



LI KA SHING FACULTY OF MEDICINE  
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香港大學李嘉誠醫學院

LC Paper No. CB(2)584/16-17(47)

Tuesday 10<sup>th</sup> January, 2017

Chairman  
Panel on Health Services  
The Legislative Council of Hong Kong  
Legislative Council Complex, 1 Legislative Council Road  
Central, Hong Kong

Dear Sirs and Madams,

**Written Submission to the Panel on Health Services  
Special Meeting on 17 January 2017  
Re: LC Paper No. CB(2)386/16-17(05)**

I write to you all today in the capacity of a graduate of The Jockey Club School of Public Health and Primary Care as well as a current medical student of The Li Ka Shing Faculty of Medicine to share my views in support of the enlargement of pictorial health warnings on cigarette packets.

Over my years of studying in pursuit of the Art and Science that is Medicine and Healthcare across both Faculties in Hong Kong, I have been fortunate enough to have had a number of experiences that have exposed me to the current situation pertaining to smoking in Hong Kong. Not only have I been taught a lot of material pertaining to smoking in class (and from a multi-dimensional perspective), I have had the pleasure of visiting the Tobacco Control Office, participating in World No Smoking Day events, and have even explored had the relevant domain of the relevant ethical and legal argumentation pertaining to cigarette promotion and advertisement in Hong Kong. It is thanks to these opportunities that I have gained a working knowledge of the debate that brings us all together for this special meeting. I would like to share with you all THREE core points that have led me to come forward and share with you my stance that supports the movement of cigarette packets to approach that of incremental warning on cigarette packaging as demonstrated, most notably, by countries like Australia and of course, Uruguay.

First and foremost, we have perhaps the most empirical reason, that being that it is the most appropriate course of action to take. Cigarette smoking is harmful, and I am positive that if there is one fact that everyone in attendance would agree with, it is that smoking is injurious to the health of oneself and even the people around them. I think we can all agree, speaking from the public health perspective that; the further we cut down smoking rates and shift towards curbing cigarette smoking and empowering smoking cessation efforts, the farther we will go in terms of protecting the general health and well-being of our society. Hence, it is our duty to society to act on this noble, moral, and ethical maxim. Upon the implementation of plain packaging in Australia, there has been a lot of research which has culminated in a comprehensive Position



Statement by Cancer Council Australia (which collated 24 peer-reviewed studies, including some from Canada and New Zealand as well) [1] that overwhelmingly proved that the enactment of the Tobacco Plain Packaging Act was beneficial towards: 1) increasing recall of health warnings associated with smoking, 2) contemplation and ideation to abstain from or quite smoking, 3) health warnings being taken more seriously (especially when compared to general packets), 4) reduced false beliefs or misconceptions regarding there being a lack of difference in harmfulness of cigarettes of different brands, 5) reduced appeal of the product (including look, style, style/social quotient of smokers, even sensory perception—cigarettes from plain packets were less enjoyed by smokers and were less attractive to people in general), and lastly, 6) plain packets with 75% health warnings were significantly more likely to elicit cessation-linked intentions in smokers—hence the packages furthered their core objective successfully. It is the strong evidence and backbone that gives me great confidence in this taking this step here in Hong Kong.

As I move on to my next point, I must come forward and admit that we do have the responsibility to respect people's autonomy, and the Government has that much of a responsibility to all stakeholders in question much like I do with a friend of mine that opts to smoke despite me having informed him of the potential risks to his health. As we all know, and as put forward by the Centers for Disease Control and Prevention (CDC), smoking is a risk factor for death, as one of the leading preventable causes of it, no less [2]. People who smoke are at a greater risk of heart disease, stroke, lung cancer, other cardiovascular diseases, respiratory diseases, cancer, and has numerous other adverse effects on health since smoking harms "every organ of the body and affects a person's overall health" [2]. What's more, these effects are seen with the exposure to second-hand smoking as well, albeit to a lower degree—nonetheless, continual exposure to second-hand smoke would result in an individual causing harm to the community around him/herself. This incurs what is known as The Harm Principle, put forward by Liberal philosopher John Stuart Mill in his book *On Liberty*, in which he states that "the only purpose for which power can be rightfully exercised over any member of a civilized community, against his will, is to prevent harm to others" [3], highlighting the authority of the government to make decisions in the situation to protect the innocent and faultless. Should the government be absolutely fixated on this principle, Hong Kong would be considering display bans at points-of-sales, which have proven highly successful overseas [4-13], and can be seen as a form of drastic action when compared to an increment of 15% of cigarette packets on the largest two surfaces—bearing in mind that there are still four more where relevant brand presence could still be maintained, but I will come to that in greater detail later. I would like to stress that the harm of cigarette smoking is so immense and devastating that strong action is definitely warranted towards the curbing of smoking, because it is essentially a selfish behaviour that causes suffering to not just the individual that partakes in it, but to the people and community around them, and even worsens air quality when in enclosed spaces.



Lastly, I would like to reason to the economic trade-off and other relevant arguments commonly attributed to the opposition with the perspective as a member of the youth community in Hong Kong. Indeed, throughout my studies and research into the quandary that is managing smoking in Hong Kong, I have often wondered why there are friends that I have from back in the day that took to smoking despite having been alerted to the same health warnings that I have. This is when I was I came across studies on what is known as the “sleeper effect” [14], which essentially was a vulnerability towards smoking behaviours when teenagers came across their first cigarette. However, how might these teenagers even come into contact with cigarettes? Naturally, it is illegal for people under the age of 18 years to purchase cigarettes from points of sales—and hence these teenagers often access their first cigarettes in singles from their peers, or even procuring them from family members. Teenage years are a period of time when we all face all sorts of stressors, be they domestic, academic, psychosocial, physical, and tend to become more conscious of ourselves, already making us vulnerable to act with naiveté to escape from these stresses. Emotional coping, as aforementioned, along with the imagery of smoking in movies to reflect people that are suave, chic, or cool; and even its association with weight loss/control makes smoking something teenagers tend to take up long-term due to the accumulated vulnerability incurred. However, teenagers are also susceptible to health messages, and it is an empirical truth that the behavioural traits exercised by younger individuals (i.e. during their teen and pre-teen years) often carry forward into the future to the extent that they can even serve as predictors of long-term health problems. This is where plain packaging could come in to solve the problem, because in our younger years, we are more emotionally turned off by negative consequences and thus, exposure to plain packets in middle-aged children, when in any points-of-sales (which are quite highly frequented by children in Hong Kong), would contribute to a continual maintenance of the negative consequences and the strong imagery associated with smoking. This would quite likely emerge as a form of a conditioned, cognitive counter-smoking response in the future; and this would definitely address the pressing issue that is the induction of new smokers that go on to take up their habit for a very long time, suffer from dependent and addictive outcomes, and continue on a downward spiral of health earlier on than they ought to, had they not smoked. My personal view towards the economic ramifications or defences by the pro-cigarette company camp is that due to the presence of the sleeper effect, which is not as greatly affected by plain packaging either way (as it likely involves the passing of cigarettes from the hand of a compulsive/long-term smoker, to a never-smoker); cigarette companies would likely still be able to sell as much as they usually would, as they largely feed to satisfy the compulsions of individuals that have already developed an iron-clad long-term habit of smoking rather than actively work towards ensuring a continual stream of smokers to cater to. I do also find the opinions about the potential counterfeiting of more harmful tobacco products relatively resolvable, as making the use of printable laser stickers as a symbol of authenticity could be flexibly applied to literally any surface of the cigarette packet, and I am positive that cigarette





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companies have already dealt with this problem and have been able to differentiate their 'original product lines' efficaciously [15], which has led to the emergence of the (technically) oligopolistic nature of the cigarette market. These arguments thus do not hold as much ground as introducing plain packaging does not inherently marginalise cigarette companies.

Before I close, I would like to reiterate strongly that in our current paradigm of healthcare, Hong Kong is very much in need of strong leadership when it comes to behaviours that double up as risk factors for multiple morbidities. With the intensification of the chronic and non-communicable diseases epidemic as forecasted by the World Health Organisation (WHO), our hospitals are bound to see a continual increase in these cases much like they have over the past few years, and I was able to derive from this in person; given that this fell into the spectrum of my concentration area and hence, was a core constituent of my research project—I was thusly exposed to the potential uncertainty in the dynamics of our healthcare system from the patients' perspectives, and even left feeling unsure about how my generation of doctors (as I have just gotten to medical school) would be able to cope with the additional burdens on us. What is highly disappointing is that all of these could potentially be reduced by introducing measures to better make the general public, especially those that are much younger than even myself, more aware of the consequences they face should they smoke. Even if some voices might suggest that the effect or the outcome may be small, I would say that the effect size is definitely not going to be zero, and saving each and every life is worth every drop of blood, sweat and tears we put into it.

All in all, I strongly and vehemently raise my arm in support for the motion in today's special meeting. I encourage my fellow peers to do the same, and implore the opposition to these most urgent and necessary steps to protect the health of our local population (as well as air quality, of course) to reconsider their stance and fairly consider the proposition we make today.

Thank you for your kind attention, and please do not hesitate to contact me by email at [REDACTED] should you have any enquiries about my statement.

Yours faithfully,

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