

FAO: Wes Streeting, Potential risk reductions

From: Richard Pruen <richard@pruen.co.uk>

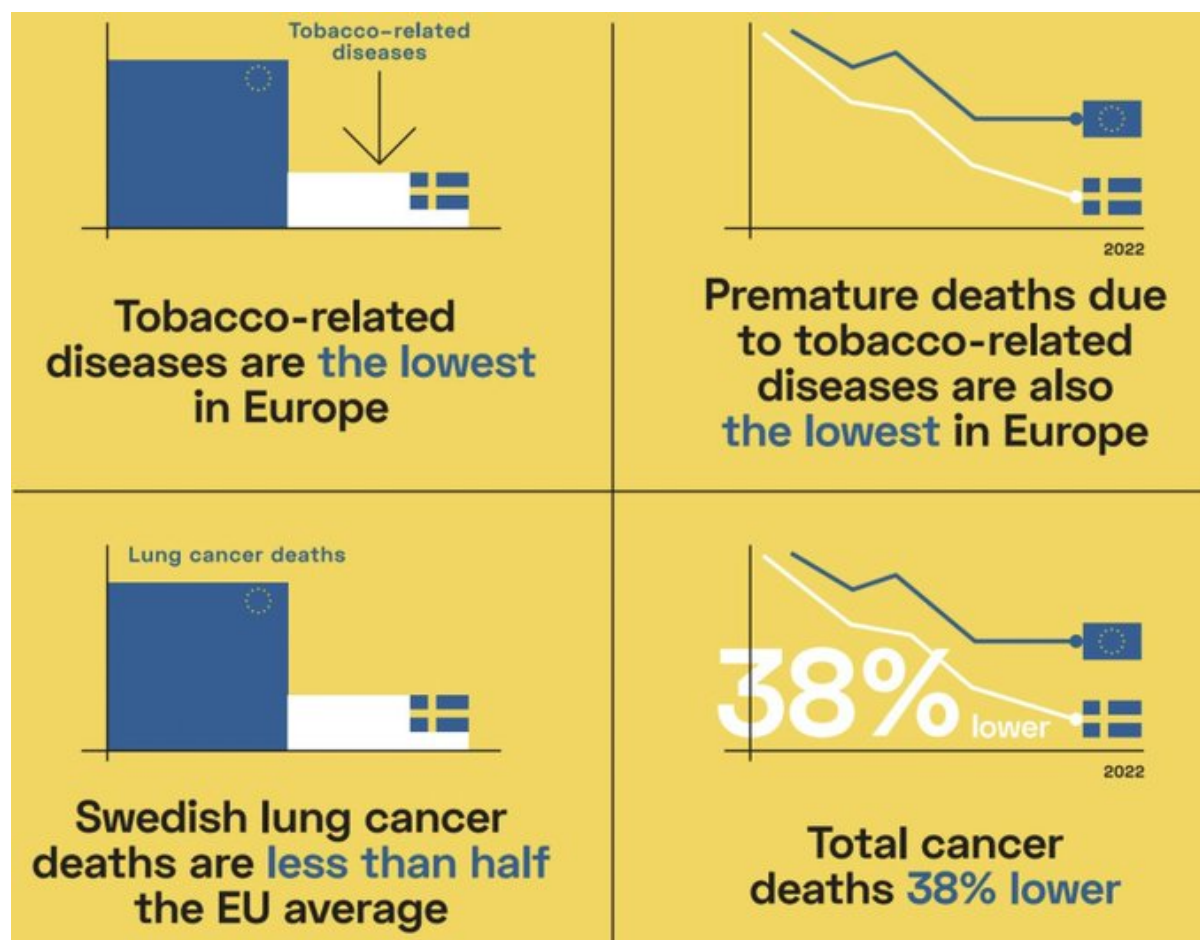
To: dhsc.publicenquiries <dhsc.publicenquiries@dhsc.gov.uk>

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Dear Wes Streeting,

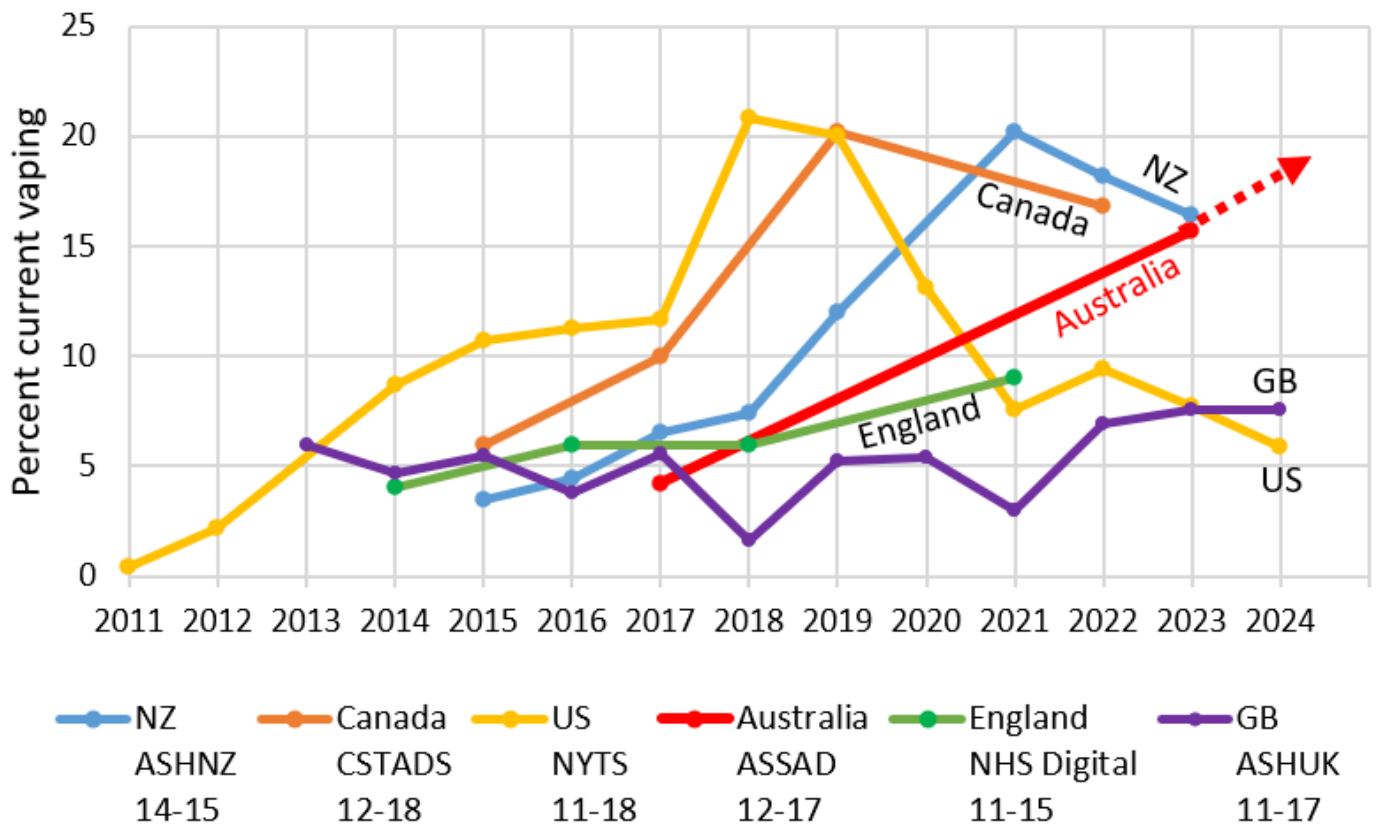
Given the abundance of poor information circulating in Parliament, I thought I should provide an easy to understand example of what a 95% reduction in risk product can do to cancer rates. Unlike the modelling and assumptions that appear to prop up the tobacco and vapes bill, I will provide real population data from Sweden (they started using a harm reduction strategy with snus years ago, enough that real world data is available).



You can verify these graphs by visiting https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Main_Page

The use of nicotine in Sweden is roughly the EU average at 22%, but much of that is a product that is similar in risk to vaping, snus is also 95% or better less risky than cigarettes. Sweden in allowing some uptake by young people has seen the reductions above, snus has substituted for a much more harmful product and overall risk has fallen dramatically as seen above. The 'not without risk' aspect of nicotine and vaping is massively overplayed, it is certainly less risky than alcohol.

Trends in youth current vaping (past 30d use)



As you can see above so far the UK has avoided the surge in adolescent vaping seen elsewhere, there has been a rise, but according to the latest ASH data 0.8% of frequent (> once per week) users are tobacco naive, so most of the increase is diversion from smoking (a good thing since if you never inhale tobacco smoke, it cannot harm you).

This begs the question; if it seems to be working, why fix it? Further restrictions will drive the product to illegal sales, and like has been seen in Australia, that results in more sales to youth, and less access for adults, exactly the opposite of the desired outcome. We already have an illegal market in oversized/over strength products roughly 30% of the market, changes will cause it to step up and supply more if it becomes profitable. Big hint here that the proposed 'sin tax' on nicotine is guaranteed to increase illegal sales. Is the tax take in the short term favourable, with the increase in illegal sales it will prompt, compared to maximising the savings to the NHS? I would strongly suggest not!

Extending the swap to stop scheme, particularly to target older cigarette users will have a huge effect on the NHS, reductions like those in the Sweden graph above, would save more than 500 million a year (up to 1 billion, if we can match Sweden in 50% reduction in lung cancer). <https://www.brunel.ac.uk/news-and-events/news/articles/How-much-could-the-NHS-save-if-people-had-healthier-lifestyles-Hundreds-of-millions-according-to-research#:~:text=One%20of%20my%20studies%20indicates,mouth%20cancer%20and%20heart%20disease>

The reduction would help cut waiting lists by 2029 as you have promised, especially if targeting the older at risk population with swap to stop. The tobacco part of the tobacco and vapes bill, that won't have had any effect by that point, and it is likely by the time it does the cigarette market will have collapsed/changed beyond recognition.

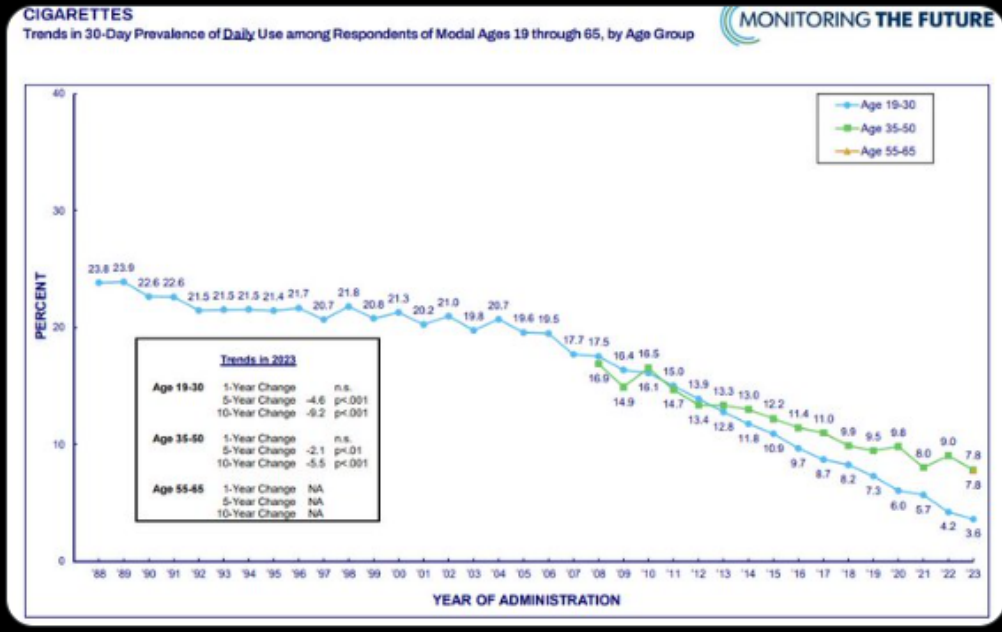


Jonathan Foulds PhD

@JonathanFoulds

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This is the kicker. Up until 2002, >20% of adults aged 19-30 smoked cigarettes DAILY. By 2023 it was 3.6%. This predicts the collapse of the cigarette industry. monitoringthefuture.org/wp-content/upl...



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I am not sure about it collapsing, but it is becoming obvious that big changes are afoot, and it will not be good for Big Tobacco of old.

I would like to ask you to be cautious of changing regulations that we already have, and that appear to be working. Also to ensure that any further measures are well thought out. The tobacco generational ban, I don't think will do any vast harm at least, it might have been a really good idea if implemented 20 years ago.

I would also draw your attention to this regarding misinformation https://safernicotine.wiki/mediawiki/index.php/File:Email_6th_sept_DHSC_reply.pdf

I have to wonder if misinformation on vaping is from tobacco companies, since as above vaping is doing a number on them? It seems this misinformation is stated without evidence usually or highly speculative evidence (rodent studies that are unsupported by the real world data). However I am happy to provide evidence for what I have said, and welcome any questions you may have, please feel free to ask.

Thank you for your time.

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