact on those from lower socioeconomic backgrounds. In Lancashire and South Cumbria, over 88,000 smoking households live in poverty and almost 7,000 people are out of work due to smoking. In addition, almost 39,000 people across the ICS receive informal care from friends and family due to smoking<sup>2</sup>.

Therefore supporting people who smoke to quit smoking, and preventing the uptake of smoking, are key priorities across Lancashire and South Cumbria.



### Vapes and Vaping

Vapes, also known as e-cigarettes or electronic nicotine delivery systems (ENDS), are battery powered devices that deliver nicotine by heating a liquid solution containing nicotine, flavourings and other additives into a vapour. There are some vaping products available that do not contain nicotine. However, the vast majority of vapes used in the UK market are nicotine containing vapes. Using these devices does not cause exposure to tar or carbon monoxide, however does expose users to addictive nicotine alongside chemical flavourings and additives from the e-liquid solution.

These devices have become increasingly popular across the UK in the last decade, with prevalence of vaping continuing to increase. Vaping prevalence in England in 2021 was between 6.9% and 7.1%, depending on the survey, which equates to between 3.1 million and 3.2 million adults who vape<sup>3</sup>.

Vaping prevalence is also increasing in children and young people with national data estimating that around 8.6% of children and young people aged 11 to 18 are vaping regularly or occasionally, more than doubling estimates from 2021. Local intelligence tells us that in reality vaping prevalence in young people may be even higher. In Blackpool, the 2022 SHEU survey found that 17% of children in years 8 and 10 used vapes regularly (at least once per week).

Single-use or "disposable vapes" are low cost vaping devices that are pre-filled with a vaping liquid and contain a single-use lithium battery. These devices cannot be recharged or refilled, therefore once used they are often thrown away. Since 2021 the popularity of single-use vapes has increased significantly. In adults who vape, around 15.2% use single-use devices, compared to 2.2% in 2021. In children and young people this increase is even more marked with 52.8% of under 18s who vape using single-use vapes compared to 7.8% in 2021.



### Vapes as a Quit Aid to Stop Smoking

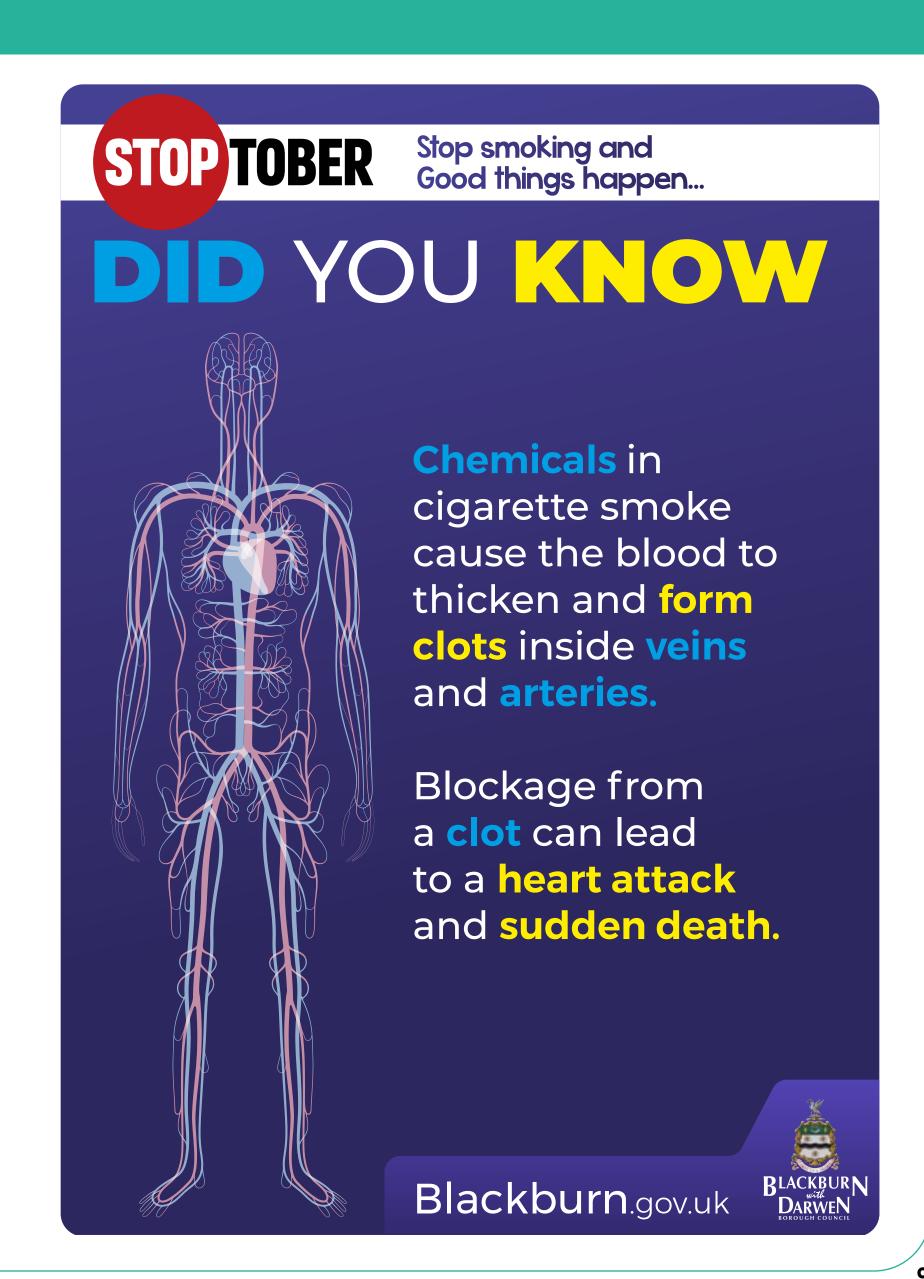
Vapes have become increasingly popular for people wishing to stop smoking. In treating tobacco dependence services across England in 2020 to 2021, quit attempts involving a vaping product were associated with the highest success rates (64.9% compared with 58.6% for attempts not involving a vaping product). The only product that has achieved higher quit rates than vapes is varenicline.

Use as a quit aid is also supported by findings from a recent Cochrane review of studies including 22,052 patients, which reports high-certainty evidence that vapes with nicotine increase quit rates compared to NRT, and moderate certainty evidence that they increase quit rates compared to vapes without nicotine4. A large UK based randomized control trial also found that using vapes as a quit aid was twice as effective and only incurred one fifth of the cost of NRT<sup>5</sup>.

Support for use of vapes as a quit aid is nationally recognised in NICE guidance, within the NHS Long Term Plan and is a critical recommendation within the Khan Review if England is to reach 2030 smoke free targets. In the April 2023 ministerial speech, the rollout of a new national "swap to stop" initiative by the government was announced, in which 1 million smokers will receive vape kits to be used to help stop smoking.

#### Safety of Vaping

Over recent years, the evidence base around vaping has been increasing and there is an expanding evidence base to suggest that vapes pose a small fraction of the risks of smoking in the short to medium term<sup>3</sup>. However, vaping is not risk free and this is particularly important to consider in people who do not smoke. More robust evidence is needed to make conclusions around the risks of vaping long term (over two years).



### Concerns Regarding the Social & Cultural Norms of Vaping

Whilst evidence does show that vapes can be an effective quit aid, there are still concerns about their wider use.

If the choice is between vaping and fresh air, then fresh air is always better. People who do not smoke taking up vaping is a concern, and it is also feared that widespread use of vapes as quit aid may further normalise their use for recreational purposes. This is especially concerning for children and young people under the age of 18.

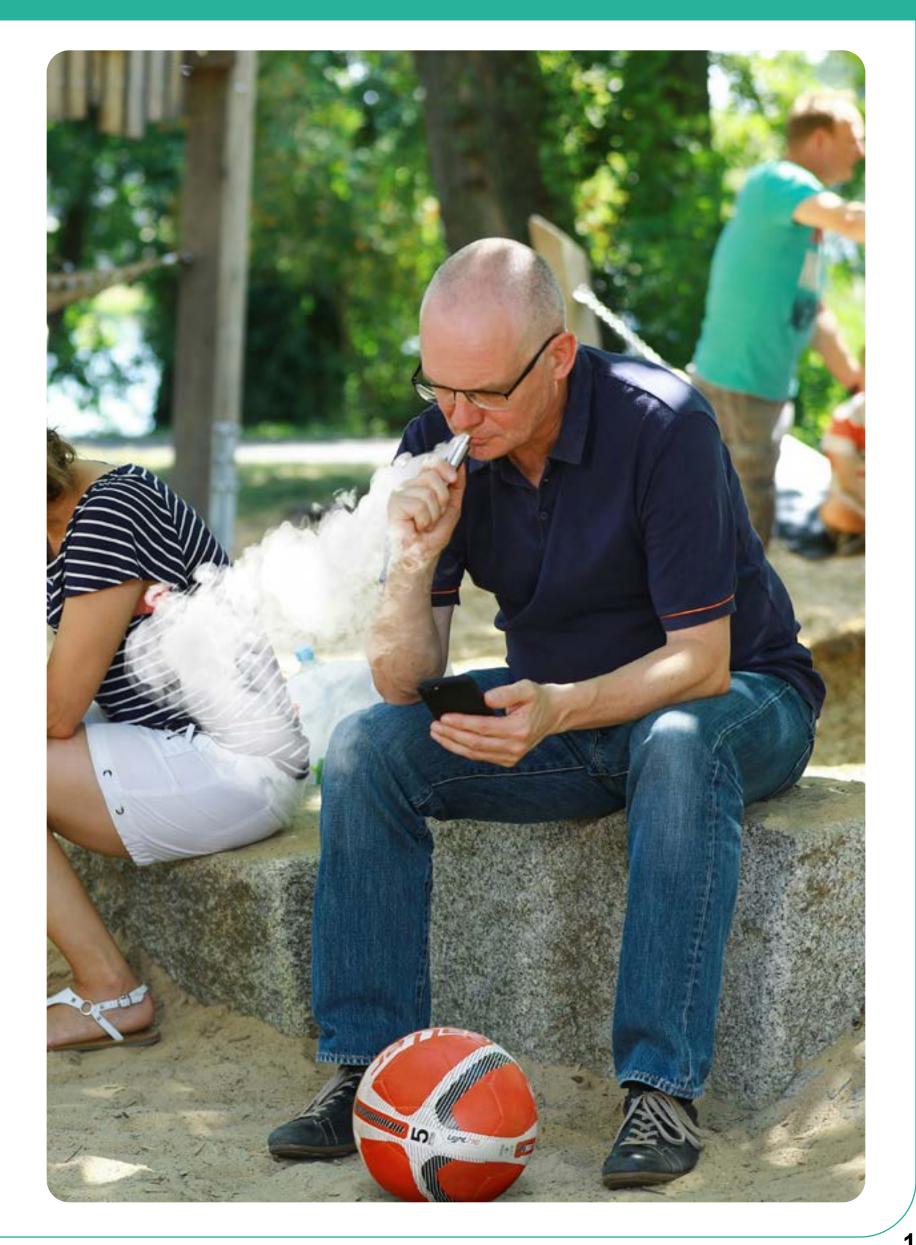
The prevalence of vaping among children and young people is continuing to increase and local intelligence suggests that the problem may be more widespread than national data suggests. Vaping has become a trend in youth audiences and it appears to be alarmingly easy for children and young people to access vapes.

In response to this issue, it has recently been announced that Australia are planning reforms that will ban importation on non-prescription vaping products, including those without nicotine, and also plan to ban single-use "disposable" vapes.

Regulation of vapes, including underage sales and illicit products are a significant issue in the UK. Trading Standards North West reported a 450% rise in intelligence reports related to underage vape sales in 2022. Test purchases conducted to see if shops would sell to underage customers in Lancashire and Cumbria within Q3 2022/23 found that over 25% of retailers allowed underage purchases.

Moreover, we are seeing marketing tactics from the vaping industry that appear to target younger audiences, such as the use of confectionery based flavours, bright colours and cartoons, light up devices and sponsorship of public buildings within our local area by vaping companies.

There are specific concerns regarding single-use vapes and the increase in their use. There is a significant environmental burden attributed to these devices with regard to litter on the street and material in landfill. The low cost of these devices also makes them easily accessible to children and young people, with over half of young vapers choosing single use devices.



### References

- 1. NHS Digital. Statistics on Smoking, England 2020. Statistics on Smoking, England 2020 NDRS (digital.nhs.uk)
- Action on Smoking and Health (ASH). Impact of smoking on Core20PLUS5- Guide for NHS Lancashire and South Cumbria ICB. https://ash.org.uk/uploads/Guide-for-NHS-Lancashire-and-South-Cumbria-ICB.pdf?v=1649675817
- 3. Office for Health Improvement and Disparities (OHID). Nicotine vaping in England: 2022 evidence update main findings. 2022. Nicotine vaping in England: 2022 evidence update main findings GOV.UK (www.gov.uk)
- 4. Hartmann-Boyce J, Lindson N, Butler AR, McRobbie H, Bullen C, Begh R, Theodoulou A, Notley C, Rigotti NA, Turner T, Fanshawe TR, Hajek P. Electronic cigarettes for smoking cessation. Cochrane Database of Systematic Reviews 2022, Issue 11. Art. No.: CD010216. DOI: 10.1002/14651858.CD010216.pub7
- 5. Hajek P, Phillips-Waller A, Przulj D, et al. A Randomized Trial of E-Cigarettes versus Nicotine-Replacement Therapy. N Engl J Med. 2019;380(7):629-637. doi:10.1056/NEJMoa1808779

### Resources

#### **Evidence and guidance around vaping**

Nicotine vaping in England: 2022 evidence update main findings - GOV.UK (www.gov.uk)

Nicotine vaping in England: an evidence update including health risks and perceptions, September 2022 (publishing.service.gov.uk)

The Khan Review - Making smoking obsolete: summary - GOV.UK (www.gov.uk)

Tobacco: preventing uptake, promoting quitting and treating dependence | Guidance | NICE

#### **Quitting vaping**

Supporting clients who want to stop vaping (ncsct.co.uk)

#### Single-use vapes

The environmental impact of disposable vapes (parliament.uk)

Recycling vapes (recycleyourelectricals.org.uk)

#### Office for Health Improvement and Disparities: Vaping Procurement portal

A new category has been created on the existing Tail Spend Solution platform named "Vaping Solutions" to assist in procuring devices for use in stop smoking initiatives. Instructions on how to access can be found at: Tail Spend Solution - CCS (crowncommercial.gov.uk)