

Committee on Children
February 27, 2014
John Bailey Government Relations Director
American Heart / Stroke Association



SB 24 An Act Concerning The Governor's Recommendations Regarding Electronic Nicotine Delivery Systems And Youth Smoking Prevention.

The American Heart Association commends the goal of **SB 24 An Act Concerning The Governor's Recommendations Regarding Electronic Nicotine Delivery Systems And Youth Smoking Prevention**, but reserves support for the bill as it is currently written.

Electronic Nicotine Delivery System Youth Access

The American Heart Association is leery of creating a separate category in statute for Electronic Nicotine Delivery Systems or e-cigarettes. We favor including e-cigarettes (and refills) to existing state youth access laws limiting the sale of tobacco products to under-age youth. This is best done by refining the definition of tobacco products to include e-cigarettes.

We recognize that very little is known about e-cigarette prevalence rates among both adults and youth, but we are seeing an increase in consumption especially among youth and that is concerning. The fact that little is known regarding health risks and the impact e-cigarettes have on youth tobacco use or whether they are effective in helping smokers quit is also very troublesome.

New findings from a national survey on youth tobacco use showed that the percentage of middle and high school students using electronic cigarettes doubled from 2011 to 2012. Researchers from the Centers for Disease Control and Prevention examined data from the National Youth Tobacco Survey,¹ which polls about 20,000 adolescents in grades six through 12 on their tobacco-related beliefs and attitudes, use habits and exposure to pro- and anti-tobacco influences. They found e-cigarette use increased from 4.7 percent of surveyed high school students in 2011 to 10 percent by 2012, the last year data was collected.¹ E-cigarette use increased from 1.4 percent of middle school students in 2011 to 2.7 percent last year¹. That worries health officials, because 90 percent of all smokers start when they're teenagers, according to the CDC.¹

The FDA has not approved e-cigarettes as an effective method to help smokers quit. The U.S. Public Health Service has found that that the seven therapies approved by the U.S. Food and Drug Administration in combination with individual or group cessation counseling is the most effective way to help smokers quit. Until and unless the FDA

approves a specific e-cigarette for use as a tobacco cessation aid, the American Heart/Stroke Association does not support any direct or implied claims to that effect. Without regulation by the Food and Drug Administration -- the FDA only regulates e-cigs that claim therapeutic benefits², like smoking cessation -- e-cigarettes can be sold to minors in states that don't restrict the sales. Electronic cigarettes containing nicotine are not subject to the same federal age restrictions as other nicotine-containing products like cigarettes, cigarette tobacco, roll-your-own tobacco and smokeless tobacco, according to the FDA.²

One study finding that concerned the CDC was that one in five middle schoolers used e-cigarettes without ever using a tobacco product¹. The new e-cigarette findings don't suggest kids are skipping tobacco entirely. More than 76 percent of middle and high school students who used e-cigarettes within the past 30 days also smoked an actual cigarette during that time.¹

We look forward to working with the committee on amending language in Senate Bill 24 to ensure that we have a comprehensive and appropriate regulatory framework to deny access to e-cigarettes by youth. We believe accomplishing this goal is best done adding e-cigarettes to existing youth access laws limiting the sale of tobacco products to under-age youth.

Tobacco Control Funding

The American Heart Association is in support of the Governor's recommendation to restore the 50% cut made to the Tobacco and Health Trust Fund in the 2014-2015 biennium budget. We applaud the call for an increase in future allocations to the Tobacco and Health Trust Fund Board for purposes of funding tobacco control programing. The \$12 million increase is admirable but we feel the state can do better by allocating \$16 million, which is half of what the Center for Disease Control and Prevention recommends for Connecticut in terms of best practices.

Heart disease is the leading cause of death for all Americans. About one in five deaths from cardiovascular diseases are attributable to smoking and more than 400,000 Americans die each year of smoking-related illnesses. The largest portion of these deaths are cardiovascular-related. Tobacco use is the leading preventable cause of cardiovascular disease in the United States.

It is critical that we fund tobacco prevention programs to keep kids from smoking because the tobacco companies are spending huge sums marketing their deadly products. The most recent data show the tobacco companies spend \$8.8 billion each year on marketing and promotion, much of which influences kids to smoke.

The evidence is clear that tobacco prevention programs work to reduce smoking, save lives and save money by reducing tobacco-related health care costs. Studies have shown

that the more states spend on tobacco prevention, the lower the youth smoking rates and overall tobacco use.

Sincerely,

A handwritten signature in black ink, appearing to read "John Bailey II". The signature is written in a cursive style with a double underline at the end.

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References:

1. CDC National Youth Tobacco Survey http://www.cdc.gov/tobacco/data_statistics/surveys/nyts/
2. FDA E-Cigarettes <http://www.fda.gov/newsevents/publichealthfocus/ucm172906.htm>

