

Maine Chapter

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American Academy of Pediatrics



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Testimony of Deborah Hagler MD, MPH, FAAP on Behalf of the Maine Chapter of The AAP in Favor of LD 1215 An act to End the Sale of Flavored Tobacco Products

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Good afternoon, Senator Baldacci and Representative Meyer and esteemed members of the Health and Human Services Committee. My name is Dr. Deborah Hagler; I live in Harpswell; I have practiced pediatrics in Brunswick for the past 26 years. I am the immediate past president of the Maine Chapter of the American Academy of Pediatrics and am testifying in favor of LD1215 An Act to End the Sale of Flavored Tobacco Products.

The first time I ever saw an e-cigarette was about 15 years ago. I had no idea what it was. A very bright patient brought it in to show me and asked questions about it. They had researched it on the internet and ordered one. It was a long plastic looking thing, and they understood it was a way to smoke that was less harmful. They knew smoking was bad but wanted to try it and thought this might be the way to go. It seemed like it could be safer. All I could offer them at the time was it seems like a bad idea if there is nicotine involved - Ultimately, they went on to smoke combustible cigarettes as they were more easily procured at the time....They already had been sold and confused by the ideas of harm reduction and I had no idea at the time how to really counsel them.

In the United States the ideas of harm reduction really matured in the 1980s with the discovery of AIDS, but they had been adopted much earlier in Europe.¹ The recognition that Aids could be spread by people who injected drugs sharing needles led to campaigns to distribute sterile syringes to control the spread of the virus. As a by-product of these efforts to provide care it was noted that more people who participated in these programs participated in substance use treatments and reduced high risk behaviors such as injectable drug use and rates of infections like HIV, Hepatitis B and Hepatitis C decreased.² These programs were not about initiating high risk behaviors- such as the introduction of addictive substances.

For an adolescent with a maturing brain that is uniquely primed for addiction, introduction of a highly addictive substance such as nicotine that can prime the brain for future addictions is not harm reduction.

The pivot of the vaping companies away from the flashy cool marketing that peddled their flavored devices to teens to "harm reduction" devices clearly is a real game of smoke and mirrors. It is intent on confusing a population that the tobacco companies need to groom as new customers - less than one percent of the population will initiate tobacco product use after the age of 26.³ However, teens that hear harm reduction may not understand the risk that comes with these devices that they contain carcinogens, that they can explode and cause severe injury, they prime the brain for future substance use, they are linked to the development of mood disorders like depression and anxiety, or they are 3-3.5 times more likely to transition to combustible cigarette use and additionally have a greater risk of marijuana and alcohol use.⁴ Four out Five teens initiate tobacco product use because of flavors. Mixing the ideas of harm reduction into marketing schemes is another ploy to cultivate customers by falsely signaling to our youth these products are safe. Please vote to remove the flavors from tobacco products to protect our youth. Please vote Ought to Pass on LD1215.

1.Des Jarlais, D.C. Harm reduction in the USA: the research perspective and an archive to David Purchase. *Harm Reduct J* 14, 51 (2017). <https://doi.org/10.1186/s12954-017-0178-6>

2.van Santen DK, Coutinho RA, van den Hoek A, van Brussel G, Buster M, Prins M. Lessons learned from the Amsterdam Cohort Studies among people who use drugs: a historical perspective. *Harm Reduct J*. 2021 Jan 6;18(1):2. doi: 10.1186/s12954-020-00444-6. PMID: 33407562; PMCID: PMC7789277.

3.[Tobacco Initiation Youth-CDC](#)

4.[AAP- E Cigarettes](#)

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