Royal College of Paediatrics and Child Health Cymru

Leading the way in Children's Health

Royal College of Paediatrics and Child Health (RCPCH) Wales response to Health and Social Care Committee's call for comments on the Legislative Consent Memorandum Tobacco and Vapes Bill.

January 2025

The RCPCH Wales welcomed the reintroduction of the Tobacco & Vapes Bill in Westminster.

We strongly support its proposals and believe this type of legislation is a once in a generation opportunity to safeguard the health and wellbeing of children and young people as well as that of future generations.

This submission summarises the evidence to support proposals to reduce the appeal and access of vapes to young people, raise the age of sale for tobacco products and expand smokefree and vape free outdoor public spaces. We believe these are crucial measures to help create the first smokefree generation and tackle the rise in youth vaping in the UK.

Prevalence of youth vaping

It is illegal to sell vapes to under 18s in the UK, however data shows that the number of children and young people using vapes is rising, highlighting a growing trend of young people engaging in a behaviour with no recorded health benefits.

Data shows that 7% of young people aged 11 to 16 use vapes weekly. This is an increase from 5.4% since 2021. For pupils in year 11, the figure is 15.9%, up from 13.6% from 2021. This is worrying as many vapes contain nicotine, which is very addictive.

Access to vapes

Vapes are currently regulated by the Tobacco and Related Products Regulations (TRPR) in the UK. In 2015, it became illegal to sell vapes containing nicotine to under 18s or to purchase them on their behalf. However, research found, 67 of 297 attempts (23%) by

young volunteers to purchase nicotine containing vapes, resulted in a sale. This was as high 38% in one local authority.

Non-nicotine containing vape liquids are available, which are usually flavoured, and are not regulated by the TRPR but by the General Product Safety Regulations (GPSR). Advertising or promotion of vapes and re-fill containers on a number of media platforms is prohibited, as regulated under the EU Tobacco Products Directive (TPD). The only advertising still allowed is at point of sale and other local advertising. However, despite these existing regulatory frameworks, evidence shows that CYP are still able to readily access vapes therefore a more consistent legislative framework and strengthened enforcement powers are needed to prevent this.

Alongside brightly coloured packaging, flavours have been introduced to deliberately be promoted to appeal to young people. ASH found the most popular vape flavours are fruit (59%), sweet (16%) and mint (6.9%).

Evidence on health impacts of e-cigarette use on children and young people

Vapes are a relatively new product; they aren't risk free and their long-term impacts are not known. However, there is a growing evidence base that highlights the adverse health impacts of vaping use amongst young people which demonstrates a strong need to introduce measures as proposed in the Bill to restrict the access and reduce the appeal of vapes to children and young people. Scoping searches of evidence conducted by RCPCH in 2023 and 2024 can be found in Annex A.

An analysis of the health impacts associated with vaping was also undertaken by Public Health Wales's Incident Report Group which explored professionals concerns. The most commonly raised concern was the increasing prevalence of nicotine dependence and the impact this was having on health, wellbeing and learning.

Phasing out sale of tobacco products to those born in or after 2009

Smoking is detrimental to the health of young people throughout their lives, with earlier initiation linked to increased levels of smoking and dependence, a lower chance of quitting and higher mortality.

Most adult smokers have had their first cigarette or were already addicted to nicotine by the age of 18, and 90% of lifetime smoking is initiated between the ages of 10 and 20 years in the UK.

It is therefore important to ensure a continued reduction in the proportion of young people that smoke and their exposure to tobacco smoke by creating barriers to smoking initiation to safeguard their health and that of future generations.

Expand smokefree legislation to public outdoor areas/and extend to include vapefree

We strongly support the expansion of smokefree legislation. Almost all (97%) of the 149 paediatricians we surveyed in December 2023 support the proposal to raise the smoking age.

Second-hand smoke exposure is responsible for numerous child health issues, including chest infections, meningitis and sudden infant death syndrome (SIDS).

In 2024, the most common contributory factor identified in infant deaths which was modifiable was smoking by a parent or carer. The introduction of smoke free public spaces led to improved child health outcomes, including fewer premature births and reduced asthma admissions for under five-year-olds.

The evidence base on the impacts of secondhand exposure to e-cigarette vapour is growing and three studies were included in the recent RCPCH scoping search that examined the impact of secondhand exposure to aerosols from e-cigarettes.

In light of the growing evidence and our view that CYP should be protected from any known and unknown harms, we support proposals in the Bill that would enable an extension of the the indoor smoking ban to outdoor spaces.

About the Royal College of Paediatrics and Child Health (RCPCH) Wales

The RCPCH works to transform child health through knowledge, innovation and expertise. We have over 600 members in Wales, 14,000 across the UK and an additional 17,000 worldwide. The RCPCH is responsible for training and examining paediatricians. We also advocate on behalf of members, represent their views and draw upon their expertise to inform policy development and the maintenance of professional standards.

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Annex A

An association between e-cigarette use and increased risk of asthma in young people [1] [2]

E-cigarette use was linked with increased odds of smoking; the addictive nature of nicotine in these products can lead to a lifelong dependency, serving as a gateway to traditional cigarette use amongst young people who have never smoked. A prospective study found ever use of e-cigarettes was robustly associated with initiation but more modestly related to escalation of cigarette use.[3] A second prospective study found E-cigarette use by age 14 is associated with increased odds of tobacco cigarette initiation and frequent smoking at age 17.[4]

A cross sectional study found e-cigarette use was associated with smoking intention in never, experimental and former smokers.[5] Another study's results indicated that lifetime e-cigarette use increased the prevalence of subsequent conventional cigarette use by 1.86 times and the prevalence of conventional cigarette use in the last month by 2.38 times, independently of whether the e-cigarette contains nicotine or not.

Dual users showed a higher percentage of daily smokers, and a greater number of cigarettes per day, a higher use of e-cigarettes with nicotine, and an earlier age of smoking onset.[6] An additional study found those aged 12, 13, and 14 bear an alarmingly disproportionate burden of the elevated risk.[7]

Gastrointestinal findings as a symptom of EVALI (e-cigarette or vaping product use associated lung injury).[8] [9] [10] One study stated that gastrointestinal symptoms were found in 85% of patients.[11] A case report of a 13 year old boy describes a history of abdominal pain, nausea, and emesis after a 12-month history of significant e- cigarette use.[12]

Three studies reported on the link between e-cigarette use and mental health. Two studies suggested that adolescents with depressive symptoms[13] or anxiety sensitivity[14] are more likely to engage in e-cigarette use. One study found that e-cigarette use directly increased the risk of suicidal ideation. [15] Another study reported that an increased risk of suicide attempts extends to a range of emerging tobacco products, which includes vapes, and manifests amongst elementary school aged children. [16]

One study was included that reported on nicotine dependence, which had conflicting findings. However, the study found that adolescents who used pod products (e-cigarettes) showed more signs of nicotine dependence than non-pod users. [17]

One study reported on oral health outcomes. Adolescents self-reported on their e-cigarette use and a provider diagnosis on dental problems. Findings suggest that dual use of e-cigarettes and conventional cigarettes is associated with poor oral health outcomes among adolescents. However, no association can be made as the finding was not statistically significant.[18]

15 studies reported on respiratory concerns (excluding asthma).[19] [20] [21] [22] [23] [24] [25] [26] [27] [28] [29] [30] [31] [32] [33]. Reported features included lung injury/EVALI, pneumothorax, and pneumonia.

Three studies reported on the association between e-cigarettes and drug use, all three studies found e-cigarette use to be associated with drug use. Incident use of marijuana, marijuana in electronic nicotine devices, Ritalin/Adderall, and polysubstance use were linked to e-cigarette use but not painkillers, sedatives, or tranquilizers. [34] High and low levels of e-cigarette use patterns were found to be associated with increasing use of other substances (alcohol and marijuana use) over time.[35] E-cigarette use in early adolescence was associated with higher odds of cocaine use later in adolescence. [36]

One study reported sleep-related complaints. E-cigarette use was significantly associated with greater odds of reporting sleep-related complaints among adolescents. [37]

One study reported on traumatic injuries. A retrospective study reported facial burns, loss of multiple teeth, thigh and groin burns, hand burns, ocular burns, a radial nerve injury, a facial laceration, and a mandible fracture as injuries related to e-cigarette use. [38]

A systematic review conducted on the health outcomes of vaping during pregnancy concluded that while more studies found no evidence of increased risk of exclusive-vaping compared with non-use and evidence of comparable risk for exclusive-vaping and exclusive-smoking, the quality of that evidence limits conclusions on whether smoking during pregnancy is harmful to child health. [39]

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[11] Alnajem A, Redha A, Alroumi D, Alshammasi A, Ali M, Alhussaini M, et al. Use of electronic cigarettes and secondhand exposure to their aerosols are associated with asthma symptoms among adolescents: a cross-sectional study. Respiratory Research. 2020;21(1):16.

[2] Cho JH, Paik SY. Association between Electronic Cigarette Use and Asthma among High School Students in South Korea. PLoS ONE [Electronic Resource]. 2016;11(3).

[3] Conner M, Grogan S, Simms-Ellis R, Flett K, Sykes-Muskett B, Cowap L, et al. Do electronic cigarettes increase cigarette smoking in UK adolescents? Evidence from a 12-month prospective study. Tobacco Control. 2017;17:17.

[4] Staff J, Kelly BC, Maggs JL, Vuolo M. Adolescent electronic cigarette use and tobacco smoking in the Millennium Cohort Study. Addiction. 2022;117(2):484-94.

[5] Wang MP, Ho SY, Leung LT, Lam TH. Electronic cigarette use and its association with smoking in Hong Kong Chinese adolescents. Addictive Behaviors. 2015;50:124-7.

[6] Aonso-Diego, G., et al. (2024). "Association between e-cigarette and conventional cigarette use among Spanish adolescents." Adicciones 36(2): 199-206.

[7] Egger, S., et al. (2024). "The association between vaping and subsequent initiation of cigarette smoking in young Australians from age 12 to 17 years: a retrospective cohort analysis using cross-sectional recall data from 5114 adolescents." Australian and New Zealand journal of public health: 100173.

[8] Carroll BJ, Kim M, Hemyari A, Thakrar P, Kump TE, Wade T, et al. Impaired lung function following e-cigarette or vaping product use associated lung injury in the first cohort of hospitalized adolescents. Pediatric Pulmonology. 2020;55(7):1712-8.

[9] Casamento Tumeo C, Schiavino A, Paglietti MG, Petreschi F, Ottavianelli A, Onofri A, et al. E-cigarette or Vaping product use Associated Lung Injury (EVALI) in a 15 year old female patient - case report. Italian Journal of Pediatrics. 2022;48(1):19.

[10] viAdkins SH, Anderson KN, Goodman AB, Twentyman E, Danielson ML, Kimball A, et al. Demographics, Substance Use Behaviors, and Clinical Characteristics of Adolescents With e-Cigarette, or Vaping, Product Use-Associated Lung Injury (EVALI) in the United States in 2019. JAMA Pediatrics. 2020;174(7):01.

[11] Rao DR, Maple KL, Dettori A, Afolabi F, Francis JKR, Artunduaga M, et al. Clinical Features of E-cigarette, or Vaping, Product Use-Associated Lung Injury in Teenagers. Pediatrics. 2020;146(1):07.
[12] Wekon-Kemeni C, Santhanam P, Halani P, Bradford L, Loughlin CE. A Gut Feeling: Abdominal Symptoms as an Initial Presentation of EVALI. Pediatrics. 2021;147(1):01.
[13] Gorfinkel L, Hasin D, Miech R, Keyes KM. The Link Between Depressive Symptoms and Vaping Nicotine in U.S. Adolescents, 2017-2019. Journal of Adolescent Health. 2022;70(1):133-9.
[14] Guillot CR, Pang RD, Vilches JR, Arnold ML, Cajas JO, Aleman AM, et al. Longitudinal Associations Between Anxiety Sensitivity and Substance Use in Adolescents: Mediation by Depressive Affect. Experimental and Clinical Psychopharmacology. 2023.
[15] Wilkinson, A. V., et al. (2024). "Use of cigarettes and e-cigarettes, impulsivity and anxiety: Influences on suicidal ideation among youth and young adults in Texas." Nicotine & tobacco research : official journal of the Society for Research on Nicotine and Tobacco. 19.
[16] Lee, P. H., et al. (2024). "Use of Tobacco Products and Suicide Attempts among Elementary School-Aged Children." JAMA Network Open 7(2): E240376.
[17] Boykan R, Goniewicz ML, Messina CR. Evidence of Nicotine Dependence in Adolescents Who Use Juul and Similar Pod Devices. International Journal of Environmental Research & Public Health [Electronic Resource]. 2019;16(12):17.
[18] Akinkugbe AA. Cigarettes, E-cigarettes, and Adolescents' Oral Health: Findings from the Population Assessment of Tobacco and Health (PATH) Study. Jdr Clinical & Translational Research. 2019;4(3):276-83.
[19] Carroll BJ, Kim M, Hemyari A, Thakrar P, Kump TE, Wade T, et al. Impaired lung function following e-cigarette or vaping product use associated lung injury in the first cohort of hospitalized adolescents. Pediatric Pulmonology. 2020;55(7):1712-8.
[20] asamento Tumeo C, Schiavino A, Paglietti MG, Petreschi F, Ottavianelli A, Onofri A, et al. E-cigarette or Vaping product use Associated Lung Injury (EVALI) in a 15 year old female patient - case report. Italian Journal of Pediatrics. 2022;48(1):19.
[21] Rao DR, Maple KL, Dettori A, Afolabi F, Francis JKR, Artunduaga M, et al. Clinical Features of E-cigarette, or Vaping, Product Use-Associated Lung Injury in Teenagers. Pediatrics. 2020;146(1):07.
[22] viAdkins SH, Anderson KN, Goodman AB, Twentyman E, Danielson ML, Kimball A, et al. Demographics, Substance Use Behaviors, and Clinical Characteristics of Adolescents With e-Cigarette, or Vaping, Product Use-Associated Lung Injury (EVALI) in the United States in 2019. JAMA Pediatrics. 2020;174(7):01.
[23] Alsaid AH, Elfaki A, Alkhouzaie MT, Alghamdi RA. A rare case of acute eosinophilic pneumonia induced by vaping-associated lung injury: a case report. BMC Pulmonary Medicine. 2023;23(1) (no pagination)(291).
[24] Barnes JM, Ali M. E-Cigarette or Vaping Associated Lung Injury: Evolving Threat to Healthy Teens. South Dakota Medicine: The Journal of the South Dakota State Medical Association. 2021;74(7):318-21.
[25] Deskins SJ, Luketich SK, Al-Qatarneh S. Recurrent spontaneous pneumothorax in a 15-year-old female associated with electronic cigarettes. Pediatric Pulmonology. 2568;57(10):2568-70.
[26] Fedt A, Bhattarai S, Oelstrom MJ. Vaping-Associated Lung Injury: A New Cause of Acute Respiratory Failure. Journal of Adolescent Health. 2020;66(6):754-7.
[27] Lu MA, Jabre NA, Mogayzel PJ, Jr. Vaping-related Lung Injury in an Adolescent. American Journal of Respiratory & Critical Care Medicine. 2020;201(4):481-2.
[28] Ronald AA, Defta D, Wright J, Rothstein B. Extensive Pneumorrhachis Associated with Vaping-Induced Lung Injury. World Neurosurgery. 2020;140:308-11.
[29] Schaffer S, Strang A, Saul D, Krishnan V, Chidekel A. Adolescent E-cigarette or Vaping Use-Associated Lung Injury in the Delaware Valley: A Review of Hospital-Based Presentation, Management, and Outcomes. Cureus. 2022;14(2).
[30] Tackett AP, Urman R, Barrington-Trimis J, Liu F, Hong H, Pentz MA, et al. Prospective study of e-cigarette use and respiratory symptoms in adolescents and young adults. Thorax. 2023;(no pagination)(218670).
[31] Wang MP, Ho SY, Leung LT, Lam TH. Electronic Cigarette Use and Respiratory Symptoms in Chinese Adolescents in Hong Kong. JAMA Pediatrics. 2016;170(1):89-91.
[32] Brose, L. S., et al. (2024). "Associations between vaping and self-reported respiratory symptoms in young people in Canada, England and the US." BMC Medicine 22(1) (no pagination)(213).
[33] Kurdys-Bykowska, P., et al. (2024). "Respiratory Symptoms among Adolescents in Poland: A Study on Cigarette Smokers, E-Cigarette Users, and Dual Users." Pediatric Reports 16(3): 530-541.

[34] Bentivegna K, Atuegwu NC, Oncken C, DiFranza JR, Mortensen EM. Electronic Cigarettes Associated With Incident and Polysubstance Use Among Youth. Journal of Adolescent Health. 2021;68(1):123-9.
[35] Park E, Livingston JA, Wang W, Kwon M, Eiden RD, Chang YP. Adolescent E-cigarette use trajectories and subsequent alcohol and marijuana use. Addictive Behaviors. 2020;103(106213):04.
[36] Silva CP, Maggs JL, Kelly BC, Vuolo M, Staff J. Associations Between E-cigarettes and Subsequent Cocaine Use in Adolescence: An Analysis of the UK Millennium Cohort Study. Nicotine & Tobacco Research. 2023;25(3):514-23.
[37] Riehm KE, Rojo-Wissar DM, Feder KA, Mojtabai R, Spira AP, Thrul J, et al. E-cigarette use and sleep-related complaints among youth. Journal of Adolescence. 2019;76:48-54.
[38] Russell KW, Katz MG, Phillips RC, Kelley-Quon LI, Acker SN, Shahi N, et al. Adolescent Vaping-Associated Trauma in the Western United States. Journal of Surgical Research. 2022;276:251-5.
[39] Ussher, M., et al. (2024). "Vaping during pregnancy: a systematic review of health outcomes." BMC Pregnancy and Childbirth 24(1) (no pagination)(435).