

Review of: "[Commentary] The WHO strategies to reduce tobacco-related deaths are insufficient"

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World-renowned tobacco control expert, Professor Lars Ramstrom, offers a cogent analysis. He highlights the commendable achievements of the Framework Convention on Tobacco Control (FCTC) in reducing smoking rates in certain countries while shedding light on its notable shortcomings in others. In this context, the FCTC's stance against alternative nicotine products like e-cigarettes and Swedish snus appears counterintuitive. Accumulating evidence suggests that these products have the potential to play a positive role in harm reduction strategies and improve public health.

Professor Ramstrom's article might have benefited from emphasizing the positive stance adopted by key regulatory bodies and scientific authorities. In the United States, the FDA has granted authorization for the legal commercialization of heated tobacco products and e-cigarettes, asserting that their marketing is appropriate for the protection of public health (1,2). In the UK, the National Institute for Health and Care Excellence (NICE) committee has concurred that switching to nicotine-containing e-cigarettes is likely significantly less harmful than continuing to smoke and that people should have access to them as part of their range of cessation interventions (3). The most recent Cochrane review concludes that people randomized to nicotine e-cigarettes had higher quit rates compared to those randomized to nicotine replacement therapy (RR 1.63, 95% CI 1.30 to 2.04), implying a definitive role for e-cigarettes in aiding smokers in achieving sustained abstinence from cigarette smoking (4).

Supporting these arguments, it's worth noting that researchers at the Center of Excellence for the Acceleration of Harm Reduction at the University of Catania (CoEHAR) have extensively investigated combustion-free nicotine products. Their studies encompassed toxicological effects (5,6), effectiveness, and tolerability among smokers (7,8), as well as the impact on health conditions among individuals with chronic obstructive pulmonary disease who have made the switch to these products (9,10). Their findings indicate that combustion-free nicotine products:

- Significantly reduce exposure and risk compared to traditional cigarettes.
- Assist smokers in quitting.
- Are associated with clinically relevant improvements in users with smoking-related pathologies, such as those with chronic obstructive pulmonary disease.

In light of CoEHAR's conclusions, it is evident that combustion-free alternatives should not be equated with conventional tobacco cigarettes.

I agree with Professor Ramstrom that it is time for a more nuanced and evidence-based approach to addressing the

opportunities offered by alternative nicotine products in the fight against smoking, which could be particularly beneficial in countries where traditional tobacco control measures have seen limited success. In light of the divergent trends in smoking and the growing body of evidence in support of harm reduction through alternatives like e-cigarettes and Swedish snus, the upcoming 10th Conference of the Parties (COP10) in Panama could mark a significant turning point in the global approach to tobacco control.

It is of paramount importance that the WHO will engage in an open, evidence-based discussion about these alternatives, as it affects the global strategies for tobacco control. And I share with Professor Ramstrom the hope that WHO will consider the clear evidence that replacing tobacco cigarettes with less harmful products can save millions of lives.

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