

Review of: "The outbreak of lung injuries often known as "EVALI" was nothing to do with nicotine vaping"

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This manuscript deals authoritatively and comprehensively with 'EVALI' not being related to nicotine vaping.

There seems no doubt that the vast majority of cases of this syndrome were related to vitamin E acetate contamination of THC cannabis oils illicitly inhaled by vaping. Other very rare cases of clinically similar syndromes are very unlikely to be related to nicotine itself, but may have multiple other causes.

It is difficult to disagree with the author's conclusions that crystal clear communication is required to prevent E-cigarette users switching to tobacco cigarettes. While precise long-term risks of E-cigarette use remain unclear there is a consensus that they are considerably safer than traditional tobacco smoking. Full discussion of this is probably outwith the scope of this paper. Renaming EVALI as VEA associated lung damage would possibly/probably be helpful in the future.

Regulation of vaping products ie additives, is clearly desirable. The question of regulation of cannabis related products, in this context, is rightly mentioned but I agree that this is a very complex issue.

The proposal that a Public Health inquiry into the handling of the EVALI by the CDC is of interest in view of the final delay and reluctance to 'clear' nicotine vaping although it is not clear what general lessons are likely.

The manuscript is timely, comprehensively referenced and well written, if slightly repetitive.