

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

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## HEALTH UNIT RECOMMENDATIONS ABOUT ELECTRONIC CIGARETTES (E-CIGARETTES)

### **Recommendation**

*It is recommended that the Board of Health receive Report No. 105-13 re “Health Unit Recommendations About Electronic Cigarettes (e-cigarettes)” and the “Electronic Cigarettes (E-Cigarettes) Assessment of Evidence and Implications for Middlesex-London Health Unit Recommendations” (attached as [Appendix A](#)).*

### **Key Points**

- Electronic cigarettes undermine current tobacco control policies in place.
- There are many questions around the benefit and safety of these products due to the lack of quality control and manufacturing standards, and the undetermined health effects of the substances found within these products.
- Electronic cigarettes are not approved as a smoking cessation aid in Canada.
- Health Unit staff will monitor developments by public health tobacco control partners and emerging evidence about the health impacts related to the use of e-cigarettes. The Board of Health will be updated as appropriate.

### **Background**

Electronic cigarettes (e-cigarettes) are devices made of plastic or steel that, in most cases, resemble real cigarettes. They produce a visible vapour similar in appearance to cigarette smoke and the end of the device may glow like a cigarette. Typically an e-cigarette consists of a cartridge, an atomizer and a battery. The cartridges contain water and added flavourings in a base of propylene glycol, vegetable glycerin, or polyethylene glycol 400; the cartridges may or may not contain nicotine. Users inhale on the device like they would a cigarette which heats the solution into a vapour, that when exhaled looks like smoke.

### **The Issue**

Electronic cigarettes are becoming more and more popular in Canada and around the world. The federal government is responsible for the regulation of e-cigarettes; Health Canada (and its partners) prohibits the importation, sale, distribution and advertising of e-cigarettes containing nicotine, and those making health claims. Despite regulations, these products are easily accessible to those who want to use them. Tobacco companies and large tobacco industry conglomerates are acquiring the companies that manufacture e-cigarettes to get a share of the market. In addition, electronic cigarettes are being rebranded, modified and released into the market with catchy gimmicks and packaging to appeal to more users, including youth.

Unlike tobacco products, e-cigarettes that don't contain nicotine and that don't make health claims, can be used virtually anywhere and can be marketed and sold without any restrictions. This means that e-cigarettes can be used indoors or in places where tobacco use is banned; they do not have to be hidden when available

for sale (i.e. they can be placed with candy, on the counter or with other novelty items); and, they can be sold to youth.

Furthermore, there are many questions around the health benefits and safety of these products due to the lack of quality control and manufacturing standards. In 2009, Health Canada issued a public statement advising Canadians “not to purchase or use electronic smoking products, as these products may pose health risks and have not been fully evaluated for safety, quality and efficiency by Health Canada”. To date, there have been no long-term studies on the health benefits or risks of using e-cigarettes; however, there is a growing body of relatively new scientific evidence that is raising concerns within the public health community about the health consequences and safety of these devices. Many individuals will purchase e-cigarettes to be used as an aid to quit smoking not knowing if the product contains nicotine, or they will purchase additional nicotine to add to the device. In some instances, e-cigarette vendors will offer a “choice” of nicotine strength. As a result, individuals may not know the amount of nicotine within the cartridge, or what is even more alarming, what other products or chemicals are being inhaled from the cartridge of their e-cigarette.

### **Electronic Cigarettes as a Cessation Aid**

E-cigarettes look and feel similar to cigarettes which could be appealing to smokers. Their use involves the same hand to mouth repetitions associated with smoking. E-cigarettes have also been marketed as a safer alternative to continued cigarette use, and as a result, e-cigarettes are being purchased as cessation aids. However, the use of e-cigarettes involves the inhalation of ultra-fine particles into the lungs, including propylene glycol, which is a known lung irritant. E-cigarettes as cessation aids have not been tested for effectiveness or safety. There is also no scientific evidence outlining how these products should be used effectively as a cessation aid. As a result, e-cigarettes have not been approved by Health Canada for use as a cessation aid or harm reduction product and therefore should not be used as such.

### **Conclusion/Next Steps**

Evidence about the impact of e-cigarettes on health is emerging. The Health Unit receives inquiries from healthcare providers and individual clients asking for advice on the use of e-cigarettes. Many individuals see the e-cigarette as a safer alternative to smoking and feel that using them may help them or their clients/patients to quit. The Health Unit also receives inquiries from workplaces, schools and restaurants regarding the legality of use in enclosed public places and workplaces and on school property. In order to provide accurate, consistent and up to date advice on the use of e-cigarettes, Health Unit staff will be providing clients, partner agencies and others recommendations contained within the “Electronic Cigarettes (E-Cigarettes) Assessment of Evidence and Implications for Middlesex-London Health Unit Recommendations” (attached as [Appendix A](#)). Health Unit staff will continue to monitor developments by public health tobacco control partners and the advancements in the evidence related to e-cigarettes and the Board of Health will be updated as appropriate.

This report was prepared by Ms. Leila Davis, Tobacco Enforcement Officer, Ms. Lil Marinko, Public Health Nurse, Ms. Tanya Weishar, Health Promoter, Ms. Sarah Neil, Public Health Nurse, and Ms. Linda Stobo, Manager, Chronic Disease Prevention and Tobacco Control Team.

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<p><b>This report addresses</b> the following requirement(s) of the Ontario Public Health Standards: Foundations: Principles 1, 2; Comprehensive Tobacco Control: 1, 6, 9, 11 and 13</p>
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