



Vaping: UK experts defend safety in face of US lung injury cases

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London

The outbreak of lung injuries in the US among people using electronic cigarettes should not deter UK smokers from using them, a panel of experts told a briefing at the Science Media Centre in London. The danger, they said, was less from vaping than from the fear of vaping, which could discourage smokers from using the best currently available aid to quitting.

Although in the US there have now been 1299 alleged cases and 26 deaths across 49 states, in the UK only a single victim has been identified after nearly 10 years of e-cigarette use. Nor is there evidence from the yellow card scheme run by the Medicines and Healthcare Products Regulatory Agency of a hidden epidemic.

The US Centres for Disease Control has now given the condition its own name: EVALI, for “e-cigarette or vaping product use-associated lung injury.” But unlike other acronymic diseases such as HIV or SARS, which knew no borders, EVALI is so far corralled within the US, for reasons that remain conjectural. CDC officials this week cautioned that the symptoms may mimic those of flu or other respiratory viruses. “Any given individual may have a lung injury, they may have an infection, or they may have both,” said Ram Koppaka, a medical officer at the CDC’s National Centre for Immunization and Respiratory Disease.

Analysis of a subset of the US cases has indicated that around three quarters of those affected had used their vaping gear to inhale cannabis products. John Britton, director of the Centre for Tobacco and Alcohol Studies at the University of Nottingham, told the London briefing: “It looks as if it’s a cannabis vaping problem. It’s not happening here. It’s a US specific problem.”

The US cases worry the UK experts because of the risk of damage to the reputation of e-cigarettes, to which they attribute a rapid fall in smoking in the UK at a time when official smoking cessation programmes are languishing. “Between 2011 and 2018, smoking in the UK has fallen by an average of 0.9 percentage points a year,” Britton said. “That’s twice as fast as in the US, and three times as fast as in Australia, where e-cigarettes containing nicotine are illegal. It’s also as fast a decline as we have ever experienced in recent history.”

Ann McNeill, professor of tobacco addiction at the Institute of Psychiatry in London, said there was a small suggestion, in recent data from the UCL Smoking Toolkit Study, of an increase in the proportion of would be quitters trying to give up without any aids. That was bad news, she said, because they would be

likely to fail. Fear of the supposed risks of vaping could be a cause of this trend.

Surveys show, she said, that consumers in England who don’t currently use e-cigarettes remained uncertain about the safety of e-cigarettes though, US experience apart, they had no grounds to be. “That’s our concern,” she said. “When asked about harms only 30% know the right answer, which is that vaping is less harmful than smoking.” The other 70% either believed they were equally harmful or more harmful, or didn’t know.

As for the recently retired chief medical officer, Sally Davies, who said at the weekend that she favoured a ban on flavoured e-cigarettes, the panel maintained that she was wrong. McNeill said, “I disagree with her. Many adult smokers say they need the flavours if they’re going to use e-cigarettes—it’s the flavours that make them palatable.” Banning flavours might therefore prolong the smoking habit for many.

Britton also said Davies was wrong. “She first expressed that fear several years ago, saying that more evidence was needed on the safety of flavours, but that evidence is now clear for all to see.”

Panel member Alan Boobis, emeritus professor of toxicology at Imperial College London and chair of the UK Committee on Toxicity, said it was already clear that the flavours available in the UK were safe. His committee is partway through an examination of e-cigarettes. This confidence was, he said, partly based on animal models and partly on common sense. “Most of the flavours are already used in food, and at the relatively low temperatures used in e-cigarettes they are not going to give rise to hazardous byproducts,” he said.

Many of the US cases feature lipoid pneumonia, more usually seen when people inhale oil after industrial accidents. Britton believes the cases to be the result of inhaling cannabis oils. But there are other cases with different symptoms of lung injury, and these could have a different cause, he said.

Some in the US agree. “It may be that there is more than one cause to this outbreak,” said Ned Sharpless, acting commissioner of the US Food and Drug Administration.

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Correction: On 15 October we amended this article to correct the spelling of Ann McNeill’s name, to give the full name of the Institute of Psychiatry, Psychology & Neuroscience, and to correct the misattribution of a quotation.

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