

Regulating E-cigarettes: Exploring policy options around retailing

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Background: E-cigarettes internationally

- Diverse range of products – continuing to evolve
- Global growth in e-cig market share
- Various estimates for lower level of harm relative to smoked tobacco eg, 5%, 10% as harmful
- Role in assisting smoking cessation still unclear
- Concerns around youth uptake, normalisation of smoking/drug use & erosion of smokefree laws



Background: E-cigarettes in NZ

- Not legal to retail with nicotine – but a Ministry of Health review process underway
- Self-importation of nicotine is legal
- Nicotine containing e-juice seems readily available (illegally sold) – probably very low risk of prosecution

“Amsterdam Coffee Shop”
in Wellington



Options for regulation of e-cigarette retailing

(building on: Wilson et al 2015 *NZMJ*)

- Any retailer (eg, as per tobacco in NZ)
- Any retailer – but with a licence (as per tobacco in some countries)
- Specialist vape shops only (with a licence)
- Pharmacists only – “pharmacy only”
- Pharmacists only – “prescription only”
- Public hospital pharmacies only (no private sector)
- No retail permitted (as per NZ for nicotine-containing; but not devices)

Arguments for wide retail availability

- More available and visible to smokers → **enhanced uptake** of vaping?
- More competition → **lower prices** (better to compete with tobacco)

Also: Any licence fees would deter retailers & would not be a level playing field relative to tobacco retailing

Arguments for constrained and regulated retail availability

- Better **customer support** (vape shops, pharmacists) to assist transition to vaping
- Easier for government to **monitor any controls** eg, on: purchase age, marketing, product labelling, product quality etc
- Easier for government to **enforce compliance** (eg, the threat of licence withdrawal)
- Easier for government to **roll-back** e-cig availability in the future (eg, if future knowledge highlights problems)
- Fees from licences could **fund monitoring, enforcement and research**

Tightly regulated retail – continued

- Could combine with tighter regulation of **retail availability of tobacco** – eg, licensing (as per Hungary), a sinking lid on retail outlets (Pearson et al 2016 *Tob Control*)
- If NZ followed international trends around **cannabis** – licensed vape shops/pharmacies could be a model for controlled sale

Cannabis vaporiser



Problematic marketing – glamour vs quitting aid?

The image shows a screenshot of the NZVAPOR website. At the top, there is a navigation bar with links for HOME, WISH LIST (0), MY ACCOUNT, SHOPPING CART, CHECKOUT, LOGIN, and CREATE AN ACCOUNT. A 'WHOLESALE' button and social media icons for Facebook, Instagram, Twitter, and YouTube are also present. The main header features the NZVAPOR logo with the tagline 'PREMIUM E-CIG SUPERSTORE'. To the right, there is a PayPal logo, a shopping cart icon showing 'Cart Items: 0 \$0.00', and a search bar. Below the header is a secondary navigation menu with links for HOME, E-CIGS, STARTER KITS, E-JUICE, HARDWARE, and FAQ. A 'CONTACT' link is located at the bottom left of the menu. The main content area features a large banner with a woman's profile in the background. The text on the banner reads: 'WELCOME TO NZVAPOR' and 'GET 10% OFF YOUR NEXT PURCHASE WITH NZVAPOR'. A right arrow icon is visible on the right side of the banner. At the bottom right, there are four small white dots and the text 'otearoa'.

NZ data & experience

- Some NZ pharmacists used to sell e-cigarettes
- Survey of NZ pharmacists – high support for smoking cessation activities & for sales if made “pharmacy only” [van der Deen, PhD thesis manuscript]
- Psychoactive Substances Act 2013 – licensing provisions for retail (Wilson et al *NZMJ* April 1, 2016) – but not utilised yet

Selected international experience

- Australian survey: Vapers had strong opposition to prescription only or pharmacy only sales. (Fraser et al 2015 *Int J Drug Policy*)
- UK survey: The majority of pharmacists (73%) sell e-cigs (Gomes et al 2016, *BMJ Open*)
 - Most (97%) supportive of e-cigarettes being regulated
- E-cig sales ban to minors common in the USA, 14 states require licenses/permits for sales eg, California (Public Health Law Centre 2016) (Tremblay et al 2015 *BMC Med*)

Options for what NZ health workers can do:

- 1. Wait** – until the evidence around options is clearer?
- 2. Engage** with the ongoing policy process in NZ eg, any future Select Committee on new e-cig regulations?
- 3. Advocate** for tighter retail controls on *tobacco* (which may make regulations for e-cigarette retail more useful & viable)?

Summary

- Many plausible options for regulating retailing of e-cigs: from nil to very tight (eg, hospital pharmacies) / banning
- Limited evidence to inform the best option – so some will use philosophical approaches: unfettered market vs precautionary approach
- NZ health workers have various options to engage – including an integrated approach of also reduce tobacco retail availability