Public Health England prematurely endorses e-cigarettes

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We were struck by the permissiveness of the report commissioned by Public Health England on e-cigarettes compared with a contemporaneous US academy report.123

The PHE review states that “e-cigarette use alone or in combination with licensed medication and behavioural support . . . appear to be helpful in the short term.” 1 By contrast, the US review says, “There is insufficient evidence . . . about the effectiveness of e-cigarettes as cessation aids.”3

PHE says that “e-cigarettes are attracting very few young people who have never smoked into regular use,”1 but the US report concludes, “There is substantial evidence that e-cigarette use increases risk of ever using combustible tobacco cigarettes among youth.”3

Both reports corroborate the purported reduction in harm afforded by e-cigarettes compared with tobacco cigarettes.11 But the US reviewers say that “there is no available evidence whether or not e-cigarette use is associated with clinical cardiovascular outcomes . . . and respiratory diseases,”3 whereas PHE concludes that these putative risks are “substantially below” those of smoking.1

The US review says that “there is no available evidence whether or not e-cigarette use is associated with intermediate cancer endpoints.”3 Yet PHE promotes the finding that “the cancer potencies of e-cigarettes” are “largely under 0.5% of the risk of smoking.”14

We understand that such conflict, existing as it does among tobacco experts, reflects a wider uncertainty surrounding the long term health risks of e-cigarettes. That PHE, whose purpose is “to protect and improve the nation’s health,”5 should sanction e-cigarette use citing an embryonic and inconclusive evidence base, is astonishing. When over 75% of acute NHS trusts are in financial deficit,8 a decision backing NHS investment in e-cigarettes is even more perplexing. The PHE report represents an unduly premature endorsement of e-cigarettes to the smoking public.

Footnotes
- Competing interests: None declared.
- Full response at: http://www.bmj.com/content/360/bmj.k575/rr

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