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Cover Story

Electronic Cigarettes (e-cigarettes)



Some people said e-cigarettes can help smokers quit smoking, while more people said they are just as harmful as regular tobacco products. This Bulletin will explore in depth the issue of e-cigarettes.

E-cigarettes (also known as electronic nicotine delivery systems) are electronic devices which resemble a cigarette or cigar. They also take the form of everyday items such as pens and USB memory sticks. A typical e-cigarette has a cartridge for storing a liquid which usually composed of nicotine*, propylene glycol and other unknown chemicals. After heating, the liquid vaporises and delivers to the lungs of the user.

According to the report on e-cigarettes of the World Health Organization (WHO),¹ there is indication that the use of e-cigarettes is increasing rapidly. It is estimated that there were 466 e-cigarette brands in 2014. In 2013, US\$3 billion was spent on e-cigarette globally, and sales are forecasted to be increased by a factor of 17 by 2030. Available data has also indicated that e-cigarettes use at least doubled among both adults and adolescents from 2008 to 2012, and is growing rapidly among children and adolescents. Pursuant to the National Youth Tobacco Survey in the United States, the prevalence of e-cigarette current users increased from 0.6% among middle school students and 1.5% among high school students in 2011 to 3.9% and 13.4% in 2014 respectively.^{2,3} Another concern is that once addicted to nicotine through e-cigarettes, children (and non-smokers) may switch to cigarette smoking.

Most e-cigarette cartridges contain propylene glycol, which is a known irritant when inhaled. Propylene glycol may induce health problems like eye and respiratory irritation.¹ As e-cigarette cartridges may also contain various concentrations of nicotine, use of e-cigarette may cause nicotine dependence and constriction of blood vessels. In addition, some toxic substances such as carcinogenic tobacco-specific nitrosamines⁴ and formaldehyde-releasing chemical⁵ were also detected in some e-cigarettes, according to some overseas research.

Recommendations of the World Health Organization

The WHO report stated that the evidence for the effectiveness of e-cigarettes as a method for quitting smoking is limited and is currently considered inconclusive. So far, no e-cigarettes has been evaluated and approved for smoking cessation by any governmental agency at the moment.¹

Therefore, WHO recommends that efforts should be made by Parties to regulate these products appropriately. When designing a regulatory

* Some e-cigarettes on the market claim that they do not contain any nicotine

Words from Editor

Electronic cigarette is a new product. Its market in overseas countries has developed rapidly, and the wave has apparently spread to Hong Kong. Many people do not fully understand what electronic cigarettes are. This issue aims to provide information about electronic cigarettes, as well as the World Health Organization's recommendations for these products, and the current situation in Hong Kong. On the other hand, the theme of World No Tobacco Day this year is "Stop illicit trade of tobacco products". We have invited the Customs and Excise Department to introduce their work on combatting illicit tobacco products activities.

strategy for e-cigarettes, governments should bear in mind some general objectives, such as impeding e-cigarettes promotion to and uptake by non-smokers, pregnant women and youth. Prohibit manufacturers and third parties from making health claims for e-cigarettes, including that e-cigarettes are smoking cessation aids, until manufacturers provide convincing supporting scientific evidence and obtain regulatory approval.

The sixth session of the Conference of the Parties to the WHO Framework Convention on Tobacco Control in October 2014 had discussed the above report.¹ Parties were invited to consider prohibiting or regulating e-cigarettes, including as tobacco products, medicinal products, consumer products, or other categories, as appropriate, and urged to consider banning or restricting advertising, promotion and sponsorship of e-cigarettes.

Local Situation

The Government commissioned the School of Public Health of the University of Hong Kong to conduct the school-based survey on smoking in 2012-13. The result showed that about 1% of secondary school students had used e-cigarettes. In order to gain a more in-depth understanding of the use of e-cigarettes in Hong Kong, the Census and Statistics Department will include in the next round of Thematic Household Survey on the pattern of smoking in Hong Kong a series of questions relating to e-cigarettes.

Cigarette smoking (including e-cigarette) is banned in no smoking areas under the Smoking (Public Health) Ordinance (Chapter 371, Laws of Hong Kong). No smoking areas include all indoor public areas and some outdoor areas such as school campus, public parks and beaches. Offenders are subject to a fixed penalty of fine \$1,500. Since 2011, the Tobacco Control Office has prosecuted 3 offenders who smoked e-cigarettes in no smoking area.

Under the Pharmacy and Poisons Ordinance (Chapter 138, Laws of Hong Kong), nicotine is a Part I poison. E-cigarettes containing nicotine are regarded as pharmaceutical product and must be registered with the Pharmacy and Poisons Board before sale or distribution. Possession or sale of unregistered pharmaceutical product, and the possession or sale without authority of Part I poison, are

both offences. Each offence shall be liable on conviction to maximum penalty of \$100,000 fine and 2 years' imprisonment.

While for smoking cessation, any e-cigarettes containing nicotine as smoking cessation product must satisfy the criteria of efficacy, safety and quality for approval of registration by the Pharmacy and Poisons Board (the Board) before sale in Hong Kong. Detail of control measures including import and export, trading licence and product registration of pharmaceutical products can be browsed at Drug Office's website at www.drugoffice.gov.hk. If you need any assistance or information on smoking cessation, please call Integrated Smoking Cessation Hotline of the Department of Health at 1833 183.

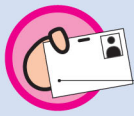
Proposed Regulation of E-cigarettes

Given the health effect and hazards arising from the use of e-cigarettes, the wider long-term impact to students and youngsters (e.g. inducing them to smoke) and the recommendation of the WHO, the Government submitted a paper to the Legislation Council Panel on Health Services in May 2015 to propose prohibiting import, manufacture, sale, distribution, and advertising of e-cigarettes, and seek the views of Legislative Council Members on the proposal.



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2. US Centers for Disease Control and Prevention. Notes from the field: electronic cigarettes use among middle and high school students – United States, 2011-2012. *Morbidity and Mortality Weekly Report*. 2013; **62**:729-730. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6235a6.htm>
3. US Centers for Disease Control and Prevention. Tobacco use among middle and high school students – United States, 2011-2014. *Morbidity and Mortality Weekly Report*. 2015; **64**:381-385. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6414a3.htm>
4. US Food and Drug Administration. Evaluation of e-cigarettes. <http://www.fda.gov/downloads/drugs/scienceresearch/ucm173250.pdf>
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Waterpipe Smoking in Designated No Smoking Areas

Smoking waterpipe (also known as Shisha and Hookah) is becoming more popular in Hong Kong. Contrary to the belief of many waterpipe smokers, smoking waterpipe is not safer than smoking cigarette. In fact, even after tobacco smoke has passed through water, it still contains numerous toxicants including tar, carbon monoxide, heavy metals and cancer-causing chemicals.

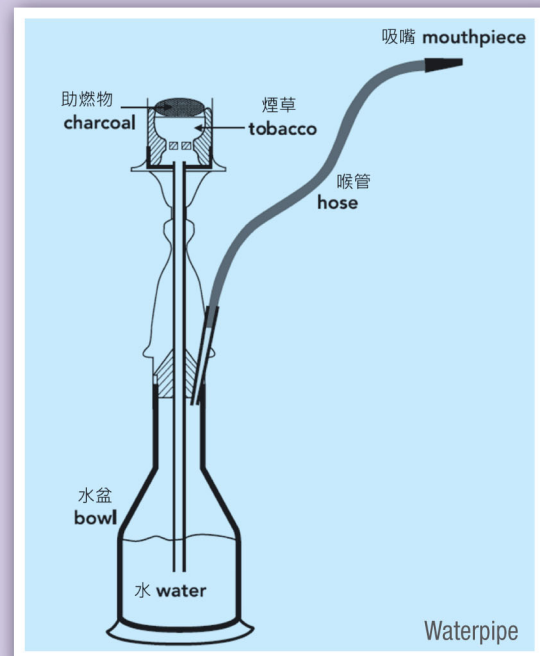
Similar to cigarette smoking, waterpipe smoking is also regulated by the Smoking (Public Health) Ordinance (Cap. 371) (“the Ordinance”). Smoking waterpipe in a statutory no-smoking area is an offence and offenders will be liable to a fixed penalty of \$1,500.

In Hong Kong, the Tobacco Control Office (TCO) of the Department of Health is the principal enforcement agency of the Ordinance. TCO follows up every complaint received. In 2014, TCO received 14 complaints related to waterpipe smoking. During inspections of the public premises concerned (e.g. bars), the Tobacco Control Inspectors of TCO issued 5 Fixed Penalty Notices (FPNs) for waterpipe smoking offences. To further strengthen the deterrent effect against illegal waterpipe smoking, TCO had increased inspections to bars that provided waterpipes for smoking earlier in 2015. So far, TCO has issued 3 FPNs for waterpipe smoking offences from January to May 2015.

In addition, the Ordinance regulates the sale of tobacco products including pipe tobacco, and prohibits the exhibition of tobacco advertisement. The Ordinance requires that no person shall sell any tobacco products unless the retail container bears a health warning in the prescribed form and manner. During our inspections, if we find any of these irregularities, we will issue warnings to or prosecute the offenders accordingly.

Moreover, no person shall sell any tobacco product (including pipe tobacco) to any person under the age of 18 years, and no person shall, for the purposes of promotion or advertisement, give any tobacco product to any person. Offenders are liable on summary conviction to a maximum fine of \$25,000.

TCO will continue to enforce and monitor the compliance of the Ordinance, and through publicity, health education as well as smoking cessation service promote a smoke-free culture in Hong Kong.





Illicit Trade of Tobacco Products - The Enforcement Work of Hong Kong Customs

The illicit trade of tobacco products has become a common concern of different Customs administrations worldwide. To combat the illegal activities and protect government revenue, the Customs and Excise Department (C&ED) is tasked to eliminate cross-boundary and downtown illicit tobacco products activities in Hong Kong.

Illicit Trade of Cigarettes

Illicit trade of cigarettes across the land boundary remained prevalent in recent years. Cigarettes smuggling activities have become increasingly organized and sophisticated with infiltration of the supply chain networks. Syndicates usually mix-loaded illicit cigarettes among general cargoes or used false compartment in container for concealment. Upon being smuggled into the territory, the illicit cigarettes would be immediately disseminated by local vehicle fleets to distributors for direct delivery to customers.

Apart from the cargo channel, syndicates adopted the “ants-moving-home” tactic to smuggle illicit cigarettes by employing cross-boundary private cars plying frequently across the boundary and passenger couriers’ frequent movements to bring in illicit cigarettes along the railway line.

Illicit Trade of Tobacco

Illicit trade of tobacco via Hong Kong, as a regional logistic hub, continued to take place. In 2014, C&ED detected a total of 29 tobacco smuggling cases with seizure totaling 500 kg of loose tobacco, which represented a decrease of 9% and 84% in case number and seizure quantity respectively as compared to 2013. There was a significant decrease in the average seizure quantity in each case. Overwhelming majority of the cases involved direct transshipment of pre-packed tobacco by air mail and express cargo from the mainland via Hong Kong to European countries, taking advantage of Hong Kong’s sophisticated logistic infrastructure.

Effective Enforcement Strategy

C&ED has strengthened enforcement against illicit trade of tobacco products at all fronts. In particular, the strategy of tightening boundary controls to interdict illicit cigarettes at source is pursued and proved to be very effective in preventing illicit cigarettes from flowing into the territories. In 2014, the total quantity of seizure was dropped to 52

million sticks of cigarette, representing a decrease of 42% as compared with 2013. Smuggling activities are scaling down, reflecting the effectiveness of C&ED’s operational strategy to interdict the influx of illicit cigarettes at source.

Illicit trade of cigarettes in downtown are also in full control. With the effective sweeping operations at black spots in various districts, peddling activities of illicit cigarettes on street have been largely suppressed. Ordering via telephone has become the major channel for illicit cigarette peddling. To tackle the emergence of this problem, a task-specific enforcement team has been set up since 2012 to mount dedicated and intensified enforcement actions to effectively contain such peddling activities. Besides, the newly launched cooperation programme “Joint Effort with Community against Illicit Cigarettes” with the Housing Department and building management offices has also created synergies in curbing local illicit cigarette activities involving buying or selling illicit cigarettes, provision of phone numbers and distribution of handbills. The number of effected telephone-order cases and number of arrests recorded increases by 63% and 46% respectively in 2014, as compared to 2013. The concrete enforcement outcome has shown the determination of C&ED to combat illicit cigarettes and the effectiveness of its enforcement strategy.

Our enforcement strategy also extends to international platform. We emphasize cooperation and intelligence exchange among different Customs administrations to combat illicit trade of tobacco products. Currently, we are an active member in a cooperation project with 22 Customs administrations in the Asia Pacific Region to fight against transnational illicit cigarette and tobacco products smuggling. Through the effective monitoring and intelligence systems of the cooperation project, movement of suspicious cigarette shipments will be detected when they are imported, re-exported or transshipped across Customs territories.

Way Forward

C&ED will continue the stringent enforcement against illicit trade of tobacco products at all fronts. In the years ahead, we will keep in view the effectiveness of various control measures on illicit trade of tobacco products and conduct vigorous enforcement actions at all levels, from smuggling to peddling, against illicit tobacco activities in Hong Kong.

(Acknowledgement: contents are provided by the Customs and Excise Department of HKSAR)

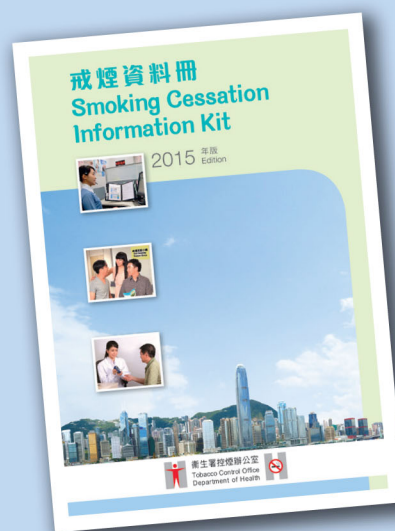


Smoking Cessation Information Kit 2015

The Department of Health has always accorded high priority to the work on smoking cessation. The Tobacco Control Office (TCO) has been coordinating smoking cessation services. In 2015, TCO revised the “Smoking Cessation Information Kit” to provide healthcare workers with updated information on smoking cessation. The contents of this kit include various counselling skills and information on drugs for quitting smoking.

In 2013, the World Health Organization (WHO) published a training package for primary care providers who provide assistance in treating tobacco dependence.¹ In this regard, the kit was updated in 2015. We have adopted the WHO guidelines on pharmacotherapy (i.e. nicotine replacement therapy and non-nicotine medications) used in smoking cessation in this new edition. Various counselling skills, such as assessment by means of the Transtheoretical Model of Change, “5A’s”, “5R’s” and motivational interviewing were also updated based on the training package and relevant evidence. Furthermore, the latest information on smoking cessation services in Hong Kong was provided, so that healthcare professionals can deliver brief smoking cessation interventions and refer smokers who are willing to quit.

A Cochrane Review shows that a brief advice on smoking cessation by a physician during the consultation increases the chance of successful quitting.² According to the WHO’s training package, one of the roles for primary care providers in tobacco control is assisting tobacco users to quit smoking.¹ Local evidence also supports the significant role of healthcare professionals in smoking cessation in Hong Kong.³ We hope that this kit can facilitate healthcare workers in helping their smoking clients to quit. For contents of the kit, please visit the website of TCO, http://www.tco.gov.hk/english/quitting/eresources_for_hcp.html



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1. World Health Organization. Strengthening health systems for treating tobacco dependence in primary care - Part III: Training for primary care providers: brief tobacco interventions. Geneva, Switzerland: World Health Organization, 2013.
2. Stead LF, Buitrago D, Preciado N, Sanchez G, Hartmann-Boyce J, Lancaster T. Physician advice for smoking cessation. *Cochrane Database of Systematic Reviews* 2013, Issue 5. Art. No.: CD000165. DOI: 10.1002/14651858.CD000165.pub4.
3. Abdullah ASM, Hedley AJ, Chan SSC, et al. Establishment and evaluation of a smoking cessation clinic in Hong Kong: a model for the future service provider. *J Public Health* 2004; **26**: 239-244.



The second “Fellowship Programme on Tobacco Control” was successfully held in Hong Kong from 17 November to 21 November 2014. A total of 16 delegates from various member states of the Western Pacific Region, namely, China, Macau SAR (China), Kiribati, Mongolia and the Philippines attended. Besides, over 20 professionals from local non-governmental organisations were also invited to join as observers.

The Fellowship Programme was organised by the Tobacco Control Office of the Department of Health which was designated by the World Health Organization (WHO) as the Collaborating Centre for Smoking Cessation and Treatment of Tobacco Dependence in 2012.

This 5-day programme targeted at middle managers in tobacco control and was designed to provide a comprehensive overview of various tobacco control measures, including legislation, enforcement, advocacy and publicity, development and evaluation of cessation programmes. The format included lecture, field immersion, workshop, group discussion and visit to community-based cessation centres.



Group photo of guests, speakers and delegates



Delegates visiting a smoking cessation centre

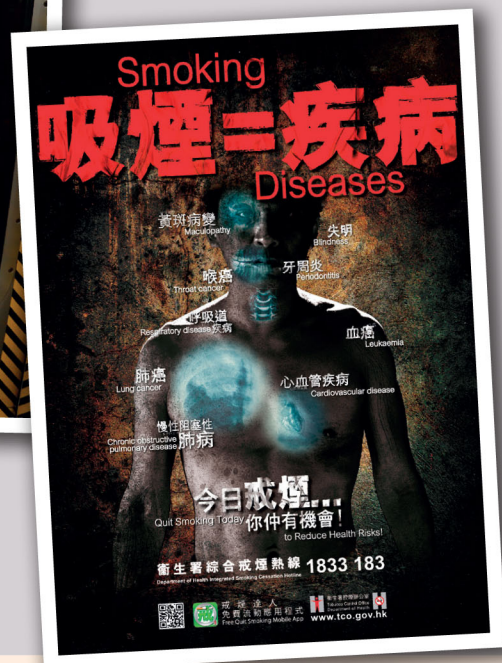


Delegates visiting a smoking cessation centre



The Tobacco Control Office endeavours to enhance the knowledge of the general public on the harmfulness of smoking, to prevent people from picking up smoking habit, and to encourage smokers to quit smoking. Our health promotion efforts include general publicity, health education and promotional activities on tobacco control through TV and radio announcements in the public interests (APIs), internet advertisements, enquiry hotline, promotion campaigns, health education materials and seminars, etc.

In 2014, we produced two APIs about smoking cessation and enforcement, with the aims of promoting the awareness of “smoking is equal to diseases” and the importance of cooperating with Tobacco Control Inspectors. Apart from TV and radio, we also launched promotional activities through various media such as advertisements in bus stops, bus media and MTR.





The Department of Health will review tobacco control measures in a timely manner. We will take into account the scientific evidence related to tobacco control at the international level, the experience of measures taken by other places, as well as the community's expectation when considering the need to further adopt new tobacco control measures.

Taking into account the above factors, the Government submitted a paper to the Legislation Council Panel on Health Services in May 2015, so as to recommend strengthening tobacco control efforts. Apart from e-cigarettes as mentioned in the Cover Story, we propose increasing the size of health warning on packet or retail container of cigarettes and relevant tobacco products that covered at least 85% of two largest surfaces and updating the pictures. On the other hand, we propose designating bus interchange facilities located at the tunnel portal areas as statutory no smoking areas. For details, please visit the website of the Legislation Council, <http://www.legco.gov.hk/yr14-15/english/panels/hs/agenda/hs20150518.htm>.



Special Topic

The 16th World Conference on Tobacco or Health was held in Abu Dhabi, United Arab Emirates from 17 to 21 March 2015. This conference is an international conference on tobacco control that is held once every 3 years. Representatives from governments, non-governmental organisations and academia would gather to exchange information on the topics related to tobacco control.



The Conference had invited the Director of Health, Dr Constance CHAN to feature in promotional video and share with the delegates experience on tobacco control in Hong Kong.

The Conference issued declaration recognising all tobacco products are harmful, that they are a leading cause of disease and death worldwide, that they pose an especially heavy burden on low- and middle-income countries after concluded. For details, please visit its website



<http://www.wctoh.org/updates/conference-resolutions>

