

A year of mixed progress in ending smoking

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As 2018 ends, let's take stock of whether we are making real progress in ending smoking. [Data from the World Health Organization](#) (WHO) show that there are still more than 1 billion smokers in the world today, and more than 7 million lives are prematurely claimed by smoking-related cancer, heart disease, and lung disease. Combustible cigarettes and certain forms of toxic smokeless tobacco products together remain the largest preventable cause of premature deaths globally. The stakes remain unacceptably high.

Market-led solutions, driven by the demand of smokers for reduced-harm products or better ways to quit, have made headlines this year. My favorites are the following:

- [Altria Group Inc announced a \\$12.8 billion](#) investment in JUUL Labs, Inc, the US leader in e-vapor products. This represents a [35% economic interest in JUUL](#). It means that Altria now has a proven successful alternative nicotine product in its portfolio. When IQOS receives premarket authorization from the FDA, Altria's products will offer various avenues out of smoking and into reduced-risk products. A recent [study](#) led by prominent researcher David Levy, PhD, showed that if US smokers switched to e-cigarettes, up to 6.6 million premature deaths would be prevented within a decade.
- China National Tobacco Corporation (CNTC) launched its new [heated tobacco product in South Korea](#), which could herald a much-needed global competitive war for the heated tobacco market. CNTC produces almost [40%](#) of all cigarette stick equivalents globally. With [315 million smokers in China](#) and about 1.8 million premature deaths from smoking, a shift to reduced-risk nicotine products could save millions of lives within a few decades.
- Hard data from [Japan](#) and [Korea](#) show that millions of smokers have switched to heated tobacco products or have quit.
- Smoking rates have dropped to their lowest-ever recorded level in Norway as [snus gains popularity](#). This mirrors decades of similar results [in Sweden](#). Smokeless tobacco has a great potential to save lives in India. Gutkha and pan (paan) tobacco use is associated with approximately nine and seven times [oral cancer risk increase](#), respectively, versus a 1% risk increase with snus use.

Some governments have made notable progress; for example, the United Kingdom has greatly improved the [regulation](#) of reduced-harm products. However, many international bodies actively shun tobacco [harm reduction](#), which is a key element of overall tobacco control. Below are a few examples of actions against harm reduction.

- The World Conference on Tobacco Control (March 2018) and the WHO Framework Convention on Tobacco Control (WHO-FCTC) [eighth session of the Conference of the Parties \(COP8\)](#) (October 2018) denied the benefits of reduced-risk products, despite inclusion of "harm reduction strategies" in the very definition of tobacco control by the [FCTC](#). Harm-reduction stakeholders were banned from participating at COP8, and media messages were tightly controlled.
- In 2018, the [Campaign for Tobacco-Free Kids](#), funded by Bloomberg Philanthropies, stepped up its advocacy for children at the cost of adult smokers' lives. The result?

Maintaining the status quo that supports the use of combustibles and their serious health effects. Protecting children from smoking or using alternative products must not impede progress in harm reduction for adults who wish to reduce their risks or quit smoking.

- In its efforts to respond to fears about youth using JUUL, the [FDA](#) dominated headlines in 2018 with confusing messages about reduced-harm alternatives relative to combustibles, and the risks attributed to nicotine. The FDA acknowledges that “[nicotine](#) – while highly addictive – is delivered through products that represent a continuum of risk and is most harmful when delivered through smoke particles in combustible cigarettes.” However, the [latest statement](#) caused more confusion among many smokers and alternative product users about the relative risks of such products versus combustibles.

The highest quit rate attributed to current pharmaceutical cessation treatments after 1 year is [<25%](#). In fact, WHO indicated that pharmacological nicotine-replacement therapy, alone or combined with other prescription cessation medications, increases quit rates by only about [7%](#). Moreover, the pipeline for new therapies is virtually empty, and no new products are expected within [5-10](#) years. There surely is room for improvement.

Consumers demand change and a longer and healthier life. Evolving technologies can lower health risks significantly. Governments need to act more forcefully in the interest of smokers; not cower before opposition to harm reduction. Millions of lives are at stake.

As we enter a new year, let’s redouble our efforts to end smoking faster.