The AMA House of Delegates has adopted policy to “urgently advocate for regulatory, legislative or legal action at the federal or state levels to ban the sale and distribution of all e-cigarette and vaping products, with the exception of those which may be approved by the FDA [Food and Drug Administration] for tobacco-cessation purposes and made available by prescription only.”

The action, taken at the 2019 AMA Interim Meeting in San Diego this week, comes after the AMA last year declared e-cigarette use and vaping an urgent public health epidemic. Learn more about the AMA’s work on e-cigarettes and vaping. There has been a surge in e-cigarette use among youth and lung illness outbreak linked to more than 2,000 illnesses and more than 40 deaths.

The AMA also has pushed for more stringent policies to help protect our nation’s young people from the harmful effects of tobacco and nicotine use. That includes bans on all flavored tobacco products, raising the minimum purchase age for tobacco products to 21, and parity in the advertising and marketing restrictions between e-cigarettes and combustible products.

Current e-cigarette use among high-school students has risen 78%, accounting for 3 million-plus American high schoolers using e-cigarettes in 2018. E-cigarette use among middle schoolers is also on the rise, up by 48% from 2017 to 2018. Today, a total of 570,000 kids are current e-cigarette users.

“The recent lung illness outbreak has alarmed physicians and the broader public health community and shined a light on the fact that we have very little evidence about the short- and long-term health consequences of e-cigarettes and vaping products,” said AMA President Patrice A. Harris, MD, MA. “It’s simple—we must keep nicotine products out of the hands of young people and that’s why we are calling for an immediate ban on all e-cigarette and vaping products from the market.

“With the number of young people using e-cigarettes spiking it is not only critical that there is research into nicotine addiction treatments for this population, but it is imperative that we continue efforts to prevent youth from ever using nicotine,” Dr. Harris added.
An AMA reference committee received testimony in strong support of banning e-cigarettes and vaping products. While the AMA has repeatedly urged the FDA to act, little has been done and several delegates expressed that “we cannot keep waiting on the FDA to exercise their authority.”

With the dramatic rise in use of e-cigarettes by the youth threatening to put another generation at risk of nicotine dependence, delegates also directed the AMA to “advocate for research funding to sufficiently study the safety and effectiveness of e-cigarette and vaping products for tobacco cessation purposes.

“Since declaring e-cigarette use and vaping an urgent public health epidemic in 2018, the AMA has pushed for more stringent policies to help protect our nation’s young people from the harmful effects of tobacco and nicotine use,” said Dr. Harris. “For decades, we have led the public health fight to combat the harmful effects of tobacco products, and we will continue to support policies and regulations aimed at preventing another generation from becoming dependent on nicotine.”

In a related action, delegates moved to help people under 18 quit nicotine use. Despite skyrocketing e-cigarette use among children, current evidence-based tobacco cessation treatment options are only approved for those who are 18, according to a resolution introduced by the Indiana delegation.

With a need for additional treatment options to help young patients, delegates asked the AMA to support:

- Immediate and thorough study of the use of pharmacologic and nonpharmacologic treatment strategies for tobacco use disorder and nicotine dependence resulting from the use of noncombustible and combustible tobacco products in populations under the age of 18.
- Federal regulation that encourages manufacturers of pharmacologic therapy for treatment of tobacco use disorder and nicotine dependence approved for adults to examine their products’ effects in populations under age 18.