









World Health Organization's Recommended Options for **Regulating E-Cigarettes (2014)**

On July 21, 2014, the World Health Organization (WHO) Framework Convention on Tobacco Control released a report that summarizes current research on the health impact of electronic nicotine delivery systems (ENDS) – also known as "e-cigarettes" – and identifies options for controlling and preventing their use. WHO proposes that governments focus on four regulatory objectives: (1) impede e-cigarette promotion to, and uptake by, non-smokers, pregnant women and youth; (2) minimize potential health risks to e-cigarette users and nonusers; (3) prohibit unproven health claims from being made about e-cigarettes; and (4) protect existing tobacco control efforts from commercial and other vested interests of the tobacco industry.

To achieve these objectives, WHO recommends several regulatory options:

- Prohibit manufacturers and third parties from making health claims about e-cigarettes, including that they are smoking cessation aids, until manufacturers provide convincing supporting scientific evidence and obtain regulatory approval.
- Prohibit the use of e-cigarettes indoors, especially in smoke-free areas, until exhaled vapor is proven not to harm bystanders and reasonable evidence exists that smoke-free policy enforcement is not undermined.
- Restrict e-cigarette advertising, promotion and sponsorship. For example:
 - o Ensure that e-cigarettes are regulated by an appropriate governmental body.
 - o Clearly state whether e-cigarettes contain nicotine or may be used with nicotine solutions; include information on nicotine's addictiveness; and do not suggest that e-cigarettes have positive qualities related to this addictiveness.
 - Do not make e-cigarettes appealing to or target non-smokers, non-nicotine users, or minors, including through the selection of media, location or the context in which they appear, or through imagery.
 - Encourage smoking cessation and provide a quitline number if one exists.
 - Ensure that nothing in e-cigarette advertising, promotion or sponsorship could reasonably be expected to promote the use of tobacco products.
 - Prohibit health or medicinal claims unless the product is licensed for those purposes by the appropriate regulatory agency.
 - Do not undermine any tobacco control measure.
 - Include factual information about product ingredients other than nicotine in a way that does not distort evidence of risks.
 - Do not link e-cigarettes with gambling, alcohol, illicit drugs or any activities or locations in which use would be unsafe or unwise.

- Require transparency from e-cigarette and tobacco companies advocating for and against legislation and regulation, both directly and through third parties.
- Regulate e-cigarette product design and information to:
 - Minimize content and toxicant emissions.
 - o Ensure use of nicotine of pharmacological quality, when nicotine use is intended.
 - o Standardize nicotine delivery at levels known to consumers.
 - Minimize acute nicotine toxicity.
 - o Impede product alteration to use of other drugs.
 - o Ban e-cigarette solutions with fruit, candy-like and alcoholic drink flavors.
 - o Require manufacturers and importers to disclose to governmental authorities information about e-cigarette content and emissions.
 - o Require manufacturers and importers to register with governmental authorities.
- Ensure that e-cigarette health warnings are commensurate with proven health risks, such as potential nicotine addiction; potential respiratory, eyes, nose and throat irritant effect; and potential adverse effect on pregnancy.
- Use or strengthen tobacco surveillance and monitoring systems to assess developments in e-cigarettes and nicotine use by sex and age.
- Prohibit retailers from selling e-cigarettes to minors and eliminate or greatly restrict vending machines that sell these products.