Top Ten Things To Know
Electronic Cigarettes

1. This paper reviews the latest science around one of the newest classes of products entering the tobacco control landscape – electronic cigarettes, also called electronic nicotine delivery systems (ENDS), providing an overview on design, operations, constituents, toxicology, safety, user profiles, public health, youth access, impact as a cessation aid, and secondhand exposure.

2. Based on the current evidence, this paper provides policy recommendations in key areas of tobacco control such as clean indoor air laws, taxation, regulation, preventing youth access, marketing and advertising to youth, counseling for cessation, surveillance, and defining e-cigarettes in state law.

3. The American Heart Association supports effective regulation that addresses marketing, labeling, quality control of manufacturing, and standards for contaminants. The association also supports including e-cigarettes in smoke-free air laws and prohibiting the sales of e-cigarettes to youth.

4. As of early 2014, there were 466 brands and 7764 unique flavors of e-cigarette products in the marketplace. There is concern that the use of flavors enhances the appeal of e-cigarettes to youth.

5. E-cigarettes are now are widely available in many countries across the world in retail outlets and online.

6. Some predictions are that e-cigarette sales margins will surpass those of conventional cigarettes and be a $10 billion industry by 2017.

7. There is real concern about the advertising and marketing of e-cigarettes to youth and the access that youth currently have to these products.

8. Clinicians should be educated about e-cigarettes and be prepared to counsel their patients regarding comprehensive tobacco cessation strategies. Current evidence suggests at best a modest effect on cessation, likely equal to or slightly better than nicotine patches without behavioral support.

9. The association will continue to encourage clinicians to use proven smoking cessation strategies as the first line of treatment for any patient. When repeated efforts with conventional treatment fail, is intolerant, or rejected by a patient, clinicians may support the patient's attempt to quit using e-cigarettes.

10. The paper concludes by outlining a future research agenda and critical areas in which new information is urgently needed to further our understanding and assessment of the public health impact of e-cigarettes.


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