National Assembly for Wales / Cynulliad Cenedlaethol Cymru Health and Social Care Committee / Y Pwyllgor Iechyd a Gofal Cymdeithasol

Public Health (Wales) Bill / Bil lechyd y Cyhoedd (Cymru)

Evidence from the British Heart Foundation - PHB 101 / Tystiolaeth gan Sefydliad Prydeinig y Galon - PHB 101



Consultation on the Public Health (Wales) Bill

Response from the British Heart Foundation (BHF) Cymru, September 2015

British Heart Foundation (BHF) Cymru is the nation's leading heart charity. We are working to achieve our vision of a world in which people do not die prematurely or suffer from cardiovascular disease. In the fight for every heartbeat we fund groundbreaking medical research, provide support and care to people living with cardiovascular disease and advocate for change and improvement in services and care.

We are actively involved in tobacco control issues because of the strong association between smoked tobacco and ill-health including cardiovascular disease (CVD). Smoking is a major risk factor for CVD, and smokers are almost twice as likely to have a heart attack as non-smokers. Each year in Wales, an estimated 5,600 smokers die as a result of smoking and around 28,000 hospital admissions are attributed to smoking.¹

BHF welcomes the opportunity to respond to this consultation. We are supportive of the Government proposal to establish a register of tobacco retailers. We believe that measures of this kind are useful in countering the illicit trade and underage sales and also provide valuable data which can support tobacco control research.

However, we have significant concerns about the way in which this consultation approaches the issue of e-cigarettes. The Welsh Government explicitly states that its aim is to bring regulation of e-cigarettes in line with existing restrictions on smoking. We believe that this goal is fundamentally flawed as it is based on the assumption that cigarettes and e-cigarettes are essentially equivalent in terms of public health harm. This is not the case.

E-cigarettes have the potential to act as one of a range of options for smokers to use to support their quit efforts. Although research on this is at an early stage, early indications are that e-cigarettes may be effective as a smoking cessation aid.²

¹ Chief Medical Officer for Wales Annual Report 2009 & Patient Episode Database for Wales (smoking-attributable fractions published by NHS Information Centre), 2010.

² McRobbie, H., et al., Electronic cigarettes for smoking cessation and reduction. Cochrane Database Syst Rev, 2014. 12: p. CD010216.

While we recognise that the safest behaviour for any individual is neither to smoke nor to use ecigarettes, the scale of risk between the two products is not equivalent. Current best estimates are that e-cigarettes are around 95% safer than cigarettes.³ To regulate two products with such different levels of risk in the same way is misleading and may act to disincentivise smokers from switching to e-cigarettes.

Smokefree legislation applying to tobacco products is underpinned by the health risks posed by passive smoking. No equivalent risks have been demonstrated for e-cigarettes.⁴ Arguments to extend the legislation to include e-cigarettes tend to focus on concerns around renormalisation of smoking, but this was not the underpinning argument for the original legislation. It is not robust policy making to extend legislation to new product using a fundamentally different rationale from the one which underpinned the original arguments.

There have been concerns expressed for some time that e-cigarettes have the potential to act as a gateway product for children into smoking. However, current trends demonstrate that use of e-cigarettes among non-smoking under 18s is negligible.⁵ It is crucial that we continue to monitor usage data on these trends so that we can observe any changes in patterns, particularly among young people and non-smokers, and react accordingly.

It is important to recognise that, as a new product, evidence on e-cigarettes continues to emerge and, in this context, we must remain vigilant. It is important that we monitor emerging using trends and continue to research potential side effects and long term health consequences of ecigarette use. We would welcome the Welsh Government's continued engagement in this process.

Cigarettes kill one in two of their long-term users. A smoker switching from cigarettes to ecigarettes is moving from a more to a less risky behaviour and it is wrong to seek to discourage this. While there remain considerable uncertainties around these products and caution must be exercised in monitoring and regulating them, it is heavy handed and not evidence based to seek to regulate them as if they were cigarettes. As such, we believe that these proposals will not improve public health in Wales and may, in fact, have the potential to damage it. We would urge the Welsh Government to reconsider its approach.

The BHF is also a signatory to a joint response on the general principles of the Public Health (Wales) Bill, which has been drafted by a number of public health organisations in Wales. We would like to restate our endorsement of this response here, in particular the need for the Welsh Government to consider diet and obesity in its work on public health.

To discuss this consultation response in more detail, please contact Jennifer Boon, Policy Manager, Research and Prevention, on

⁴ Britton, J. and I. Bogdanovica, Electronic cigarettes: A report commissioned by Public Health England. London: Public Health England, 2014 – p.14

³ E-cigarettes: an evidence update: A report commissioned by Public Health England p.6

⁵ E-cigarettes: an evidence update: A report commissioned by Public Health England – p.31