

# **ITS** - Institute for Tobacco Studies

■ Kanalvägen 17, SE-183 38 Täby, SWEDEN ■ Phone: +46(0)709 745 787 ■ Email: [its@tobaccostudies.com](mailto:its@tobaccostudies.com) ■

## **COMMENT**

Consultation S2015/738/FST on the committee report SOU 2015:6 concerning proposals for legislation to implement the EU Directive on Tobacco Products.

Ministry of Health and Social Affairs  
103 33 Stockholm

## **Committee report SOU 2015:6 More common tobacco legislation**

ITS, Institute for Tobacco Studies, carries out scientific research related to tobacco use and its effects in collaboration with Swedish and international research institutions, naturally without links to the tobacco industry. With reference to relevant results from scientific research ITS is here commenting on the above committee report. We focus mainly on Sweden-specific aspects in relation to the overall objective of the EU Directive on Tobacco Products "to achieve a high level of protection of human health".

### **Summary**

Since the objective of the EU Directive on Tobacco Products is to improve public health, the Swedish implementation should take into account the special background factors that are of importance for the health effects of tobacco use in Sweden. While cigarette smoking poses nothing but colossal harm, snus use poses very tiny health risks and has also been shown to play an important role in the reduction of smoking. It is therefore urgent that tobacco control legislation reflects the differences between cigarettes and snus in a way that makes cigarettes less attractive than snus. Then we can be ensured that the existing trend to use snus instead of cigarettes continues and consolidates the current health benefits that, among other things, mean that Swedish men have Europe's lowest mortality from diseases attributable to tobacco use.

### **General considerations**

#### ***The need for a broad perspective***

As mentioned in the guidelines for the committee, use of tobacco has serious negative impact on public health and national economy in Sweden, and it is important that the forthcoming review of the Swedish tobacco legislation can help reduce these health risks. Such an objective requires that the work of the committee does not only address technical particulars of legal and toxicological matters. Attention should also be paid to the possible effects of regulatory measures on the future development of Swedish people's use of different tobacco products and the ensuing implications for public health.

#### ***The development in Sweden up to now***

In Sweden it has for many years been a reduction of mortality attributable to the use of tobacco, and Swedish males have lower rates than men in any other country in Europe. Among international tobacco researchers there is a widespread conviction that this is to a considerable extent due to large reduction of

smoking associated with transition to snus use. This view is based on results from large studies in Sweden and Norway, which are published in the scientific literature.

### ***The necessity of distinctions between different tobacco products***

To make it possible for Sweden's hitherto favourable trend to continue it is urgent that the transition from smoking to snus continues. To promote a continued favourable development it is essential to strengthen public awareness of the fact that the health risks of snus use are extraordinarily much smaller than those of smoking, and, to make cigarettes less attractive than snus in other respects as well. In this context, the design of the future regulatory framework can play a role. Regulations for the various products should reflect the differences in health risks. Snus should not only be seen as a product to be discouraged due to some (very limited) health risks. Consideration should also be given to the role of snus as a means to keep back the many times more harmful tobacco use - smoking.

### ***Explicit focus on possible health gains***

The present interim report fails to give attention to the above mentioned distinctions. These should be given a clear place in the future work with a view to let the regulatory framework for tobacco products help to encourage smokers to stop using tobacco use and, if this is not successful, make use of the health benefits of switching to snus as a significantly less harmful nicotine use and then to proceed to ceasing snus use as well.

## **Current background conditions**

### ***Health effects of smoking respectively snus use for individual users***

Scientific studies that compared health risks of different tobacco products show extremely large differences between smoking and snus use. Levy et al (Cancer Epidemiol Biomarkers Prev 2004) summarizes their conclusions: *For overall mortality, the estimated median relative risks for individual users of the LN SLT were 9 % and 5 % of the risk associated with smoking for those age 35 to 49 and 50+ years; respectively.* (The abbreviation LN SLT refers to such types of smokeless tobacco as Swedish snus). Gartner et al (Lancet 2007 June 16) studied a different and very illustrative measure of the health damage caused by tobacco use. They estimated, for various categories of tobacco users, how much they can expect to have life shortened compared with non-tobacco users. It was found e.g. that among 50-year-old men smokers could expect to lose 5 life years, snus users 0.5 years. Thus, snus users were expected to have almost the same life expectancy as non-tobacco users, while smokers were expected to have a ten times greater shortening of life.

### ***The significance of snus use for initiation respectively cessation of smoking***

Swedish studies have found that the risk to start daily smoking is significantly less for young people who use snus daily than for those who do not. It was also found that snus is more effective as a smoking cessation aid than nicotine gum and nicotine patch, and, that among men snus is the most widely used smoking cessation aid. Completely coherent results are also reported from Norway, where use of Swedish snuff is rapidly increasing. The results from the Swedish and Norwegian studies are reported in numerous scientific publications. Examples include:

RAMSTRÖM, L. & FOULDS, J. (2006) Role of snuff in initiation and cessation of tobacco smoking in Sweden, Tobacco Control, 15, 210-214.

LUND, KE, MCNEILL, A. & SCHEFFELS, J. (2010) The use of snus for quitting smoking compared with medicinal products, Nicotine & Tobacco Research, 12, 817-822.

Overviews of Swedish and Norwegian findings were also presented at the scientific conference Nicotine Global Forum 2014. They are available on the Internet:

<http://gfn.net.co/downloads/2014/plenary2/lars%20ramstrom.pdf>

<http://gfn.net.co/downloads/2014/plenary1/kar!%20lund.pdf>

The above research findings show that snus use contributes to reduced smoking both by holding back initiation of smoking and by facilitating smoking cessation. When a smoker takes up snus use, dual use can occur as a transition to smoke-free, while sustained dual use is unusual.

### ***Public health effects of smoking respectively snus use***

Despite the fact that individual consumers are at much lower health risks of snus use than of smoking, snus use could be negative for public health if it led to increased initiation of smoking and/or reducing the number of successful smoking cessation attempts. But, as demonstrated above, there is no basis for such fears. The question of public health effects of snus use can be illustrated by analyzing the development in Sweden. The observation that in Sweden increased use of snus has been accompanied by decreasing morbidity and mortality from tobacco-related diseases has long been interpreted as a sign that snus has been a contributing factor to the actual health benefits. A recently published study has made a more detailed analysis of this development:

RAMSTRÖM, L. & WIKMANS, T. (2014) Mortality attributable to tobacco among men in Sweden and other European countries: an analysis of the data in a WHO report. *Tobacco Induced Diseases*. 2014, 12:14.

<http://www.tobaccoinduceddiseases.com/content/pdf/1617-9625-12-14.pdf>

The study concludes that the widespread use of snus instead of cigarettes can be a primary reason why Swedish men have Europe's lowest mortality from diseases attributable to tobacco use.

### ***Impact assessment***

The committee report covers a number of aspects which require an impact assessment. *However, it fails to cover the aspect that should be most important of all - the extent to which the regulatory framework might affect public health in Sweden.* In a report by The National Board of Health and Welfare, *Registry Data on the Harmful Effects of Tobacco Smoking* (National Board of Health and Welfare 2014) it is pointed out, inter alia, (p. 38): "The ongoing trend in the population to move from smoking to snus use will reduce the harmful effects of tobacco, but not eliminate them completely." This underscores what has been said above (under *Explicit focus on possible health gains*) on the importance for public health that the transition from smoking to snus use continues and strengthens. The regulatory framework should therefore create such market conditions that a health oriented impact assessment can indicate that, for a nicotine consumer, it becomes less attractive to use cigarettes than to use snus. Thinking of this kind has also emerged in the Norwegian tobacco policy debate. Thus, the Research Director of *The Norwegian Institute for Alcohol and Drug Research* (SIRUS), Karl Erik Lund, concludes: "To give harm-reducing nicotine products market conditions that let them compete with – or preferably out-compete – the deadly cigarettes, can reduce the enormous cigarette-related mortality more than any other action."

<http://www.forebygging.no/Kronikker/--2015/Behovet-for-skadereduksjon/>

Täby 2015-05-21

Lars Ramström  
Research Director, Institute for Tobacco Studies