



Vaping and smoking in England 2019

Dr Leonie Brose
Institute of Psychiatry, Psychology and Neuroscience
King's College London



Funding

- I have received funding from Cancer Research UK, Heart Research UK, Public Health England and the Medical Research Council
- No funding from or relationship with pharma, tobacco or e-cigarette companies.

Topics

- Vaping-related lung disease
- Regulation for tobacco and e-cigarettes in England
- Vaping and smoking in adults
- Vaping and smoking in youth
- E-cigarettes and smoking cessation

Vaping-related lung disease

Vaping Illness Update: FDA Warns Public to Stop Using Tetrahydrocannabinol (THC)-Containing Vaping Products and Any Vaping Products Obtained Off the Street

FDA strengthens warning to public to stop using THC-containing vaping products and any vaping products obtained off the street.

- Over 10 million vapers in the US
- US has little regulation of vaping devices or marketing
- In the last few months, >1000 cases of illness, 18 deaths
- Reaction: Bans on specific flavours, nicotine e-cigarettes
- Information from patient surveys, liquid samples and biopsies
 - Vast majority vaped THC
 - Bought from illicit sources
 - Vitamin E acetate may be implicated
 - Acute chemical injury
- Very unlikely due to nicotine vaping or vaping of regulated products

Regulation for tobacco and ecigarettes in England

Tobacco control

Table 4. 35 European countries ranked by total TCS score in 2016

Ranking 2016 (ranking 2013)		Country	Price (30)	Public place bans (22)	Public info campaign spending (15)	Advertising bans (13)	Health warnings (10)	Treat- ment (10)	Total (100)
1 (1)	_	UK	26	22	3	12	9	9	81
2 (2)	_	Ireland	20	22	2	13	5	8	70
3 (3)	_	Iceland	20	17	13	13	4	2	69

...

33 (28)	_	Lux.	5	15	9	1	7	37
33 (33)	_	Germany	13	11	4	5	4	37
35 (34)	_	Austria	11	8	7	5	5	36

Since 2010:

Nicotine replacement therapy (patches, gums, lozenges etc) licensed for cessation attempts and harm reduction (use while smoking, cutting down, temporary abstinence)

Every year, smoking causes 78000 deaths in England (1500/week)







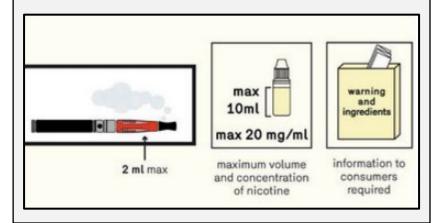


EC regulation

- England has some of the most comprehensive regulations
- Age of sale law
- Prohibition of proxy purchasing
- EU Tobacco Products Directive translated into UK Tobacco and Related Product Regulations
 - Notification before sale, regulated by MHRA
 - Minimum standards for safety and quality, including ban on colourings, caffeine, vitamins
 - Reporting systems for side effects and safety concerns
 - Standards for information provision







EC regulation

- Advertising regulations
 - No cross-border advertising, no print, no online
 - Allowed on buses, billboards, in cinema if
 - Socially responsible (not for ex-smokers or non-smokers)
 - Doesn't target, feature, appeal to children
 - Doesn't confuse with tobacco products
 - Doesn't make medicinal claims, careful with health claims
 - Doesn't mislead about ingredients
 - Doesn't mislead about where can be used
- Medicinal licensing route, but none yet marketed





Adults (16+)

Adult surveys

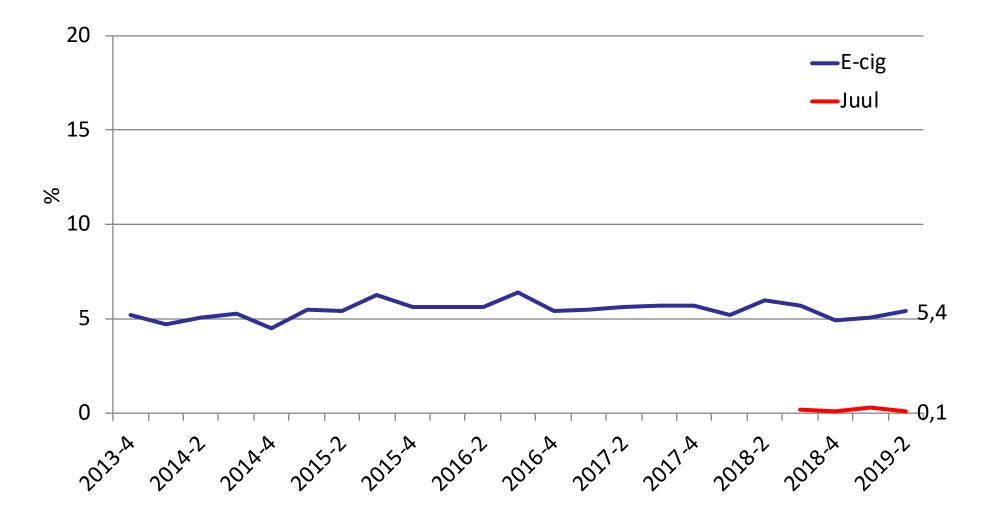






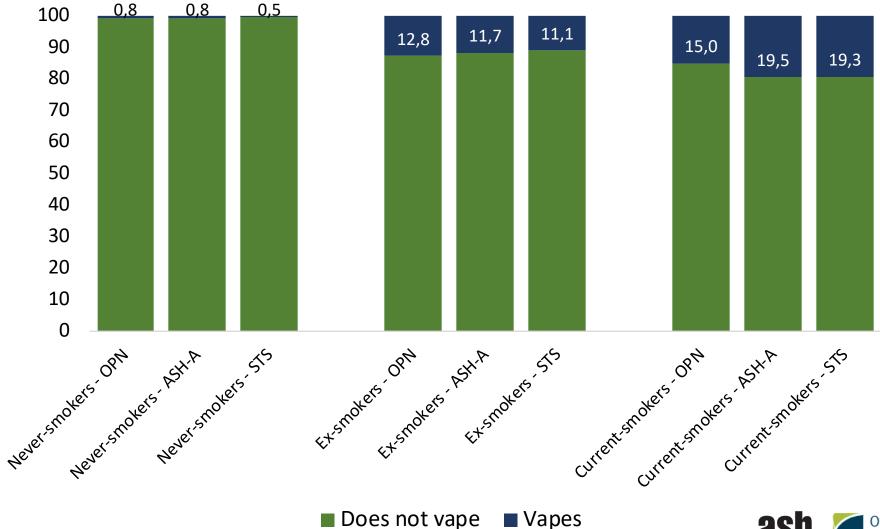
	Smoke-free Survey, adults ASH-A	Opinion and Lifestyle Survey OPN	Smoking Toolkit Study STS
Conducted for	Action on Smoking & Health	Office for National Statistics	University College London (UCL)
Data collection	YouGov, online	Household (changing to phone)	IPSOS Mori, Household
Date	Feb – Mar 2019	2018	Monthly since 2007
Location	Great Britain	Great Britain	England
Minimum age	18	16	16
Sample size	12393	8303	~1700 per month

Prevalence of e-cigarette use, ages 16+





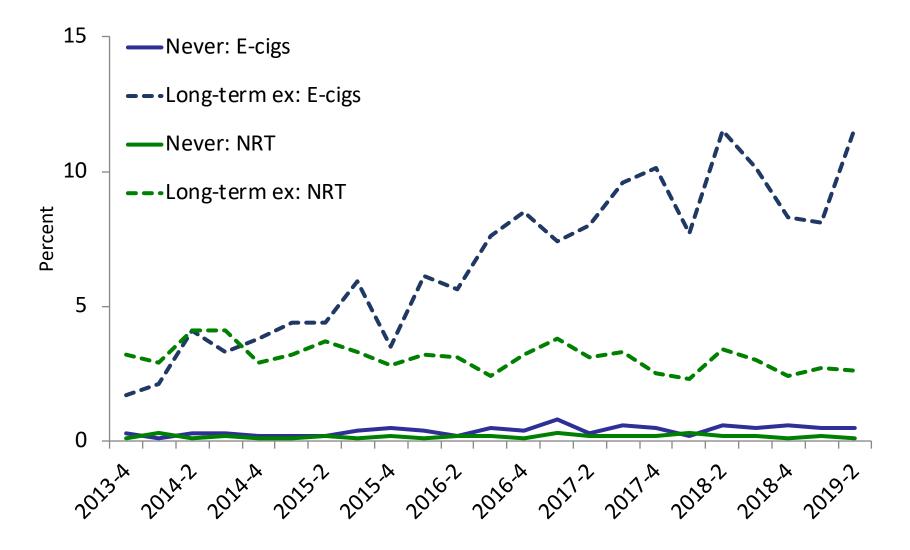
E-cigarette use/vaping by smoking status





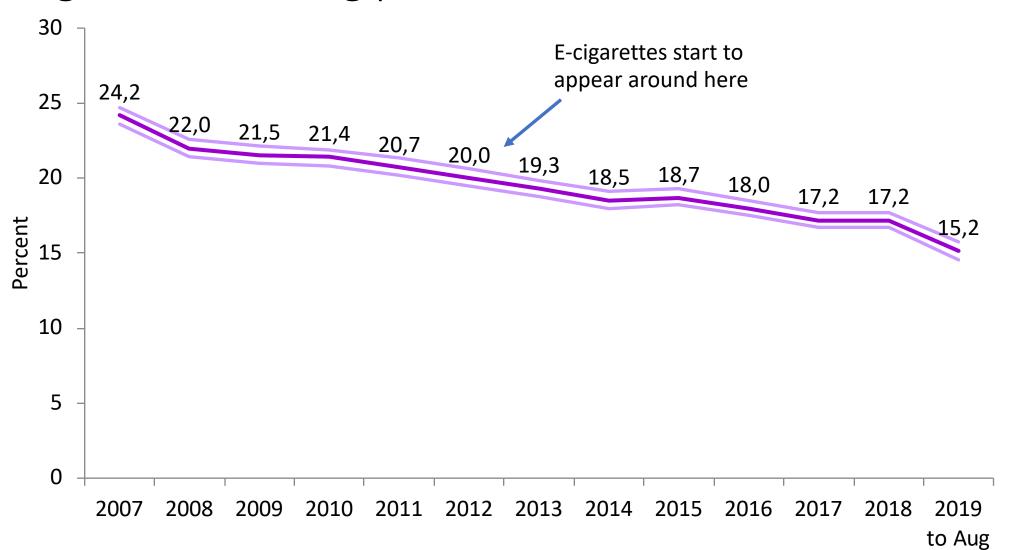


Nicotine use by never smokers and long-term ex-smokers, 16+



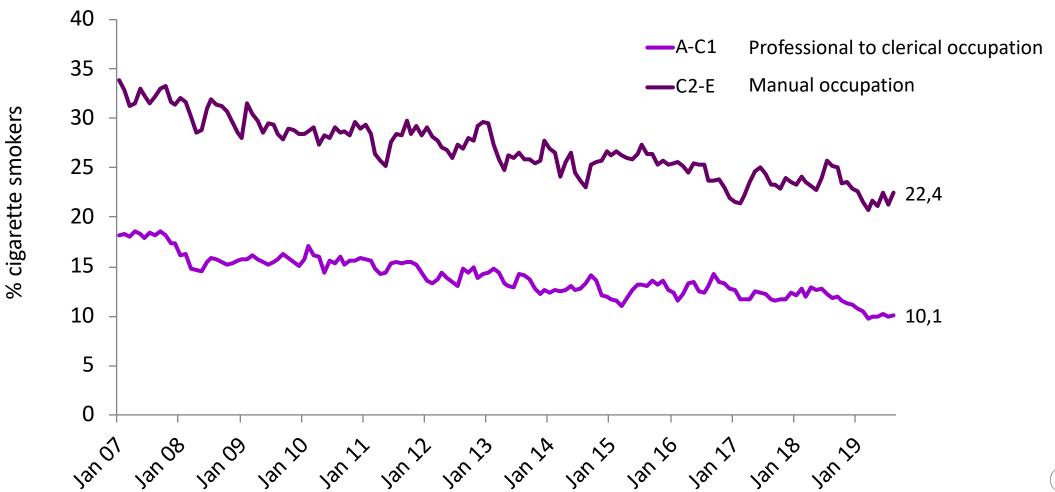


Cigarette smoking prevalence, 16+



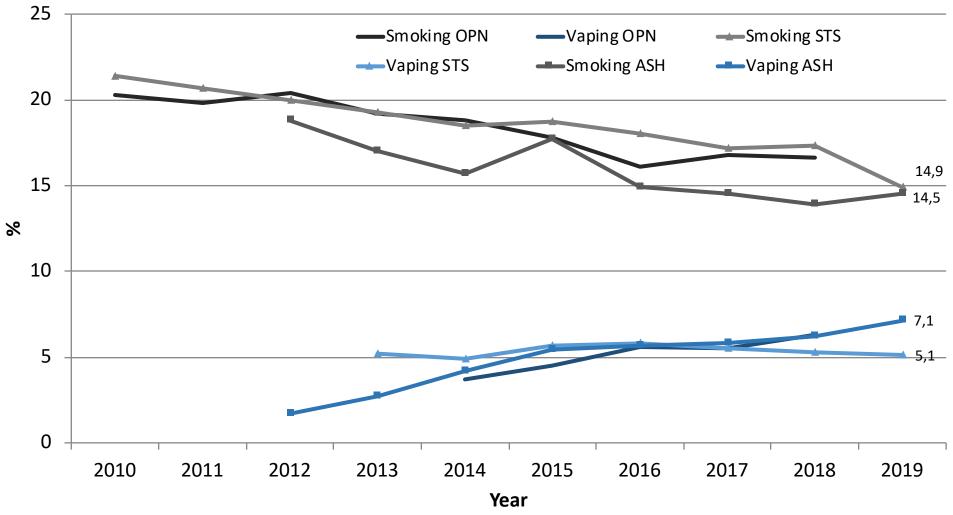


Prevalence of cigarette smoking by social grade, 16+





Comparison across national surveys of adults



Vaping includes any frequency

Notes

Smoking of any combustibles or cigarette smoking





- Modelled on STS, but from age 14
- Started 2016, every 2 months
- Daniel Kotz, Sabrina Kastaun, Universität Düsseldorf
- https://debrastudy.wordpress.com/
- Kastaun S, Brown J, Brose LS, ... Kotz D. Study protocol of the German Study on Tobacco Use (DEBRA): a
 national household survey of smoking behaviour and cessation. BMC Public Health 2017; 17:378

Youth

Prevalence of e-cigarette use, youth

	Smoking, Drinking and Drugs Survey Governmental survey	Smoke-free survey, youth Action on Smoking & Health
Data collection Survey date Location Age range Sample size	IPSOS Mori in schools Sep 2018 - Feb 2019 England 11 to 15 13191	YouGov, online Mar - Apr 2019 Great Britain 11 to 18 2173
Vaping status, %		
Haven't heard of e-cigs		
Don't want to say		
Never tried		
Tried once or twice		
Former user		
Current user		

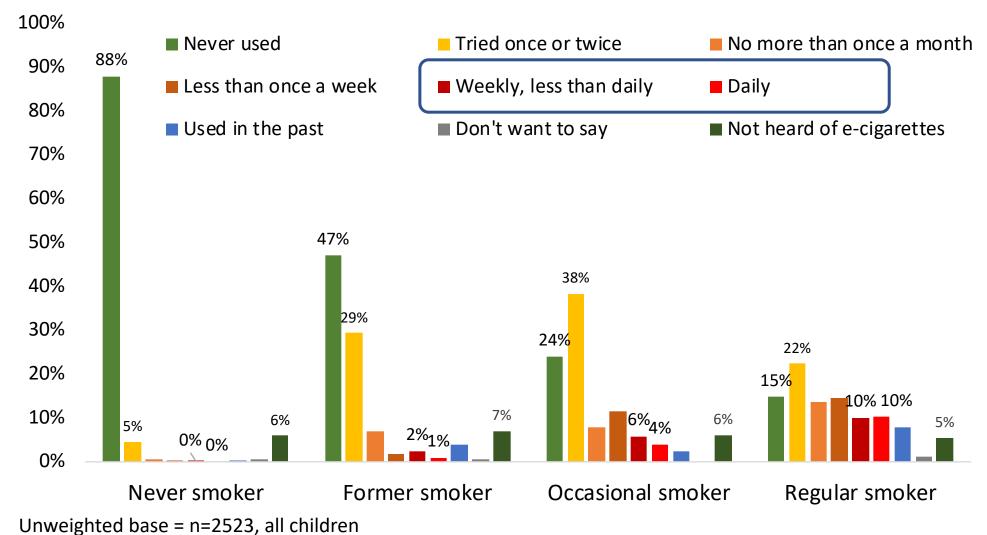


Prevalence of e-cigarette use, youth

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Vaping status, %		
Haven't heard of e-cigs		6.6
Don't want to say	-	1.1
Never tried	75.3	76.9
Tried once or twice	15.3	9.5
Former user	3.5	1.0
Current user	5.9	4.9



Frequency of use, youth



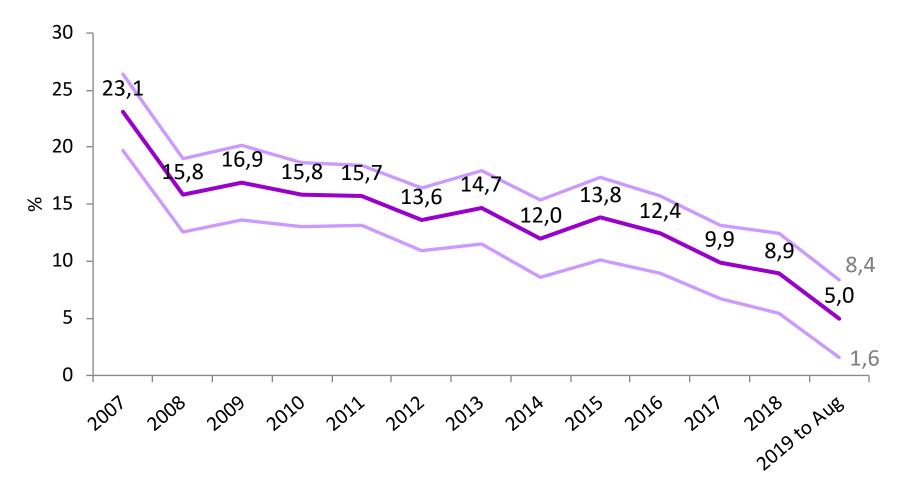


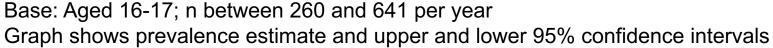
Smoking prevalence youth

	Smoking, Drinking and Drugs Survey Governmental survey	Smoke-free survey, youth Action on Smoking & Health
Smoking status, %		
Don't want to say	-	1.5
Never tried	83.8	79.3
Tried	8.4	9.2
Former	2.8	3.4
Current	5.0	3.8



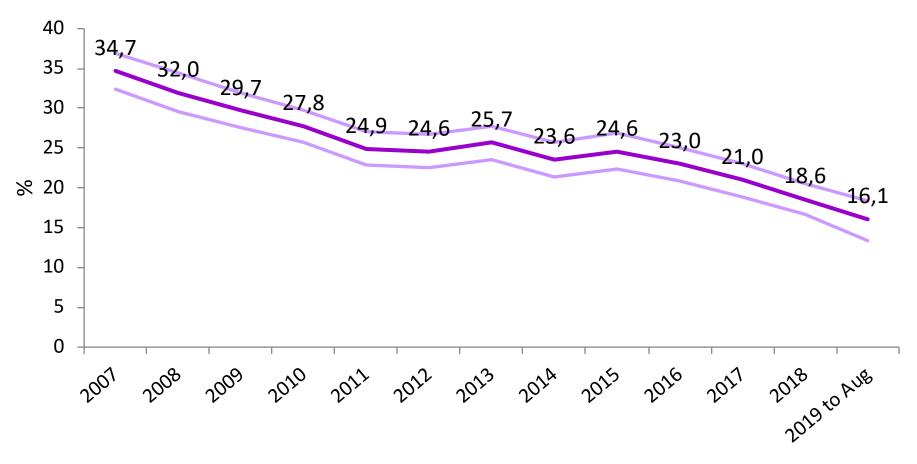
Cigarette smoking prevalence in 16-17 year olds

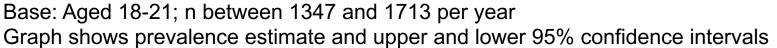






Cigarette smoking prevalence in 18-21 year olds



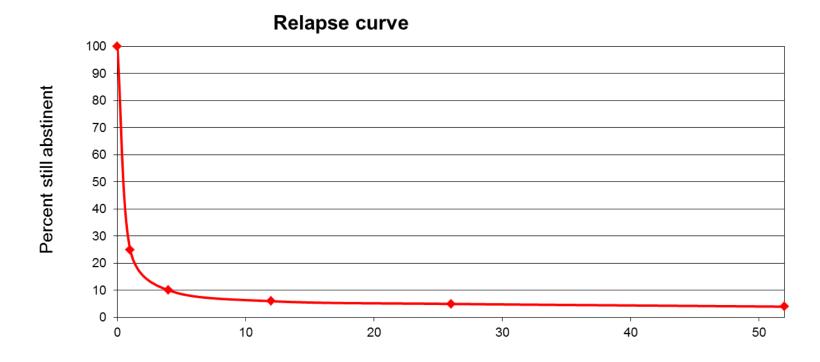




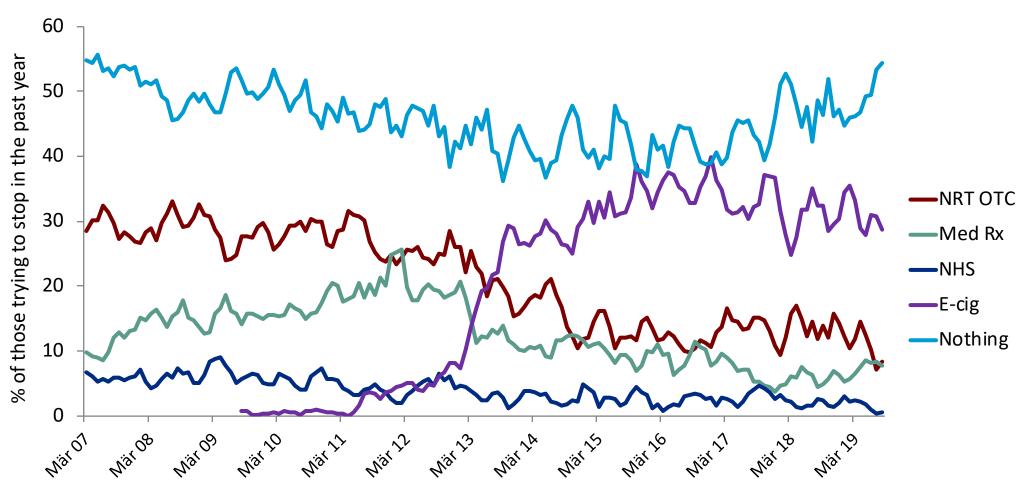
E-cigarettes and smoking cessation

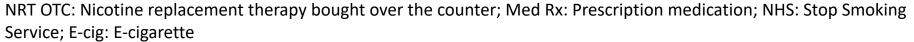
Cessation

Without help, about 3%-4% of all smokers trying to quit are abstinent for one year



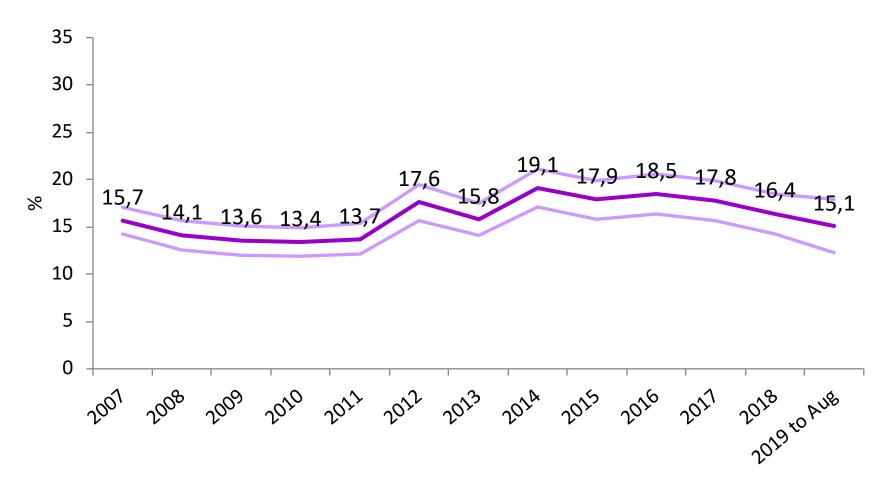
Support used in quit attempts







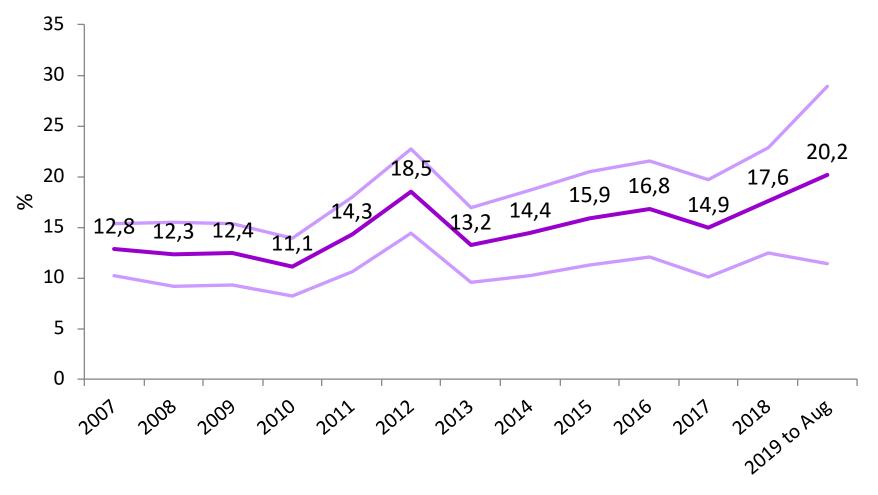
Success rate (at time of survey) in those who tried





Base: Smokers (16 and over) who tried to stop in the past year; n between 1139 and 2553 per year

Success rate for stopping in those aged 16-24 who tried



Base: Smokers (16-24) who tried to stop in the past year; n between 209 and 626 per year



Overview of systematic reviews

2015 to 2017: 14 systematic reviews, 7 included a meta-analysis

Review	Relative risk /odds of being abstinent with EC		
Rahman, 2015	RR 2.29, (1.05 - 4.96) p=0.04		
Hartmann-Boyce 2016	RR 2.29, (1.05 - 4.96) p=0.04		
Khoudigian 2016	RR 2.02, (0.97 - 4.22) p=0.06		
Vanderkam 2016	RR 1.91, (0.93 - 3.89) p=0.08		
Kalkhoran & Glantz 2016	OR 0·72, (0.57 – 0.91)		
Malas 2016	AOR 0.10, (0.05, 0.22) - 6.07 (1.11, 33.18)		
El Dib 2016	RR 2.03, (0.94- 4.38) p=0.07		

Reasons for inconsistent findings

Types of studies included

RCTs only vs observational studies

Types of participants included in a meta-analysis

E.g. current/ex-smokers, smokers who had 'tried an EC' but who continued to smoke at baseline (These exclude people who have successfully stopped smoking using an EC and level of use unclear)

Types of outcomes included in a meta-analysis:

Length of follow up
Treatment of missing data

McNeill, Brose, Calder, Bauld, Robson (2018)

Latest randomised controlled trial

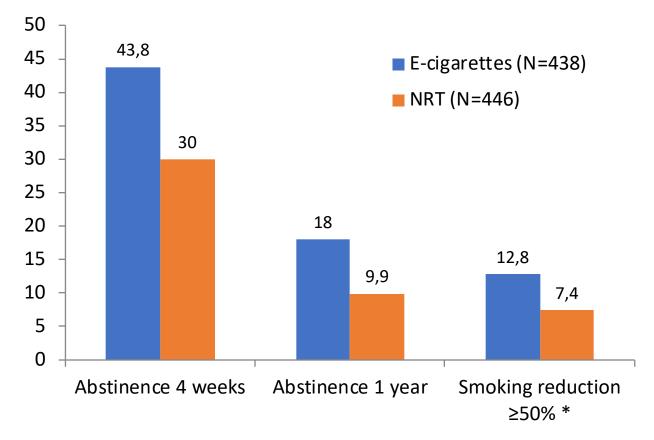
- Weekly behavioural support for at least 4 weeks and
- Nicotine-replacement products of their choice, including combinations, for up to 3 months

Or

 Refillable e-cigarette with one bottle of nicotine e-liquid (18 mg/ml nicotine), recommendation to purchase further eliquids of their choice

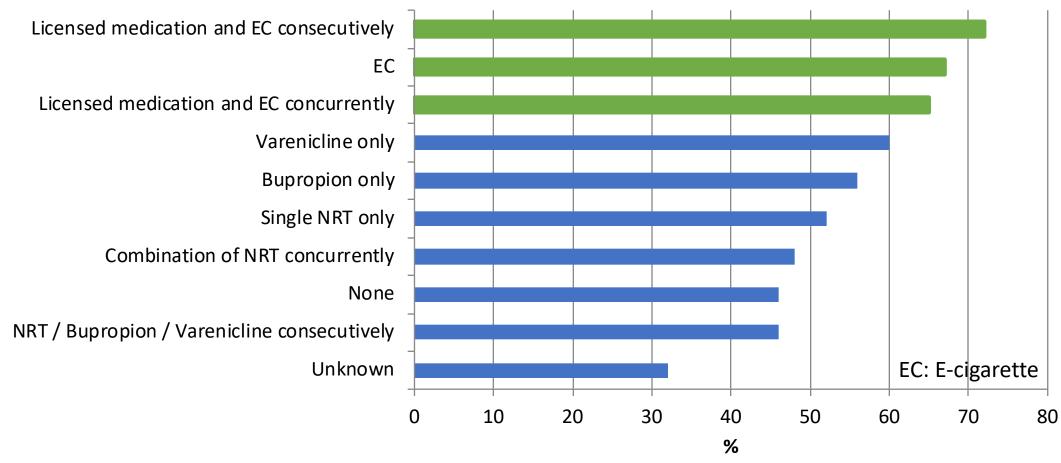
Respiratory symptoms at 52 weeks:

- No difference in shortness of breath or wheezing
- Less phlegm and cough in e-cig group



All differences significant
Abstinence= Not more than 5 cigarettes since week 2, CO of ≤8ppm
* Reduction among those not quit

Stop smoking services 2018/19 4-week self-reported success rates by pharmacotherapy





Vaping and smoking in England 2019



- Very strong tobacco control
- E-cigarettes regulated
- E-cigarette prevalence stable at about 5 6%
- Use by never smokers remains very rare
- Smoking prevalence declining, now 15% in adults, 5% in youth
- Attempts to quit smoking with e-cigarettes very good success rates
- Continue to monitor situation through PHE reports and surveys
- So far seem to be getting balance roughly right: Allowing e-cigarettes to reduce deaths and disease caused by smoking without attracting non-smokers