


電子煙與傳統煙草無異,不但危害健康和損害肺部,
而且有爆炸風險,與二手煙和三手煙一樣危害公共安全。

姓名: Ben. Yim Tsz Chung 

學生/家長/在職人士/其他

我^見得電子煙的修果等同於傳統香煙, 所以立法管制電子煙是必要的

姓名: Benson Chan *l.*

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙會產生甲醛，可能引發哮喘，有害健康。政府應該立法全面禁止電子煙。
儘快

姓名: _____

☒ 學生 ☐ 家長 ☐ 在職人士 ☐ 其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙會釋出甲醛, 容易引致哮喘, 影响
健康, 促請政府儘快立法全面禁止電子煙.

姓名: Miki

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

致立法會秘書處 (請轉交全體立法會議員):

懇請政府增撥資源，教育市民認識電子煙
的禍害，並儘快立法禁止電子煙，保障市民
健康。

姓名: _____

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙含有害物質，但普及情況越演越烈。
為保障市民健康，政府應該立法全面禁止電子煙
的銷售。
儘快

姓名: 高凱欣

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

促請政府增加撥款，教導市民認識電子煙
的壞處，並全面立法禁止電子煙，保護下
一代的健康。^{儘快}

姓名: _____

☒ 學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙同一般捲煙一樣會產生甲醛, 可能引
發哮喘, 危害健康, 請政府儘快立法全面
禁止電子煙。

姓名: Ny Ka Chung

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙含氫化甲醛, 可能引發哮喘, 有害健康。政府應該立法全面禁止電子煙。
儘快

姓名: _____

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙會釋出甲醛, 容易引致哮喘 影响
健康, 促請政府儘快立法全面禁止电子
煙。

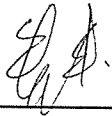
姓名: Chor To

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

致立法會秘書處 (請轉交全體立法會議員):

懇請政府增撥資源，教育市民認識電子煙好禍害，並儘快立法禁止電子煙，保障市民健康。

姓名: _____



☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙含有害物質，但普及情況越演越烈。
為保障市民健康，政府應該立法全面禁
止電子煙的銷售。
儘快

姓名:

Nisha

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

促請政府增加撥款，教導市民認識電子煙的壞處，並^{儘快}全面立法禁止電子煙，保護下一代的健康。

姓名: _____

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

电子煙同一般捲煙一樣會產生甲醛，可能
引發哮喘，危害健康，請政府儘快立
法全面禁止电子煙。

姓名: Chan Wing Hei

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙含有毒物質，增加患病風險。

促請政府^{儘快}立法全面禁止銷售電子煙，
保障公眾健康。

姓名: 王偉倫

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

長期吸用電子煙會增加患癌的機會，
政府必須加快立法禁止銷售電子煙。

姓名: 吳
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

要求政府正視並修例，禁止市民在禁煙
區內吸用電子煙及其他新煙草產品，
並儘快立法全面禁止電子煙。

姓名: 岑

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

強烈要求政府修例, 禁止市民在禁
煙區內吸用電子煙, 並立法全面禁止
電子煙。

姓名: 張生

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

青少年容易被網上傳言誤導，以為電子煙無害，政府必須加強教育，認識吸食電子煙的禍害，並儘快立法全面禁止電子煙。

姓名: R

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

促請政府加大撥款支持更多戒煙服務，
守護市民健康，減少呼吸道疾病，從而減少
医疗系統的壓力。同時立法全面禁止電子煙。
儘快

姓名: 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

有研究證實電子煙含有致癌物, 政府必須
儘快立法禁止有關產品的銷售, 保障市民健康。

姓名: 宜

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

电子煙及其他新產品煙草產品均含有致癌物，
政府必須加快落實立法，禁止有關產品的銷
售。

姓名:

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

很多市民不了解吸食電子煙的風險，將電子煙當作戒煙工具，政府需要加強宣傳正確的戒煙途徑，並且儘快立法禁止電子煙。

姓名:

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

越來越年青人吸用電子煙,而煙內的有害
物質會影響健康,增加患上心肺疾病
的機會,他請政府立法全面禁止電子煙。
儘快

姓名:

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

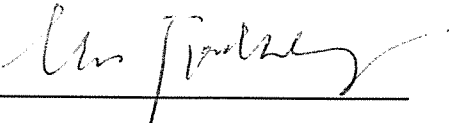
電子煙含有害物質，構成健康風險。為保障市民健康，請政府確實立法禁止銷售電子煙。

姓名: 

學生/家長/在職人士/其他

Cigarettes or E-cigarettes are both harming people's health, the government should ban them when they can!

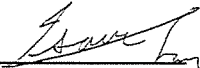
姓名:



學生/家長/在職人士/其他

致立法會,


政府應該立即全面禁止電子煙及其他新煙草產品，以保障非吸煙人士及旁人接觸二手和三手煙內所含的有毒物質和尼古丁。

姓名: 林冠樺 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6228)

The use of electronic cigarettes is addictive, and it can increase the health burden. Therefore, the government must legislate to completely ban its sales.

姓名: Matthew Lan 
~~學生/家長/在職人士/其他~~

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6229)

There is no safe level to exposure of carcinogens in e-cigarettes. Government should impose a ban of e-cigarettes to protect population health.

姓名:

PH Lep Kelly

學生/家長/在職人士/其他

雖然現時香港政府對電子煙買賣進行管制，但缺少配套監管其他新興煙草產品，在改善市民健康上仍需努力。希望政府可以立法管制所有煙草產品，謝謝！

姓名: _____

譚彥廷

學生/家長/在職人士/其他

新興電子煙在青少年之間形成了一股熱潮, 影響
他們生理及心理健康。故懇請政府全面禁止電子
煙及其他產品。謝謝!

姓名: 羅雪瑩 *Lv.*

學生/家長/在職人士/其他

請政府盡快立法實施全面禁止電子煙及
新煙草產品包括加熱煙，以保障公眾健康。

姓名: 袁靖曼

☒ 學生 / 家長 / 在職人士 / 其他



Please increase tobacco control education program, especially e-cigarettes and other tobacco products, to promote population health.

姓名: 馮啟恩 FUNG KAI YAN MATTHIAS

(學生/家長/在職人士/其他)

Many people do not understand the negative impact of e-cigarettes on health and mistakenly believe that e-cigarettes are healthier than traditional ones. The government is urged to educate the public about electronic cigarettes.

姓名: _____

學生/家長/在職人士/其他

CIMIPMHK/

ORG.

PNUE-UNEP

NON-PROFIT
ET CHARITABLE



Government should increase tobacco control education program, especially e-cigarettes, to protect public health.



姓名: _____

學生/家長/在職人士/其他



LA FONDATION DE
"PLANTONS POUR
LA PLANÈTE"
DU PNUF (UNEP),
HK

ORCT.
NON-LUCRATIF
ET CHARITABLE

Many people are unaware of e-cigarettes adverse health impacts. Government need to promote education program about health risk of e-cigarettes and other tobacco products.



姓名: _____

HIMA FOUNDATION HK.

學生/家長/在職人士/其他

ORG. NON-PROFIT
ET CHARITABLE

致立法會秘書處 (請轉交全體立法會議員):

E-cigarette smoking not only increases the risk of cardiovascular disease, but also increases respiratory symptoms such as cough and asthma. To protect public health, the Government needs to increase the e-cigarette research fund and educated the public about the risks to e-cigarettes.



姓名: _____

學生/家長/在職人士/其他

ORG. NON-LUCRATIVE
ET CHARITABLE

+HKGN/
LADDE-HK

致立法會秘書處 (請轉交全體立法會議員):

TO PROTECT THE PUBLIC HEALTH,
THE GOV. NEEDS TO INCREASE THE
E-CIGARETTES RESEARCH FUND &
EDUCATE THE PUBLIC ABOUT
THE RISKS TO THE E-CIGARETTES.

姓名: _____

學生/家長/在職人士/其他

Novel tobacco products (eg. e-cigarettes, heat-not-burn) are marketed as fashion and high-tech products in order to attract non-smokers apart from smokers. Youths will be at higher risk to initiate using these products.

姓名: Wu Yung-shu

學生/家長/在職人士/其他

The government has a responsibility to educate the public about the risks to health of e-cigarettes and other new tobacco products.

姓名: Tan Jian

學生/家長/在職人士/其他

The public is easily misled by scientific research data produced by the tobacco industry. The government is urged to strengthen education to increase understanding of the health risks of e-cigarettes and other new tobacco products.

姓名: Will Chun

學生/家長/在職人士/其他

All of the non-combusted tobacco products were found to contain Class 1 carcinogens. The government should completely ban e-cigarettes and other new tobacco products.

姓名: 黃穎

學生/家長/在職人士/其他

The Government Laboratory in 2017 showed that the amount of tar and nicotine in the non-combusted tobacco products was similar to that of traditional cigarettes. The government should completely ban e-cigarettes and other new tobacco products.

姓名: HUANG YING

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

Please enact the ban of e-cigarettes to protect Hong Kong young generations.

姓名:

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

E-cigarette was confirmed to contain carcinogens; yet population is not widely aware of its health risks. The government needs to pay attention to the harmful effects of e-cigarettes to protect public health.

姓名: In 偉

學生/家長/在職人士/其他

E-cigarettes contain toxic substances and nicotine, so they are not effective smoking cessation tools or help to quit smoking.

姓名: DENG YIQI

✓ 學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

E-cigarettes are more attractive to children and young adults, who are the future of development nation. A ban of e-cigarettes would protect their health.

姓名: Xu Hui

☒ 學生/家長/在職人士/其他

The use of e-cigarette addiction by the public is serious. Long-term use of e-cigarettes increases the risk of heart and lung disease, cancer, and other diseases associated with smoking. The government should legislate a comprehensive ban to protect public health.

姓名: WU QIONG

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

The sale of e-cigarettes is already banned in many developing countries in the world. Government of Hong Kong needs to impose a ban of e-cigarettes to protect population health.

姓名: Lam Rok Him

學生/家長/在職人士/其他

Second-hand and third-hand smoke from e-cigarettes can introduce toxic substances to bystanders. Government should enforce a ban on e-cigarettes to protect population health.

姓名: Wong Chun Ming

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6251)

By banning e-cigarettes, government would prevent the inititaion of e-cigarettes and other tobacco products by non-smokers and youths.

姓名: Sha Chun Man

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

To minimise potential health risks to e-cigarettes users, authorities should impose a ban of e-cigarettes sales.

姓名: James

學生/家長/在職人士/其他

The Government should enact legislation to completely ban e-cigarettes sale and manufacture to protect non-smokers and bystanders from toxic substances and nicotine contained in second-hand and third-hand smoke.

姓名: 高煥煥

學生/家長/在職人士/其他

Electronic cigarette is proved not a safe smoking cessation method since it contains formaldehyde and heavy metals. The health risks are too high to trade-off population health.

姓名: 白晝端

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6255)

The Government should immediately ban all e-cigarettes and other new tobacco products, increase education funding and support e-cigarette research, so that young people can fully understand the different harmful chemicals and carcinogens produced by e-cigarettes and other new tobacco products.

姓名: 陈丽扬
學生

香港身為全球吸煙率最低的城市之一，不應該因為新興的尼古丁產品而破壞多年降低吸煙人口工作的成果。

姓名: 林 暉

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Hong Kong has one of the lowest smoking rate, we should keep these new nicotine products at bay so the many years of public health hard work would not go to waste.

姓名:


學生/家長/在職人士/其他

E-cigarettes are labeled as “hip” and stylish, just like cigarettes did. The government should totally ban these products so we would not create a whole new generation of smokers.

姓名: _____

學生/家長/在職人士/其他

E-cigarettes phenomenon in US is already out of the government's control.
Hong Kong should not repeat this mistake by not banning it.

姓名: 王哲

學生/家長/在職人士/其他

電子煙和其他新煙草產品是煙草公司吸引及荼毒新一代煙民的產品，我們不可能接受。

姓名: Lijun Liao

學生/家長/在職人士/其他

無論是煙或電子煙，都一樣危害大眾健康，政府應盡其能力禁止市民接觸這些產品。

姓名: Chang-jen Li
學生/家長/在職人士/其他

美國的青少年電子煙問題已經不可控制，香港絕不能步其後塵，令香港青少年成為新一代的尼古丁受害者。

姓名: 康宇

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

Government should educate the population to not mistake e-cigarettes as smoking cessation tools but a threat to public health.

姓名:

Wang Shuy

學生/家長/在職人士/其他

Smoking e-cigarettes not only increases the risk of cardiovascular disease, but also increases respiratory symptoms. To protect public health, government has to increase the e-cigarette research fund and educate the public about the risks of e-cigarettes.

姓名: Xue Xian

學生/家長/在職人士/其他

To protect public health, please legislate as soon as possible to completely ban e-cigarettes and other new tobacco products.

姓名: Mo Yulan

學生/家長/在職人士/其他 ☒

E-cigarettes are just as toxic and carcinogenic as conventional cigarettes, do not mistake e-cigarettes as a smoking cessation tool to conventional smoke.

姓名: Eliza

學生/家長/在職人士/其他
✓

The use of e-cigarettes not only harms the health of the users, but also affects others by second-hand and third-hand smoke. The government should legislate to completely ban e-cigarette sales to protect public health.

姓名: Lily Ng

~~學生/家長/在職人士/其他~~

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6268)

To protect the next generation, the government must increase education funding and support e-cigarette research.

姓名: Summer Lau

學生/家長/在職人士/其他

The use of electronic cigarettes is addictive, and it is not a substitute for “smoking cessation”. Therefore, the government must legislate to completely ban its sales.

姓名: GONG Xianghui
學生/家長/在職人士/其他

Government should remove public misleading of e-cigarettes and enhance awareness of the health risks of e-cigarettes and other new tobacco products.

姓名: Nicky Ho
☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

支持香港全面禁止電子煙
因為它含有重金屬

姓名: Penny Chung (Cheng Yan Chi)
☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

I support the ban on e-cigarette !

姓名: Peter Chan

學生/家長/在職人士/其他

I support the ban on e-cigarette!

姓名: Winnie Tse

(學生)/家長/在職人士/其他

支持香港全面禁煙!

姓名: Joy Kwok

☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

吸煙危害健康, 請禁止電子
煙及其他新煙草產品!
保障市民健康!

姓名: Cherry Chan

學生/家長/在職人士/其他

Cherry

Quality of e-cigarettes without control would contain dangerous health risks for users. Government needs to enforce e-cigarettes to control its sale and quality.

姓名: Keen Lee (LEE KAM LING)

學生/家長/在職人士/其他

促請政府及早修例，任何人不得在禁煙區內使用草本煙及電子煙。

姓名: _____

學生/家長/在職人士/其他

Ho Long Kuan

香港海關和警察一直廉潔奉公。政府絕對有足夠資源打擊私煙，包括未來走私電子煙及其他煙草產品。

姓名: 李曉嵐

學生/家長/在職人士/其他

現時全球各地有各式各樣戒煙服務及產品。電子煙及其他煙草產品未能通過臨床證明。政府須要投放更多資源，宣傳及提供到位的戒煙服務。

姓名: WING SU CHAN ✓

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

政府有責任改善空氣質素。控煙絕對是必不可少的一環。

姓名: IP CHEUK YING 4

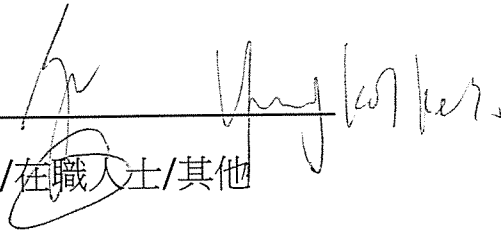
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

除了癌症、心臟病、中風外，牙患、智力缺陷和男女生殖問題都與吸煙有關。我們需要長遠禁止所有煙草產品，保障每一個人健康。

姓名: _____

學生/家長/在職人士/其他

A handwritten signature in black ink, appearing to be 'Vincent', is written over a horizontal line. Below the line, the text '學生/家長/在職人士/其他' is printed.

致立法會秘書處 (請轉交全體立法會議員):

使用電子煙、加熱煙的問題已經是世界衛生組織所定的共識。實施全禁符合歷史潮流。

姓名: 梁競倩

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

促請政府在立例管制電子煙同時，亦多關注電子煙草產品生產及供應商改變電子煙包裝及外觀，經其他途徑繼續銷售，危害市民健康。

姓名: 黃麗敏

學生/家長/在職人士/其他

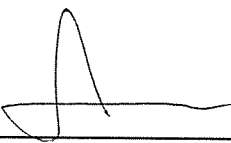
促請政府正視電子煙草產品銷售商在廣告宣傳中誇大不實及誤導消費者的內容。

姓名: Lucy Wong Man Lee

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

政府應參考世衛二零一八年第八屆公約締約方會議決定，加強管制、限制製造、進口、分銷、推介和銷售電子煙草製品，以保障市民健康。

姓名:  Suen Oi Sze

~~學生/家長/在職人士/其他~~

致立法會秘書處 (請轉交全體立法會議員):

為防止青少年抵受不住電子煙時尚包裝及廣告誘惑而嘗試吸食，政府應加快禁止電子煙草產品進口及銷售。

姓名: SHAM Tsz WING

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6287)

除了全禁電子煙外，還要訂立全禁煙仔在內所有煙草產品時間表。政府須把握時機，全面檢討現行控煙教育及戒煙服務的內容。

姓名:

TSE SIU-CHUNG LAM

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙草產品製造商至今沒有披露其產品的釋放物詳細資料，已對吸食者健康已經構成傷害，更威脅吸食二手電子煙者的健康，希望政府及有關部門關注。

姓名: Wendy Teng
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

若政府仍未對任何電子煙產品作出規管，市民可能會視吸食電子煙為可接受及合法的行為，長遠會拖累市民整體健康水平，增加社會醫療風險。

姓名: TONG Hoi Ting Q:

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

How many have thought about the frustration and disappointment of people with smoker family members? Banning all e-cigarettes and other new tobacco products is helping those families, to further advise or convince their family members to quit smoking.

姓名: Chan Sum Ying

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

擔心重蹈覆轍，好似食煙仔一樣遺害人間。

姓名: 李銳桐

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙同其他另類煙草產品可能真是煙仔替代品：誘發多種嚴重疾病另類根源。

姓名: 李皓怡.

學生/家長/在職人士/其他

我們要多管齊下，減低醫療開支、公立醫院專科及急症室的輪候時間。

沙華樂

姓名: _____

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6294)

避免將抽煙合理化，向下一代傳遞錯誤信息。

姓名: 羅素靜

☒ 學生 / 家長 / 在職人士 / 其他

致立法會秘書處 (請轉交全體立法會議員):

If teachers and parents want to teach students and children to be away from any harmful addiction in life, should the government do something at the same time to ban addictive harmful products in the market? The total ban on e-cigarettes and other new tobacco products is something that the government can do now.

姓名: SHIH PY

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Smoking is not just an issue of an individual. It may harm a social as a whole eventually. If not doing something now to control it, especially the e-cigarettes and other new tobacco products, the situation must be more much difficult to control later.

姓名: FONG CHUN HO

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

If not banning e-cigarettes and other new tobacco products, people can market it legally! It means to acknowledge & accept such products in our society. Some must be influenced to smoke. Banning them to stop the bad influence from the public media as soon as possible is a way to disapprove such harmful product in our society!

姓名: Fuly HC.

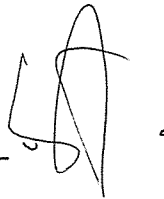
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Where is the logic that banning harmful addictive product in market means taking away one's freedom? If something is not good to people and a society, it'd be the issue of 'right and wrong' more than 'freedom'.

姓名:

HO SAT7 NUT



學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

There must be people objecting the total ban of all e-cigarettes and other new tobacco products. Should something be harmful to our society and people, shall they be banned? No new laws can be passed in 1 day. If our government don't set any timeline for the legislation now, how much longer shall our city live with the e-cigarettes and other new tobacco products?

姓名: _____

學生/家長/在職人士/其他

藍國軒

致立法會秘書處 (請轉交全體立法會議員):

Action speaks louder than words! If a smoke free Hong Kong is a common objective for everyone, why do not the government action sooner, banning all e-cigarettes and other new tobacco products to build a clean city now?

姓名: n Ho Chung kin

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

To support smoking prevention and cessation in Hong Kong, banning all e-cigarettes and other new tobacco products is definitely in line with this.

姓名: Hannah Tse

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

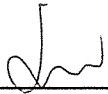
How sad to see young people smoking e-cigarette! Our government Should do something to protect our innocent younger generation by laws, to ban the e-cigarettes and other new tobacco products totally

姓名: Y C Wong

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Prevention is better than cure! For the good of all HK people, why not banning all e-cigarettes and other new tobacco products now instead of investing more resources for smoking cessation later? We all can survive well without cigarette or any tobacco product.

姓名: 

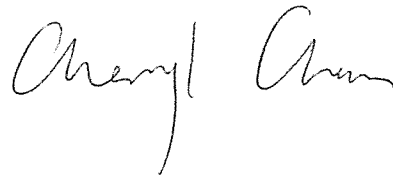
(學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

大部份電子煙包裝都沒有列明詳細成份，化學物質在加熱後會變為其他對人體有害成份，這已對吸食者及旁人健康構成極大風險。為保障市民，促請政府立法禁售。

姓名: Cheryl Chan

學生/家長/在職人士/其他



致立法會秘書處 (請轉交全體立法會議員):

政府食物及衛生局應加強宣傳電子煙並非戒煙工具或可以幫助戒煙，擊破
電子煙銷售宣傳的謊言，提醒誤信的市民。

姓名: 姜祥

學生/家長/在職人士/其他

姜祥

致立法會秘書處 (請轉交全體立法會議員):

二零一六年港大公共衛生學院有關學校吸煙情況統計調查發現，有小學生曾吸用電子煙，政府不能漠視，促請加快立法杜絕吸食電子煙風蔓延。

姓名: _____

學生/家長/在職人士/其他

譚國成

希望政府成功立法全面禁止電子煙進口、銷售。亦希望其後能打擊非法售賣的問題。

姓名: 王芝璇

王芝璇

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

政府應呼籲各類型活動，應盡量避免接受電子煙草產品生產商的贊助及經費補貼。以免誤導市民相信及嘗試吸食電子煙。

姓名: 李碩

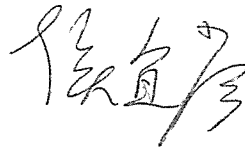
學生/家長/在職人士/其他

李碩

致立法會秘書處 (請轉交全體立法會議員):

電子加熱煙的電子金屬組件在加熱後會釋放有害金屬物質，長期吸入後對人體的傷害必定嚴重。請政府盡早通過全面禁售。

姓名: 侯宜亨



學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

吸煙損人不利己；禁煙不需要理由。促請政府盡快立例禁止電子煙銷售。

姓名: 張琦韻
學生/家長/在職人士/其他



致立法會秘書處 (請轉交全體立法會議員):

為左唔食煙同埋食煙嘅人嘅健康，政府應該拿拿聲禁加熱煙同電子煙啦，
唔通要等到周街嘅人都係度食先做野？


姓名: Ningyuen Guo

學生/家長/在職人士/其他

Ningyuen Guo

致立法會秘書處 (請轉交全體立法會議員):

政府要儘快立法全面禁止電子煙及
其他新煙草產品包括加熱非燃燒煙
草產品,以保障公眾健康。

姓名: 李嘉祐 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙及其他新煙草產品均含有害化學物質及致癌物，存在健康風險，政府要儘快立法全面禁止電子煙。

姓名: Carrie Chan

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

有不少人會因為使用電子煙及其他
新煙草產品而轉吸煙仔，政府要儘
快立法全面禁止電子煙。

姓名: _____



學生/家長/在職人士/其他

Lau Man Yee

致立法會秘書處 (請轉交全體立法會議員):


電子煙及其他煙草產品存在健康風險，
政府要儘快立法全面禁止電子煙。

姓名: 陳錫儀 SY Chen

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

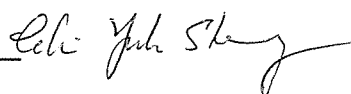
很多電子煙及其他新煙草產品證實含有
致癌物，促請政府儘快立法全面禁止電
子煙。

姓名: LEUNG KIN WAI 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

煙草本身具有毒性，即使天然形式的煙草
也有致癌物，因以所有形式的煙草使用都有
害，政府要儘快立法全面禁止電子煙。

姓名: CHI Yuk SHUN 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙及其他新煙草產品含有有害物質，
政府應訂立全面禁煙時間表，並儘快
立法全面禁止電子煙，實現無煙香港。

姓名:

葉子傑

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

沒有證據顯示電子煙及加熱非
燃燒煙草產品較傳統捲煙能減
少健康風險，所有煙草都有害健康，
政府要儘快立法全面禁止電子煙。

姓名: 鄧仲頌
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):


很多研究證實電子煙含有有害物質可嚴重
影響健康,促請政府儘快立法全面禁止電
子煙。

姓名: Myra Wang Kw

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

根據世界衛生組織所指沒有證據顯示
電子煙及加熱非燃燒煙草產品較傳統
捲煙的危害少，促請政府全面禁止電子煙。

姓名: ADA CGG 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

避免使用電子煙及加熱非燃燒煙
草產品成為年輕人吸煙的門檻，
政府要儘快立法全面禁止電子煙。

Alk

姓名: _____

Alvin Kwan

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙及新煙草產品常被推廣為能減少健康風險，但所有煙草都含有害化學物質及致癌物，對身體健康有害，政府要儘快立法全面禁止電子煙。

姓名: 李卓人

~~學生/家長/在職人士/其他~~

致立法會秘書處 (請轉交全體立法會議員):

政府應增加撥款支持社會各界推廣電子煙及其他煙草產品對健康的風險，讓市民明白電子煙及其他新煙草產品的危害，並儘快立法全面禁止電子煙。

姓名: LZ

學生/家長/在職人士/其他

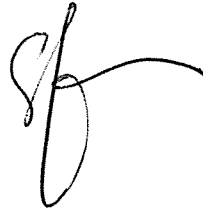
謝 Connie

致立法會秘書處 (請轉交全體立法會議員):

有不少年青人會因為使用電子煙而開始接觸煙草產品，政府應儘快立法全面禁止電子煙。

姓名: KAM MAN HON

學生/家長/在職人士/其他



致立法會秘書處 (請轉交全體立法會議員):

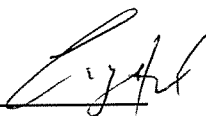
市民容易被煙草業所製造的科學研究數據及宣傳所誤導，政府應加強教育，使市民明白有關電子煙及其他新煙草產品的危害，並儘快立法全面禁止電子煙。

姓名: Leung Kwai Fan

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

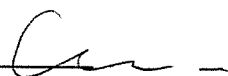
電子煙並非認可的戒煙工具或
幫助戒煙，政府應儘快立法全
面禁止電子煙。

姓名: 溫榮之 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

政府應增加電子煙研究基金，防止市民用
電子煙，並要儘快立法全面禁止電子煙，
保障公眾健康。

姓名: Chow Lai Yan 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子煙及其他新型煙草產品一樣含有致癌物質，宜家都有證據證明電子煙或者加熱煙係健康過普通捲煙。政府要快啲做野 ban 曬佢地，同埋確定個時間表連食煙都禁埋。

姓名: 黃 Daisy 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

加熱煙都未開始正式有得賣就已經甘多人用，點可以正式引用，如果唔係咪仲多人用，分分鐘成堆後生仔開始曬食。仲有啲電子煙，小學生就有開始食，啲水果味之類咪就係想吸引佢地遮。宜家唔禁仲等幾時啊！

姓名: _____

學生/家長/在職人士/其他

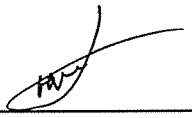
致立法會秘書處 (請轉交全體立法會議員):

In order to improve the health of both smokers and non-smokers, the government of HKSAR should ban electronic cigarettes, heated tobacco products as well as other novel tobacco products ASAP.

姓名: Wai To Wai Lok Zai
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

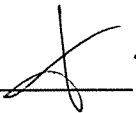
E-cigarettes and Heat-not-Burn tobacco produce various toxicants and deliver a similar level of nicotine, and are no doubt very harmful and addictive. Our government should implement a total ban on these novel tobacco products.

姓名: Wai Sun 

~~學生~~/~~家長~~/~~在職人士~~/~~其他~~

致立法會秘書處 (請轉交全體立法會議員):

To protect the next generation of Hong Kong people, smoking should be eliminated with a predefined schedule. The first step should be these novel products which have not become an epidemic in Hong Kong yet.

姓名: Kenn Luk 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Government should practice smoke-free policies to protect non-smokers from secondhand smoke, hence protect population health.

姓名: 何嘉俊 何嘉俊

學生/家長/在職人士/其他

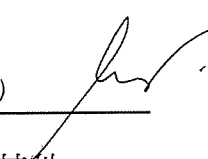
致立法會秘書處 (請轉交全體立法會議員):

Younger generation is more susceptible to e-cigarettes adverse impacts. For the sake of the new generation's health, government must completely ban these products.

姓名: Chan Wing cheng Joanna
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Misleading information by tobacco companies would encourage more users, especially young population. Government needs to increase funding on tobacco control program to enhance awareness of health risks of e-cigarettes.

姓名: TEO QI WEN 

☒ 學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

WHO considers that all forms of tobacco use, including the use of e-cigarettes, are harmful. Hong Kong government is advised that e-cigarettes and other non combustible products should be subject to policy and regulatory measures to protect public health.

KANMANI CHANDRA RAJAN

C. Kanmani

姓名: _____

學生/家長/在職人士/其他

Hong Kong government is advised by WHO that e-cigarettes and other non combustible products should be subject to policy and regulatory measures to protect public health.

姓名: 陳顯雯 陳顯雯

學生/家長/在職人士/其他

1

致立法會秘書處 (請轉交全體立法會議員):

Tobacco industry advocated lower toxicant levels in e-cigarette compared to tobacco smoke without clear scientific research on safe tolerance limits for smoke constituents or their specific effects on the multiple diseases caused by smoking. Government needs to promote funding for tobacco control program to educate population about e-cigarettes' health risks.

姓名: 陳明德 陳

致立法會秘書處 (請轉交全體立法會議員):

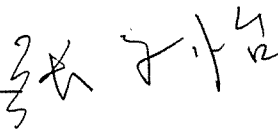
The Government's test on e-cigarettes purchased from the market detected harmful chemicals such as formaldehyde, a carcinogen, in many of the samples. It is high time for government to take action on the ban of e-cigarettes to protect population health.

姓名: Julie Li Julie

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

The Hong Kong Baptist University tests in 2015 on the aerosol of e-cigarettes detected formaldehyde (a carcinogen) and heavy metals, which posed the harmful effects of e-cigarttes to health. A ban of e-cigarettes and other non combustion tobacco products is needed to protect population health.

姓名: 張子怡 
學生/家長/在職人士/其他


致立法會秘書處 (請轉交全體立法會議員):

The danger of second-hand and third-hand smoking is very present in bystanders of e-cigarettes smoking. A ban of e-cigarettes is needed to protect population health.

姓名: Michelle Chan 
學生/家長/在職人士/其他

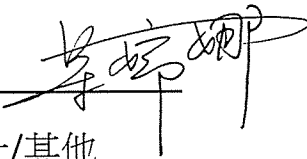
致立法會秘書處 (請轉交全體立法會議員):

The use of e-cigarettes becomes addictive with the presence of nicotine and increases cardiovascular risks. A ban of e-cigarettes and other non combustion tobacco products is needed to protect population health.

姓名: Timothy Cheng 
☒ 學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Please enact the ban of e-cigarettes to protect both users and non-users well-being.

姓名: 梁婷娜 
學生/家長/在職人士/其他

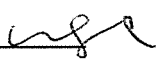
致立法會秘書處 (請轉交全體立法會議員):

Cessation purpose of e-cigarettes is being inaccurately promoted by tobacco companies to encourage more users. Government needs to control the sale of e-cigarettes to protect population health.

姓名: Carel Wong 區志軒
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

Government should completely ban e-cigarettes and other new tobacco products to protect the health of the next generation.

姓名: Weng Xue 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):


政府應該全面禁止煙草產品宣傳,並儘快立法
禁止電子煙及其他新煙草產品,預防年青人會因
為使用電子煙而開始接觸煙草產品。

姓名: 馮凱勳 Stephen Fung

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

In order to protect public health, government should increase funding to support the e-cigarette research fund and enact a comprehensive ban on e-cigarettes.

姓名: Cho Wing Chi 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

電子烟含有有害化學物質及致癌物，並非安全有效的戒烟工具，政府應儘快落實立法全面禁止電子烟。

姓名: 葉家品



☒ 學生 / ☐ 家長 / ☐ 在職人士 / ☐ 其他

Tobacco control and education program should be promoted by government to protect population health.

姓名: Hsieh Chi Yu Ruan

學生/家長/在職人士/其他

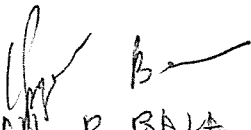
致立法會秘書處 (請轉交全體立法會議員):

Some people profess e-cigarettes and other new tobacco products may help smokers kick a tobacco habit, yet local doctors say these products are too new to properly understand their harms and benefits. Thus, these products should be totally banned in Hong Kong.

姓名: Grace Yew Grace Yew

學生/家長/在職人士/其他

Some people profess e-cigarettes and other new tobacco products may help smokers kick a tobacco habit, yet local doctors say these products are too new to properly understand their harms and benefits. Thus, these products should be totally banned in Hong Kong.

姓名:  VIVIAN P. BALALA

學生/家長/在職人士/其他


致立法會秘書處 (請轉交全體立法會議員):

E-cigarettes and other new tobacco products are advertised as trendy products attracting particularly the teenagers to try. E-cigarettes end up becoming a gateway to tobacco smoking among youngers. The government should thus enact a total ban on these products.

姓名: Dr. Jojo Kwok

學生/家長/在職人士/其他

No tobacco product is safe. Harmful chemicals were also found in e-cigarettes and other new tobacco products, bringing health risks to the public. A total ban on these products should thus be enacted.

姓名: 林焜霞 

學生/家長/在職人士/其他

Encouraging people to take e-cigarettes which will lead to addiction is no different from encouraging people to try alcohol or illegal drugs in the hope that they will never become dependent and start to suffer problems of substance abuse.

姓名: WEN DENG

學生/家長/在職人士/其他

Some people profess e-cigarettes and other new tobacco products may help smokers kick a tobacco habit, yet local doctors say these products are too new to properly understand their harms and benefits. Thus, these products should be totally banned in Hong Kong.

姓名: JENNIFER B. VELASCO

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

有不少人錯誤將電子煙視作戒煙工具或幫助戒煙，但卻沒有全面了解電子煙對健康所產生的風險，所以政府要儘快立法全面禁止電子煙。

姓名: LAM Hoi Yi

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

政府要增加電子煙及其他新煙草產品對健康風險的宣傳，並儘快立法全面禁止電子煙，保障公眾健康。

姓名: _____

鄭詩均

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

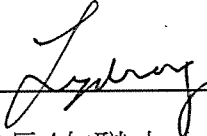
為保障公眾健康，請政府增加撥款支持
電子煙研究基金，並儘快立法全面禁止電
子煙。

姓名: Yanki Wang

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

政府應該儘快立法全面禁止電子煙及其他
新煙草產品，以守護下一代的健康，實現無煙
香港。

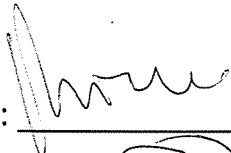
姓名:  NG YUEN KIU.

~~學生/家長/在職人士/其他~~

致立法會秘書處 (請轉交全體立法會議員):

許多研究證實電子煙含有有害物質可嚴重
影響健康，為保障公眾健康，政府應儘快
立法全面禁止電子煙。

姓名:

 (Shuen Man Tung Michelle)

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

促請 政府 增加 電子煙 研究基金 及 教育 市民
有關 電子煙 及其他 新煙草產品 對健康的風險，
並儘快立法 全面禁止 電子煙。

姓名: Alison Ip

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

為保障公眾健康, 促請政府儘快立法全面
禁止電子煙。

姓名 Lo Ka Man
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

大部份電子煙及其他新煙草產品被證實
含有致癌物，對身體存在健康風險，促請政府
儘快立法禁止電子煙。

姓名: Pakru 鄭嘉文

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):


為保護下一代的健康及實現無煙香港，
促請政府增加電子煙及其他新煙草產品對健康
風險的戒煙宣傳，並儘快立法全面禁止電子煙。

姓名: Sit SHIRLEY SIT.

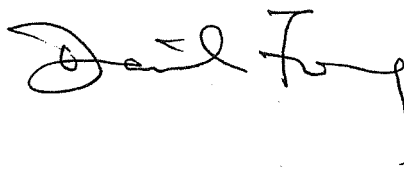
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):

煙草商聲稱加熱非燃燒煙草製品釋出的化學物較傳統捲煙少，對身體的危害亦相對低，意圖淡化吸煙對身體帶來的傷害。香港政府應全面禁止電子煙及其他新煙草產品。

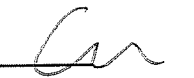
姓名: MANDY H 
學生/家長/在職人士/其他 13/3/2018

目前還沒有證據顯示減少對煙草化學物質的暴露會降低人類的健康風險，
只有禁止電子煙、加熱非燃燒煙草製品及其他新煙草產品，才能防患於未然。

姓名: Daniel Fong 
學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員):


電子煙、加熱非燃燒煙草製品及其他新煙草產品宣稱健康、無害或較少害處，加上新穎的包裝設計及不同的味道，尤其吸引年輕人使用。因此，政府應立法全面禁止電子煙及其他新煙草產品。

姓名: CHOW PJ LANCY 

學生/家長/在職人士/其他

電子煙及其他新煙草產品可能會令人上癮，因此政府應立法全面禁止電子煙及其他新煙草產品。

立法會CB(2)1214/18-19(6369)號文件
LC Paper No. CB(2)1214/18-19(6369)

姓名: Chau Pui Hing 

學生/家長/在職人士/其他

致立法會秘書處 (請轉交全體立法會議員): LC Paper No. CB(2)1214/18-19(6370)

E-cigarettes are just new products from the tobacco company to keep the new generation of people addicted to nicotine, and we should not accept it.

姓名: 丁 豪

學生/~~家長~~/~~在職人士~~/~~其他~~

香港中區立法會道1號

立法會綜合大樓

立法會秘書處

《2019年吸煙(公眾衛生)(修訂)條例草案》委員會秘書

贊成《2019年吸煙(公眾衛生)(修訂)條例草案》
立法全禁另類吸煙產品

全面禁止另類吸煙產品刻不容緩，政府應盡快通過。

立法的目標是要保護青少年免受另類吸煙產品的毒害，不是懲罰受引誘的十八歲以下人士，我們長遠目標是無煙香港、無煙世界，而重要的一步就是防患於未然，禁止另類吸煙產品立足香港，現在是唯一機會禁止另類吸煙產品遺禍世世代代香港人，歷史之覆轍不宜重蹈。

另類吸煙產品對健康有害，電子煙釋出的超微細顆粒會沉澱在肺部，令肺組織慢性發炎，可以增加患病、患癌的機會，電子煙和傳統煙一樣增加心臟病發率，同時吸食傳統煙和電子煙的人士心臟病發率就高於非吸煙人士4.6倍，加熱煙本身就是煙草，所釋出的尼古丁、焦油分量與傳統煙大同小異。另類吸煙產品亦禍延下一代。另類吸煙產品對人體有害不限於對小朋友，對成年人也一樣有害，香港人的平均壽命超過80歲，18歲開始吸食就有60多年的煙齡，足以嚴重影響健康，香港有8.7%的中學生曾經吸食電子煙，而且人數在繼續上升。

另類吸煙產品無助戒煙。沒有堅實的證據證明另類吸煙產品有助戒煙。大部分研究報告顯示電子煙無助戒煙，甚或減低戒煙的成功率，香港以至世界各地的醫學研究證明，非吸煙者一旦開始吸食電子煙，將來便有更大的意欲吸食傳統煙，直至目前為止，沒有任何證據證明電子煙所帶來的健康風險少於傳統煙。

Laurence Pang
04/01/2019

香港中區立法會道1號
立法會綜合大樓
立法會秘書處

《2019年吸煙(公眾衛生)(修訂)條例草案》委員會秘書

支持《2019年吸煙(公眾衛生)(修訂)條例草案》
歡迎特區政府全禁另類吸煙產品

本人表示贊成有關議案, 希望政府能全面禁止另類吸煙產品。

我們長遠目標是無煙香港、無煙世界, 而重要的一步就是防患於未然, 禁止另類吸煙產品立足香港, 香港仍有60多萬人每天吸煙, 因此傳統煙不是一時間可以全面禁止。然而, 無煙香港的長遠方向明確, 因此先禁電子煙和另類吸煙產品與無煙香港的長遠方略一致, 任何吸煙產品不含任何人體需要的成分, 也沒有正面社會功能。

另類吸煙產品對健康有害, 加熱煙本身就是煙草, 所釋出的尼古丁、焦油分量與傳統煙大同小異, 研究確定二手電子煙內含有害物質, 表面上濃度不高, 但是由於電子煙沒有濃烈煙味, 旁人容易暴露在二手電子煙內很久而不自知, 如果不吸煙人士聞到濃烈煙味用5秒時間離開的話, 接觸二手煙就是5秒。但如果逗留在氛香的電子煙味裡等了10分鐘巴士, 就算電子煙的危害物質一如某些報告所指只有傳統煙的5%, 他接觸到的危害物質就足足6倍於傳統煙。另類吸煙產品亦禍延下一代。另類吸煙產品對人體有害不限於對小朋友, 對成年人也一樣有害, 電子煙嚴重影響健康, 大大減低社會生產力, 並巨幅增加社會醫療開支, 香港有8.7%的中學生曾經吸食電子煙, 而且人數在繼續上升。

另類吸煙產品無助戒煙。沒有堅實的證據證明另類吸煙產品有助戒煙。大部分研究報告顯示電子煙無助戒煙, 甚或減低戒煙的成功率, 最近在新英格蘭醫學雜誌刊登的一份研究顯示, 絕大部分以電子煙戒煙的人士只是變成了電子煙民, 而並非完全戒煙, 直至目前為止, 沒有任何證據證明電子煙所帶來的健康風險少於傳統煙。

Sammi Yu
04/03/2019

Apr 4, 2019

Clerk to Bills Committee on Smoking (Public Health) (Amendment) Bill 2019
Legislative Council Secretariat
Legislative Council Complex,
1 Legislative Council Road,
Central, HK

Dear Chairman KWOK Wai-keung,

Re: Bills Committee: Regulate Alternative Tobacco Products Instead of Ban

I am writing to express my view to the Bills Committee to reconsider regulating alternative tobacco products Instead of Ban.

I understand that the Hong Kong government has proposed a new bill to implement a complete ban on heated tobacco products. Such ban is not practical as there are other ways in which smokers can still purchase the products in the black market and will only encourage more illicit trade. The illicit trade activities hinder us from understanding the market with a clear and complete view. Therefore, it is believed that, through regulation, it will be able to have a better control and monitoring in the industry.

Thank you for your consideration.

Yours faithfully,

A handwritten signature in black ink, appearing to be 'Chun Sh' followed by a long horizontal stroke.

Dear Mr. Kwok Wai Keung,

My name is Peter and I have been a smoker for over 30 years.

I tried IQOS as it has no smell and ash which gets less harm to the environment. This product is using the new technology with heat instead of burn; as a result it can prevent any accident of burning things or body which has less harm to the public.

My family also allows me to use this product instead of cigarettes, which it brings no smell and ash at home and my kid is willing get close to me.

Knowing that HK government is planning to ban this product to sell which does not make sense. A lot of Western and Asian countries are selling this product in the market. HK health department cannot prove this product is more harmful than traditional cigarette. I have no idea why HK government ban on selling this product in a free economy market. Would it be better to regulate it instead of ban?

Apr 4, 2019

Clerk to Bills Committee on Smoking (Public Health) (Amendment) Bill 2019
Legislative Council Secretariat
Legislative Council Complex,
1 Legislative Council Road,
Central, HK

Dear Chairman KWOK Wai-keung,

Re: Bills Committee: Regulate Alternative Tobacco Products Instead of Ban

I am writing to express my view to the Bills Committee to reconsider regulating alternative tobacco products Instead of Ban.

I understand that the Hong Kong government has proposed a new bill to implement a complete ban on heated tobacco products. Such ban is not practical as there are other ways in which smokers can still purchase the products in the black market and will only encourage more illicit trade. The illicit trade activities hinder us from understanding the market with a clear and complete view. Therefore, it is believed that, through regulation, it will be able to have a better control and monitoring in the industry.

Thank you for your consideration.

Yours faithfully,

MARIO

3 April, 2019

Clerk to Bills Committee on Smoking (Public Health) (Amendment) Bill 2019
Legislative Council Secretariat
Legislative Council Complex,
1 Legislative Council Road,
Central, HK

Dear Mr KWOK Wai-keung,

Re: Regulate Alternative Tobacco Products

I am writing to request the Bills Committee to reconsider the proposed ban on e-cigarettes and alternative tobacco products. I believe that regulation is more balanced approach for the Hong Kong Government and for the Hong Kong Citizens.

From what I learned about e-cigarettes and heat-not-burn products, these products may help tackle problems arising from smoking cigarettes in Hong Kong. According to independent scientific evidence, these new type of cigarette products emit significantly less harmful substances than that from traditional cigarettes, with lower health risks to both smokers and non-smokers.

It is believed that the government should allow smokers in Hong Kong have a better smoking option over conventional cigarettes and hope that different voices can be heard and considered before implementing a ban.

Sincerely,

Steven Man



香港胸肺基金會
HONG KONG
LUNG
FOUNDATION

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Hon. Auditor
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名譽會計師：
李湯陳會計師事務所

4 April 2019

A TOTAL BAN on E-cigarettes and heat-not-burn tobacco products

In response to recent potentially misleading campaigns and voices on “regulation” of electronic cigarettes and heat-not-burn tobacco products, Hong Kong Lung Foundation would like to reiterate our firm stance against smoking, including electronic cigarettes, herbal cigarettes and heat-not-burn tobacco and related products.

It is our firm belief that:

1. Any partial or non-comprehensive regulations the HKSAR Government implement on such new products would be inadequate and would provide legitimate pathways for their sales and use in Hong Kong;
2. A TOTAL BAN of the sales of electronic cigarettes, herbal cigarettes, heat-not-burn tobaccos and related tobacco products by legislation is the ONLY solution to safeguard the public especially the young people against their harmful effects on health.

支持「全面禁止」有關電子煙和加熱非燃燒煙草製品

就最近社會出現潛在誤導的聲音，建議政府「規管」電子煙和加熱非燃燒煙草製品一事，香港胸肺基金會重申其一貫反吸煙立場，包括反對電子煙、香草煙、加熱非燃燒煙草製品及相關產品。

我們堅信：

- 一、特區政府單憑立法「規管」有關煙草產品，力度並不足夠；此等無異於容許各種新型煙草產品於本港合法銷售及使用；
- 二、只有立法「全面禁止」銷售電子煙、香草煙、加熱非燃燒煙草製品及其他相關煙草產品，才能真正保障市民(尤其是青少年)之健康。

Dr. CHAN Wai Man Johnny (Chairman)
主席：陳偉文醫生

Dr. KO Wai San Fanny (Secretary)
秘書：古惠珊醫生

立法會秘書處
香港中立法會道 1 號
立法會綜合大樓

致全體立法會議員：

本人懇請全體立法會議員儘快通過「全面禁止電子煙及其他新煙草產品」並促請特區政府訂立全面禁煙的時間表。

過往和現時禁止賣煙給青少年的管制方法完全無效，並導致大多數現時吸煙的成年人在十八歲以前開始染上煙癮。美國早已禁止賣電子煙給青少年，結果是青少年吸電子煙大幅上升，已成大流行病，並且會繼續上升，已經失控。你們的支持可以預防千千萬萬的兒童和青少年變成尼古丁成癮者，每天的拖延，便每天多一批青少年成為電子煙和其他煙商的長期提款機。

懇請全面禁止電子煙和所有新興煙草產品，謝謝！

潘靜
廣州市第十二人民醫院

敬啟者:

本人方少萌支持香港特區政府草案《2019年吸煙(公眾衛生)(修訂)條例草案》，支持全面禁煙，包括電子煙，以保障市民健康。

此致

香港特區立法會

簽名:方少萌

日期:2019年3月23日

主題:

支持全面禁止電子煙及其他新煙草產品，並訂立全面禁煙的時間表。

電子煙及新煙草產品(包括加熱非燃燒煙草製品)被宣傳推廣為潮流玩意，聲稱害處較少，以降低市民對其害處的警覺，吸引不吸煙人士(尤其是年輕人)使用。為防止這些產品可能導致吸煙人士增加，故必須全面禁止，以保護公眾，尤其是下一代的健康。

世界衛生組織已表明電子煙並非認可的戒煙工具，亦沒有證據顯示電子煙及加熱非燃燒煙草製品，較傳統捲煙，更能減少健康風險，或幫助戒煙。同時，越來越多科學證據證實，電子煙及其他新煙草產品均含有害化學物質及致癌物，存在健康風險，對身體健康的影響，實在不容忽視。

而且，電子煙及其他新煙草產品，都會令人上癮，使其使用者終身成為尼古丁的奴隸。現在香港已有不少青少年使用這些產品，如果政府選擇規管而不全禁，等於將這些產品合法化，使更多青少年將會使用電子煙及新煙草產品，到時後果不堪設想。因此政府應在電子煙和其他新煙草產品尚未流行時，儘快跟從世界衛生組織建議，以公眾健康為本，立法禁止這些產品。

世界衛生組織警告，每兩個吸煙者，有一個會被煙草殺害!最新研究更指出，從兒童和青少年開始吸煙，三個之中將會有兩個死於煙草產品所帶來的疾病!

我們身邊已有朋友從使用這些產品轉吸煙仔，更有不少吸煙朋友因為使用這些產品而不願戒煙! 如果政府將這些產品合法化而導致大量青少年使用，只要有三個使用這些產品的青少年之後轉吸煙仔，即是有兩個青少年會無辜被殺害!

為避免使用電子煙及加熱非燃燒煙草產品，及其二手煙霧的潛在健康風險，並避免更多年輕人吸煙，我們在此強烈呼籲政府，儘快立法全面禁止電子煙及其他新煙草產品，包括加熱非燃燒煙草產品，以保護市民免受煙草及二手煙的傷害。同時，我們在此強烈呼籲政府，為全面禁煙訂立時間表，以保障公眾健康，致力邁向無煙香港。

姓名: Sandy Kwan

日期:24-3-2019

Au Yeung Shiu Lun Ryan

Assistant Professor

School of Public Health, Li Ka Shing Faculty of Medicine,

The University of Hong Kong,

1/F, Patrick Manson Building,

7 Sassoon Road, Hong Kong

To whom it may concern,

Re: Support towards the Smoking (Public Health) Amendment Bill 2019

I am writing to indicate my strong support towards the Smoking (Public Health) Amendment Bill 2019. The impact of e-cigarette on health is not well understood given the lack of rigorous epidemiologic studies with sufficient follow up time.¹ Furthermore, some studies have suggested potential gateway effects where young people first initiate e-cigarette use behavior, which will increase their likelihood of using cigarettes later in life.¹ As such, by applying precautionary principle given incomplete evidence and potential gateway effects, I strongly believe that tight measures towards e-cigarettes (as stated in the Amendment Bill) would be the best approach to safeguard public health in Hong Kong. Thank you very much for your attention.

Yours sincerely



Ryan Au Yeung

References

1. Glantz SA, Bareham DW. E-Cigarettes: Use, Effects on Smoking, Risks, and Policy Implications. *Annu Rev Public Health*. 2018;39:215-235.

莫松先生提交的意見書

我支持全面禁止電子煙和其他另類吸煙產品!

我年輕時 20 多歲左右, 因為好奇也因為朋輩影響開始吸煙, 結果現在 60 多歲, 天天咳嗽。另類吸煙產品不是完全無害!

我不希望現在的兒童和青少年被電子煙的外型和香味吸引, 漸漸染上煙癮。

希望香港政府為了下一代的健康着想, 一定一定要全面禁止電子煙和其他另類吸煙產品!!單純的監管是不夠的, 我們見到在美國, 雖有法例禁止向未滿 18 歲人士銷售電子煙, 不過單在 2017 年, 就有逾 200 萬名中學生使用電子煙。我睇新聞都知, 在法國及英國在 2014 年有過半數人同時吸食電子煙和傳統捲煙。為左下一代的健康和清新的空氣, 一定要全面禁止電子煙。

沈琳琍女士提交的意見書

另類吸煙產品,尤其是電子煙越來越流行。作為一個家長,我非常擔心年青人會被電子煙吸引,從而煙癮越來越大。電子煙是有害的。我希望政府全面禁止電子煙,千萬不要讓下一代接觸到,我們一定要保護我們的孩子啊!

From: po ying Chan [REDACTED]
To: "bc_54_18@legco.gov.hk" <bc_54_18@legco.gov.hk>

Date: Monday, April 08, 2019 04:35PM

Subject: 反對全面禁止加熱 煙及電子煙

致立法會秘書處

致全體立法會議員

政府一向粗暴踐踏煙民吸煙的自由，煙民是默然接受，政府變本加厲，今次禁加熱煙更是橫行霸道，蠻不講理，不單是踐踏煙民吸煙的權利，更恣意摧毀香港社會和諧共處，求同存異，互相包容的固有傳統。

禁加熱煙不禁香煙，社會和大部份立法會議員都是認為是不合邏輯，不能接受，但政府一意孤行，全無商量餘地。

禁加熱煙拿了青年人作幌子，說加熱煙包裝時尚，對青少年有吸引力，會誘惑青年先食加熱煙，再去吸煙，當一個社會去到這樣不理性，只是由一些人用個人的觀感，不講理由，不講其他人的感受，只憑自己喜好用公共關係手法製造「民意」，迫政府用立法方式去實行他們自己的價值觀，政府毫不思索接受，香港已經是一腳踏進專制政權之門。

加熱煙是新的產品，將傳統煙的煙害降低，由於不是用燃燒方式，發出的煙味較香煙低，這產品特性為了減低是對吸煙者的健康風險和對旁人的干擾，香港醫學會副會長林哲玄在報章撰寫專文，以加熱煙沒有濃烈煙味做文章，本來香港有言論自由，我們不能批評，但當歪理當真理，我們不能坐視不理。林醫生說：「吸加熱煙等同有人拍你的裙底春光給發現了，對質時狡辯說：『我只是拍攝，根本不會騷擾你，別囉嗦了』。一個醫生，一個跟據科學作判斷受過良好教育的社會領袖，用了這樣的比喻，可以見反加熱煙人士的非理性，非邏輯去到甚麼境界。

從來沒有人說吸加熱煙是無害，說的只是其煙害較香煙少。反煙人士卻轉移視線說加熱煙主要成份是煙草，煙草有尼古丁，尼古丁令人上癮，可是科學上數據從未有說尼古丁會是致癌物質。

希望議員不要盲從附和，以持平、客觀審視《2019年吸煙(公眾衛生)(修訂)條例草案》，剔除剝奪煙民選擇權的條文。

多謝議員明察秋毫。

陳寶瑩

From: Isabel Cheung [REDACTED]
To: bc_54_18@legco.gov.hk

Date: Monday, April 08, 2019 04:40PM
Subject: My reference number is: 8774ACDF.

Hi

本人提倡電子煙合法化

原因：

電子煙比香煙傷害較小，煙味也是
欲減少影響別人情況，電子煙是比香煙容易接受

Isabel

Ref. No. 9EB6F806

香港中區
立法會道1號
立法會綜合大樓
立法會秘書處

致: 《2019年吸煙(公眾衛生)(修訂)條例草案》委員會秘書

就上述議題，本人有以下意見:

並不因為我們是家長，爲了兒童/青少年的未來，我們便跑出來向政府提出禁止賭波、賭馬
因為我相信政府有合理規管已足夠教育兒童，同時平衡到博彩人士的需要，
家長們和政府，你們都做得好！

並不因為我們是醫生，爲了公眾健康及安全，我們便跑出來向政府提出禁止售賣酒類飲品
因為我相信政府有合理規管已足夠保護大眾，同時平衡到飲酒人士的需要，
醫護界和政府，你們都做得好！

並不因為我們是家長，爲了兒童/青少年的未來，我們便跑出來向政府提出禁止肉商售賣
同煙仔有一級致癌物的加工食物如香腸、燒味等
因為我相信政府的呼籲已足夠保護大眾，同時平衡到饕餮人士的需要，
家長們、醫護界和政府，你們都做得好！

爲甚麼家長們，爲了兒童/青少年的未來，你們便跑出來向政府提出禁售電子煙及加熱煙
難度你們不相信政府可以用合理規管及教育方式令兒童/青少年不受接觸新型或舊型香煙，
於是你們便要扼殺和圍堵一班吸煙人士的需要而達成己望

這是現今家長們教育子女的手法嗎？
這是現今政府聽從民意(單向式)的取向嗎？
這是你們想看見今日香港處事的態度嗎？

平衡需要 反對禁售電子煙及加熱煙

謹致

李梁慧斯 家長上
2019年4月8日

抄送: 食物及衛生局
邵家輝議員

To whom it may concern,

立法會CB(2)1214/18-19(6387)號文件
LC Paper No. CB(2)1214/18-19(6387)

I was hit with a bad surprise knowing that Hong Kong is making a policy U-turn on e-cigarette. At the expense of smokers seeking better alternatives, this position is based on a fear of adolescence getting hooked on smoking because more kids having TRIED e-cigarette. But the thought that total banning would do the job, it will be nothing but another futile effort. I represent e-cigarette users in Thailand, and I am hoping that Hong Kong would not make the mistake Thailand did 4 years ago.

Don't get me wrong. I believe minors, teens must be protected. They must be factually educated about associated risks and not allowed access to nicotine in any form. But from what I see in Thailand, such effort cannot be achieved under the total ban, allow me to share what is really happening in Thailand.

Forbidden fruits are sweeter: More scientific studies on e-cigarette coming out these days, suggesting e-cigarette is much better alternative for smokers (though not completely safe). As a support to quit cigarette, many developed countries such as UK, EU include e-cigarette as part of their tobacco control plan. Banning will only make e-cigarette a "forbidden fruit". The demand will drive underground market which is difficult to control. The product safety standard, misleading health claim and illegal products will be uncontrollable. And the worst thing, no proper buyer's ages verification. Smokers has no alternatives, children are not protected this truly defeats purpose of the ban.

Tourism impact: Owning e-cigarette is a criminal offence in Thailand. There are tourists (and locals) getting arrested and constantly reported in the news. The worst part is that e-cigarette becomes a new channel for corruption, the payment made to officials to drop the charge. While most part of the world accepts e-cigarette, total ban drives tourists away. And this is the reason why Thailand ranked the worst place to be for e-cigarette users, from the survey conducted at the annual Global Forum on Nicotine in Warsaw.

Not all the same would happen in Hong Kong, but I am certain that total ban is counter-productive. I believe balanced regulation is the answer. Let's put e-cigarette on the ground so all can monitor and protect children. Let's give smokers a better choice, improve chance for them to quit.

Hong Kong is my travel destination, and I wish it continues to be. I am writing this note with the hope in mind that the ban will be reconsidered. Please don't force me, and millions ex-smokers around the world, to go back and smoke again.



Asa Saligupta

Ends Cigarette Smoke Thailand

TEL. [REDACTED]

立法會CB(2)1214/18-19(6388)號文件
LC Paper No. CB(2)1214/18-19(6388)

From: Lee Barry [REDACTED]
To: bc_54_18@legco.gov.hk, sfhoffice@fhb.gov.hk, info@kennethleung.hk

Date: Monday, April 08, 2019 04:56PM
Subject: Bills Committee on Smoking (Public Health) (Amendment) Bill 2019 (Regulate Alternative Tobacco Products Instead of Ban in Hong Kong)

Submission reference Number : F82B6BF9

Dear Mr. Kwok Wai Keung,

I am writing to you about the recently Hong Kong Government proposed Amendment Bill that was announced on February 13, 2019 to ban e-cigarettes and heat-not-burn products in Hong Kong.

I am not a smoker, however, I know that there are good evidence showing heat-not-burn products such as IQOS are less harmful than cigarettes. Besides, I am no longer suffering from second hand smoking when my friends and others are using IQOS around me.

With the ban, why does the Government want us to revert to smelling to second hand smoke from cigarettes again? This is a choice that both smokers and non-smokers are entitled to have in Hong Kong.

Hong Kong Government should consider all the facts and advantages for this new product which can give a better choice to the smokers or even non-smokers. I understand the concern from Hong Kong Government and other parties which may appeal to minors. That's why I strongly support a proper regulations are required but not ban. This is an effective way to balance benefit to different stakeholders.

Thank you!

Regards,
Lee Chi Ming
Member of HKICPA #A24875

cc:
Sophia Chan Siu-Chee, sfhoffice@fhb.gov.hk
Kenneth Leung, info@kennethleung.hk

From: "Wang, Mei" [REDACTED]
To: "bc_54_18@legco.gov.hk" <bc_54_18@legco.gov.hk>
Cc: [REDACTED] "info@kennethleung.hk"
<info@kennethleung.hk>

Date: Monday, April 08, 2019 03:27PM

Subject: Bills Committee on Smoking (Public Health) (Amendment) Bill 2019

History: ↻ This message has been forwarded.

Dear Mr Kwok Wai Keung,

I hearby to voice out that we need to have Reduced Risk Products in Hong Kong. Traditional consumable smells heavily and impact the environment. The people has the authority to have better choice.

To participate Public Hearing, I have registered, details as below:

registered name: 王雪

email: [REDACTED]

post address: [REDACTED]

reference number: D3695C45

Thank you,

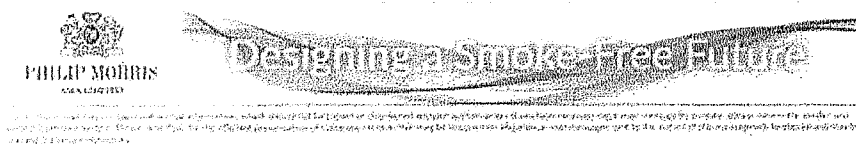
Mei WANG

NPI Leader | PMI Science and Innovation

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[REDACTED]



From: Muni Winslow [REDACTED]
To: bc_54_18@legco.gov.hk
Cc: kwk@ftulegco.org.hk

Date: Monday, April 01, 2019 06:41PM
Subject: Submission from Singapore

To whom it may concern:

Thank you for the opportunity to provide my inputs to the Hong Kong Bills Committee on Smoking (Public Health) (Amendment) Bill 2019.

As a general psychiatry and addictions practitioner, I was responsible for the setting up and development of addiction services both in the Institute of Mental Health, Singapore and the larger community in Singapore since 1993.

There are compelling reasons why people start and continue smoking, including the high non-debilitating re-enforcement effects; genetic vulnerability; mental illness and other addictions; peer acceptance and pressure; adolescent rebellion; family and social modelling; ease of availability and affordability; and the cycle of bio-chemical tolerance and withdrawal effects. In my years of practice, I have seen conventional prevention and cessation strategies fail with many of my patients and struggle to find effective alternative measures until the advent of new nicotine delivery technologies. Whilst these products deliver highly addictive nicotine, they do not involve the hundreds of toxins in burning tobacco smoke.

I can understand that the authorities in Hong Kong are choosing to take a moral stand with the proposed changed but by banning these devices, my view is that it would prevent smokers from improving their own health (and the health of their loved ones) and extending their lives. It is clear that e-cigarettes, heat-not-burn tobacco products, nicotine replacement therapies, Varenicline and bupropion are not 100% safe — however there is a general consensus that they are safer than cigarettes. (This would be a harm minimization programme by giving healthier alternatives to traditional cigarettes)

Particularly on point of these devices being seen as a “gateway” to daily long-term smoking in adolescents – who would not have otherwise been daily smokers – I would note that Public Health England (PHE) has found that the evidence does not support this. The UK youth smoking rate is declining and e-cigarette users were virtually all prior smokers. Similar evidence from the US, shows almost linear associations between increases in e-cigarette use and declining smoking rates among adolescents.

If there are health risks to these devices, a more considered approach would be not to ban but to regulate them carefully, and reduce the risks. These devices can be improved, lowering toxins but increasing the efficiency of nicotine delivery. Regulations can be used to ensure that the devices and consumables are of good quality and safer to use – this can only be done through a transparent and honest dialogue between regulators, practitioners and even the industry which would require more time as we all try to understand the innovations in the field of new nicotine delivery technologies.

Thank you again once.

Yours sincerely,

Winslow

Dr. Munidasa Winslow
MMBS (S'pore), MMed (Psych), FAMS
Senior Consultant Psychiatrist

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From: "Yolanda Tang" [REDACTED]
To: <bc_54_18@legco.gov.hk>
Cc: <sfhoffice@fhb.gov.hk>

Date: Monday, April 08, 2019 12:45PM

Subject: Smoking (Public Health) (Amendment) Bill 2019 - Bills Committee

Dear Ms. Kwok,

We have noticed the recent announcement by the Government to ban e-cigarettes and heated tobacco products. We are writing to express our view that these products should be regulated and allowed to be sold in Hong Kong instead of complete ban.

We have some staff members in our organization who used to smoke conventional cigarettes before but then switched to Heat Not Burn Products. The products were also a relief for the people working with them as there is no second hand smoking as well as bad smell. We have also seen that these Heat Not Burn products have less harmful impact to smokers and their surroundings and more importantly they have less harmful impact to the many non-smokers around them.

As reported in other advanced countries like United Kingdom, we believe these alternative tobacco products can help address the smoking problems in Hong Kong. It will be easier for us to create a more friendly and comfortable working environment for both smoking and non-smoking employees if these alternative tobacco products are allowed in Hong Kong.

We believe that proper regulation on Heat Not Burn products (like what is done for conventional cigarettes) coupled with education will still help to maintain a low smoking incidence as well as prohibit people under 18 years to get access to it.

Hong Kong has positioned itself to become Asia's world city, and we need to explore and welcome new regulated approach to solve old problems. Instead of banning Heat Not Burn products, they should be regulated and allowed to be sold in Hong Kong to the benefits for both smokers and non-smokers.

We would like the Bills Committee members to express our views and opinion as indicated in this letter submission to the Hong Kong Government.

Thank you for your kind attention.

Yours Sincerely,

YOLANDA TANG

Business Development Director



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Bonham Strand Hong Kong Limited
25th Floor, Workington Tower
78 Bonham Strand, Hong Kong

April 8, 2019

The Legislative Council of the Hong Kong Special Administrative Region

Attn: Chairman Kwok Wai Keung

Re: Bills Committee on Smoking (Public Health) (Amendment) Bill 2019

Honorable Chairman Kwok:

This brief is hereby submitted to the honorable Chairman Kwok Wai Keung in connection with the Bills Committee's deliberation of Smoking (Public Health) (Amendment) Bill 2019 (the "Bill") to ban the import, manufacture, sale, distribution and advertisement of alternative tobacco products (the "Ban"), which include e-cigarettes, heated tobacco products (e-cigarettes and heated tobacco collectively, "Non-smoke Alternatives") and herbal cigarettes (collectively "ATPs").

Bonham Strand Hong Kong Limited ("BSH") is a social impact organization focused on issues that impact the working poor and vulnerable women and youth in Hong Kong. We hereby respectfully submit this brief for your kind consideration as part of the Committee's review and evaluation of the Bill.

Youth Related Public Health Issues are Important and Deserve Attention

The Hong Kong Government's stated public health rationale for the proposed Ban is to protect Hong Kong's youth from ATPs and reduce the potential for youth to "graduate" from ATPs to cigarettes. While not comparable to the urgent issues facing the majority of Hong Kong youth such as alcohol abuse, cyberbullying, our education crisis and depression, the underage use of ATPs is an important public health, community and societal issue especially for the lower income working class segment of Hong Kong. Given the wide and inexpensive availability of dangerous combustible alternative products such as shisha pipes and herbal cigarettes and the potential for flavored or drug-laced e-cigarette to appeal to young men and women in Hong Kong, we fully support the government's attention to this matter at this time.

However, based on our research of existing information, materials and publicly available data we respectfully request the Bills Committee's consideration of the following findings. Specifically, a complete ban on alternative tobacco products:

1. **Condemns Hundreds of Thousands of Respiratory Disease Sufferers Who Cannot Stop Smoking to Greater Suffering and Accelerated Mortality;**
2. **Conflicts with Hong Kong's Legal Obligations Under the Convention on the Rights of Persons with Disabilities;**

3. **Disproportionately Hurts Women and Children and Violates The Basic Law, the Hong Kong Bill of Rights Ordinance and International Human Rights Laws;**
4. **Denies Public Health Authorities a Tool to Substantially Reduce the #1 Cause of Mortality and Hospital Utilization in Hong Kong;**
5. **Fails to Acknowledge the Lack of Any Material Evidence that Heated Tobacco Products Pose Any Risk to Hong Kong Youth;**
6. **Inappropriately Treats Non-Smoke Alternatives Equally With Combustible Tobacco Alternatives;**
7. **Rejects and Ignores Hong Kong's Highly Successful and Rational Adoption of Methadone Treatment to Address Heroin Addiction for 40 Years; and**
8. **Unscientifically Imposes Higher Standards of and Durations for Analysis, Research and Study on ASTs than those Required for New Drugs**

Evidence and support of the above findings and opinions are readily discoverable online and specific citations and supporting documentation can be submitted upon request.

Banning Non-Smoking Alternatives to Cigarettes Condemns Hundreds of Thousands of Respiratory Disease Sufferers Who Cannot Stop Smoking to Greater Suffering and Accelerated Mortality.

The Facts:

According to a recent article in the South China Morning Post, 170,000 people in Hong Kong suffer from mild to severe chronic obstructive pulmonary disease ("COPD") and that there are over 30,000 hospital discharges and deaths in Hong Kong annually from COPD alone. By some estimates, up to 90% of all COPD sufferers have been or are active smokers. Combined with other respiratory diseases such as lung cancer and pneumonia, respiratory diseases collectively represent the greatest cause of mortality and hospital utilization in Hong Kong costing the government over HK\$5,000,000,000.

It is widely understood publicly acknowledged by subject matter authorities such as the Hong Kong Lung Foundation that smokers are far more likely to suffer from one or more respiratory diseases such as COPD, pneumonia and lung cancer and that cessation of smoking is a critical part of treating any respiratory disease. Yet, studies show that cessation of smoking is extremely difficult with approximately 80% of smokers who attempt to quit independently relapsing within the first month of abstinence, and only about 5% achieving long-term abstinence.

At the same time, the available research suggests that there is a direct, significant and positive impact on the health outcomes of people afflicted with a respiratory disease who are unable to stop smoking from the substitution of cigarettes with Non-smoke Alternatives. While there is no substitute for pure clean air, science and data support the common sense conclusion that Non-smoke Alternatives are a far better choice than cigarettes and other combustible tobacco alternatives for respiratory disease sufferers who cannot stop smoking.

Point of Concern:

Despite the fact that the medical community agrees that respiratory disease victims need to stop smoking and that the vast majority struggle to do so, the currently Bill seeks to cement an ineffective and harmful “Abstinence Only” approach to respiratory disease treatment when using Non-smoke Alternatives is clearly a superior choice over smoking for the vast majority of sufferers who struggle with or cannot stop smoking. In fact, Non-smoke Alternatives are so much better than smoking we are curious as to why the medical and scientific community are not supportive of a more proactive recommendation to respiratory disease patients to substitute a Non-smoke Alternative for cigarettes for patients who simply cannot quit cigarettes.

Recommendation:

It is our recommendation that the Bills Committee seriously consider an amendment to the current Bill allowing Non-smoke Alternatives (but not combustible tobacco alternatives) to be sold only by licensed pharmacies in Hong Kong much like nicotine gums and patches. Licensed pharmacies are far more likely to effectively ensure that Non-smoke Alternative products are neither marketed to nor sold to minors and are offered to existing adult smokers suffering from a respiratory disease or seeking a solution to stop smoking. Allowing licensed and regulated pharmacies to offer Non-smoke Alternatives also provides the Hong Kong government far greater visibility and control of the availability and pricing of such products.

Banning Non-Smoke Alternatives Conflicts with Hong Kong’s Legal Obligations Under the Convention on the Rights of Persons with Disabilities.

Article One of the Convention on the Rights of Persons with Disabilities (“CRPD”) notes that disabilities covered by the Convention include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. Sufferers of chronic respiratory diseases such as COPD, recurring pneumonia and lung cancer clearly fall under this definition. The CRPD requires bound parties to ensure a “reasonable accommodation” of persons with disabilities.

Denying victims of respiratory diseases arguably discriminates against such individuals and an arbitrary decision to deny the availability of Non-smoke Alternatives through well regulated and licensed pharmacies without any material disproportionate or undue burden on any other part of society fails to satisfy the convention’s “reasonable accommodation” requirement.

A Blanket Ban on Non-Smoking Alternatives Disproportionately Hurts Women and Children and Violates The Basic Law and International Human Rights Laws.

The Facts:

According to research by Hong Kong University, approximately 80% of all smokers in Hong Kong are men, the majority of which are members of the lower income working class. Accordingly, the victims of second-hand smoke in the households of these individuals are disproportionately vulnerable lower income women and children. An outright ban all non-smoking alternatives to cigarettes will force male smokers who cannot stop smoking to continue hurting their families with second hand smoke.

Such disproportionate impact on vulnerable members of our society including lower income women and children potentially violate Hong Kong's Basic Law and Bill of Rights Ordinance in addition to several international human rights treaties and conventions to which Hong Kong is a party.

In addition to its Basic Law and Bill of Rights Ordinance, Hong Kong is bound by several international human rights and anti-discrimination treaties and conventions including but not limited to, the International Covenant on Civil and Political Rights (the "CCPR"), the International Covenant on Economic Social and Cultural Rights (the "CESCR"), the Convention on the Elimination of All Forms of Discrimination against Women (the "CEDAW"), and the Convention on the Rights of the Child (the "CRC"). As party to these treaties and conventions, Hong Kong is required to protect individuals and vulnerable groups at risk through the Basic Law, the Bill of Rights Ordinance, appropriate policies and other legal enactments.

These laws safeguard a range of civil and political rights including protections against direct and indirect discrimination and rights to health, education and an adequate standard of living especially as such rights and protections are threatened by government action (or inaction). These laws collectively underscore the importance of substance over form by focusing on not only the guarantee of equal protection but also equal and fair treatment and the relationship between the two principles.

The CEDAW in particular highlights the importance of maximizing the participation of women in the legislative and regulatory process to help ensure that, at a minimum, women have an opportunity to be heard on decisions by government that disproportionately impact women.

Hong Kong case law supports this position in that contrary to the many cases where laws and policy enacted by the government were held constitutional despite the fact that such laws and policies did have a discriminatory impact against women because of the court's deference to the government in matters of broad social or economic policy, such deference is not appropriate where such discrimination is either arbitrary or unfounded. In *Kung Yun Ming v. Director of Social Welfare* (2009) 4 HKLRD 382, the court acknowledged that policies and laws could be challenged for infringing constitutionally guaranteed rights under the Basic Law or the Bill of Rights including any "unequal treatment amongst residents of the SAR that cannot be justified." Given the disproportionate harm to women and children from second hand smoke, the Bill treats women and children unequally by serving to perpetuate such hazardous exposure and therefore deserves heightened and more thoughtful consideration and justification.

Point of Concern:

Unlike the *Kung* case where the government justified its position on economic and resource distribution concerns, there is no justification to ban Non-smoke Alternatives that would virtually eliminate the dangers of second hand smoke if the government does not ban and legalize cigarettes. Failing such justification, the Bill would be unconstitutional. Other cases similar to *Kung*, such as *Yao Man Fai George v. Director of Social Welfare*, *Raza v. Chief Executive-in-Council*, *Fok Chun Wa v. Hospital Authority* and *R (Carson) v. Secretary of State for Work and Pensions* involve government policy decisions that relate to economic burden, allocation of resources and addressing social needs. However in the case of the Bill, Non-smoke Alternatives cannot be similarly justified if cigarettes are allowed to be legally sold and consumed in Hong Kong. On the contrary, the government could arguably use broad social or economic policy to discriminate against men by banning all forms of combustible tobacco and legalizing only Non-smoke Alternatives.

Recommendation:

It is our recommendation that the Bills Committee commission a formal impact assessment on the potential for Bill to disproportionately harm to women and children through mandating ongoing exposure to second hand smoke and whether such discrimination can be justified on broad social or economic policy grounds.

Banning Non-Smoke Alternatives Denies Public Health Authorities A Tool To Substantially Reduce the #1 Cause of Mortality and Hospital Utilization in Hong Kong.

Respiratory diseases are the greatest cause of death in Hong Kong and the cost the government at least HK\$5,000,000,000 annually. Current research and data suggests that Non-smoke Alternatives can improve the economic productivity, health outcomes, reduce hospitalization and increase lifespans resulting in substantial cost healthcare savings.

Banning Non-smoke Alternatives Rejects and Ignores Hong Kong's Highly Successful and Rational Adoption of Methadone to Address Heroin Addiction for 40 Years

During the 1970s, Hong Kong faced a major public health, social and public safety crisis driven by a surge in heroin addiction and its impact on society. Based on the advice of objective global experts, Hong Kong adopted a bold and thoughtful policy to combat, treat, manage and reduce heroin addiction by making low cost daily methadone treatment widely available without burdening Hong Kong's overworked doctors and overwhelmed public hospitals. This non-judgmental, measured and results oriented policy and implementation has not only dramatically reduced harm but also substantially lowered the cost of heroin addiction to society. Rejecting this 40+ year success story and local precedent, the Bill seeks to further elevate abstinence as the only legal solution for smokers despite a large body of research and evidence confirming how typically unsuccessful attempts at unassisted smoking cessation are.

Recommendation:

Consistent with our recommendation above, we believe Hong Kong's experience and success with Methadone Treatment in combating heroin addiction supports the legal availability of Non-smoke Alternatives through licensed and regulated pharmacies in Hong Kong for the treatment of nicotine addiction and respiratory disease for adult smokers unable to stop smoking.

Banning Non-Smoke Alternatives Unscientifically Imposes Higher Standards of and Durations for Analysis, Research and Study than those Required for New Drugs

Non-Smoke Alternatives have been on the market for well over a decade with many millions worldwide having successfully transitioning away from cigarettes. Many among those supporting the Ban suggest that 10 years is simply not enough time to judge the absolute and relative impact on health of Non-smoke Alternatives. Yet under global best practices, it is widely known and understood that Phase III clinical trials typically consist of a few thousand subjects and last between six to 24 months.

with regulatory bodies approving new drugs approximately 12 months after successful Phase III trial results. The since, chemistry and statistical significant of tens of millions of Non-smoke Alternative consumers over 10 years presents far more definitive and convincing benefits over smoking far exceeding the substantive requirements required for new drugs in Phase III clinical trials.

Recommendation:

We would encourage the Bills Committee to apply the same statistical and scientific standards to a potential ban of Non-smoke Alternatives as is applied to new drugs for their Phase III trials.

The Ban Inappropriately Treats Non-Smoke Alternatives Equally With Combustible Tobacco Alternatives;

More and more research around the world confirms that by far the biggest health issue from smoking is from the combustion of tobacco and inhalation of smoke. Non-smoke Alternatives to cigarettes are already playing a substantial and positive role in ensuring smoking cessation resulting in significantly improved health outcomes, overall harm reduction and life extension. The same cannot be said for combustible cigarette alternatives such as shisha pipes and herbal cigarettes which in most cases are far more harmful than cigarettes. We support the ban of combustible tobacco alternatives.

There is No Data For Any Material Abuse of Heat No Burn Devices by Hong Kong Youth

To date, authorities in Hong Kong have cited an increase in the use of e-cigarettes and/or vaping products by youth. Whether these findings reflect the actual situation in Hong Kong and whether there is a material health danger to youth from such activity, there is no material evidence in the record whatsoever in the record of Hong Kong youth using heat-not-burn devices and the reasons for that are obvious and reflect the substantial difference between e-cigarettes and heated tobacco products. First, heated tobacco products are substantially more expensive and complex than e-cigarettes. Second, heated tobacco products are not attractive to youth as they are not marketed to youth, do not offer any flavors appealing to the young palate and cannot easily be used to inhale non-nicotine illegal or controlled substances such as THC (the active chemical in Marijuana) and ketamine. At the same time, heat not burn devices have a strong and growing track record of reducing smoking and improving the health of adult former smokers in major markets such as Japan, the United Kingdom and Korea.

Sincerely,

BONHAM STRAND HONG KONG LIMITED

/s/ Jong Lee

Chairman

5 April 2019

Dear Sir/ Madam

We refer to the Smoking (Public Health) (Amendment) Bill 2019 gazetted on 15 February 2019. We write to express our concerns regarding the Bill which proposes to ban the import, manufacture, sale, distribution, and advertisement of alternative smoking products, including electronic cigarettes, heat-not-burn products, and herbal cigarettes.

We are a member of the Imperial Tobacco group of companies. Imperial Tobacco has been expanding its portfolio of Next Generation Products (NGPs), including vapour products and heated tobacco, with a view to creating better products with lower health risks for the world's smokers.

NGPs' health benefits

It is unfortunate that the Hong Kong government's publicity campaign has spread the misleading message that NGPs are of a comparable risk profile as conventional tobacco products.¹ Instead, there is a growing body of evidence that using e-cigarettes is significantly safer than smoking. Public Health England has concluded that *'based on current knowledge, stating that vaping is at least 95% less harmful than smoking remains a good way to communicate the large difference in relative risk'*.²

The Hong Kong government also relied on the false claim³ that there is *'a lack of evidence'* that NGPs help in quitting smoking. The latest studies have confirmed the understanding that vaping can be used as an effective nicotine-replacement therapy.⁴ Reputable public health authorities have started to encourage using e-cigarettes to help quit smoking. An emerging research area is to explore ways to encourage smokers to transition from smoking to vaping,⁵ so as to maximise the health benefits brought by vaping products.

The proposal to ban NGPs based on old testing results also ignores the fact that the NGP market is undergoing rapid innovation which results in better products that contain less harmful substances. Research also shows that newer e-cigarette devices may be more effective for smoking cessation than earlier generation devices.⁶

We encourage the government to conduct a thorough review of the growing body of evidence which supports NGPs' role in promoting public health.

Unjustified differential treatment of similar products

¹ https://www.isd.gov.hk/chi/tvapi/16_md275.html

² McNeill A, Brose LS, Calder R, Bauld L, Robson D. *Evidence review of e-cigarettes and heated tobacco products 2018. A report commissioned by Public Health England*. London: Public Health England. 2018.

³ <https://www.info.gov.hk/gia/general/201902/15/P2019021500222.htm>

⁴ Hajek P, Phillips-Waller A, Przulj D, Pesola F, Myers Smith K, Bisal N, Li J, Parrott S, Sasieni P, Dawkins L, Ross L. A randomized trial of e-cigarettes versus nicotine-replacement therapy. *New England Journal of Medicine*. 2019;380:629-637.

⁵ Robertson L, Hoek J, Blank ML, Richards R, Ling P, Popova L. Dual use of electronic nicotine delivery systems (ENDS) and smoked tobacco: a qualitative analysis. *Tobacco control*. 2019;28(1):13-9.

⁶ Diemert L, Bayoumy D, Pelletier H, Schwartz R, O'Connor S. *E-Cigarette Use for Smoking Cessation: Scientific Evidence and Smokers' Experiences*. Toronto ON: Ontario Tobacco Research Unit; February 2019.

The drafting of the Bill reflects the lack of rational deliberation in the policymaking process. For example, the definitions of vapour products (known as 'Category 1' products in the Bill) and heated tobacco (known as 'Category 2' products) exclude 'waterpipe'. 'Waterpipe' is defined as follows:

waterpipe (水煙壺) means a receptacle or other device designed for use for smoking tobacco in a form other than as a cigarette or cigar where the receptacle or device—

- (a) allows smoke to be generated other than by means of electricity; and
- (b) consists of or includes a jar or similar receptacle for containing a liquid through which the smoke of tobacco would pass before being inhaled by the user of the receptacle or device.

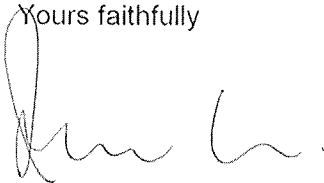
This definition inexplicably distinguishes products allowing smoke to be generated '*by means of electricity*' and other products. Such a distinction cannot serve any reasonable public health purpose. Given that the stated legislative intent is to prevent the harm of NGPs, the government must explain why certain classes of products are singled out for prohibition but other similar products are excluded in the Bill.

On a separate note, the above definition once again uses the undefined term '*smoke*'. It has been previously pointed out that this term is ambiguous in that it is unclear whether the vapour generated from NGPs falls within the meaning of this term. However, the Bill has not remedied the ambiguity.

Conclusion

It is in our interest and the interest of the tobacco industry to create products with reduced harm to customers. We believe NGPs will be an important tool to achieve the government's vision to make Hong Kong a smoke-free city. We enclose a copy of Imperial Tobacco's introductory materials on NGPs for members' reference.

Yours faithfully



Wang Hong Siang
Sales & Marketing Director (Vietnam, Hong Kong & Macau)

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04/05/2019

Clerk to Bills Committee on Smoking (Public Health) (Amendment) Bill 2019
Legislative Council Secretariat
Legislative Council Complex
1 Legislative Council Road
Central, Hong Kong

Re: Submission to Bills Committee on Smoking (Public Health) (Amendment)
Bill 2019

Dear Sir/Madam,

I write to support the motion in the recent Bill on enforcing bans on alternative tobacco products in Hong Kong.

Smoking has left serious consequences since its inception in the last century. It is obvious that alternative tobacco substances should be banned., This is the only chance to stop alternative tobacco substances from adversely affecting the future generations of citizens in Hong Kong. We are avoiding to repeat the mistakes made in the past., There are 600,000 citizens smoking every day, hence traditional smoking cannot be banned imminently. Yet, a clear direction is still visible for a smoke free city.

Alternatives to conventional tobacco products also pose considerable harm to health. Vapers and heat-not-burn products release formaldehyde, which is a cancerous substance., Vaping and traditional cigarette smoking similarly increases possibility of heart attack, and those who smoke both ways have a risk of having heart attacks at a rate 4.6 times higher than that of non-smokers., Research confirms secondhand vaping propagates hazardous materials. Although the concentration of these materials is not high, the absence of the taste and odour as expected of smoke makes it easy for surrounding individuals to unknowingly inhale large amounts of hazardous substances from others' vaping. Furthermore, alternative forms of tobacco present longstanding harms to our future generations. Banning under 18s to smoke alternative tobacco substances are useless; America has demonstrated that this will only encourage vaping culture., The use of vapers severely impacts physical health, diminishes social production and increases medical expenses., In Hong Kong, 8.7% of secondary students have experienced vaping, and these numbers are rising.

Alternatives to tobacco have also not been found to aid in smoking cessation. There is no concrete evidence that alternative tobacco substances are helpful in smoking cessation. Most research indicates that the use of a vapor does not contribute to quitting, and may even reduce the chances of successful cessation.,

Recently, the New England Journal of Medicine published a new research suggesting that most individuals that quit smoking and use vapers become regular vaper users, and did not entirely quit smoking.. Since no research could prove that heat-not-burn products could assist with smoking cessation, the Food and Drug Administration (FDA) Science Committee suggested rejecting the application of heat-not-burn smoking devices as “risk-reducing products”.

I would like to once again project my support for the banning of alternative products to tobacco.

I thank you for your kind attention.

Yours sincerely,

Lau Tang Yun



To : The Honourable Members of the Legislative Council
Legislative Council Complex 1
Legislative Council Road Central
Hong Kong

From : Trade Related Intellectual Property Rights Protection Association (TIPA)
20 Eonju-ro 129-gil, Nonhyeon 2(i)-dong, Gangnam-gu, Seoul, Republic
of Korea (5th floor, Korea Customs Brokers Association)
Phone: +82 2-3445-3761, Fax: +82 2-3445-3760

Date: 3 April 2019

Title : Smoking (Public Health) (Amendment) Bill 2019

To Whom It May Concern,

TIPA hereby submits this letter (the "Letter") in opposition to the Smoking (Public Health) (Amendment) Bill 2019 (the "Bill").

1. Introduction of TIPA and Grounds for the Submission of this Letter

TIPA is an association established on December 29, 2006 with the approval of the Director of Customs of the Republic of Korea pursuant to Article 4 of the Rules for the Establishment and Supervision of the Ministry of Strategy and Finance and its Non-profit Corporation for the purpose of protecting the holders of intellectual property ("IP") rights, including trademarks and copyrights, and consumers.

TIPA submits this Letter with concern that the passage of this Bill will potentially infringe upon the IP rights, such as goodwill and trademark rights, held by members of TIPA, including KT&G, British American Tobacco Korea, Philip Morris Korea, JTI Korea (collectively referred to as the "Members").

2. Potential Goodwill and IP Infringement Issues upon the Passage of this Bill

The Bill prohibits residents of Hong Kong from purchasing, importing, or using electronic cigarettes or Tobacco Heating Products (“THPs”) within Hong Kong.

If the Bill is passed, it will virtually be impossible to export or sell electronic cigarettes or THPs, which the Members have developed at an enormous cost, to Hong Kong. In other words, the Bill effectively restricts the goodwill of the Members in Hong Kong and seriously infringes the Members’ IP rights, such as trademarks, within Hong Kong.

As such, absent any legitimate reasons, such as scientific evidence after a thorough analysis on the hazards of electronic cigarettes or THPs, the Bill does not have the statutory or regulatory legitimacy as the Bill, if passed, excessively restricts the IP rights of the manufacturers, including the Members, of electronic cigarettes or THPs and the consumer rights.

3. Taxation and Regulation of THPs in Korea

Korea imposes and collects various taxes or charges on tobacco, such as Tobacco Consumption Tax, Local Education Tax, National Health Promotion Tax, and Individual Consumption Tax, etc., pursuant to the relevant laws and regulations, including National Health Promotion Act, Local Tax Act, and Individual Consumption Tax Act.

However, for THPs, the aforementioned laws impose only about 89% of the tax or charges imposed on traditional cigarettes (per 20 cigarettes).

Category	Tobacco Consumption Tax	Local Education Tax	National Health Promotion Tax	Individual Consumption Tax
Traditional Cigarette	KRW 1,007	KRW 443	KRW 841	KRW 594
Tobacco Heating Products	KRW 897	KRW 395	KRW 750	KRW 529

In addition, Korea requires the tobacco manufactures to display warning image and text on the packages of cigarettes, and even specifies the warning image and text for each type of tobacco in the regulation issued by the Ministry of Health and Welfare.

According to the regulation of the Ministry of Health and Welfare, the package of traditional cigarettes must include a repulsive photo of lung cancer, larynx cancer, oral cancer, stroke, heart disease, or sexual dysfunction, and a warning text stating that cigarette smoke contains carcinogenic substances such as, naphthylamine, nickel, benzene, vinyl chloride, arsenic, and cadmium. However, the packages of vaping products may use alleviated graphic warning and display a simple warning text stating "addiction to nicotine and exposure to carcinogens."

In sum, Korea allows the sale of electronic cigarettes and THPs and applies more relaxed regulations, such as tax and package warning requirements, on electronic cigarettes and THPs compared to those of traditional cigarettes.

4. Conclusion

In conclusion, TIPA submits that the Bill should not be passed or implemented in the Legislative Council, and respectfully urges the protection of IP rights of electronic cigarettes and THPs, including the Members. TIPA further requests the Legislative Council to consult with manufacturers of electronic cigarettes or THPs, and to refer study results on the hazards of electronic cigarettes and THPs prior to the discussion on the passage of this Bill.

Trade Related Intellectual Property Rights Protection Association



Name: CHUNG, Nam-Ki

Title: Chairman



香港哮喘會

THE HONG KONG ASTHMA SOCIETY
Since 1989

立法會CB(2)1214/18-19(6396)號文件

LC Paper No. CB(2)1214/18-19(6396)

關注你的胸肺健康

We care about your Lungs

Chairman,

Bill Committee on Smoking (Public Health) (Amendment) Bill 2019

The Legislative Council of the Hong Kong Special Administrative Region

28 March 2019

Dear Sir,

Re: Full support from Hong Kong Asthma Society to have total ban of alternative smoking products

We, the Asthma Society of Hong Kong, a patient group with 817 members are in full support of the HKSAR government to have a total ban on alternative smoking products.

From the online Legislative Council Brief (File Reference: FH CR 1/3231/19), we are aware that our government is fully cognizant of the potential side effects of alternative smoking products including e-cigarettes and heat-not-burn tobacco products.

However, it comes to our attention that some political parties are trying to have a spin on the subject, and use verbal camouflage to mislead the public that regulation of tobacco products is synonymous with total ban.

With **more than 330,000 people** suffering from asthma in Hong Kong, we have to make our voice heard; we demand total ban of alternative smoking products for our lung health.

- While the Brief has included convincing evidence on the harmful side effects of alternative smoking products, such caution fails to reach the general public, in particular teenagers.
- With a local prevalence of asthma in the secondary school students at 10.2%, the deleterious impact of alternative smoking products in immature lungs must call for top attention.
- Alternative smoking products emit second-hand smoke in the same fashion. We want a smoke free Hong Kong in our campaign for total asthma control.



香港哮喘會

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- Evidence does not support alternative smoking products can help quit smoking. It only provides a false hope to smoking asthmatics.
- Worse still, the gateway effect will lure young people to smoke. The long term irritant effects on the airways and predisposition to develop asthma is not yet fully understood.

Asthma, being a chronic condition with significant health and economic burdens both on the individuals and society, can be better managed with allergen and irritant avoidance. Smoking, no matter ordinary cigarettes or not-ordinary cigarettes, is highly dangerous. To protect the vulnerable group, especially those young people not in-the-know, asthma patients whether old or young, the HKSAR government has a duty of care to legislate a total ban on alternative smoking products. We cannot accept a compromise to have a regulation of the products instead.

Yours sincerely,

CHAN Wing Kai
Chairman

Chairman,
Bill Committee on Smoking (Public Health) (Amendment) Bill 2019
The Legislative Council of the Hong Kong Special Administrative Region
28 March 2019

Dear Sir,

Re: Full support to have total ban of alternative smoking products

I am a respiratory physician working in public sector. I see patients with various types of respiratory diseases, including Chronic Obstructive Pulmonary Disease, lung cancer and asthma which are all related to or worsened by smoking. I understand the plight of them with the dreadful symptoms of shortness of breath.

I appreciate the great effort of the HKSAR government to have a total ban of alternative smoking products. From the online Legislative Council Brief (File Reference: FH CR 1/3231/19), the deleterious side effects of alternative smoking products including e-cigarettes and heat-not-burn tobacco products have been well described.

However, new evidences are yet coming up. I wish to highlight some relevant findings that are only available after the Legislative Council Brief has been released.

- New heated tobacco devices with vaping are toxic to human lung cells like traditional cigarettes. ¹
- Use of Nicotine while pregnant alters genes. ²
- Sperm count is also 50 percent lower in sons of fathers who smoke. ³
- Vapors are vulnerable to pneumonia. The vapour from e-cigarettes seems to help pneumonia-causing bacteria stick to the cells that line the airways. ⁴
- Vaping can cause acute allergic eosinophilic pneumonitis as well as respiratory failure due to lipoid pneumonia. ⁵

Indeed, the list on the harmful effects of alternative smoking products can only keep on expanding with ongoing researches. To protect the vulnerable especially our teenagers, the HKSAR government must implement full legislation to have a total ban of such products in our city. A mere regulation is not enough since such products have potentially deleterious short term and long term side effects.

Thank you for your kind attention.

Yours sincerely,



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Submission from Mr David YONG Tat-ching

Online submission for Bills Committee on Smoking (Public Health) (Amendment) Bill 2019

Dear Legislative council of the Hong Kong Special Administrative region of the people republic of china,

I strongly oppose a total ban of e cigarettes in HK, although it is not 100% safe but it is at least 95% safer than traditional cigarettes.

Please see below highlighted in yellow for the important and valid points!

<https://www.gmjournall.co.uk/vaping-95-less-harmful-than-smoking>

E-cigarettes are 95% safer than traditional smoking, Public Health England has reported.

The findings, published in an evidence update, support the use of e-cigarettes as an effective way to help people give up smoking.

The evidence update provides a follow-up to initial investigations carried out last year, and serves as a comprehensive review of up-to-date evidence ahead of the introduction of new e-cigarette legislation next year.

Its finding include:

- E-cigarettes pose no risk of nicotine poisoning to users, but e-liquids should be in 'childproof' packaging
- Although vaping is not 100% safe, most of the chemicals causing smoking-related disease are absent and the chemicals present pose limited danger. The current best estimate is that e-cigarette use is around 95% less harmful to health than smoking
- E-cigarettes release negligible levels of nicotine into ambient air with no identified health risks to bystanders
- There is an inaccurate perception that e-cigarettes as at least as harmful as cigarettes.

Following the publication of the report, Public Health England has suggested e-cigarettes may one day be available on the NHS as a possible aid to give up smoking. It also made a number of next step proposals to ensure e-cigarettes remain appropriately monitored. These include:

- Continuing to monitor the evidence on uptake of e-cigarettes, the health impact and effectiveness for smoking cessation as products and technologies develop
- Holding a second national symposium on e-cigarettes and harm reduction in spring 2016
- Providing the public with clear and accurate information on the relative harm of nicotine, e-cigarettes and smoked tobacco
- Commissioning the National Centre for Smoking Cessation and Training to provide support to stop smoking practitioners to improve their skills and confidence in advising clients on the use of e-cigarettes
- Monitoring tobacco industry involvement in the evolving e-cigarettes market.

If the government is banning something that's not proven to be safe, then that would be the same logic banning any possible trial treatment for other illness and that surely does not make any logical sense.

Vaping is 95% safer than traditional smoking, another bigger government bigger than HK has done the research to show it, so why is it so difficult for the HK government to understand and to accept it?

Even though vaping is not recognised as a smoking cessation, but in real life it is a smoking cessations for lots of ex-smokers (myself included). As it does basically the same thing, delivering nicotine to the users, and lower the risk from traditional cigarettes by a great extent.

If anything that should be change, I would suggest it to be setting a legal age limit of selling to 18+ years old only.

The person who suggests vaping would lead people who vapes to smoke, they clearly have no idea how things works in real life. For example. People who buy and use BB guns, does not lead to all BB guns users to wanting to own/use a real gun (given that it's available).

People who played violence video games does not lead gamers to kill people in real life.

If the above is really the case then the government should ban all BB guns, as it lead people to use real guns. The government should ban all violence video games, and all violence movies, novel, etc as it leads people to do violence in the real life.

The same logic applies here, people who vape does not lead them to smoke.

Not only that, the focus now is the government targeting and bullying vapers. Why are you targeting the minority?

Smoking is proven to be cancer causing and why are you not banning it?

Alcohol is classified as a cancer causing substance (see below), and it leads people to bad behaviour and results in violent crimes, date rape, raping, domestic violence, drink driving that cause deaths.

See highlighted points in yellow.

<https://www.cancer.gov/about-cancer/causes-prevention/risk/alcohol/alcohol-fact-sheet>

What is the evidence that alcohol drinking can cause cancer?

There is a strong scientific consensus that alcohol drinking can cause several types of cancer (1, 2). In its Report on Carcinogens, the National Toxicology Program of the US Department of Health and Human Services lists consumption of alcoholic beverages as a known human carcinogen.

The evidence indicates that the more alcohol a person drinks—particularly the more alcohol a person drinks regularly over time—the higher his or her risk of developing an alcohol-associated cancer. Even light drinkers (those who have no more than one drink per day) and binge drinkers have a modestly increased risk of some cancers (3–7). Based on data from 2009, an estimated 3.5% of cancer deaths in the United States (about 19,500 deaths) were alcohol related (8).

If the government is using the public health as the reason to ban e cigarettes then it should also place a total ban on drinking and smoking too.

All I can see over the years is the government are favouring people who drinks and targeting people who smoke, and now their target is on people who vape. Look at how much is taxed for alcohol related drinks/products over the years compare to the tax increase for cigarettes and related products. People are not blind you know.

These are my views, please do not ban smoking, because if you do, you're basically pushing all the ex-smokers who have quit smoking who now vapes back to smoking the most lethal and disgusting habit and killing them instead. Please give these people a chance I beg of you.

Thank you.



- CONSUMER CHOICE

- RATIONAL DEBATE

- SENSIBLE REGULATION

Honourable Chairman, Members of the Panel,

Congratulations on choosing to seek more information on this important topic. On behalf of Hong Kong consumers I thank you for the opportunity to present our views.

factasia is an independent, not-for-profit, consumer advocacy promoting rational debate and sensible regulation of the rights of adults throughout Asia to choose nicotine related products. We do not promote nicotine, and we oppose all under-age use of any product containing nicotine.

This is all about “**harm reduction**”. How can we all reduce the harm done to smokers and many millions of non-smokers who are exposed to the smoke of conventional tobacco products? Specifically, we are talking about adult consumers and voters who choose to use nicotine.

There cannot be a smoker left anywhere who does not know the risks inherent in smoking, but still half a billion Asians, including 650,000 adults in Hong Kong, choose to do so. Many smokers find it difficult to quit, or enjoy their nicotine and don't want to give up.

We agree with the tobacco control experts who say providing less harmful alternatives to cigarettes should be part of government strategies. E-cigarettes are one such alternative.

Globally, experts in 'harm reduction' regard “e-cigarettes” containing nicotine as a valuable tool to reduce death and disease associated with smoking. The support for e-cigarettes **from the anti-smoking experts** has become dramatic: one leading medical expert in the UK calls them “at least 95 percent safer than smoking”.

So why ban something that

- the experts want legalised and is now legal in Europe and the US as a result of their data?
- gives smokers a path **away** from smoking?
- is proven in medical research **not** to be a gateway for non-smokers to start taking nicotine?

factasia's latest independent opinion poll results released last September 16, 2018, show that 65 percent of Hong Kong's smokers “would consider switching to e-cigarettes” as a safer alternative if they were legal here.

Smokers themselves have been asking for years for ATPs to be legalised – with appropriate regulation such as age-of-sale controls. But now the general public, including non-smokers, is saying Government should not continue to deny the benefits to public health of allowing non-combustible alternatives such as heat-not-burn (HnB) and e-cigarettes (vaping).

Key points from the 2018 IPSOS survey commissioned by factasia.org:

- two-thirds of all adults (65%) throughout the SAR agree that “through tax and regulatory policies, the Government should encourage adult smokers to switch to less harmful alternatives to cigarettes and ensure they are not used by youth”
- six out of ten current cigarette users (58%) say “it would be wrong for the Government to prevent or delay the introduction of less harmful alternatives to cigarettes”
- smokers and non-smokers (60%) agree that “if a new product is scientifically proven to have the potential to reduce the risk of smoking as compared to conventional cigarettes, adult smokers should have the right to access this information”

The new poll was taken as the public consultation exercise for the 2018 Policy Address was coming to a close and just ahead of a global conference on tobacco harm reduction at which even the World Health Organization softened its stance against ATPs in the face of overwhelming evidence that such products are improving public health by helping smokers to quit.

Certain sectors of the community such as the Council on Smoking and Health have downplayed a large body of international research conducted in Europe, Japan, the UK and Canada on ATPs. These are also among the many countries that now allow sale and use of appropriately regulated ATPs.

factasia’s previous poll in 2015, showed that 66 percent of Hong Kong’s smokers wanted to be able to choose. The new results show they still do, and that most non-smokers agree with them, despite the misinformation put out by some authorities here and abroad.

factasia’s research backs up its talks with local smokers – they want more information on e-cigarettes and they want them legalised. They see e-cigarettes as a positive alternative to smoking. And three-quarters of them say the government should encourage smokers to switch, and that it would be wrong to delay or prevent the availability to adults of e-cigarettes.

So the Council has a rare opportunity to act for the good of its citizens **and** please consumers and voters.

factasia recommends the Council should give them the choice to reduce death and disease in five steps:

1. Accept the body of evidence from the anti-smoking and harm reduction experts. Restricting adult access to safer products is unethical and counter-productive in the battle to eliminate

smoking.

2. Legalise e-cigarette use in Hong Kong among adults, as has been legislated in countries such as the UK and in the EU where E-cig and other non-combustible alternatives are understood by Public Health authorities to be much less harmful alternatives for smokers and eliminate passive smoking concerns to non-smokers.

3. Regulate for product quality and manufacturing standards like any other consumer product, and tax rationally – no-one is suggesting e-cigarettes should be tax-exempt.

4. Under age use of vaping devices can and should be prohibited, it has always been within the power of the government to enact specific legislation in this regard. However, adult smokers should not be disadvantaged by regulations aimed at preventing youth uptake and a full range of products should be made available to smokers seeking to transition to less harmful alternatives to smoking.

5. In line with international best-practices policy development, the Hong Kong Government should ensure that appropriate public consultation and a regulatory impact assessment be undertaken before any legislation is amended.

The Government has a chance to become a clear leader in Asia in progressive public health policy and in harm reduction in this vital sector. It's what consumers want, and it's good for them too.



- CONSUMER CHOICE
- RATIONAL DEBATE
- SENSIBLE REGULATION

Appendix 1

Link to full factasia/IPSOS 2018 survey – Adult Smokers only

https://www.factasia.org/wp-content/uploads/pdf_files/hong-kong-rrp-survey-2018-main+booster-adult-smokers.pdf

Appendix 2

Link to full factasia/IPSOS 2018 survey – Adult smokers and non-smokers

https://www.factasia.org/wp-content/uploads/pdf_files/hong-kong-rrp-survey-2018-main-adult.pdf

Appendix 3

HONG KONG RRP SURVEY: 2018 ADULT SMOKERS ONLY

KEY SPECIFICATIONS

AUDIENCE: LEGAL AGE, GENERAL POPULATION ADULTS

SAMPLE SIZE: Main+Booster Adult Smokers (n=437)

METHOD: ONLINE

RESEARCH SUPPLIER: IPSOS

COMMISSIONING ORGANIZATION: factasia.org

S1. First, how old are you?

0%	Under 18	(TERMINATE)
7%	18-24	
12%	25-29	
15%	30-34	
9%	35-39	
13%	40-44	
9%	45-49	
18%	50-54	
12%	55-59	
6%	60-64	
0%	65 or older	

S2. Next, what is your gender?

79%	Male
21%	Female

Are you – or is any member of your immediate family – currently employed with/as:

- 1 Yes
- 2 No

(RANDOMIZE)

	% YES	%No
S3. An advertising or public relations agency	0%	100%
S4. A newspaper, radio, or television station	0%	100%
S5. A market research or opinion research firm	0%	100%
S6. An elected official	0%	100%
S7. A senior or policy making role in government	0%	100%

[IF YES TO ANY S3-S7: TERMINATE]

For each of the following products, please indicate whether you are a regular user, an occasional user, a former user, or a complete non-user.

- 1 Regular user
- 2 Occasional user
- 3 A former user
- 4 A complete non-user

(RANDOMIZE)		Regular	Occasional	Former	Non-user
S8.	Cigarettes	58%	52%	0%	0%
S9.	Cigars	2%	25%	25%	48%
S10.	Pipes	3%	16%	21%	61%
S11.	Shisha/Waterpipe	2%	16%	23%	59%
S12.	E-cigarettes	13%	30%	19%	38%
S13.	Heated tobacco products	9%	24%	14%	52%

Q1. Have you recently seen, read, or heard anything about e-cigarettes?

- 86% Yes
- 12% No
- 2% Unsure (vol.)

[IF Q1="YES", ASK: n=383]

Q1a. And where have you recently seen, read, or heard about e-cigarettes? Please check all that apply.

- 40% Print media
- 35% Broadcast media
- 44% Internet news sites
- 47% Social media (i.e. Facebook, Twitter)
- 0.1% E-cigarette user group (SPECIFY)
- 47% Your personal environment such as family, friends, and colleagues
- 0.1% Unsure (vol.)

[IF Q1="YES", ASK: n=383]

Q1b. And, did what you see, read, or hear about e-cigarettes cause you to view the product more positively, more negatively, or did it have no impact?

- 42% More positively
- 15% More negatively
- 44% No impact

Q2. Regardless of whether you have recently seen, read, or heard, something about e-cigarettes, how familiar would you say you are with e-cigarettes?

8%	Very familiar
58%	Somewhat familiar
24%	Not very familiar
8%	Not at all familiar
1%	Unsure (vol.)

As you may know, e-cigarettes are battery powered devices that vaporize nicotine liquid to create an inhalable aerosol. E-cigarettes do not contain tobacco leaf and come in various shapes and sizes, and can be disposable, rechargeable, or refillable.

Q3. And, do you know whether or not e-cigarettes are legally sold in your country? If you don't know or are unsure, please indicate accordingly.

40%	Legal
29%	Illegal
32%	Unsure

Switching topics...

Q4. Have you recently seen, read, or heard anything about heated tobacco products?

56%	Yes
40%	No
4%	Unsure

[IF Q4="YES", ASK: n=264]

Q4a. And where have you recently seen, read, or heard about heated tobacco products? Please check all that apply.

35%	Print media
41%	Broadcast media
47%	Internet news sites
47%	Social media (i.e. Facebook, Twitter)
0%	E-cigarette user group (SPECIFY)
36%	Your personal environment such as family, friends, and colleagues
0%	Unsure (vol.)

[IF Q4="YES", ASK: n=264]

Q4b. And, did what you see, read, or hear about heated tobacco products cause you to view the product more positively, more negatively, or did it have no impact?

31%	More positively
16%	More negatively
53%	No impact

Q5. Regardless of whether you have recently seen, read, or heard something about heated tobacco products, how familiar would you say you are with heated tobacco products?

8%	Very familiar
41%	Somewhat familiar
30%	Not very familiar
21%	Not at all familiar
1%	Unsure

As you may know, heated tobacco products are battery powered systems that heat tobacco instead of burning it to create an inhalable aerosol.

Q6. And, do you know whether or not heated tobacco products are legally sold in your country? If you don't know or are unsure, please indicate accordingly.

33%	Legal
21%	Illegal
46%	Unsure

In the next section of this survey, you'll be asked a number of questions related to e-cigarettes and heated tobacco products. The following provides some background on these products:

In Europe and the USA, e-cigarettes are widely available and millions of people use them. Public health experts agree that they are probably much less harmful than cigarette smoking because they do not burn tobacco. Some public health experts believe they should be widely available for smokers to use instead of cigarettes. While others think they are not an effective method for smoking cessation and are concerned they could be a "gateway" to smoking among youth.

Heated tobacco products are available in Japan, Korea, and more than 30 other countries in Europe, North America, Africa, and Asia. The companies that manufacture these products have said they significantly reduce the harmful chemicals formed when tobacco is burned in a cigarette and have the potential to reduce the health risk of smoking in smokers who switch to them. Independent reviews of the available evidence by government agencies in the UK, the USA, and elsewhere have confirmed that potential but acknowledge the lack of long-term evidence. Some public health experts believe they should be widely available for smokers to use instead of cigarettes. While others think they are not an effective method for smoking cessation and are concerned they could be a "gateway" to smoking among youth.

You will now be shown a number of statements made about e-cigarettes and heated tobacco products. For each of the following, please indicate whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree
- 5 Unsure (vol.)

(RANDOMIZE)

[QUESTIONS TO ASK TO ALL]

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Unsure (vol.)
Q7. E-cigarettes represent a positive alternative to today's conventional cigarettes.	14%	46%	16%	11%	13%
Q8. Heated tobacco products represent a positive alternative to today's conventional cigarettes.	12%	45%	16%	11%	16%
Q9. It would be wrong for the Government to prevent or delay the introduction of less harmful alternatives to cigarettes for adult smokers.	13%	45%	21%	7%	14%
Q10. Through tax and regulatory policies, the Government should encourage adult smokers to switch to less harmful alternatives to cigarettes and ensure they are not used by youth.	24%	52%	14%	6%	4%
Q11. If a new product is scientifically proven to have the potential to reduce the risk of smoking as compared to conventional cigarettes, adult smokers should have the right to access this information.	25%	58%	7%	6%	4%

[QUESTIONS TO ASK TO COMBUSTIBLE TOBACCO USERS ONLY – PROGRAMMING NOTE:

IF ((S8 (CIGARETTES)="REGULAR" OR "OCCASIONAL" USER) OR
(S9 (CIGARS)="REGULAR" OR "OCCASIONAL" USER) OR
(S10 (PIPES)="REGULAR" OR "OCCASIONAL" USER) OR
(S11 (SHISHA/WATER PIPE)="REGULAR" OR "OCCASIONAL" USER)) AND
(S12 (E-CIGARETTES)="FORMER" OR "COMPLETE NON-USER")) AND

S13 (HEATED TOBACCO PRODUCTS)="FORMER" OR "COMPLETE NON-USER" n=191

- Q12. I would consider switching to e-cigarettes if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.
- Q13. I would consider switching to heated tobacco products if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Unsure (vol.)
Q12. I would consider switching to e-cigarettes if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.	15%	49%	14%	10%	12%
Q13. I would consider switching to heated tobacco products if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.	14%	40%	18%	9%	18%

[QUESTIONS TO ASK TO CURRENT NON-USERS ONLY – PROGRAMMING NOTE:

IF ((S8 (CIGARETTES)="FORMER" OR "COMPLETE NON-USER") AND
(S9 (CIGARS)="FORMER" OR "COMPLETE NON-USER") AND
(S10 (PIPES)="FORMER" OR "COMPLETE NON-USER") AND
(S11 (SHISHA/WATER PIPE)="FORMER" OR "COMPLETE NON-USER") AND
(S12 (E-CIGARETTES)="FORMER OR "COMPLETE NON-USER") AND
(S13 (HEATED TOBACCO PRODUCTS)="FORMER" OR "COMPLETE NON-USER") n=0)

- Q14. I would consider encouraging cigarette smokers I know to consider switching to e-cigarettes.
- Q15. I would consider encouraging cigarette smokers I know to consider switching to heated tobacco products.

[IF S12 (E-CIGARETTES) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=201]

- D1. How long have you used e-cigarettes?

9%	Less than 3 months
13%	3 to 6 months
25%	6 to 9 months
18%	9 to 12 months
9%	12 to 18 months
5%	18 to 24 months
18%	Longer than 24 months
3%	Unsure (vol.)

[IF S12 (E-CIGARETTES) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=201]

D2. Why did you start using e-cigarettes? (CHECK ALL THAT APPLY)

- | | |
|-----|--|
| 31% | Price |
| 52% | Convenience |
| 53% | As a potentially safer alternative to regular cigarettes |
| 27% | Flavours |
| 23% | To help me stop smoking cigarettes |
| 1% | Other (SPECIFY) |
| 2% | Unsure (vol.) |

[IF S12 (E-CIGARETTES) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=201]

D3. Where do you predominately buy your e-cigarettes?

- | | |
|-----|-----------------------------|
| 10% | Convenience store |
| 10% | Grocery |
| 2% | Kiosk |
| 50% | Specialty e-cigarette store |
| 26% | Internet/Online store |
| 1% | Other (SPECIFY) |
| 1% | Unsure (vol.) |

[IF S12 (E-CIGARETTES) ='OCCASIONAL USER', ASK: n=147]

D4. What has kept you from using e-cigarettes more?

- | | |
|-----|--|
| 26% | Flavour |
| 28% | Price |
| 51% | Accessibility to e-cigarettes |
| 16% | Have not found them to be suitable alternative to regular cigarettes |
| 1% | Other (SPECIFY) |
| 6% | Unsure (vol.) |

[IF S13 (HEATED TOBACCO PRODUCTS) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=171]

D1a. How long have you used heated tobacco products?

- | | |
|-----|-----------------------|
| 18% | Less than 3 months |
| 22% | 3 to 6 months |
| 15% | 6 to 9 months |
| 17% | 9 to 12 months |
| 9% | 12 to 18 months |
| 4% | 18 to 24 months |
| 10% | Longer than 24 months |
| 5% | Unsure (vol.) |

[IF S13 (HEATED TOBACCO PRODUCTS) = 'REGULAR USER' OR 'OCCASIONAL USER', ASK: n=171]

D2a. Why did you start using heated tobacco products? (CHECK ALL THAT APPLY)

- | | |
|-----|--|
| 21% | Price |
| 39% | Convenience |
| 52% | As a potentially safer alternative to regular cigarettes |
| 30% | Flavours |
| 17% | To help me stop smoking cigarettes |
| 0% | Other (SPECIFY) |
| 2% | Unsure (vol.) |

[IF S13 (HEATED TOBACCO PRODUCTS) = 'REGULAR USER' OR 'OCCASIONAL USER', ASK: n=171]

D3a. Where do you predominately buy your heated tobacco products?

- | | |
|-----|-----------------------|
| 17% | Convenience store |
| 12% | Grocery |
| 7% | Kiosk |
| 26% | Specialty store |
| 31% | Internet/Online store |
| 2% | Other (SPECIFY) |
| 5% | Unsure (vol.) |

[IF S13 (HEATED TOBACCO PRODUCTS) = 'OCCASIONAL USER', ASK: n=116]

D4a. What has kept you from using heated tobacco products more?

- | | |
|-----|--|
| 16% | Flavour |
| 34% | Price |
| 51% | Accessibility to heated tobacco products |
| 19% | Have not found them to be suitable alternative to regular cigarettes |
| 0% | Other (SPECIFY) |
| 5% | Unsure (vol.) |

D5. EDUCATION

- | | |
|------|--|
| 0.5% | Not complete primary school |
| 0.1% | Completed primary school |
| 8% | Not complete secondary school |
| 29% | Completed secondary school |
| 12% | Not complete post secondary/university |
| 45% | Complete post secondary/university |
| 6% | Completed masters |

D6. INCOME

1%	HK\$4,999 or below
0%	HK\$5,000 - \$5,999
0.3%	HK\$6,000 - \$6,999
0%	HK\$7,000 - \$7,999
1%	HK\$8,000 - \$8,999
1%	HK\$9,000 - \$9,999
3%	HK\$10,000 – \$12,499
3%	HK\$12,500 - \$14,999
8%	HK\$15,000 - \$19,999
9%	HK\$20,000 - \$24,999
14%	HK\$25,000 - \$29,999
19%	HK\$30,000 - \$39,999
19%	HK\$40,000 - \$49,999
23%	HK\$50,000 or above

Appendix 4

HONG KONG RRP SURVEY: 2018 ADULT SMOKERS and NON-SMOKERS

KEY SPECIFICATIONS

AUDIENCE: LEGAL AGE, GENERAL POPULATION ADULTS

SAMPLE SIZE: Main+Booster Adult Smokers (n=437)

METHOD: ONLINE

RESEARCH SUPPLIER: IPSOS

COMMISSIONING ORGANIZATION: factasia.org

S1. First, how old are you?

0%	Under 18	(TERMINATE)
7%	18-24	
12%	25-29	
15%	30-34	
9%	35-39	
13%	40-44	
9%	45-49	
18%	50-54	
12%	55-59	
6%	60-64	
0%	65 or older	

S2. Next, what is your gender?

79%	Male
21%	Female

Are you – or is any member of your immediate family – currently employed with/as:

- 1 Yes
- 2 No

(RANDOMIZE)

		% YES	%No
S3.	An advertising or public relations agency	0%	100%
S4.	A newspaper, radio, or television station	0%	100%
S5.	A market research or opinion research firm	0%	100%
S6.	An elected official	0%	100%
S7.	A senior or policy making role in government	0%	100%

[IF YES TO ANY S3-S7: TERMINATE]

For each of the following products, please indicate whether you are a regular user, an occasional user, a former user, or a complete non-user.

- 1 Regular user
- 2 Occasional user
- 3 A former user
- 4 A complete non-user

(RANDOMIZE)		Regular	Occasional	Former	Non-user
S8.	Cigarettes	58%	52%	0%	0%
S9.	Cigars	2%	25%	25%	48%
S10.	Pipes	3%	16%	21%	61%
S11.	Shisha/Waterpipe	2%	16%	23%	59%
S12.	E-cigarettes	13%	30%	19%	38%
S13.	Heated tobacco products	9%	24%	14%	52%

Q1. Have you recently seen, read, or heard anything about e-cigarettes?

- 86% Yes
- 12% No
- 2% Unsure (vol.)

[IF Q1="YES", ASK: n=383]

Q1a. And where have you recently seen, read, or heard about e-cigarettes? Please check all that apply.

- 40% Print media
- 35% Broadcast media
- 44% Internet news sites
- 47% Social media (i.e. Facebook, Twitter)
- 0.1% E-cigarette user group (SPECIFY)
- 47% Your personal environment such as family, friends, and colleagues
- 0.1% Unsure (vol.)

[IF Q1="YES", ASK: n=383]

Q1b. And, did what you see, read, or hear about e-cigarettes cause you to view the product more positively, more negatively, or did it have no impact?

- 42% More positively
- 15% More negatively
- 44% No impact

Q2. Regardless of whether you have recently seen, read, or heard, something about e-cigarettes, how familiar would you say you are with e-cigarettes?

8%	Very familiar
58%	Somewhat familiar
24%	Not very familiar
8%	Not at all familiar
1%	Unsure (vol.)

As you may know, e-cigarettes are battery powered devices that vaporize nicotine liquid to create an inhalable aerosol. E-cigarettes do not contain tobacco leaf and come in various shapes and sizes, and can be disposable, rechargeable, or refillable.

Q3. And, do you know whether or not e-cigarettes are legally sold in your country? If you don't know or are unsure, please indicate accordingly.

40%	Legal
29%	Illegal
32%	Unsure

Switching topics...

Q4. Have you recently seen, read, or heard anything about heated tobacco products?

56%	Yes
40%	No
4%	Unsure

[IF Q4="YES", ASK: n=264]

Q4a. And where have you recently seen, read, or heard about heated tobacco products? Please check all that apply.

35%	Print media
41%	Broadcast media
47%	Internet news sites
47%	Social media (i.e. Facebook, Twitter)
0%	E-cigarette user group (SPECIFY)
36%	Your personal environment such as family, friends, and colleagues
0%	Unsure (vol.)

[IF Q4="YES", ASK: n=264]

Q4b. And, did what you see, read, or hear about heated tobacco products cause you to view the product more positively, more negatively, or did it have no impact?

31%	More positively
16%	More negatively
53%	No impact

Q5. Regardless of whether you have recently seen, read, or heard something about heated tobacco products, how familiar would you say you are with heated tobacco products?

8%	Very familiar
41%	Somewhat familiar
30%	Not very familiar
21%	Not at all familiar
1%	Unsure

As you may know, heated tobacco products are battery powered systems that heat tobacco instead of burning it to create an inhalable aerosol.

Q6. And, do you know whether or not heated tobacco products are legally sold in your country? If you don't know or are unsure, please indicate accordingly.

33%	Legal
21%	Illegal
46%	Unsure

In the next section of this survey, you'll be asked a number of questions related to e-cigarettes and heated tobacco products. The following provides some background on these products:

In Europe and the USA, e-cigarettes are widely available and millions of people use them. Public health experts agree that they are probably much less harmful than cigarette smoking because they do not burn tobacco. Some public health experts believe they should be widely available for smokers to use instead of cigarettes. While others think they are not an effective method for smoking cessation and are concerned they could be a "gateway" to smoking among youth.

Heated tobacco products are available in Japan, Korea, and more than 30 other countries in Europe, North America, Africa, and Asia. The companies that manufacture these products have said they significantly reduce the harmful chemicals formed when tobacco is burned in a cigarette and have the potential to reduce the health risk of smoking in smokers who switch to them. Independent reviews of the available evidence by government agencies in the UK, the USA, and elsewhere have confirmed that potential but acknowledge the lack of long-term evidence. Some public health experts believe they should be widely available for smokers to use instead of cigarettes. While others think they are not an effective method for smoking cessation and are concerned they could be a "gateway" to smoking among youth.

You will now be shown a number of statements made about e-cigarettes and heated tobacco products. For each of the following, please indicate whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree
- 5 Unsure (vol.)

(RANDOMIZE)

[QUESTIONS TO ASK TO ALL]

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Unsure (vol.)
Q7. E-cigarettes represent a positive alternative to today's conventional cigarettes.	14%	46%	16%	11%	13%
Q8. Heated tobacco products represent a positive alternative to today's conventional cigarettes.	12%	45%	16%	11%	16%
Q9. It would be wrong for the Government to prevent or delay the introduction of less harmful alternatives to cigarettes for adult smokers.	13%	45%	21%	7%	14%
Q10. Through tax and regulatory policies, the Government should encourage adult smokers to switch to less harmful alternatives to cigarettes and ensure they are not used by youth.	24%	52%	14%	6%	4%
Q11. If a new product is scientifically proven to have the potential to reduce the risk of smoking as compared to conventional cigarettes, adult smokers should have the right to access this information.	25%	58%	7%	6%	4%

[QUESTIONS TO ASK TO COMBUSTIBLE TOBACCO USERS ONLY – PROGRAMMING NOTE:

IF ((S8 (CIGARETTES)="REGULAR" OR "OCCASIONAL" USER) OR

(S9 (CIGARS)="REGULAR" OR "OCCASIONAL" USER) OR

(S10 (PIPES)="REGULAR" OR "OCCASIONAL" USER) OR

(S11 (SHISHA/WATER PIPE)="REGULAR" OR "OCCASIONAL" USER)) AND

(S12 (E-CIGARETTES)="FORMER" OR "COMPLETE NON-USER") AND

S13 (HEATED TOBACCO PRODUCTS)="FORMER" OR "COMPLETE NON-USER") n=191)

Q12. I would consider switching to e-cigarettes if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.

Q13. I would consider switching to heated tobacco products if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Unsure (vol.)
Q12. I would consider switching to e-cigarettes if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.	15%	49%	14%	10%	12%
Q13. I would consider switching to heated tobacco products if they were legally available, met quality and safety standards, and were conveniently available like regular tobacco products.	14%	40%	18%	9%	18%

[QUESTIONS TO ASK TO CURRENT NON-USERS ONLY – PROGRAMMING NOTE:

IF ((S8 (CIGARETTES)="FORMER" OR "COMPLETE NON-USER") AND

(S9 (CIGARS)="FORMER" OR "COMPLETE NON-USER") AND

(S10 (PIPES)="FORMER" OR "COMPLETE NON-USER") AND

(S11 (SHISHA/WATER PIPE)="FORMER" OR "COMPLETE NON-USER") AND

(S12 (E-CIGARETTES)="FORMER OR "COMPLETE NON-USER") AND

(S13 (HEATED TOBACCO PRODUCTS)="FORMER" OR "COMPLETE NON-USER") n=0)

Q14. I would consider encouraging cigarette smokers I know to consider switching to e-cigarettes.

Q15. I would consider encouraging cigarette smokers I know to consider switching to heated tobacco products.

[IF S12 (E-CIGARETTES) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=201]

D1. How long have you used e-cigarettes?

9%	Less than 3 months
13%	3 to 6 months
25%	6 to 9 months
18%	9 to 12 months
9%	12 to 18 months
5%	18 to 24 months
18%	Longer than 24 months
3%	Unsure (vol.)

[IF S12 (E-CIGARETTES) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=201]

D2. Why did you start using e-cigarettes? (CHECK ALL THAT APPLY)

31%	Price
52%	Convenience
53%	As a potentially safer alternative to regular cigarettes
27%	Flavours
23%	To help me stop smoking cigarettes
1%	Other (SPECIFY)
2%	Unsure (vol.)

[IF S12 (E-CIGARETTES) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=201]

D3. Where do you predominately buy your e-cigarettes?

10%	Convenience store
10%	Grocery
2%	Kiosk
50%	Specialty e-cigarette store
26%	Internet/Online store
1%	Other (SPECIFY)
1%	Unsure (vol.)

[IF S12 (E-CIGARETTES) ='OCCASIONAL USER', ASK: n=147]

D4. What has kept you from using e-cigarettes more?

26%	Flavour
28%	Price
51%	Accessibility to e-cigarettes
16%	Have not found them to be suitable alternative to regular cigarettes
1%	Other (SPECIFY)

6% Unsure (vol.)

[IF S13 (HEATED TOBACCO PRODUCTS) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=171]

D1a. How long have you used heated tobacco products?

18%	Less than 3 months
22%	3 to 6 months
15%	6 to 9 months
17%	9 to 12 months
9%	12 to 18 months
4%	18 to 24 months
10%	Longer than 24 months
5%	Unsure (vol.)

[IF S13 (HEATED TOBACCO PRODUCTS) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=171]

D2a. Why did you start using heated tobacco products? (CHECK ALL THAT APPLY)

21%	Price
39%	Convenience
52%	As a potentially safer alternative to regular cigarettes
30%	Flavours
17%	To help me stop smoking cigarettes
0%	Other (SPECIFY)
2%	Unsure (vol.)

[IF S13 (HEATED TOBACCO PRODUCTS) ='REGULAR USER' OR 'OCCASIONAL USER', ASK: n=171]

D3a. Where do you predominately buy your heated tobacco products?

17%	Convenience store
12%	Grocery
7%	Kiosk
26%	Specialty store
31%	Internet/Online store
2%	Other (SPECIFY)
5%	Unsure (vol.)

[IF S13 (HEATED TOBACCO PRODUCTS) ='OCCASIONAL USER', ASK: n=116]

D4a. What has kept you from using heated tobacco products more?

16%	Flavour
34%	Price
51%	Accessibility to heated tobacco products
19%	Have not found them to be suitable alternative to regular cigarettes
0%	Other (SPECIFY)

5% Unsure (vol.)

D5. EDUCATION

0.5% Not complete primary school
0.1% Completed primary school
8% Not complete secondary school
29% Completed secondary school
12% Not complete post secondary/university
45% Complete post secondary/university
6% Completed masters

D6. INCOME

1% HK\$4,999 or below
0% HK\$5,000 - \$5,999
0.3% HK\$6,000 - \$6,999
0% HK\$7,000 - \$7,999
1% HK\$8,000 - \$8,999
1% HK\$9,000 - \$9,999
3% HK\$10,000 – \$12,499
3% HK\$12,500 - \$14,999
8% HK\$15,000 - \$19,999
9% HK\$20,000 - \$24,999
14% HK\$25,000 - \$29,999
19% HK\$30,000 - \$39,999
19% HK\$40,000 - \$49,999
23% HK\$50,000 or above

立法會CB(2)1214/18-19(6400)號文件
LC Paper No. CB(2)1214/18-19(6400)

The Legislative Council of the Hong Kong Special Administrative Region

Bills Committee on Smoking (Public Health) (Amendment) Bill 2019

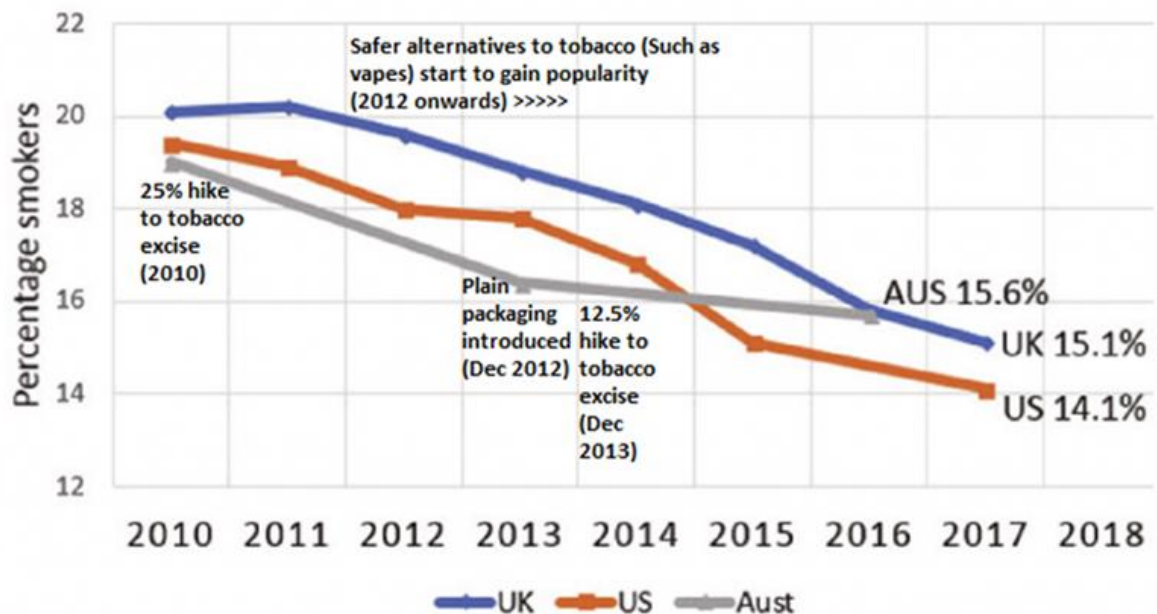
Comments of the Australian Taxpayers' Alliance (ATA)

Introduction

1. The ATA thanks the committee for the opportunity to provide comments on the aforementioned legislation to ban the import, manufacture or sale, or use in certain places, of prescribed alternative smoking products and to restrict the giving, possession, advertising or promotion of the products.
2. The ATA is a 75,000+ member national grassroots advocacy group who represent Australia's taxpayers. We stand for the principles of civil liberties, property rights, evidence-based public health and the economic prosperity of our shared ASEAN international region.
3. We are concerned that the *Smoking (Public Health) (Amendment) Bill 2019* ('the Bill') will seriously undermine public health outcomes in Hong Kong and set a terrible precedent for our southeast Asian region by denying smokers struggling to beat their addiction the choice of proven safer nicotine delivery alternatives and quit smoking tools.
4. We note that comprehensive international studies and international best practice in public health policy supports the legalisation of alternative nicotine delivery products such as vapes. In addition to outlining the evidence, the following submission notes the strong correlation between the availability of these products and declining smoking cessation rates in countries which have not banned them such as the UK, USA and European Union countries. By contrast, Australia, where nicotine vaping is illegal, has

experienced stalling smoking cessation rates in recent years as seen in the following graph which also charts the effect of other tobacco control measures by the Australian government:

UK, US, Australia 18y+ smoking rates, 2010-2017



Sources: UK. Annual Population Survey, Office of National Statistics; US. National Health Interview Survey, CDC National Centre for Statistics; Australia. National Drug Strategy Household Survey, Australian Institute of Health and Welfare

5. It is submitted that vaping products are not completely risk-free. However, studies have shown that they are at least 95 percent less harmful than traditional cigarettes.¹ Therefore, they should not be denied to smokers who want to access them as this is contrary to both public health and informed consumer choice. According to the Chinese University of Hong Kong, smoking is the single largest cause of illness and premature death in Hong Kong and kills over 5,500 Hong Kongers a year which equates to 15 deaths a day.² Given these circumstances, it is submitted that evidence-based public health policy based on tobacco harm reduction must be considered, and will be abrogated if *the Bill* is passed.
6. Evidence also shows that alternative nicotine delivery products such as vapes, do not act as a gateway to smoking, are almost exclusively taken up by former smokers, are largely limited to experimental use amongst the small minority of minors or non-smokers who utilise these products, and benefit from legalisation and regulation to eliminate or minimise any of their potential harms.

¹ Public Health England. E-cigarettes around 95% less harmful than tobacco estimates landmark review. E-cigarettes: an evidence update 19 August 2015. [\[link\]](#)

² http://www.cuhk.edu.hk/med/shhcgg/healthyageing/healthyageing_in01.html

7. It is therefore submitted that the Bill should not be passed, and that an evidence-based regulatory framework and advertising regulations premised on international best practice, should be applied to alternative nicotine delivery products. This will ensure that their potential harms while ensuring that they are targeted at former smokers and not non-smokers or minors.

Tobacco Harm Reduction & Vaping

8. Tobacco harm reduction is the process of minimising or eliminating the harms inflicted upon smokers by tobacco. It has already been employed in other fields such as road safety and intravenous drug use. Government programs have dealt with high-risk behaviours through education, strategies and products that could facilitate change to lower-risk behaviour.
9. The ATA submits that while the ultimate aim is to encourage the complete cessation of smoking, a large preponderance of smokers are unable or unwilling to quit and remain at high risk of smoking-related fatalities or diseases. 'Cold turkey' is the most desirable method of smoking cessation, the method has a low success rate.³ Most of those attempting to quit smoking completely, experience relapses and many struggle for the rest of their lives to quit despite *bona fide* intentions and persistent attempts to do so.⁴
10. Tobacco control experts have understood this problem for decades, resulting in the development and approval of 'Nicotine Replacement Therapy' (NRT). These products (including patches and gums) provide smokers with controlled doses of nicotine and are intended to ease the smokers' transition out of smoking by targeting their nicotine withdrawals and cravings.⁵
11. Tobacco harm reduction is an instrumental aspect of Articles 1(d) and 1(f) of the World Health Organisation's [Framework Convention on Tobacco Control](#) (FCTC) treaty. Hong Kong is a signatory to the FCTC and is thus obliged to introduce various THR strategies in addition to other tobacco control measures.
12. Some reduced harm products such as nicotine patches and gums have been sold over-the-counter as consumer goods in Hong Kong for years, while others like nicotine inhalers are available as prescription medicine.⁶ The Hong Kong Journal of Family Physicians has published studies confirming the effectiveness of these products as smoking cessation aids.⁷ Randomised controlled trials of early vaping devices with low nicotine delivery were found to be at least as effective in aiding cessation as NRT.

³ Hyland, Andrew, et al. "Predictors of cessation in a cohort of current and former smokers followed over 13 years." *Nicotine & Tobacco Research* 6.Suppl 3 (2004): S363-S369.

⁴ Ibid.

⁵ Molyneux, A. (2004). Nicotine replacement therapy. *Bmj*, 328(7437), 454-456. [\[link\]](#)

⁶ Ambrose CH Wong 王智康, Kin-sang Ho 何健生, Kam-wing Ching 程錦榮, Helen CH Chan 陳靜嫻, Marget FY Wong 黃鳳儀, 'Observational study on the efficacy of various modalities of Nicotine Replacement Therapy available in Hong Kong' *HK Pract* 2014; 36:4-10

http://www.hkcfp.org.hk/Upload/HK_Practitioner/2014/hkp2014vol36mar/original_article.html

⁷ Ibid.

Studies of more modern devices have shown them to be even more effective.⁸

13. The scientific evidence overwhelmingly demonstrates that e-cigarettes or ‘vapes’ are at least 95% less harmful than tobacco smoking and are effective smoking cessation tools which are almost exclusively taken up by smokers seeking safer alternative means of acquiring nicotine. As such, the current legal status of nicotine vaping effectively encourages smoking and facilitates smoking-related harms by preventing smokers from accessing proven safer alternatives which are also proven to drastically lower the build-up of toxins, carcinogens and tar in the bodies of those who transition from cigarette smoking.
14. While Australia’s smoking rates have stagnated since 2012-13, those of the UK and USA have fallen considerably within this timeframe. The UK not only allows smokers to legally access nicotine vapes, but actively encourages doctors, through its public health agencies and anti-smoking strategies, to recommend nicotine vapes to smokers who want to quit or improve their health. The United States and European Union nations have experienced similar drops in their smoking prevalence since 2012, coinciding with the rapid uptake of nicotine vaping technology.
15. Vapes do not contain or combust tobacco. Instead, nicotine is delivered in a liquid medium which is heated and ‘vapourised’ prior to inhalation.
16. When consumed through inhalation, nicotine is a benign stimulant no more dangerous than caffeine. It is a member of the nightshade family and a naturally occurring alkaloid that does not significantly alter mind/body function or provide pharmacological effects like a medicine. It is also non-carcinogenic and is not the cause of smoking-related morbidity or mortality.⁹
17. Smoking-related harms overwhelmingly arise from the combustion of the tobacco leaf itself,¹⁰ a process that releases carcinogens, toxins and tar, and not from nicotine.¹¹
18. By providing smokers with the nicotine that satisfies their cravings without the tar that detracts their health, nicotine vaping is hence a safer alternative.¹²
19. This is supported by the Royal College of Physicians (UK) which sums up the effects of nicotine as follows: *“At low doses, nicotine is a stimulant, which in the short term increases heart rate and may improve attention, memory and fine motor skills. Although potentially lethal at very high doses, at the blood levels typically achieved by*

⁸ Hitchman SC. Associations between e-cigarette type, frequency of use and quitting smoking. *Nicotine Tob Res* 2015.

⁹ Royal College of Physicians. *Nicotine without smoke: Tobacco harm reduction*. London: RCP. 2016. [\[link\]](#), pg. 125

¹⁰ U.S. Food and Drug Administration Website, July 28 2017 [\[link\]](#)

¹¹ Shahab L, Goniewicz ML, Blount BC, Brown J, McNeill A, Alwis KU, et al. Nicotine, Carcinogen, and Toxin Exposure in Long-Term E-Cigarette and Nicotine Replacement Therapy Users: A Cross-sectional Study. *Ann Intern Med*. [Epub ahead of print 7 February 2017] doi: 10.7326/M16-1107 [\[link\]](#)

¹² David J. Nutt, *et al.*, “Estimating the Harms of Nicotine-Containing Products Using the MCDA Approach,” *European Addiction Research* **20** (April 2014): 218–25 [\[link\]](#)

smoking nicotine does not result in clinically significant short- or long-term harms."¹³

20. Vapes facilitate a consumer's ability to moderate their nicotine dosage. A 2016 study found that experienced vapers were better able to titrate their nicotine dosage with nicotine solutions of different concentrations than using cigarettes.¹⁴
21. Most users vape with solutions that are flavoured, providing an appealing sensory experience that makes them a more attractive option than cigarettes and thus enhances their effectiveness as a quit smoking tool. A 2016 Consumer Advocates for Smoke-Free Alternatives Association (CASAA) survey of 27,343 e-cigarette users found that 72% of respondents *"credited tasty flavours with helping them give up tobacco."*¹⁵
22. Similarly, a 2013 internet study by leading researcher Konstantinos Farsalinos, concluded that flavourings in e-cigarettes *"appear to contribute to both perceived pleasure and the effort to reduce cigarette consumption or quit smoking."*¹⁶ A pleasant smelling vapour also ensures that passive vapers in the vicinity are spared exposure to far more odorous and dense tobacco smoke which, unlike vapour generated by using nicotine solutions, sticks to clothes.
23. The ATA further submits that vapes are also customisable to the individual quitter's needs which facilitates individuals to transition out of smoking. Smokers who switch to vaping are able to choose from an innovative range of vapes that can be tailored to their individual preferences. For example, some consumers prefer devices or liquids can deliver a similar physical sensation to the throat as a cigarette. Vapes can achieve this effect without relying on carcinogenic tobacco smoke.
24. Another element is that it is more effective than conventional nicotine patches and gums. The practical advantages of vaping over conventional nicotine products is also supported by the statistics. Randomised controlled trials of early devices with low nicotine delivery were found to be at least as effective as nicotine patches and gums. Studies of more modern devices have shown them to be even more effective.¹⁷
25. The effectiveness is also enhanced by the addition of nicotine. The Cochrane Collaboration, an internationally recognised independent assessor of therapeutic effectiveness, canvassed the results of multiple studies and found that e-cigarettes containing nicotine increased the odds of long-term successful smoking cessation than using e-cigarettes which do not contain nicotine.¹⁸

¹³ Tobacco Advisory Group to the Royal College of Physicians (UK) 2016, 'Nicotine without smoke: Tobacco harm reduction' pg. 184.

¹⁴ Dawkins LE, Kimber CF, Doig M, Feyerabend C, Corcoran O. Self-titration by experienced e-cigarette users: blood nicotine delivery and subjective effects. *Psychopharmacology*. 2016.

¹⁵ "Large Survey Finds E-Cigarettes Do Help Smokers Quit," *Vape Ranks* (website), January 12, 2016, [\[link\]](#)

¹⁶ Konstantinos E. Farsalinos, *et al.*, "Impact of Flavour Variability on Electronic Cigarette Use Experience: An Internet Survey," *International Journal of Environmental Research and Public Health* 10 (December 2013): 7272–82 [\[link\]](#)

¹⁷ Hitchman SC. Associations between e-cigarette type, frequency of use and quitting smoking. *Nicotine Tob Res* 2015.

¹⁸ [\[link\]](#)

26. By 2014, an estimated 6 million Europeans had quit smoking by switching to ENDS since the technology was introduced,¹⁹ with surveys indicating that 65% of Australians would consider quitting smoking if the e-liquids necessary to vape nicotine were legally available.²⁰ If just two out of three Australian smokers switched to vaping, over 500,000 lives would be saved from premature death.²¹
27. Vapes (supported by an appropriate regulatory framework) have been significantly linked to harm reduction. A long-term, cross-sectional study recently found that transitioning from cigarettes to alternative nicotine delivery products **drastically lowers the build-up of carcinogens and tar in the bodies of smokers.**²²
28. The UK Royal College of Physicians has found that nicotine delivery products such as vapes and heat-not-burn products are less harmful than conventional smoking of combustible tobacco as they **virtually eliminate a smoker's exposure to carcinogens found in tobacco.**²³ For example, the two most dangerous carcinogens in tobacco smoke: Acrylonitrile and 1,2-butadiene, account for more than three-quarters of the cancer risk from smoking and are not found in vapour at all.²⁴
29. Research has also found that nicotine vaping reduces the risk of cardiovascular disease among smokers due to the far lower concentrations of potentially toxic ingredients in vaping solutions than cigarettes.²⁵
30. The Royal College of Physicians and Public Health England not only recommend the legalisation of alternative nicotine delivery products including vapes, but advises **doctors to recommend these products to patients who wish to quit smoking.**²⁶ Nicotine vaping has been endorsed by academics and public health institutions including the UK Centre for Tobacco and Alcohol Studies²⁷ and the Canadian Institute

¹⁹ Farsalinos KE, Poulas K, Voudris V, Le Houezec J. Electronic cigarette use in the European Union: analysis of a representative sample of 27 460 Europeans from 28 countries. *Addiction* (Abingdon, England). 2016. [\[link\]](#)

²⁰ Australia Adult Smoker Survey (2015) Factasia. [\[link\]](#)

²¹ Levy, D. T., Borland, R., Lindblom, E. N., Goniewicz, M. L., Meza, R., Holford, T. R. & Abrams, D. B. (2017). Potential deaths averted in USA by replacing cigarettes with e-cigarettes. *Tobacco control*, tobaccocontrol-2017. [\[link\]](#); Dr. Colin Mendelsohn – Tobacco Treatment Specialist, 3rd October 2017 “Switching to e-cigarettes could save the lives of half a million Australian smokers” [\[link\]](#)

²² Shahab L, Goniewicz ML, Blount BC, Brown J, McNeill A, Alwis KU, et al. Nicotine, Carcinogen, and Toxin Exposure in Long-Term E-Cigarette and Nicotine Replacement Therapy Users: A Cross-sectional Study. *Ann Intern Med*. [Epub ahead of print 7 February 2017] doi: 10.7326/M16-1107 [\[link\]](#)

²³ Royal College of Physicians (London), Nicotine without smoke: tobacco harm reduction. 28 April 2016. [\[link\]](#)

²⁴ Stephens WE. Comparing the cancer potencies of emissions from vapourised nicotine products with those of tobacco smoke. *Tob Control* 2017 [\[link\]](#)

²⁵ Benowitz, N. L. (2010). Nicotine addiction. *New England Journal of Medicine*, 362(24), 2295-2303. [\[link\]](#)

²⁶ UK Government policy paper, “towards a smoke-free generation” 18 July 2017 [\[link\]](#)

*- The RCP states that vaping is unlikely to represent even 5% (1/20th) of the danger of smoking and may be a great deal less.

²⁷ Britton J, Bogdanovica I, McNeill A, Bauld L. Commentary on WHO report on electronic nicotine delivery systems and electronic non-nicotine delivery systems. UK Centre for Tobacco & Alcohol Studies. 2016.

for Substance Use Research (CISUR).²⁸

31. According to Dr. Colin Mendelsohn, tobacco treatment specialist and Conjoint Associate Professor of Public Health and Community Medicine at the University of New South Wales in Australia, **smokers suffering from mental illness will also be specially benefited by vapes.**²⁹ This claim is also supported by the Royal Australia and New Zealand College of Psychiatrists.³⁰
32. Collins & Lapsley estimated that tobacco costs the Australian government \$65 million annually (or \$85 million annually, adjusted for inflation) due to fires.³¹ Vapes carry far less fire risk. Legalised nicotine vapes are therefore likely to minimise tobacco-related fire damage.
33. Public health outcomes globally have substantially improved as a result of vapes. Georgetown University's Comprehensive Cancer Centre estimates a reduction of 21 percent in smoking-attributable deaths and 20 percent in life years lost as a result of use of vapes in people born in 1997 or after, compared to what would have happened if e-cigarettes were not an option.³² Another study considered the public health impacts of vaping in the US over a 10-year period. It found that even under conservative estimates about the rate of uptake in vaping by smokers and relative harm, it is likely that 6.6 million Americans will avoid premature deaths with 86.7 million fewer life years lost due to vapes.³³ If the study's results are applied to Australia, over half a million premature deaths will be prevented should two out of three smokers here transition to vaping.³⁴
34. The most recent evidence to date in August, 2018, involved the UK parliament's conclusions that e-cigarettes are substantially less harmful than conventional cigarettes and are a proven stop-smoking tool. The report summarising these findings recommended that *'Existing smokers should always be encouraged to give up all types of smoking, but if that is not possible they should switch to e-cigarettes as a considerably less harmful alternative'*.³⁵

²⁸ O'Leary R, MacDonald M, Stockwell T, Reist D. Clearing the Air: A systematic review on the harms and benefits of e-cigarettes and vapour devices. University of Victoria, BC: Centre for Addictions Research of BC. 2017.

²⁹ [\[link\]](#)

³⁰ [\[link\]](#)

³¹ Collins, David John, and Helen M. Lapsley. *The costs of tobacco, alcohol and illicit drug abuse to Australian society in 2004/05*. Canberra: Department of Health and Ageing, 2008. [\[link\]](#)

³² Levy et al, The Application of a Decision-Theoretic Model to Estimate the Public Health Impact of Vaporized Nicotine Product Initiation in the United States. *Nicotine Tob Res* (2016) doi: 10.1093/ntr/ntw158 First published online: July 14, 2016

³³ Levy DT. Potential deaths averted in USA by replacing cigarettes with e-cigarettes. *Tobacco Control* 2017 [\[link\]](#)

³⁴ Ibid; Dr. Colin Mendelsohn – Tobacco Treatment Specialist, 3rd October 2017 "Switching to e-cigarettes could save the lives of half a million Australian smokers" [\[link\]](#)

³⁵ <https://www.parliament.uk/business/committees/committees-a-z/commons-select/science-and-technology-committee/news-parliament-2017/e-cigarettes-report-publication-17-19/>

35. Public Health England assert that smoking and long-term use is likely to be no more than 5% of the risk of smoking. This is supported by the graphs below which show that electronic cigarettes are positioned closer to the low-risk end of the scale.³⁶
36. For these reasons, the Royal College of Physicians notes that policy or laws that make vapes less easily accessible, less palatable or acceptable, more expensive, less consumer-friendly, less pharmacologically effective or which hinder development and innovation of new products, effectively perpetuate smoking and its harms.³⁷
37. **Overseas Evidence:** The ATA draws on evidence from international approaches to support the effectiveness of vapes as a cessation aid in quitting smoking. In general, **European nations** and the **USA** have adopted a progressive approach by allowing consumers the choice of legally available vapes with nicotine. The US Food & Drug Administration (FDA) recently announced strong support for e-cigarettes in tobacco harm reduction,³⁸ with FDA Commissioner Dr. Scott Gottlieb declaring that *“Envisioning a world where ... adults who still need or want nicotine could get it from alternative and less harmful sources, needs to be the cornerstone of our efforts.”*³⁹
38. **New Zealand**⁴⁰ and **Canada**⁴¹ are currently in the process of legalising nicotine for use in vapes.
39. In the **UK**, nearly 3 million adults now use e-cigarettes,⁴² and both public health authorities, (over 20 organisations including Public Health **England** and NHS **Scotland**), and doctors, now ‘*encourage*’ smokers to use them as a quit smoking aid.^{43 44} The products are sold as consumer goods and can also be sold through a therapeutic goods pathway after securing approval of the relevant regulator.
40. The **European Union** has also adopted a dual system, whereby there is an ordinary consumer market but also potential for a therapeutic market.⁴⁵
41. Since they have been available around the world, vapes have been exclusively taken up by current smokers attempting to quit or reduce their smoking.⁴⁶

³⁶ <https://www.karger.com/Article/FullText/360220>

³⁷ Royal College of Physicians (London), Nicotine without smoke: tobacco harm reduction. 28 April 2016 [\[link\]](#)

³⁸ Warner KE, Schroeder SA. FDA's Innovative Plan to Address the Enormous Toll of Smoking. *Jama*. 2017; Gottlieb S, Zeller M. A Nicotine-Focused Framework for Public Health. *N Engl J Med*. 2017. [\[link\]](#)

³⁹ [\[link\]](#)
⁴⁰ New Zealand Government. Nicotine e-cigarettes to become legal (media release). 2017. [\[link\]](#)

⁴¹ Canadian Parliament. Bill S-5. An Act to amend the Tobacco Act and the Non-smokers' Health Act and to make consequential amendments to other Acts. 2017. [\[link\]](#)

⁴² The Guardian, 8th May 2017, “majority of vapers have quit tobacco” [\[link\]](#)

⁴³ Public Health England. E-cigarettes around 95% less harmful than tobacco estimates landmark review. E-cigarettes: an evidence update 19 August 2015. [\[link\]](#)

⁴⁴ NHS Health Scotland. Consensus statement on e-cigarettes. 2017 [\[link\]](#) Accessed 29 September 2017.

⁴⁵ European Commission. Tobacco Products Directive, Electronic cigarettes, Article 20. 2014. [\[link\]](#)

⁴⁶ McNeill A, Brose LS, Calder R, Hitchman SC, Hajek P, McRobbie H. E-cigarettes: an evidence update. A report commissioned by Public Health England. PHE publications gateway number: 2015260 2015. [\[link\]](#)

42. As of 2014, over 6 million Europeans had given up smoking completely by transitioning to vapes,⁴⁷ and it is likely that this figure has increased substantially since then. Similarly, over 1.5 million British smokers had quit as of 2016 with the aid of vaping,⁴⁸ and the latest figures from Public Health England (2018) estimate that 20,000+ British smokers a year continue to quit with the aid of vaping.⁴⁹ Approximately 770,000 of these went on to quit both smoking and vaping completely.
43. The UK government found that while the fall in the country's smoking rate began to stall late in the last decade, smoking sharply reduced between 2012 and 2014 – a period coinciding with rapid uptake of vaping. By 2014, it had hit a record low of 17.4%.⁵⁰ The only significant tobacco control measure implemented by the UK government during this time were cigarette display bans which did not come into effect until 2015, towards the period's end.⁵¹
44. A similar trend is observed in the United States where adult smoking rates have fallen rapidly between 2010 and 2017 – from 19.4% to a record low of 14.4% - below Australia's smoking rate despite the prevalence of far stricter tobacco control regulations including plain packaging and the world's highest cigarette prices in Australia.⁵²
45. Smokers in the US who attempt to quit with the aid of e-cigarettes were over 73% more likely to succeed than those who do not use vapes.⁵³ Studies have found that vapes are at least as effective as other nicotine replacements to aid smoking cessation,⁵⁴ and are likely to reach more smokers due to their suitability as a cigarette substitute.⁵⁵ A UK study observed 15,532 recent smokers and found that those who use e-cigarettes daily were thrice as likely to have quit smoking by the end of the study than those who had never used e-cigarettes.⁵⁶
46. Data from the United States' 2014/15 Tobacco Use Supplement-Current Population Survey (TUS-CPS) found that both quit attempts and the success rate of quit attempts were positively correlated with vape use.⁵⁷ A survey of over 15,000 American smokers

⁴⁷ Vardavas, C. I., Filippidis, F. T., & Agaku, I. T. (2015). Determinants and prevalence of e-cigarette use throughout the European Union: a secondary analysis of 26 566 youth and adults from 27 Countries. *Tobacco control*, 24(5), 442-448.

⁴⁸ ASH. Use of electronic cigarettes (vapourisers) among adults in Great Britain. Fact sheet. May 2017 [\[link\]](#)

⁴⁹ Evidence review of e- cigarettes and heated tobacco products 2018. A report commissioned by Public Health England [\[link\]](#)

⁵⁰ Office of National Statistics (UK), Adult Smoking Habits in Great Britain 1974-2014. 18 February 2016 Table 1 [\[link\]](#)

⁵¹ Ibid.

⁵² CDC, National Health Interview Survey, 2017 [\[link\]](#)

⁵³ Zhu S. E-cigarette use and associated changes in population smoking cessation. *BMJ* 2017 [\[link\]](#)

⁵⁴ Clearing the Air: a systematic review on the harms and benefits of e-cigarettes and vapour devices. University of Victoria, Centre for Addictions Research BC, Canada. January 2017 [\[link\]](#)

⁵⁵ Glasser AM. Overview of Electronic Nicotine Delivery Systems. *Am J Prev Med* 2017. [\[link\]](#)

⁵⁶ Giovenco DP. Prevalence of population smoking cessation by electronic cigarette use status in a national sample of recent smokers. *Addict Behav* 2017 [\[link\]](#)

⁵⁷ Levy DT. The Relationship of E-Cigarette Use to Cigarette Quit Attempts and Cessation: Insights From a Large, Nationally Representative U.S. Survey. *Nicotine Tob Res* 2017 [\[link\]](#)

also found that vapes are now more popular than FDA-approved medications as a tobacco cessation aid.⁵⁸ They are also the most popular quitting aid in the UK.⁵⁹

47. **Refutations to anti-vaping claims:** A number of misleading comments have been made by anti-vaping advocates about vaping. The assembly should reconsider the following evidence below when forming a decision regarding the Bill.
48. Contrary to anti-vaping arguments, there is no evidence that e-cigarettes provide a 'gateway' to smoking for youths as they enter adulthood.⁶⁰ This claim is not supported by the evidence, which instead finds that vapourised nicotine has almost exclusively been taken up by smokers attempting to quit or lower their intake,⁶¹ therefore acting as a 'gateway' away from tobacco smoking.
49. A 2014 study in the American Journal of Preventative Medicine found that the few nicotine vape users who were not smoking previously, used the product only 1-2 days a week, indicating that any residual harm from legalised nicotine vaping is minimal.⁶²
50. Similarly, evidence from large, national cross-sectional studies also show no evidence that vaping uptake increases the ranks of future smokers in countries where nicotine vaping is legal.⁶³
51. **The latest study from April 2019 by Cardiff University researchers has disproved the misleading claims from anti-vaping campaigners that vaping is a gateway to smoking.**⁶⁴ According to Dr Graeme Moore, based at the Centre for the Development and Evaluation of Complex Interventions for Public Health Improvement: "*these*

⁵⁸ Caraballo RS. Quit Methods Used by US Adult Cigarette Smokers, 2014–2016. *Prev Chronic Dis* 2017 [\[link\]](#)

⁵⁹ Fidler, J. A., Shahab, L., West, O., Jarvis, M. J., McEwen, A., Stapleton, J. A & West, R. (2011). 'The smoking toolkit study': a national study of smoking and smoking cessation in England. *BMC public health*, 11(1), 479. [\[link\]](#)

⁶⁰ O'Leary R, MacDonald M, Stockwell T, Reist D. Clearing the Air: A systematic review on the harms and benefits of e-cigarettes and vapour devices. University of Victoria, BC: Centre for Addictions Research of BC.; 2017 [\[link\]](#); Polosa R. A critique of the U.S. SG's conclusions regarding e-cig use among youth and young adults in US. *Harm Red J* 2017 [\[link\]](#)

⁶¹ McNeill A, Brose LS, Calder R, Hitchman SC, Hajek P, McRobbie H. E-cigarettes: an evidence update. A report commissioned by Public Health England. PHE publications gateway number: 2015260 2015. [\[link\]](#); Britton J, Bogdanovica I, McNeill A, Bauld L. Commentary on WHO report on electronic nicotine delivery systems and electronic non-nicotine delivery systems. UK Centre for Tobacco & Alcohol Studies. 2016.

⁶² Warner, K. E. (2016). Frequency of E-Cigarette Use and Cigarette Smoking by American Students in 2014. *American journal of preventive medicine*.

⁶³ Kozlowski L, Warner K. Adolescents and e-cigarettes. Objects of concern may appear larger than they are. *Drug Alc Depend* 2017

⁶⁴ Hallingberg B, Maynard OM, Bauld L, *et al* Have e-cigarettes renormalised or displaced youth smoking? Results of a segmented regression analysis of repeated cross sectional survey data in England, Scotland and Wales *Tobacco Control* Published Online First: 01 April 2019. doi: 10.1136/tobaccocontrol-2018-054584 <https://tobaccocontrol.bmj.com/content/tobaccocontrol/early/2019/03/08/tobaccocontrol-2018-054584.full.pdf>

findings suggest that fears over a resurgence in youth tobacco smoking because of the rise in e-cigarette use are largely unfounded to date."⁶⁵ ⁶⁶

52. Nicotine patches and gums have existed and been approved for smokers as young as 12 years old for 30 years across western, developed nations, yet no evidence of adverse effects on adolescent brain development have emerged.⁶⁷
53. The presence of formaldehyde in e-cigarettes is misleading. This claim is based on a single study which produced formaldehyde from an e-cigarette by deliberately overheating it, thus engaging in unsafe use which is atypical of normal practice and akin to the dangerous effects of coffee being inferred from the consumption of an entire carton of coffee powder in a single sitting.⁶⁸
54. Subsequent research has confirmed that 'The high levels of aldehyde emissions that were reported in a previous study were caused by unrealistic use conditions that create the unpleasant taste of 'dry puffs' to e-cigarette users and are thus avoided.'⁶⁹
55. Under realistic conditions, new-generation vapes emit minimal formaldehydes/g liquid at both low and high power.⁷⁰
56. **Vaping and tobacco excise:** It is submitted that maintaining the accessibility of nicotine vaping will enhance the effectiveness of tobacco excise as a control measure as it will offer smokers unable to break their addiction a viable alternative as the addictive quality of cigarettes renders them a relatively price inelastic product. It is submitted that the insignificant decline in Australia's smoking prevalence since 2013 despite excise hikes attests to this, since nicotine vaping remains illegal in Australia and the same pattern has not been repeated in comparable countries like the UK and USA which have legalised nicotine vaping and where tobacco excise rates are lower Australia's. It is further submitted that allowing smokers to continue vaping will be of especially important benefit to marginalised groups and demographics who are disproportionately affected by smoking addiction.⁷¹ One in three individuals suffering from mental illness are smokers and these individuals also experience lower quitting rates than the general population, with smoking identified as the major contributor to

⁶⁵ National Institute for Health Research 'Growth in e-cigarette use hasn't led young people to think smoking is 'normal' 2 April 2019 <https://www.nihr.ac.uk/news/growth-in-e-cigarette-use-hasnt-led-young-people-to-think-smoking-is-normal/10736>

⁶⁶ Steven Morris, 'E-cigarettes do not normalise smoking for young people – study' *The Guardian* 2 April 2019 <https://www.theguardian.com/society/2019/apr/01/e-cigarettes-do-not-normalise-smoking-for-young-people-study>

⁶⁷ Lee PN, Fariss MW. A systematic review of possible serious adverse health effects of nicotine replacement therapy. *Archives of toxicology*. 2016.

⁶⁸ R. Paul Jensen, *et al.*, "Hidden Formaldehyde in E-Cigarette Aerosols," *New England Journal of Medicine* **394** (January 2015): 392–4, doi: 10.1056/NEJMc1413069, [\[link\]](#)

⁶⁹ Farsalinos K. E-cigarettes emit very high formaldehyde levels only in conditions that are aversive to users. *Food Chem Tox*. 2017.

⁷⁰ Farsalinos K. Aldehyde levels in e-cigarette aerosol. Findings from a replication study and from use of a new-generation device. *Food Chem Tox* 2017.

⁷¹ *Ibid.*

the health gap between the mentally ill and the general population.⁷² Poorer individuals not only lose a larger portion of their household incomes to tobacco and tobacco excise, they are also less likely than their wealthier counterparts to quit smoking and more likely to smoke due to stress or depression,⁷³ as well as less sensitive to tobacco excise hikes.⁷⁴ It is therefore submitted that regulated and legal vaping products provide effective incentives to smokers to quit who are not able or willing to quit despite tobacco excise. It is further submitted that such legal alternatives for nicotine delivery which are safer than tobacco smoking undermine the tobacco black market, thereby countering the influence of criminal enterprises and ensuring takings in tax revenue for the Hong Kong government.

57. **Advertising:** It is submitted that rather than prohibiting the advertising of vaping products, international best practice should be adopted from the United Kingdom whereby advertising regulations allow these products to be advertised within strict guidelines. The UK regulations preclude advertising that appeals to minors or targets non-smokers. Vape advertisements cannot feature anyone appearing to be under the age of 25.⁷⁵ These regulations can be adopted as standards and guidelines in Hong Kong.

Conclusion

58. The ATA once again thanks the legislative council and committee for the opportunity to provide the abovementioned comments. It is submitted that the adoption of international best practice in public health by allowing for the availability of nicotine vaping products promotes smoking cessation, reduces tobacco-related harms, undermines the tobacco black market and enhances the effectiveness of tobacco excise and future excise hikes in a manner that is fairer for poorer smokers and marginalised groups. It is submitted that the evidence outlined in this submission from multiple jurisdictions including Australia, the UK, European Union and USA, attests to the value and effectiveness of a compassionate, risk-proportionate and pro-consumer choice tobacco control policy which includes innovative and life-saving nicotine vaping technology.



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⁷² Mendelsohn, Colin P., Dianne P. Kirby, and David J. Castle. "Smoking and mental illness. An update for psychiatrists." *Australasian Psychiatry* 23.1 (2015): 37-43. [\[link\]](#)

⁷³ Peretti-Watel, P., and Constance, J.. "'It's all we got left". Why poor smokers are less sensitive to cigarette price increases." *International journal of environmental research and public health* 6.2 (2009): 608-621. [\[link\]](#)

⁷⁴ Remler, Dahlia K. "Poor smokers, poor quitters, and cigarette tax regressivity." *American Journal of Public Health* 94.2 (2004): 225-229. [\[link\]](#)

⁷⁵ UK Advertising Code. UK Code of Non-Broadcast Advertising. 2016 [\[link\]](#)