

# THE E-CIGARETTE SUMMIT

## Science, Regulation & Public Health

Virtual Event ■ 3 – 4 December 2020



Day 1 AM – THURSDAY 3 DECEMBER	
SESSION 1 - Science & Evidence (presentations available to watch on demand 1 <sup>st</sup> December – viewing time 75 mins)	
10.30 – 10.40 LIVE	<b>Welcome from the Chair – Prof Ann McNeill, Professor of Tobacco Addiction Institute of Psychiatry, Psychology &amp; Neuroscience (IoPPN), King’s College London</b>
10.40 – 10.55	<b>Absolute and relative risks of electronic cigarettes:</b> <i>On request from the Department of Health and Social Care (DHSC) and Public Health England (PHE), the Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment (COT) reviewed the potential toxicological risks from electronic nicotine delivery systems (ENDS). The Committee assessed the absolute risks from use of ENDS to former cigarette smokers, naïve users, and bystander, as well as the relative risks, compared to smoking conventional cigarettes, in those switching products. ENDS are not without risk, although these are substantially less than those of conventional cigarettes. However, the difference in risk will depend on the health effect in question. There is little evidence that the short to medium term use of ENDS causes major harm, but there are significant data gaps, particularly on the effects of long-term use. In addition, the use of ENDS de novo by non-users of tobacco products is likely to be associated with some adverse health effects to which the user would not otherwise have been subject. The risks to bystanders for most health effects will be low in conventional exposure scenarios, although exposure to nicotine may result in pharmacological effects in some individuals.</i> <b>Prof R Alan Boobis, OBE –Emeritus Professor of Toxicology, Imperial College London &amp; Chair, Committee on Toxicity</b>
10.55 – 11.10	<b>The latest Cochrane review of electronic cigarettes for smoking cessation: key conclusions and comparisons with existing policy:</b> <i>Cochrane reviews are accepted as the gold-standard for investigating the evidence of potential harms and benefits of healthcare interventions. The Cochrane review of electronic cigarettes for smoking cessation was first published in 2014. A recent update, published in October 2020, now finds increased evidence of benefit for e-cigarettes with nicotine when used to quit smoking. Many policymakers, however, remain reticent to encourage their use for this purpose, citing ongoing uncertainty. This presentation will include a summary of findings from the most recent update, and then compare the Cochrane reviews’ conclusions with that from key national and international policy documents, such as the US Surgeon General’s 2020 report on smoking cessation and recent statements from the World Health Organisation.</i> <b>Dr Jamie Hartmann-Boyce – Senior researcher, Health Behaviours; Managing editor, Cochrane Tobacco Addiction Group, Nuffield Department of Primary Care Health Science, University of Oxford</b>
11.10 – 11.25	<b>E-cigarettes and vascular health:</b> <i>VESUVIUS, the British Heart Foundation-funded clinical trial is believed to have been the largest study undertaken to-date in comparing the impact of tobacco vs e-cigarettes on cardiovascular health, with the findings published by the Journal of the American College of Cardiology. The SCHEER preliminary opinion on electronic cigarettes (EC) states that there is strong evidence for the long-term systemic impact of EC on the cardiovascular system. The conclusion drawn by this preliminary report is at odds with the report it purports to reference and the literature review was selective, of poor quality and concerning unbalanced. The report fails to acknowledge that there are a significant number of human clinical trials that have demonstrated a beneficial effect of switching from tobacco cigarettes to EC as a harms reduction measure. This discussion will present data on VESUVIUS and discuss the current state of evidence for the cardiovascular impact of e-cigarettes.</i> <b>Prof Jacob George - Professor of Cardiovascular Medicine and Therapeutics, University of Dundee</b>
11.25 – 11.40	<b>The pulmonary effects of e-cigarettes:</b> <i>The lungs represent a vast interface between the outside world and the human body through which inhaled products can be absorbed. The risks posed by such inhalants have been considered by users, regulators, and researchers in attempts to quantify the risk and come up with sensible policy recommendations and advice on the relative risks and benefits. This discussion will review some of the evidence to date on the pulmonary effects of e-cigarettes.</i> <b>Prof Sanjay Agrawal – Professor of Respiratory Science, Institute of Lung Health, University Hospitals of Leicester NHS Trust, Chair of the Tobacco Special Advisory Group, Royal College of Physicians</b>
11.50 – 11.55	BREAK
11.55 – 12.10	<b>E-Cigarettes and the media – the highs and lows of getting the evidence into the news:</b> <i>For a science press officer in the UK, there was no more boring subject in recent decades than smoking - until around 2013 when e-cigarettes began to take centre stage. Governments and health bodies were divided, and a subject which had enjoyed almost universal consensus became suddenly controversial. The UK government signaled their backing to e-cigarettes as a quitting aid and vape shops sprang up on every high street. Journalists were interested again. But media coverage has been mixed. How should the scientific community communicate such a divisive and emotive subject to the public? What does ‘good’ coverage look like when apparently even researchers can’t agree? And what can scientists do to ensure e-cigarettes are reported responsibly and accurately?</i> <b>Tom Sheldon -Senior Press Manager, Science Media Centre</b>
12.10 – 12.40 LIVE	<b>Panel Discussion and Live Q&amp;A: The Scientific evidence on e-cigarettes</b>
12.40 – 13.20	LUNCH

DAY 1 PM	
SESSION 2: Nicotine, Policy and Regulation (presentations available to watch on demand 1 <sup>st</sup> December – viewing time 60 mins)	
13.20 – 13.30 LIVE	<b>Introduction: Prof Ann McNeill - Professor of Tobacco Addiction Institute of Psychiatry, Psychology &amp; Neuroscience (IoPPN), King's College London</b>
13.30– 13.45	<b>Making smoking obsolete:</b> <i>The post implementation review of the UK's Tobacco &amp; Regulatory Products Directive - the regulations that transpose the EU Tobacco Products Directive - coincide with the UK leaving the EU and follows the publication Green Paper ambition to make smoked tobacco obsolete. What opportunities arise as these three events collide. Martin will no doubt offer more questions than answers</i> <b>Martin Dockrell - Tobacco Control Lead, (PHE) Public Health England</b>
13.45– 14.00	<b>Use pattern of flavoured snus in Norway – what will be the net public health effect?</b> <i>Similar to the debate around e-cigarettes, an increase in snus use among Norwegian adolescents has prompted debate on whether flavour options in snus should be limited. Ideally, a justification for an intervention on snus flavours should demonstrate that this would in fact be appropriate for the protection of public health, and that it is reasonable to expect that the benefits will outweigh the harms. We compared use of flavoured snus among snus users with different smoking status. The overall probability of using flavoured snus was .45 (95 % CI: .44–.46), highest among daily (.51, 95 % CI: .47–.54) and former daily smokers (.50, 95 % CI: .48–.52), and lowest among never smokers (.41, 95 % CI: .39–.43). Regulation that would ban or limit flavoured snus use may affect smokers – an at risk population - more than never smokers. These results will be discussed within a public health framework to consider potential costs and benefits from flavour restrictions on snus. We conclude that the health authorities should be mindful of the real-world complexity governing potential harms and benefits of flavour restrictions on non-combustible nicotine products.</i> <b>Dr Karl E. Lund - Senior Researcher, Norwegian Institute of Public Health</b>
14.00– 14.15	<b>Nicotine as a cultural drug: It's harmfulness and dependence:</b> <i>Nicotine is a cultural drug like caffeine and alcohol but nowadays much contested. In certain places it looks like cannabis is filling its void. Data on its harmfulness on the population level will be presented. Nicotine's dependence potential is related to its administration form. Roughly the dependence potential is associated with amount of behaviour that goes with administration of nicotine. As much as there is a continuum of harm from nicotine containing products there is also a continuum of dependence. In the low end of the of the continuum we have nicotine patches and in the high end traditional cigarettes. Comparisons of dependence across some nicotine containing products and to caffeine will be presented.</i> <b>Karl Fagerstrom – Professor Emeritus &amp; President, Fagerstrom Consulting</b>
14.15 -14.30	<b>Nicotine reduction strategy:</b> <i>This presentation will describe: 1) the need to “devaluing” combusted products to expedite quitting smoking or if needed, facilitate the uptake of less harmful nicotine-containing products (e.g., electronic cigarettes; 2) the importance of regulating less harmful nicotine products, and 3) the need to develop more effective nicotine replacement therapies. The presentation will be framed in the context of the continuum of risk of nicotine-containing products. To date, too little attention has been paid to how to alter the most deadly and addictive tobacco product, cigarettes, to reduce their use. Devaluing the combusted products could include reducing their appeal (e.g., eliminating characterizing flavors, sugars) and/or addictiveness (e.g., reducing nicotine in cigarettes). This approach would facilitate the shift towards harm reduction products among smoker unwilling or unable to quit nicotine. However, attention needs to be paid to the concerns associated with harm reduction products, particularly e-cigarettes. These concerns include addicting youth to nicotine, serving as a gateway to combusted products and dissuading smokers from quitting nicotine products altogether. Potential ways to allay these concerns surround e-cigarettes involve establishing product standards, reducing access and promotion to youth and more proactively discussing and providing treatments for the cessation of all nicotine containing products. Finding more effective treatments for smoking and for cessation of e-cigarette use is clearly needed to shift smokers down to the products with the lowest risk and optimally to nicotine abstinence</i> <b>Prof Dorothy Hatsukami - Professor, Department of Psychiatry and Behavioural Sciences, University of Minnesota</b>
14.30-15.00 LIVE	<b>Panel Discussion and Live Q&amp;A: Nicotine and Public Health Policy</b>  <b>Dr Jasjit S. Ahluwalia - Physician and Professor, Brown University School of Public Health and Alpert Medical School-</b> Will provide a First Response to the issues raised in this session and join the other presenters on the panel for a live Q&A
15.00– 15.15	BREAK

**SESSION 3: THR and Public Health Policy (presentations available to watch on demand 1<sup>st</sup> December – viewing time 60 mins)**

15.15– 15.25 LIVE	<p><b>Welcome from the Chair: Martin Dockrell - Tobacco Control Lead, Public Health England</b></p>
15.25– 15.40	<p><b>A Magic Bullet? The Potential Impact of E-Cigarettes on the Toll of Cigarette Smoking:</b></p> <p><i>This paper reports findings from a simulation analysis that compares potential life-years gained by vaping-induced smoking cessation with potential life-years lost by vaping-induced smoking initiation in the U.S. through the year 2100. In addition to varying assumptions about the effect of vaping on smoking cessation and initiation, and the mortality implications, the analysis considers the effects of variables previously never included in such simulations; for example, which types of smokers, defined by difficulty quitting smoking, are most aided by vaping. Out of 360 possible scenarios, 357 (99%) yield positive estimates of life-years saved (LYS), most scenarios resulting in millions of individuals quitting smoking due to vaping through the year 2100. On average, vaping-induced quitters gain an extra 1.2-2.0 years of life compared to smokers who quit without vaping. While the numbers of LYS are generally large across all scenarios, they often represent a small fraction of the toll of smoking. Thus, while vaping is highly likely to reduce smoking-produced mortality, it is not “the” answer to the public health crisis created by smoking. Rather, it may well be an important tool to add to the armamentarium of effective tobacco control measures.</i></p> <p><b>Prof Kenneth Warner - Avedis Donabedian Distinguished Professor Emeritus of Public Health and Dean Emeritus, University of Michigan School of Public Health</b></p>
15.40– 15.55	<p><b>Taking the measure of youth addiction to nicotine in the USA</b></p> <p><i>The starting point for US policy towards e-cigarettes has been and continues to be the notion of an emerging epidemic of youth addiction to nicotine. This epidemic is taken to be a matter of fact, and is evidenced by the recent rapid increase in past 30 day e-cigarette use in high school students, peaking at 27% in 2019. However, youth tobacco use in the USA is characterized by a diverse range of products, both combustible and non-combustible, traditional and novel, with prevalence and patterns of use evolving rapidly over time.</i></p> <p><i>The National Youth Tobacco Survey (NYTS) includes two well-established self-report indicators of nicotine dependence (craving for tobacco; time to first use of the day). This paper reports NYTS data from high school students and examines self-reported dependence by product used and over time, and attempts to estimate the evolving overall burden of nicotine dependence in the whole population. Dependence in otherwise tobacco-naïve e-cigarette users appears to be low, and there is little evidence for any substantial change in population burden of nicotine dependence over time as product preference has shifted from cigarettes towards e-cigarettes.</i></p> <p><b>Martin Jarvis - Emeritus Professor of Health Psychology, Department of Behavioural Science &amp; Health, UCL</b></p>
15.55– 16.10	<p><b>Transitioning Dual Users off Combustible Cigarettes: Maximizing Complete Switching</b></p> <p><i>This presentation will highlight data from an observational study of adult dual cigarette and e-cigarette users, focusing on multi-level factors that might enhance complete switching to e-cigarette use and implications for research and intervention designs. Opportunities for enhancing switching during the time of COVID-19 will be discussed.</i></p> <p><b>Prof Robin Mermelstein - Distinguished Professor of Psychology &amp; Director, Institute for Health Research and Policy, University of Illinois, Chicago</b></p>
16.10 – 16.25	<p><b>An update on Australia’s ban on sales of e-Cigarettes:</b></p> <p><i>Australia has effectively banned the sale of electronic nicotine delivery devices (ENDS) by using poisons regulations that only allow access to ENDS products demonstrated in randomized control trials to improve smoking cessation. No such products are available. Smokers can, with difficulty, import nicotine if they have a prescription, but few doctors are prepared to prescribe it. The minority of smokers who use ENDS have often illicitly accessed nicotine over the internet. This restrictive policy has been supported by most of the Australian tobacco control community. Alarm at increased ENDS use among Australian adolescents has prompted a proposal to make access even more difficult by abolishing personal importation and only allowing dispensing of approved products by pharmacists on a prescription. Illicit importation will attract fines of up to AUD200,000. This paper critically analyses the arguments used to justify Australian ENDS policy and describes how ENDS could be regulated for recreational use in ways that address the concerns about adolescent use raised by those who support a ban.</i></p> <p><b>Prof Wayne Hall - National Centre for Youth Substance Use Research, and the Queensland Alliance for Environmental Health Science, The University of Queensland, Australia</b></p>
16.25- 16.55 LIVE	<p><b>Panel Discussion and Live Q&amp;A: THR and Public Health Policy</b></p> <p><b>Professor Tikki Pang (Pangestu), Visiting Professor of Yong Loo Lin School of Medicine, National University of Singapore</b> <i>Will provide a First Response to the issues raised in this session and join the other presenters on the panel.</i></p>
16.55 LIVE	<p><b>Closing remarks: Martin Dockrell - Tobacco Control Lead, Public Health England</b></p>
17.00	<p><b>DAY 1 CLOSE</b></p>

Day 2 AM – FRIDAY 4 DECEMBER	
SESSION 4: Tobacco Control & Regulation (presentations available to watch on demand 1 <sup>st</sup> December – viewing time 75 mins)	
10.30 – 10.40 LIVE	<b>Welcome from the Chair: Prof Ann McNeill, Professor of Tobacco Addiction Institute of Psychiatry, Psychology &amp; Neuroscience (IoPPN), King's College London</b>
10.40 – 10.55	<b>Why the TPD needs to be strengthened:</b> <i>The EU Tobacco Products Directive was a milestone in tobacco control, covering everything from tracking and tracing of tobacco products to banning flavours in cigarettes, large pictorial health warnings on cigarette packs to regulation of e-cigarettes. But the in the years since the TPD came into force in May 2016 it has become clear that a review of the regulations is needed, particularly with respect to e-cigarettes and novel nicotine products. There are loopholes in the legislation which are being exploited by the tobacco industry. The evidence is growing that e-cigarettes can help smokers who can't or don't want to quit using nicotine, to stop smoking and stay quit, thereby significantly improving their health and wellbeing. This is a major public health benefit which needs to be sustained. However, just as crucially all novel nicotine products need to be regulated to minimise the risk of youth uptake. This presentation sets out ideas for how the regulations should be revised in the light of these two objectives.</i> <b>Deborah Arnott - Chief Executive, Action on Smoking and Health</b>
10.55 – 11.10	<b>FCTC-MPOWER plus THR:</b> <i>THE WHO FCTC and the associated MPOWER package of interventions provide a comprehensive approach to tobacco control including, at least in theory, tobacco harm reduction. Implementation of these interventions has been limited particularly for the most effective measures such as excise tax increases and comprehensive bans on advertising and sponsorship. Even in countries which have fully implemented WHO's recommendations marked failures in tobacco control are evident. For example, in New Zealand which has for three decades been progressively implementing WHO recommendations, inequalities in cigarette smoking rates have not been reduced and adult daily cigarette smoking rates are 13%. The enormous potential of tobacco harm reduction has not been realized. In part, this is because of divisions within the tobacco control community and fears of youth vaping. New Zealand vaping legislation was passed in August 2020 and, despite several limitations, has the potential to accelerate progress toward New Zealand's ambitious, but achievable, Smokefree 2025 goal with &lt;5% of adults smoking cigarettes daily. The New Zealand experience provides lessons for countries at all stages in their efforts to reduce the dreadful burden of death and disease caused by cigarette smoking, especially the need for evidence-based tobacco harm reduction strategies.</i> <b>Robert Beaglehole, Emeritus Professor, University of Auckland (NZ), Chair ASH – Action for Smokefree 2025.</b>
11.10 – 11.25	<b>What if we were serious about making smoking obsolete?</b> <i>Several countries have proposed 'smokefree targets', including New Zealand and Ireland, which set their goals for 2025. They are certain to fail. England has recently made a commitment "to make smoked tobacco obsolete by 2030". Someone now has to fill in the blanks: what should be done to bring this about? Imagine if everyone involved was paid by results and their livelihoods depended on meeting the goal. Imagine too that they had permission to take heretical measures? What would they do? Maybe a grand masterstroke like a cigarette prohibition or an aggressive reduced-nicotine rule? Or maybe something smarter than that? This presentation takes a look at the playbook.</i> <b>Clive Bates, Director, Counterfactual Consulting Ltd</b>
11.25 – 11.40	<b>Tobacco Harm Reduction and Politics in the US:</b> <i>As the U.S. election is underway and we wait to hear if there is a new Administration / Congressional leadership, this session will explore the material implications for tobacco control and public health policies that would result. With election results for both branches of government likely to remain in flux for weeks, there is one political truth that holds to be self-evident regardless of electoral outcome: Democrats in all levels of government routinely turn to the Campaign for Tobacco-Free Kids and Bloomberg Philanthropies for guidance on how to approach tobacco policy issues. These two non-profits are held in high regard as deeply trusted partners by virtually all Democrats, and actively encourage policymakers to advance universal flavor bans, increased taxes, and nicotine caps in all tobacco products. This means that wherever we find Democrats in power, we need to contemplate these suite of policies as real possibilities.</i> <b>Stefanie Miller - Managing Director, FiscalNote Markets</b>
11.40 – 11.50	<b>BREAK</b>
11.50 – 12.10	<b>Global view: how have recent US developments affected the global regulatory environment for products offering an alternative to combustible tobacco?</b> <i>Implementation of the PMTA deadline, and continuing regulatory pressure in areas of policy such as flavours and youth access to vaping products have been discussed widely in the media and resulted in a huge amount of regulatory change in the US. But what implications does all this have on regulation in other global markets, including Europe where discussions are about to start on a revision of the Tobacco Products Directive? And how has the market reacted to the changing legal landscape? As we look ahead to a new market environment where other reduced risk products are being offered to consumers such as heated tobacco and nicotine pouches, how does the changing market for combustible alternatives affect development of policy and regulation in this area?</i> <b>Tim Phillips – Managing Director, ECigIntelligence/TobaccoIntelligence</b>
12.10 – 12.40 LIVE	<b>Panel Discussion and Live Q&amp;A: Industry, Politics and Policy</b>
12.40– 13.20	<b>LUNCH</b>

DAY 2 PM

SESSION 5: Working with Tobacco Harm Reduction (available to watch on demand 1<sup>st</sup> December – viewing time 40 mins)

**13.20 – 14.00** **Welcome from the Chair: Prof Robert West - Professor of Health Psychology, Department of Behavioural Science and Health, University College London (UCL)**

**The UK Stop Smoking Services in a new era:** *Robert West leads a conversation with three stop smoking advisor/service practitioners to explore the real-life experiences of cessation services. Much of the conversation around e-cigarettes focuses on scientific, policy and regulatory debates. This session will look at how this translates in practice and ask: How has vaping influenced or changed the stop smoking service and how does this fit within the traditional NRT and Medicinal tool kit*

**Chair: Robert West - Professor of Health Psychology & Director of Tobacco Studies**

**Louise Ross –Vice Chair, NNA & Clinical Consultant National Centre for Smoking Cessation & Training**

**Nicky Coote - Service Lead & Specialist Smoking Cessation Practitioner, Barnet Stop Smoking Service, Public Health**

**Richard Holley – Area Manager (Smoking Cessation), Tobacco Control Lead, Northamptonshire Stop Smoking Service**

**13.50 -14.10** **Live Q&A**

**14.10– 14.15** **BREAK**

SESSION 6: Tobacco and Health Inequalities (presentations available to watch on demand 1st December – viewing time 30 mins)

**14.15 – 14.20 LIVE** **Welcome from the Chair: Prof Robert West - Professor of Health Psychology, Department of Behavioural Science and Health, University College London (UCL)**

**14.20 – 14.30** **Relapse prevention: a matter of taste?** *There is growing and widespread concern about youth use of e-liquid flavours. Findings from a review of recent research evidence confirms that young people prefer fruit and sweet flavoured e-liquids. People like vaping liquids that taste and smell good. Do flavours, therefore, tempt young people to start using nicotine, on a pathway from vaping towards tobacco smoking dependence? Or do flavoured e liquids divert young people away from harmful tobacco smoking, and support smoking quit attempts? For adult smokers, particularly perhaps those who are vulnerable and find it most difficult to quit, might enjoying using e-liquid flavours actually promote not only cessation, but sustained tobacco smoking abstinence? The evidence will be considered within a context where societal discourses of ‘protecting innocent children’ prevail, alongside deficit based moral discourses positioning nicotine addiction as ‘bad’. Furthermore, international regulations categorising e-cigarettes as tobacco products cause considerable confusion, through implication by association that potential e-cigarette harms are on a par with the known serious harms of tobacco smoking. There is serious, consequential, misinterpretation of observational evidence. Might it be time to consider flavouring, as one aspect of the sensory pleasure of e-cigarette use, as a positive means to supporting long term smoking abstinence?*

**Professor Caitlin Notley, Chair of Addiction Sciences, University of East Anglia**

**14.30 - 14.40** **Reaching 'the unreachable': Responding to people in high-risk smoking groups during the Covid-19 pandemic:** *Even before the Covid-19 pandemic the UK was a widely divided nation in terms of health outcomes and quality of life. Contributing to this is tobacco smoking and dependence. Smoking rates are disproportionately high amongst those living with substance disorders, without secure accommodation and with a severe mental illness. Early in the pandemic it was highlighted that smokers living with these comorbidities were at increased risk of infection and needed help to quit smoking and to reduce risky smoking practices. In this talk case examples and survey data will highlight some of the third sectors response through the offer of an e-cigarette to adults seeking shelter and using drug services. The precariousness of this 'tobacco teachable moment' will also be discussed, highlighting how poor science and media reporting can undermine these efforts.*

**Dr Sharon Cox - Senior Research Fellow, Tobacco and Alcohol Research Group, University College London**

**14.40– 14.50** **The struggle for the vape industry: the view from the ground:** *When it comes to the vape industry, there are two contrasting public health narratives. According to one, plucky little vape shops are helping people stop smoking; according to the other, the tobacco industry uses e-cigarettes as a fiendish new way to enslave our kids. There is little understanding of the wide range of players in the industry, their changing market strategies and most importantly, the impact of these strategies on smokers deciding to switch. Drawing on research with smokers, vapers and vape shops in the North of England, I will outline some of the approaches used by industry players to survive in a crowded market, including offering specialist expertise, building consumer trust and ensuring good product distribution. I will contrast these strategies with the overwhelming customer emphasis on price, explain some of the reasons for this and draw some conclusions about the global prospects for tobacco harm reduction.*

**Dr Frances Thirlway -Research Fellow, Sociology Department, University of York**

**14.55– 15.15 LIVE** **Panel Discussion and Live Q&A: Tobacco and Health Inequalities**

**15.15– 15.25** **BREAK**

**SESSION 7: Tobacco Control and THR (presentations available to watch on demand 1<sup>st</sup> December – viewing time 60 mins)**

<p>15.25 – 15.30 LIVE</p>	<p><b>Welcome from the Chair</b>  <b>Prof Thomas J. Glynn, Adjunct Lecturer, Stanford Prevention Research Center, Stanford University School of Medicine</b></p>
<p>15.30– 15.45</p>	<p><b>Setting the agenda for tobacco harm (reduction) research</b>  <i>The scientific agenda for research on reduced risk tobacco products remains splintered and counterproductive. This is because stakeholders have different goals in mind for what research ought to be able to demonstrate and which positions it should support. Tobacco and nicotine companies, naturally, hope to demonstrate that new, alternative products, compared to cigarettes or other combustibles, carry less individual health risks. Regulators more or less are open to harm reduction science, but have not been clear on defining what types of methods and evidence qualify. Regulators are also wary of potential risks because no tobacco or nicotine product is, strictly speaking, risk free. Tobacco control activists’ agenda is to demonstrate irredeemable harms attached to any and all tobacco or nicotine consumer products, or at least to raise sufficient doubts about potential future harms vs benefits. This has resulted in an asymmetric research agenda focused on harms not benefits. This agenda is driven by mythologies that perversely attract scientists’ attention yet cannot be adequately addressed within the scope of current scientific methods (e.g., the “gateway” hypothesis, nicotine-caused brain damage, e-cigarettes don’t help smokers quit). This has led to wheel-spinning and little forward progress. I will discuss ways that the scientific community can address these myths, reassert its scientific authority, and establish a positive research agenda moving forward.</i>  <b>Dr Ray Niaura, Interim Chair of the Department of Epidemiology, Professor of Social and Behavioral Sciences, School of Global Public Health, New York University</b></p>
<p>15.45– 16.00</p>	<p><b>Attractiveness of less risky alternatives versus attractiveness of cigarettes. Are we nearly there yet?</b>  <i>The presentation will consider what needs to happen for less risky alternatives to kill off smoking. It will include some thoughts on what motivates efforts by activists and regulators that are preventing smokers from switching to less harmful options; and provide a review of some of the developments that are improving the competitiveness of less harmful alternatives against cigarettes.</i>  <b>Prof Peter Hajek - Professor of Clinical Psychology, Wolfson Institute of Preventive Medicine, Queen Mary University of London</b></p>
<p>16.00 – 16.15</p>	<p><b>Reflections from the front line</b>  <i>In this session Dr Jasjit S. Ahluwalia reflects on the broader issues surrounding the science and evidence on e-cigarettes and tobacco harm reduction. With thoughtful consideration, he will discuss the available health evidence on pulmonary, cardio vascular and cancer and consider this in context of all users and product evolution and safety. He will ask:</i></p> <ul style="list-style-type: none"> <li>• <i>What do we know?</i></li> <li>• <i>What do we need to find out?</i></li> <li>• <i>...and finally, does it matter?</i></li> </ul> <p><b>Dr Jasjit S. Ahluwalia - Physician and Professor, Brown University School of Public Health and Alpert Medical School</b></p>
<p>16.15 – 16.30</p>	<p><b><u>Keynote and closing address</u></b>  <b>Tobacco Control, Harm Reduction, and Science: Integrity is our most Important Asset</b>  <i>The stunning success of tobacco control rests on two pillars: unimpeachable scientific evidence about the harm caused by inhaling (either directly or passively) combustible tobacco smoke, and damning evidence of the duplicity of the tobacco industry. Today, the controversy over the use of tobacco harm reduction devices threatens those pillars. In their zeal to protect youth from the hazards of vaping, too many well-meaning researchers and advocates have gone beyond the evidence to overstate the dangers of harm reduction. In so doing, and at a time when authorities are suspected of disseminating “fake news,” we risk undermining our scientific and moral credibility, thereby damaging our prospects of further curbing the still devastating tobacco epidemic.</i>  <b>Prof Steven A. Schroeder - Distinguished Professor of Health and Healthcare, University of California &amp; Director, Smoking Cessation Leadership Center</b></p>
<p>16.30– 17.00 LIVE</p>	<p><b>Panel Discussion and Live Q&amp;A: Tobacco Control and THR -Friend or Foe?</b>  <b>Clifford E. Douglas - Director, Tobacco Research Network, Adjunct Professor, Department of Health Management and Policy, University of Michigan School of Public Health -Will provide a First Response to the issues raised in this session and join the other presenters on the panel for a live Q&amp;A</b></p>
<p>17.00 LIVE</p>	<p><b>Closing remarks &amp; Close: Prof Thomas J. Glynn, Adjunct Lecturer, Stanford Prevention Research Center, Stanford University School of Medicine</b></p>
<p><b>SUMMIT CLOSE</b></p>	