New and Emerging Smokeless Tobacco Products

Smokeless tobacco products, including snus and dissolvables such as strips, orbs, and sticks, are part of a new series of emerging tobacco products currently being promoted by the tobacco industry as less harmful, more convenient, and more socially acceptable alternatives to traditional cigarettes. However, there is no scientific evidence that smokeless tobacco products are safe and the use of smokeless tobacco products is not considered a safe substitute for, or an effective means of, quitting tobacco use altogether.

The Emergence of Smokeless Tobacco Products

- Between 1965 and 2004, cigarette smoking among American adults declined by half, from 42% to 21%. Since 2004, the smoking prevalence has continued to decline, but at a much slower rate.¹
- In 2010, the percentage of Americans who smoke cigarettes fell below 20% for the first time since just after World War I.²
- Cigarette and tobacco manufacturers recognize that a rise in indoor smoking restrictions, smoking-related health concerns, taxes on cigarettes, and reduced social acceptability of smoking has led to a reduction in smoking rates.³
- Since 2005, major cigarette manufacturers have, either through partnership or acquisition, moved into the smokeless tobacco business. Smokeless tobacco products introduce both smokers and non-smokers to new products for use in situations where smoking is restricted, while also providing a means for the tobacco industry to recapture revenue lost as a result of the decline in cigarette smoking.⁴
- Smokeless tobacco products include moist snuff, chewing tobacco, snus (a "spitless, moist powder tobacco pouch"), dissolvables (Orbs, Strips, and Sticks), and a variety of other tobacco-containing products that are not smoked.⁵

Health Risks

Although more research is needed to determine the full scale of health effects from smokeless tobacco products, several risks are currently documented. To date, use of smokeless tobacco has been shown to cause:⁶,⁷,⁸

- Cancer of the mouth, pancreas, and esophagus
- Precancerous mouth lesions
- Dental problems including gum recession, dental carries, and bone loss around the teeth.
- Nicotine addiction

Harm Reduction

Despite the risks, smokeless tobacco products are promoted by the tobacco industry as providing harm reduction, or as an alternative to the abstinence of risky behavior.⁹ Although the tobacco industry, which has been convicted under federal racketeering laws for decades of conspiracy to deceive the public, touts these new products as “reduced harm” or “reduced or modified risk”, and indeed not all tobacco products are equally harmful, there is no such thing as a safe tobacco product.

The tobacco industry survives and profits greatly from selling a highly addictive product that causes diseases, which lead to a staggering number of deaths each year, an immeasurable amount of human suffering and economic loss, and a profound burden on our national healthcare system. In 2010, the combined profits of the six leading tobacco companies was $35.1 billion, equal to the combined profits of Coca-Cola, Microsoft, and
McDonald’s in the same year. However, in order to make these profits, the industry misrepresents and deceives the American public.

- Laboratory analysis by the University of Minnesota revealed the presence of both toxicants and carcinogens in several brands of snus.
- Chemical analysis by Indiana University – Purdue University Indianapolis scientists found that dissolvable tobacco contains nicotine and a variety of flavoring ingredients, sweeteners, binders, and humectants. Of the flavor compounds identified, ethyl citrate is acutely toxic with oral dosing; cinnamaldehyde is an oral irritant and may increase the risk of gum and mouth disease, and coumarin, which has been banned as a flavoring agent in food for decades, is a liver and kidney toxicant.
- Carcinogenic tobacco-specific N-nitrosamines (TSNAs) have been found in smokeless tobacco products.
- To date, none of the products produced by the tobacco industry are recognized by the FDA as either a harm reduction or smoking cessation tool.

**Marketing and Use**

In 2006, the year that RJ Reynolds and Philip Morris USA began test-marketing their own smokeless tobacco products, spending on advertising and promotions for smokeless tobacco products was $354.1 million. Just two years later, in 2008, that figure rose 50%, to $537.9 million. At the same time, cigarette advertising decreased from $12.49 billion in 2006 to $9.94 billion in 2008, signaling a distinct shift in focus within the tobacco industry.

Dual use of cigarettes and smokeless tobacco products is of particular concern for public health and of particular interest to the tobacco industry. Dual use of cigarettes and smokeless tobacco products supports revenue streams for tobacco companies while also supplying multiple avenues for nicotine distribution, thus supporting nicotine addiction and, ultimately, continued use of the industry’s products.

- Many traditional smokeless tobacco users are dual users of cigarettes and smokeless tobacco.
- Use of smokeless tobacco products by persons aged 12 or older has increased by more than 51% since 2003.
- While cigarette smoking among youth ages 12-17 declined more than 50 percent between 2002 and 2010, the use of smokeless tobacco products among youth increased 15 percent during that same time period.
- According to the 2012 Surgeon General’s report, *Preventing Tobacco Use Among Youth and Young Adults*, concurrent use of multiple types of tobacco products is common among teen tobacco users. Among high school

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**Case Study: Indiana**

In 2006, Philip Morris, USA, announced the test marketing of Toboka, a new, “spitless”, smokeless tobacco product, in Indianapolis, IN. Between August 2006 and March 2008, Toboka was heavily promoted throughout Indianapolis, widely available, and heavily marketed with signage offering two-for-one deals and the proclamation that Toboka was a safer, more convenient alternative to traditional cigarettes. However, little research existed then, or now, on the safety of Toboka and other similar products, thus leaving a majority of Toboka advertising claims unsubstantiated.

Flashing forward six years, and prompted by the tobacco industry, in 2012 the Indiana General Assembly introduced a bill (H.R. 0059) that would create an interim study committee to consider tobacco harm reduction strategies as a strategy for reducing smoking-attributable death and disease. Tobacco industry lobbyists and their allies made lavish presentations to legislators about the benefits of encouraging the use of smokeless tobacco and other tobacco products that they call “reduced harm”.

However, there is a substantial body of objective scientific evidence demonstrating that the three most effective strategies for reducing the death and disease resulting from all tobacco products include:

1. Increasing the price of all tobacco products through regular, significant tax increases;
2. Implementing 100% smoke-free laws in all workplaces, restaurants, and bars; and
3. Fully funding comprehensive state tobacco prevention and cessation programs. These three proven strategies must be considered before the utilization of tobacco products is promoted.
students who use tobacco, nearly one-third of females and more than one-half of males report using more than one type of tobacco product in the last 30 days.\textsuperscript{23}

- A 2009 study drawn from four nationally representative surveys in the U.S. demonstrated that occasional smokeless tobacco users are more likely to be current daily smokers than any other group, illustrating a pattern of tobacco use that may represent a partial substitution of smoking but a prolonging of dependence on tobacco products.\textsuperscript{24}

- A content analysis of Camel snus advertisements found frequent tie-in cigarette promotions or references to the benefits of using snus relative to cigarettes.\textsuperscript{25}

- An analysis of receptivity to Toboka and Camel snus in the Indiana test market one year after product introduction demonstrated a substantial initial interest in the new products among male smokers, especially those who received promotional mailings from tobacco companies, which often included coupons for free and discounted products.\textsuperscript{26}

- A review of more than eight million internal tobacco industry documents demonstrated that tobacco manufacturers, including cigarette and smokeless tobacco companies, develop products designed to augment cigarette use when smoking is not possible, develop new smokeless tobacco products to exploit smokers and target smokers who would otherwise quit, and attempt to deter quitting by developing products that appear to be less addictive and more socially acceptable.\textsuperscript{27,28}

- Smokers who use smokeless tobacco products as a supplemental source of nicotine to postpone or avoid quitting smoking may increase rather than decrease their risk of lung cancer.\textsuperscript{29}

**ACS CAN’s Current Views and Recommendations**

ACS CAN and the Society support enacting evidence-based, comprehensive tobacco control policies that extend equally to all tobacco products, without any loopholes or exemptions. Specifically, we recommend:

- Eliminating price discrepancies between cigarettes and other tobacco products (OTPs) by increasing the tax on a package of OTPs to an equivalent percentage of the manufacturer’s price as the tax on cigarettes.

- Ensuring that the definition of “tobacco product” in new laws is sufficiently broad to include all types of tobacco products, including dissolvable tobacco products and e-cigarettes. ACS CAN and the Society do not support exempting any type of smoked or smokeless tobacco product from smoke-free and tobacco-free laws and policies, tobacco tax increases, or tobacco sales or marketing restrictions.

- Fully funding, promoting, and providing access to all FDA-approved cessation medications.

- While the federal law giving the Food and Drug Administration (FDA) the authority to regulate tobacco products provides a number of restrictions on the manufacturing, marketing, labeling, distribution and sale of tobacco products, it also allows states to further restrict or regulate the time, place and manner (but not the content) of tobacco product advertising or promotions. While some of the regulations in the FDA law apply only to cigarettes, including restrictions on flavored cigarettes and minimum pack size requirements, ACS CAN and the Society support extending appropriate restrictions to all tobacco products.

- Funding and support for increased objective and independent research on OTPs, including evaluation and surveillance of health risks.

- Questions about smokeless tobacco products and their use should be included on national and state-level surveys, particularly those targeting youth and young adults, in order to obtain information about the prevalence and patterns of smokeless tobacco product use. Such information can be used to improve tobacco prevention and cessation initiatives.
References

15. Ibid.
17. Ibid.
22. Ibid.