

May 7, 2021

Senator Claxton Representative Meyer and Health and Human Services
Committees

Support of LD 1550, An Act To End the Sale of Flavored Tobacco Products.

Dear Senator Claxton and Representatives Meyer,

The American Heart Association (AHA) is the nation's oldest and largest voluntary organization dedicated to fighting heart disease and stroke, whose mission is to be a relentless force for a world of longer, healthier lives. As part of the mission, we are working towards the tobacco endgame – ending tobacco use and nicotine addiction in the U.S., which we believe is within site; that is why we are supportive of LD1550 *An Act to End the Sale of Flavored Tobacco Products*.

The use of tobacco products remains the nation's number one cause of preventable death. Tobacco use is responsible for nearly 1 in 5 deaths nationwide and in Maine, nearly 1 in 5 adults smoke cigarettes, the highest rate in the Northeast.ⁱ More than one in 15 Maine high school students smoke cigarettes, with a high of 1 in 8 in Washington County.ⁱⁱ In recent years, overall youth tobacco use in Maine has skyrocketed, largely driven by the youth e-cigarette use epidemic. One in 2 Maine high school students and 1 in 6 middle school students have used e-cigarettes.ⁱⁱⁱ Nearly 30 percent of high school students are current users of e-cigarettes, nearly doubling from 15% in 2017.^{iv}

Tobacco companies are targeting youth with flavored tobacco products. This year they will spend an estimated \$40.8 million in Maine marketing their addictive and deadly products.^v Products that come in array of kid friendly candy and fruit flavors such as cherry, grape jelly, cotton candy, piña colada, cinnamon roll, popcorn, and appletini, all sold in colorful packaging that is designed to attract tweens and teens. In fact, there are nearly 15,000 different flavors of e-cigarettes on the market.^{vi} Nationwide, nearly 81% of youth ages 12 to 17 who had ever used a tobacco product reported that the first product they used was flavored.^{vi}

You are going to hear a lot from the opposition that Massachusetts made a mistake and that you should not make the same one. From the start in Massachusetts with bipartisan support, everyone agreed there would be revenue loss, but as a state it was decided that to put our health of our residents over profits from deadly products because the biggest beneficiaries of the law

would be future generations who do not start smoking because they are not bombarded with menthol ads and other flavored products in stores. Maine will see the benefits of protecting the health of all residents and survive the loss of revenue because the health benefits will far outweigh any loss.

You will hear that e-cigarettes are 95% safer than traditional cigarettes. That 95% number is often pushed by pro-vaping advocates, but it simply isn't true. A [new article published in the American Journal of Public Health](#) comprehensively assesses why the 95% figure is not grounded in scientific evidence. E-cigarettes can harm a user's heart, lungs, and brain; increase the risk of e-cigarette users moving to traditional cigarettes; and pose harm to others from the aerosol emitted from these devices. In addition, we do not know the long-term health consequences of e-cigarette use. They may be less harmful than traditional cigarettes, but they are not safe. They are especially not safe for young people. The high levels of nicotine in e-cigarettes pose serious risks to kids, such as harming brain development and affecting memory and learning. There is also growing evidence that they pose more immediate dangers, such as damage to their lungs. Tobacco companies have for years and continue to target and hook kids. They intentionally make products that contain high levels of addictive nicotine with enticing flavors. There is no evidence that e-cigarettes prevent youth from using traditional cigarettes—in fact, kids who use e-cigarettes are more likely to use traditional cigarettes as well. That is why all flavored tobacco products, including flavored e-cigarettes, must be taken off the market.

You will hear that adults have used e-cigarettes to quit smoking. No e-cigarette product has been approved by the FDA as a smoking cessation device. The claim that vaping is a better way to quit cigarettes compared to FDA-approved nicotine replacement products simply is not backed up by science. Most research done on this topic to date shows no advantage for e-cigarettes over the use of FDA-approved cessation products such as gum, lozenges, and patches. FDA-approved products have demonstrated success as part of an overall program for quitting that should include medications and counseling to reduce cravings.

Tobacco companies uses flavor to hook a new generation of kids on its deadly products. Flavors hide the bad taste of tobacco and make it easier for kids to try. Menthol has the additional quality of soothing the irritation of combustible cigarettes, which is why so many young people start smoking using menthol cigarettes. AHA supports a comprehensive approach to tobacco control aimed at protecting our kids from all tobacco products.

We recognize the challenges of focusing on anything other than the immediate threat during a global pandemic. However, delaying other core public health work like tobacco prevention and treatment is one that will cost the state in terms of lives and dollars. We must do everything in our power to keep our communities healthy and safe. We recognize that the Legislature is and will be under extraordinary pressure from the tobacco industry and the vaporist community to put profits above human life by limiting or curtailing elimination on flavored tobacco products. We are asking for you to stand up to the tobacco industry and their allies, by saying No to selling of Menthol Cigarettes and All Other Flavored Tobacco Products, including Flavored E-Juices! Say “No” to the continued predatory marketing of flavored tobacco products generally and to our youth particularly and say “Yes” to the health and welfare of our kids, who are the most vulnerable and say “Yes” to the protection for all residents of Maine. We look forward to working with you on this bill and happy to answer any questions you may have.

Sincerely,
Allyson Perron Drag
American Heart Association/ Stroke Association
Government Relations Director

i Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. BRFSS Prevalence & Trends Data [online]. 2019. [accessed Feb 09, 2021].

URL: <https://www.cdc.gov/brfss/brfssprevalence/>.

ii Maine CDC, 2019 Maine Integrated Youth Health Survey (MIYHS), <https://data.mainepublichealth.gov/miyhs/>.

iii Ibid.

iv Maine CDC, 2017 and 2019 Maine Integrated Youth Health Survey (MIYHS),

<https://data.mainepublichealth.gov/miyhs/>

v Campaign for Tobacco Free Kids <https://www.tobaccofreekids.org/problem/toll-us/maine>

vi Truth initiative <https://truthinitiative.org/sites/default/files/Truth-Flavors-Fact-Sheet.pdf>

vii US Department of Health and Human Services. *E-cigarette use among youth and young adults: a report of the Surgeon General*. Cdc-pdf[PDF-8.47 MB]. Atlanta, GA: US Department of Health and Human Services, CDC; 2016.