

September 19, 2019

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

Re: American Medical Association Opposition to Proposition C

Dear Mr. Tramutola:

On behalf of the American Medical Association (AMA) and our physician and medical student members, I am writing to express our opposition to Proposition C, authorizing and regulating the retail sale, availability and marketing of electronic cigarettes (e-cigarettes) in San Francisco. In 2018, the AMA supported the successful ballot measure to prohibit the sale of flavored tobacco and e-cigarette products in San Francisco. If passed, Proposition C would reverse that prohibition and re-authorize the sale of flavored e-cigarettes and the online sale of flavored tobacco products. This action would put young people at risk.

The AMA believes the use of e-cigarettes and vaping is an urgent public health epidemic that must be addressed. A particular danger of e-cigarettes is the appeal of flavorings. Candy and fruit flavored e-cigarette products play a significant role in drawing young people to vaping. Flavored products are often perceived to be “safer” and are especially attractive to young users who enjoy sweet or minty flavors. Deliberate marketing of these qualities to young people has been disturbingly successful, and the numbers of America’s youth using e-cigarette products is soaring. In addition to the harm that can be caused by e-cigarette use directly – which has been tragically demonstrated in recent weeks by the hundreds of people who have fallen ill with serious or fatal lung illnesses linked to vaping – e-cigarettes have the potential to undermine the public health gains that have been made over the years in combatting the smoking epidemic. Evidence has demonstrated that youths who use e-cigarettes are at greater risk of subsequently initiating tobacco use.¹

The negative effect of flavoring can also be seen in rates of youth tobacco use. Eighty-one 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.² 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.³ Among African American

¹ Kaitlyn Berry, Jessica Fetterman, Emelia Benjamin, et al., *Association of Electronic Cigarette Use with Subsequent Initiation of Tobacco Cigarettes in US Youths*, JAMA Network Open (published online Feb. 2019).

² 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).

³ Andrea Villanti, et al., *Changes in the prevalence and correlates of menthol cigarette use in the USA, 2004–2014*, Tobacco Control (Oct. 2016)

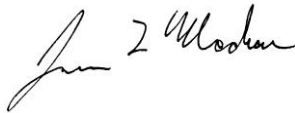
youth, menthol use is even higher: seven out of ten African American youth smokers use mentholated cigarettes.⁴ Yet flavored tobacco products have the same or worse health effects as other tobacco products. Smoking is the leading cause of preventable death in the United States, causing nearly half a million deaths each year, including more than 41,000 deaths caused by secondhand smoke.⁵ More than 16 million people live with disease caused by smoking, such as cancer, heart disease, stroke, lung diseases, diabetes and chronic obstructive pulmonary disease.⁶

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.⁷ 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.⁸ Historically, advertising of menthol cigarettes has heavily targeted African American communities.

Given the dramatic rise in e-cigarette use amongst young people in the last year alone, it is very clear that we must all do everything we can to help reverse this epidemic. The way to prevent another generation from developing nicotine dependence is to limit access to flavored products that are designed and marketed to appeal to young people and continue to raise awareness that e-cigarettes are harmful, powerfully addictive, and can often lead young people to smoke conventional cigarettes. With serious vaping-related illnesses and deaths being reported, we cannot turn back. We believe that maintaining the current prohibition on flavored e-cigarette products and online sales of flavored tobacco products is in the interest of public health. We strongly oppose adoption of this 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
Sarah Mae Smith

⁴ *Id.*

⁵ 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

⁶ *Id.*

⁷ Campaign for Tobacco-Free Kids, Tobacco Use Among African Americans, fact sheet, available at <https://www.tobaccofreekids.org/assets/factsheets/0006.pdf>

⁸ 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>