Whereas, Vaping or e-cigarettes are common terms—describing products that produce an aerosolized mixture of nicotine and flavored liquids—that do not encompass all of the products in this rapidly evolving market. Electronic Nicotine Delivery Systems (ENDS) is a more accurate term to include personal vaporizers, vape pens, e-cigarettes, e-cigars, e-hookah, vaping devices, mod systems or pod systems, and whatever new terms might be used for these incendiary nicotine devices; and

Whereas, On December 18, 2018, the U.S. Surgeon General declared e-cigarettes or ENDS an epidemic, stating, “current e-cigarette use increased 78% among high school students during the past year, from 11.7% in 2017... In 2018, more than 3.6 million U.S. youth, including 1 in 5 high school students and 1 in 20 middle school students, currently use e-cigarettes”; and

Whereas, Two deaths and 215 cases of severe pulmonary disease in 25 states are suspected to be caused by ENDS product use;° prompting the CDC to state, “if you are concerned about these specific health risks, consider not using e-cigarette products”;∥ and

Whereas, The City of San Francisco banned ENDS products, including online sales, citing safety concerns,∥∥ in spite of the fact that JUUL, the company with the market share of ENDS products, is based in San Francisco; and

Whereas, Tobacco is a sacred plant to American Indians that has been highly modified from its original form to increase the nicotine content. JUUL has approached Tribes, some of the poorest communities in the U.S., with the offer of hundreds of thousands of dollars to “switch” their smokers to JUUL products;°° therefore be it

RESOLVED, That our American Medical Association advocate for regulatory, and/or legislative, and/or legal action at the federal and/or state levels to ban all Electronic Nicotine Delivery Systems (ENDS) products. (Directive to Take Action)

Fiscal Note: Modest - between $1,000 - $5,000

Received: 09/25/19
RELEVANT AMA POLICY

Electronic Cigarettes, Vaping, and Health H-495.972
1. Our AMA urges physicians to: (a) educate themselves about electronic nicotine delivery systems (ENDS), including e-cigarettes, be prepared to counsel patients about the use of these products and the potential for nicotine addiction and the potential hazards of dual use with conventional cigarettes, and be sensitive to the possibility that when patients ask about e-cigarettes, they may be asking for help to quit smoking; (b) consider expanding clinical interviews to inquire about “vaping” or the use of e-cigarettes; (c) promote the use of FDA-approved smoking cessation tools and resources for their patients and caregivers; and (d) advise patients who use e-cigarettes to take measures to assure the safety of children in the home who could be exposed to risks of nicotine overdose via ingestion of replacement e-cigarette liquid that is capped or stored improperly.
2. Our AMA: (a) encourages further clinical and epidemiological research on e-cigarettes; (b) supports education of the public on the health effects, including toxins and carcinogens of electronic nicotine delivery systems (ENDS) including e-cigarettes; and (c) recognizes that the use of products containing nicotine in any form among youth, including e-cigarettes, is unsafe and can cause addiction.
3. Our AMA supports legislation and associated initiatives and will work in coordination with the Surgeon General to prevent e-cigarettes from reaching youth and young adults through various means, including, but not limited to, CDC research, education and a campaign for preventing and reducing use by youth, young adults and others of e-cigarettes, and combustible and emerging tobacco products.

Sales and Distribution of Tobacco Products and Electronic Nicotine Delivery Systems (ENDS) and E-cigarettes H-495.986
H-495.986 Tobacco Product Sales and Distribution
Our AMA:
(1) recognizes the use of e-cigarettes and vaping as an urgent public health epidemic and will actively work with the Food and Drug Administration and other relevant stakeholders to counteract the marketing and use of addictive e-cigarette and vaping devices, including but not limited to bans and strict restrictions on marketing to minors under the age of 21;
(2) encourages the passage of laws, ordinances and regulations that would set the minimum age for purchasing tobacco products, including electronic nicotine delivery systems (ENDS) and e-cigarettes, at 21 years, and urges strict enforcement of laws prohibiting the sale of tobacco products to minors;
(3) supports the development of model legislation regarding enforcement of laws restricting children’s access to tobacco, including but not limited to attention to the following issues: (a) provision for licensure to sell tobacco and for the revocation thereof; (b) appropriate civil or criminal penalties (e.g., fines, prison terms, license revocation) to deter violation of laws restricting children’s access to and possession of tobacco; (c) requirements for merchants to post notices warning minors against attempting to purchase tobacco and to obtain proof of age for would-be purchasers; (d) measures to facilitate enforcement; (e) banning out-of-package cigarette sales (“loosies”); and (f) requiring tobacco purchasers and vendors to be of legal smoking age;
(4) requests that states adequately fund the enforcement of the laws related to tobacco sales to minors;
(5) opposes the use of vending machines to distribute tobacco products and supports ordinances and legislation to ban the use of vending machines for distribution of tobacco products;
(6) seeks a ban on the production, distribution, and sale of candy products that depict or resemble tobacco products;
(7) opposes the distribution of free tobacco products by any means and supports the enactment of legislation prohibiting the disbursement of samples of tobacco and tobacco products by mail;
(8) (a) publicly commends (and so urges local medical societies) pharmacies and pharmacy owners who have chosen not to sell tobacco products, and asks its members to encourage patients to seek out and patronize pharmacies that do not sell tobacco products; (b) encourages other pharmacists and pharmacy owners individually and through their professional associations to remove such products from their stores; (c) urges the American Pharmacists Association, the National Association of Retail Druggists, and other pharmaceutical associations to adopt a position calling for their members to remove tobacco products from their stores; and (d) encourages state medical associations to develop lists of pharmacies that have voluntarily banned the sale of tobacco for distribution to their members; and
(9) opposes the sale of tobacco at any facility where health services are provided; and
(10) supports that the sale of tobacco products be restricted to tobacco specialty stores.

Citation: CSA Rep. 3, A-04; Appended: Res. 413, A-04; Reaffirmation A-07; Amended: Res. 817, I-07;
Reaffirmation A-08; Reaffirmation I-08; Reaffirmation A-09; Reaffirmation I-13; Reaffirmation A-14;
Reaffirmation I-14; Reaffirmation A-15; Modified in lieu of Res. 421, A-15; Modified in lieu of Res. 424, A-
15; Reaffirmation I-16; Appended: Res. 926, I-18;

FDA Regulation of Tobacco Products H-495.988

1. Our AMA: (A) acknowledges that all tobacco products (including but not limited to, cigarettes,
smokeless tobacco, chewing tobacco, and hookah/water pipe tobacco) are harmful to health, and that
there is no such thing as a safe cigarette; (B) recognizes that currently available evidence from short-term
studies points to electronic cigarettes as containing fewer toxicants than combustible cigarettes, but the
use of electronic cigarettes is not harmless and increases youth risk of using combustible tobacco
cigarettes; (C) encourages long-term studies of vaping (the use of electronic nicotine delivery systems)
and recognizes that complete cessation of the use of tobacco and nicotine-related products is the goal;
(D) asserts that tobacco is a raw form of the drug nicotine and that tobacco products are delivery devices
for an addictive substance; (E) reaffirms its position that the Food and Drug Administration (FDA) does,
and should continue to have, authority to regulate tobacco products, including their manufacture, sale,
distribution, and marketing; (F) strongly supports the substance of the August 1996 FDA regulations
intended to reduce use of tobacco by children and adolescents as sound public health policy and
opposes any federal legislative proposal that would weaken the proposed FDA regulations; (G) urges
Congress to pass legislation to phase in the production of reduced nicotine content tobacco products and
to authorize the FDA have broad-based powers to regulate tobacco products; (H) encourages the FDA
and other appropriate agencies to conduct or fund research on how tobacco products might be modified
to facilitate cessation of use, including elimination of nicotine and elimination of additives (e.g., ammonia)
that enhance addictiveness; and (I) strongly opposes legislation which would undermine the FDA's
authority to regulate tobacco products and encourages state medical associations to contact their state
departments to oppose legislation which would undermine the FDA's authority to regulate tobacco
products.

2. Our AMA: (A) supports the US Food and Drug Administration (FDA) as it takes an important first step in
establishing basic regulations of all tobacco products; (B) strongly opposes any FDA rule that exempts
any tobacco or nicotine-containing product, including all cigars, from FDA regulation; and (C) will join with
physician and public health organizations in submitting comments on FDA proposed rule to regulate all
tobacco products.

3. Our AMA: (A) will continue to monitor the FDA’s progress towards establishing a low nicotine product
standard for tobacco products and will submit comments on the proposed rule that are in line with the
current scientific evidence and (B) recognizes that rigorous and comprehensive post-market surveillance
and product testing to monitor for unintended tobacco use patterns will be critical to the success of a
nicotine reduction policy.

Citation: CSA Rep. 3, A-04; Reaffirmed: BOT Rep. 8, A-08; Appended: Res. 234, A-12; Reaffirmation A-
13; Modified: Res. 402, A-13; Modified: Speakers Rep., A-14; Appended: Res. 420, A-14; Reaffirmation
A-15; Modified: CSAPH Rep. 05, A-18; Reaffirmed in lieu of: Res. 412, A-19; Modified: CSAPH Rep. 03,
A-19;

References:
3 https://www.cdc.gov/tobacco/basic_information/e-cigarettes/severe-lung-disease.html
5 https://www.cbsnews.com/news/juul-came-to-a-9th-grade-classroom-and-told-teens-their-products-were-totally-safe-according-to-
teens-testimonies/