Hong Kong Council on Smoking and Health
Support the Proposals to Strengthen Tobacco Control

Hong Kong Council on Smoking and Health (COSH) has been advocating to implement stringent tobacco control policy to reduce tobacco use and protect public health. COSH fully supports the proposals of the Government to strengthen tobacco control measures: (1) enhancement of pictorial health warnings, include enlarging pictorial health warnings on packets of tobacco products to at least 85%, increasing number of forms to twelve, showing the health warning message “Tobacco kills up to half of its users” and displaying quitline, etc; (2) smoking ban at bus interchanges within tunnel portal areas; and (3) prohibiting e-cigarettes. The proposed measures are the global trend to curb the tobacco epidemic and reduce smoking prevalence.

1. Health Warnings on Tobacco Products

Reduce smoking
Research has proved that pictorial health warnings could reduce the attractiveness of smoking, increase quit intention and deter youth from smoking. Large pictorial warnings cause smokers to smoke fewer cigarettes, avoid smoking in front of children and pregnant women, and smoke less at home.

Increase knowledge of health risks
Health warnings serve to educate the public and smokers on the health risks of smoking. Smokers also reported that they received more information about the risks of smoking from the package of tobacco products than from any other source, except television.

Effect of existing pictorial warnings faded
The existing six forms of pictorial health warnings that cover 50% of cigarette pack have been used since 2007 without any enhancement. The deterring effect has faded. COSH’s Tobacco Control Policy-related Survey 2014 (COSH Survey) found that most respondents (66.7%) thought of the risks of smoking when they noticed the warnings. However, only 12.1% of smokers stopped to light a cigarette. There is an urgent need to increase the deterring effect of the pictorial health warnings. More respondents (62.4%) agreed to make the warnings clearer.

Larger warning is global trend
Many countries have introduced more stringent and successful measures to regulate tobacco packing in recent years. Australia, the first country to introduce plain packaging
in 2012, has resulted a substantial decrease in smoking population. It is followed by Ireland and United Kingdom in 2016. More countries are now considering to adopt, including Chile, France, Nepal, New Zealand, Norway, Pakistan and Turkey, etc. On the other hand, Nepal and Thailand have increased the coverage of pictorial health warning to 90% and 85% respectively. The effectiveness of these measures has provided strong evidence and urgency for such approach in Hong Kong and elsewhere.

**Recommended by World Health Organization (WHO)**

Dr Margaret CHAN, Director-General of WHO, particularly quoted the successful measures of plain packaging as well as tobacco tax increase in the World Conference on Tobacco or Health in March 2015. The conference affirmed their support for those countries which have passed or are considering adopting plain packaging or pictorial warnings covering more than 85% and encouraged other countries to adopt those measures by 2018.

2. **Smoking Ban at Bus Interchanges within Tunnel Portal Areas**

**Protect people from secondhand smoke**

The amendment of Smoking (Public Health) Ordinance in 2006 has designated all indoor and some outdoor public transport facilities as no smoking areas. The proposal to include 8 bus interchanges within tunnel portal areas as no smoking areas can further reduce the health risks of the public from secondhand smoke exposure.

**International examples to extend smoke-free areas**

Singapore has banned smoking in any public area occupied by a queue of 2 or more persons since January 2013. Similar measure is effective in Beijing from June 2015. The Hong Kong Government should take these reference and further designate more outdoor public places as no smoking, such as busy streets, all outdoor public transport stations and outdoor seating area of restaurants.

3. **Prohibiting E-cigarettes**

**Low prevalence of e-cigarette use in Hong Kong**

According to COSH Survey, e-cigarette use in Hong Kong is now not common, about 1.8%. But the overseas experiences had showed that its growth is rapid, especially among the youngsters. In Korea, only 0.5% of youngsters had used e-cigarettes in 2008 but drastically increased to 9.4% in 2011. The US Centre of Disease Control and Prevention found out that e-cigarette use among secondary school students tripled from 2013 to 2014, in which 13.4% among high school students.
**Targeted at youngsters**

Youngsters are the main target of the marketing strategies adopted by the e-cigarette sellers. Most e-cigarettes are sold on consignment at retail outlets and shopping centres specializing in trendy items, or through online platforms such as social media which youngsters view frequently. The flavours, designs and packaging of e-cigarettes are diverse and all appeal to the youth. The price is affordable. The marketing strategies of e-cigarettes are similar to those used in the past for traditional cigarettes.

**Promote and increase smoking**

A study in the US revealed that nearly half (43.9%) of the young e-cigarette users, who did not smoke, had an intention to smoke traditional cigarettes. The Secondary School Smoking Survey of The University of Hong Kong (HKU Survey) showed that e-cigarette users who smoked were more nicotine dependent and less likely to quit.

**Unknown effectiveness on smoking cessation and safety**

WHO re-stated that there is no sufficient scientific evidence supporting that e-cigarettes help smokers quit smoking and its safety remains unknown. In Hong Kong, most e-cigarettes do not provide details on their ingredients and are marketed as non-addictive, aid for smoking cessation, accredited and environmentally friendly which mislead consumers on their safety. WHO urges countries to regulate e-cigarettes to minimize the risk of exposing the youngsters and never smokers. Currently at least 13 countries, including Singapore, Thailand and Brazil, have imposed a complete ban on e-cigarettes, which will be a global trend.

**Toxic and carcinogenic substances and health risks**

Several overseas research studies have identified toxic chemicals and carcinogenic substances in e-cigarettes, for instance, nicotine, additives, heavy metal, propylene glycol, glycerin, formaldehyde and acetaldehyde which can bring health risks, such as nausea, bradycardia, respiratory depression and lung diseases, etc. Other unknown ingredients and unknown substances released during the vaping process may also cause negative effects on the health of users and non-users. Unintended exposure of cartridges and e-liquid in children could cause vomiting, cough, choke and death. The HKU Survey found that e-cigarette users are more likely to have respiratory systems, like cough and phlegm.
**Gateway to smoking**

While the safety and effectiveness of smoking cessation of e-cigarettes remain uncertain, the fierce promotion of sellers has encouraged and normalized the smoking behavior. Precautious actions should be carried out promptly to diminish its impact on youngsters and stop it from becoming the gateway to smoking.

With reference to the successful experience of banning smokeless tobacco products in Hong Kong in the 1980s, COSH supports the Government to impose a total ban on the sales, advertising, promotion and sponsorship, distribution, importation and manufacturing of e-cigarettes, before e-cigarette becomes prevalent and causes harms to human health.

**Conclusion**

The tobacco control measures proposed by the Government, which are effective to reduce smoking and protect public health, are overwhelmingly supported by the general public. Tremendous support from organizations and members of public were collected. The legislators should act accord with the public aspiration to strengthen tobacco control measures for the public health and general wellbeing of the society.