

April 4, 2018

Larry Tramutola
San Francisco Kids vs. Big Tobacco
1470 Valencia Street
San Francisco, CA 94110

Re: American Medical Association support for Proposition E

Dear Mr. Tramutola:

On behalf of the American Medical Association and our physician and medical student members, I am writing to express our support for Proposition E, an ordinance that will prohibit the sale of flavored and mentholated tobacco products in San Francisco. Though federal law has banned flavored cigarettes since 2009, the ban exempts menthol cigarettes and other tobacco products such as cigars, hookah and e-cigarettes. These exemptions have exacerbated youth smoking rates as flavors play a significant role in drawing young people to tobacco use. Proposition E is an important public health measure that will help reduce the harmful health effects of tobacco use.

Menthol and flavored tobacco products are often perceived to be “safer” than non-flavored cigarettes. Menthol, in particular, is marketed for its physiological effects as an anti-irritant and a cooling agent that makes the product easier to inhale. Other flavorings – often sweet, candy or fruit flavorings – similarly mask the irritation and make the products more appealing. For this reason, flavors are one of the few tobacco additives for which consumers make conscious buying choices.

Flavorings are especially attractive to new and young smokers who enjoy sweet or minty flavors that mask the harshness and discomfort of smoke inhalation. Deliberate marketing of these qualities has been tragically successful, and flavored tobacco products have been shown to increase youth smoking initiation. In fact, 81 percent of youths who have ever used tobacco products started with a flavored product, and young people cite flavoring as a major reason for their current use of tobacco products.¹ In addition, menthol cigarettes are disproportionately favored by youth cigarette users: 54 percent of smokers age 12-17 use menthol cigarettes compared with less than one-third of smokers ages 35 and older.² Among African-American youth, menthol use is even higher: seven out of ten African-American youth smokers use mentholated cigarettes.³

Yet flavored tobacco products have the same or worse health effects as other tobacco products. Smoking is the leading cause of preventable death in the United States, causing nearly half a million deaths each year, including more than 41,000 deaths caused by secondhand smoke.⁴ More than 16 million people live

¹ Bridget Ambrose, Hannah Day, Brian Rostron, et al., *Flavored Tobacco Product Use Among US Youth Aged 12-17 Years, 2013-2014*, 314 JAMA 17, 1871-73 (Nov. 2015).

² Andrea Villanti, et al., *Changes in the prevalence and correlates of menthol cigarette use in the USA, 2004–2014*, Tobacco Control (Oct. 2016)

³ *Id.*

⁴ Centers for Disease Control and Prevention, *Smoking and Tobacco Use: Fast Facts*, available at https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm

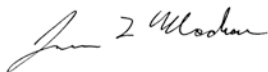
with disease caused by smoking, such as cancer, heart disease, stroke, lung diseases, diabetes and chronic obstructive pulmonary disease.⁵ The risks posed by flavored tobacco products may even rise above those of non-flavored products. Because of the anti-irritant properties of flavored products, smokers may inhale more deeply, allowing harmful particles to settle more deeply in the lungs. For that reason, smoking flavored tobacco products may increase the risk of both lung and bronchial cancer beyond that of other tobacco products. Menthol cigarettes have also been shown to have higher carbon monoxide concentrations than regular cigarettes.⁶ Studies have also shown that, in addition to the addictive sensory effects and flavor of menthol, menthol may decrease metabolism of nicotine and increase the amount of the chemical in the blood, fostering addiction, inhibiting cessation and promoting relapse.⁷

The threat posed by menthol cigarettes, in particular, is especially pronounced for African-Americans. Each year, more than 72,000 African-Americans are diagnosed with a tobacco-related cancer and more than 39,000 die from a tobacco-related cancer.⁸ The high rate of mortality and morbidity may result, in part, from greater use of menthol cigarettes. Of African-American smokers, nearly 90 percent smoke menthol-flavored cigarettes, and young African-Americans who begin smoking overwhelmingly use menthol-flavored cigarettes.⁹ Historically, advertising of menthol cigarettes has heavily targeted African-American communities.

Because flavored tobacco products pose a heightened risk of smoking initiation and addiction, we believe that prohibiting the sale of mentholated cigarettes and flavored tobacco is in the interest of public health. We urge adoption of this important measure.

If you need further information, please contact Annalia Michelman, JD, Senior Legislative Attorney, Advocacy Resource Center, at annalia.michelman@ama-assn.org, or (312) 464-4788.

Sincerely,



James L. Madara, MD

cc: California Medical Association
San Francisco Marin Medical Society
Jack Resneck, Jr., MD
Ryan J. Ribeira, MD, MPH
Karthik V. Sarma, MS

⁵ *Id.*

⁶ Murray Jarvik, et al. *Mentholated cigarettes decrease puff volume of smoke and increase carbon monoxide absorption*, 56 *Physiology & Behavior* 3, 563-70 (Sep. 1994).

⁷ Allison Hoffman, *The health effects of menthol cigarettes as compared to non-menthol cigarettes*, 9 *Tobacco Induced Diseases* 1 (2011)

⁸ Campaign for Tobacco-Free Kids, *Tobacco Use Among African Americans*, fact sheet, available at <https://www.tobaccofreekids.org/assets/factsheets/0006.pdf>

⁹ Centers for Disease Control and Prevention, *Smoking and Tobacco Use: African Americans and Tobacco Use*, available at <https://www.cdc.gov/tobacco/disparities/african-americans/index.htm>