



The Massachusetts Chapter

Regulation of E-Cigarettes

H. 3726, An Act Modernizing Tobacco Control and Protecting the Health of Minors.

Massachusetts has a strong record in enacting laws to curtail tobacco use among children. We are now challenged by the introduction of e-cigarettes and other electronic tobacco products which do not fall under our tobacco control laws and these products can be sold to children.

H. 3726 would close a loop-hole in our tobacco control laws by treating e-cigarettes as a tobacco product, and prohibit the sale to children less than 18 years of age.

Electronic cigarettes resemble traditional cigarettes. They are battery-operated devices that provide inhaled doses of nicotine through a vaporized solution contained in a cartridge inserted into the device. No smoke or combustion is involved, but the device is designed to emit nicotine vapors that are inhaled. Nicotine is a potent stimulant drug that is rapidly absorbed into the bloodstream and penetrates brain tissue within 15 seconds. Its addiction properties are similar to heroin or cocaine and it remains the primary driver of tobacco addiction.

Astonishingly, these products are not regulated and are being marketed in a reckless and dangerous manner that appeals directly to children and adolescents. E-cigarettes are being sold in fruit and candy flavors that are appealing to children, including bubble gum, cotton candy, Atomic Fireball, berry, peach, grape and vanilla. We believe that such marketing entices youngsters to use a product that encourages tobacco use and is dangerous in and of itself.

A recent study from the Centers for Disease Control and Prevention (CDC) indicates that usage among middle and high school students is increasing alarmingly.

Sensibly, H. 3726 would treat these nicotine vapor products as tobacco products. The sale to children under 18 would be prohibited. Use of the products on school premises would be banned, and the statute governing smoke free work place would apply to these products.

The Massachusetts Chapter, American Academy of Pediatrics has been a strong and consistent advocate for public health initiatives and supports efforts to curtail the harmful effects of tobacco products, especially as it affects children, and we would urge the Legislature to treat e-cigarettes and other nicotine vapor products as tobacco products and ban the sale to children under 18.

Executive Director

Cathleen Haggerty
860 Winter Street
Waltham, MA 02454
781-895-9852
Fax: 781-895-9855
chaggerty@mcaap.org

Immediate Past President

Gregory Hagan, M.D., FAAP
Cambridge, MA
617-665-3600
gnhagan@challiance.org

President

John O'Reilly, M.D., FAAP
Springfield, MA
413-794-7448
joreilly@mcaap.org

Vice President

Michael McManus, M.D., MPH,
FAAP
Boston, MA
617-355-6000
mmcmanus@mcaap.org

Treasurer

Dmitry Dukhovny, M.D., FAAP
Boston, MA
617-355-6000
ddukhovny@mcaap.org

Secretary

Kathryn Brigham, M.D., FAAP
Boston, MA
617-355-6000
kbrigham@mcaap.org

District Representatives**District 1**

Fernando Catalina, M.D., FAAP

District 2

Safdar Medina, M.D., FAAP

District 3

Lloyd Fisher, M.D., FAAP

District 4

Elizabeth Goodman, M.D., FAAP

District 5

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District 6

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District 7

Umbereen Nehal, M.D., MPH, FAAP

District 8

Allison Brown, M.D., FAAP

District 9

Walter Rok, M.D., FAAP

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



October 1, 2013

To the Honorable Chairmen and Members, Joint Committee on Public Health

Re: H.3639, An Act Modernizing Tobacco Control and Protecting the Health of Minors

This testimony is submitted on behalf of the 1,800 members of the Massachusetts Chapter of the American Academy of Pediatrics (MCAAP) in strong support of H.3639, which would prohibit the sale of e-cigarettes to children and regulate these products as a tobacco product.

The members of the MCAAP are physicians dedicated to improving the quality of life for children by providing quality health care and advocating for them and their families. The MCAAP is committed to the attainment of optimal physical, mental and social health for all infants, children, adolescents, and young adults. The MCAAP has been a strong and consistent advocate for public health initiatives and supports efforts to curtail the harmful effects of tobacco products, especially as it affects children.

Electronic cigarettes resemble traditional cigarettes. They are battery-operated devices that provide inhaled doses of nicotine through a vaporized solution contained in a cartridge inserted into the device. No smoke or combustion is involved, but the device is designed to emit nicotine vapors that are inhaled. Nicotine is a potent stimulant drug that is rapidly absorbed into the bloodstream and penetrates brain tissue within 15 seconds. Its addiction properties are similar to heroin or cocaine and it remains the primary driver of tobacco addiction. Obviously, it is a major health hazard and children must be protected from it.

Astonishingly, these products are not regulated and are being marketed in a reckless and dangerous manner that appeals directly to children and adolescents. E-cigarettes are being sold in fruit and candy flavors that are appealing to children, including bubble gum, cotton candy, Atomic Fireball, berry, peach, grape and vanilla. We believe that such marketing entices youngsters to use a product that encourages tobacco use and is dangerous in and of itself. In support of this is a recent study from the Centers for Disease Control and Prevention (CDC) indicating that usage among middle and high school students is increasing alarmingly.

Sensibly, H.3639 would treat these nicotine vapor products as tobacco products. The sale to children under 18 would be prohibited. Use of the products on school premises would be banned, and the statute governing smoke free work place would apply to these products.

It is time to protect our children from the harmful effects of these products. The MCAAP would urge the Committee to support H.3639.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "John O'Reilly". The signature is written in a cursive style with a large, stylized initial "J".

John O'Reilly

President, the Massachusetts Chapter of the American Academy of Pediatrics

American Academy of Pediatrics

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April 24, 2014

Members
House of Representatives
State House
Boston, MA 02133

Re: **Budget Amendments:**
Amendment 964, Early Intervention
Amendment 783, Tobacco Cessation Program
Amendments 1077 & 612, Tobacco Control
Amendments 139 & 203, MCPAP

Dear Representative,

I write on behalf of the Massachusetts Chapter, American Academy of Pediatrics (“MCAAP”) which represents over 1,800 pediatricians practicing in the Commonwealth to urge you to support Budget amendments which would protect the health and welfare of children.

The MCAAP urges you to support:

1. Amendment 964, Line Item 4513-1020 Early Intervention.

This Amendment would increase the line item by \$1.58 million. Early intervention services are among the most critical services we can offer to our most vulnerable children and families. These are children under the age of three with significant physical, developmental or medical disabilities. There is a wealth of data from clinical studies and economic analyses that document the impressive return of investment for society on money spent to provide these kinds of services. It is precisely in this youngest age group where the services have the greatest impact.

The Commonwealth has made progress in recent years in providing developmental services to these vulnerable children. It would be tragic for children and families, but also for the Commonwealth as a whole, if this progress does not continue. If we short-change the critical areas of development and behavioral health, we will not reduce costs for the Commonwealth. *Underfunding of these services for vulnerable children inevitably generates far greater future costs in the areas of special education, mental health services and the criminal justice system.*

2. Amendment 783, Massachusetts Tobacco Control Program.

This amendment would invest \$9 million in tobacco prevention and cessation programming through the Massachusetts Tobacco Control Program (line item 4590-0300). This very valuable DPH program to encourage smoking cessation has been underfunded for years. The Commonwealth receives over a billion dollars a year from tobacco taxes and the Tobacco Settlement Fund, yet efforts to prevent children from smoking and encouraging smokers to stop have been severely reduced. Amendment 783 would provide needed additional funding to counter tobacco advertising and marketing and help educate the public on the addictive nature of e-cigarettes.

3. Amendments 1077 & 612, Tobacco Control.

These amendments would treat nicotine vapor products, such as e-cigarettes, as tobacco products and ban the sale to children under 18 (Amendment 1077) or under 21 (Amendment 612).

Electronic cigarettes resemble traditional cigarettes. They are battery-operated devices that provide inhaled doses of nicotine through a vaporized solution contained in a cartridge inserted into the device. Nicotine is an addictive, potent stimulant drug that is rapidly absorbed into the bloodstream and penetrates brain tissue within 15 seconds. It is a major health hazard and children must be protected from it.

Astonishingly, these products are not regulated and are being marketed in a reckless and dangerous manner that appeals directly to children and adolescents. E-cigarettes are being sold in fruit and candy flavors that are appealing to children, including bubble gum, cotton candy, Atomic Fireball, berry, peach, grape and vanilla. We believe that such marketing entices youngsters to use a product that encourages tobacco use and is dangerous in and of itself.

The MCAAP has been a strong and consistent advocate for public health initiatives and supports efforts to curtail the harmful effects of tobacco products, especially as it affects children and we would urge the House to adopt one of these amendments.

4. Amendments 139 & 203, Massachusetts Child Psychiatry Access Project (MCPAP).

These amendments would assess health insurers to fund their fair share of the MCPAP program that serves their insureds. The Commonwealth currently provides a subsidy to insurers whenever a physician uses the MCPAP program for an insured patient.

Launched in 2004, MCPAP has provided invaluable assistance to primary care pediatricians throughout the Commonwealth who are increasingly on the front lines in diagnosing and treating child mental health disorders. MCPAP provides mental health consultation by telephone to pediatricians and office evaluations for children and families when necessary. Since 2004, MCPAP has served children and families regardless of whether or not they have insurance. Currently, well over a majority of the MCPAP encounters per year are used by members of commercial insurers. One can reasonably assume that MCPAP has saved insurers from paying for unnecessary emergency room visits and for child psychiatric consultations. Our members in pediatric practice have found MCPAP to be a great help in supporting the coordination of services within the medical home.

We hope that MCPAP can continue to maintain the improvements in child mental health in the Commonwealth, support the medical home in pediatric offices, and prevent inappropriate emergency room utilization for child mental health services. We urge you to support Amendments 139 & 203, and require insurers to pay their fair share of this invaluable state program.

The Massachusetts Chapter, American Academy of Pediatrics strongly urges you to support these amendments.

Respectfully,

John O'Reilly, M.D., FAAP,
President, MCAAP

American Academy of Pediatrics

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Cathleen Haggerty
860 Winter Street
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joreilly@mcaap.org

Vice President

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Boston, MA
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mmcmanus@mcaap.org

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Dmitry Dukhovny, M.D., FAAP
Boston, MA
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July 21, 2014

The Honorable Robert A. DeLeo
Speaker of the House of Representatives
The State House, Room 356
Boston, MA 02133

Re: H. 3726, An Act Modernizing Tobacco Control and Protecting the Health of Minors.

Dear Speaker DeLeo,

I write on behalf of the Massachusetts Chapter, American Academy of Pediatrics (MCAAP) which represents approximately 1,800 pediatricians across the Commonwealth. The members of the MCAAP are physicians dedicated to improving the quality of life for children by providing quality health care and advocating for them and their families. The MCAAP is committed to the attainment of optimal physical, mental and social health for all infants, children, adolescents, and young adults.

The MCAAP urges the Committee on Health Care Financing to report favorably H.3726 without any amendments. H.3726 would close a loophole in our tobacco control laws by treating e-cigarettes as a tobacco product and prohibit the sale to children less than 18 years of age.

Massachusetts has a strong record in enacting laws to curtail tobacco use among children. We are now challenged by the introduction of e-cigarettes and other electronic tobacco products that do not fall under our tobacco control laws and these products can be sold to children.

As you know, electronic cigarettes resemble regular cigarettes but are battery-powered devices intended to repeatedly administer inhaled doses of nicotine through vaporized solutions. Nicotine, of course, is a potent stimulant drug that is rapidly absorbed into the bloodstream and penetrates brain tissue within 15 seconds. Its addiction properties are well documented, are similar to heroin or cocaine, and remain the primary driver of tobacco dependence. While electronic cigarettes do not contain all of the products of tobacco combustion, they are specifically designed to administer the most addictive.

Astonishingly, these products are not regulated and, as a consequence, are widely marketed in a reckless and dangerous manner. Many products appeal directly to minors by incorporating fruit and candy flavors: bubble gum, cotton candy, Atomic Fireball, berry, peach, grape and vanilla. These flavors conceal the extreme hazards of nicotine for adolescents and children. In addition to encouraging future tobacco use, they stimulate consumption of a product that is dangerous in and of itself.

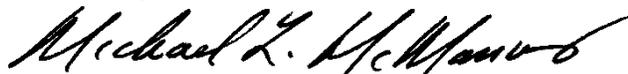
The 2011 and 2012 National Youth Tobacco Survey, conducted by our national Centers for Disease Control and Prevention (CDC), documented an alarming *doubling* of tobacco product use among middle and high school students. The CDC warned that the skyrocketing popularity of e-cigarettes has already led to their use by nearly 2 million children including one in ten American high school students. Even more sobering, the CDC has also observed a rapidly increasing incidence of nicotine poisoning with children involved in more than half of all related calls to poison control centers.

H. 3726 would simply treat these nicotine vapor products as tobacco products: the sale to children under 18 would be prohibited, use would be banned in schools, and the statute governing smoke free work places would apply to them. These are sensible measures that are overdue and must be implemented before more children are harmed.

The Massachusetts Chapter of the American Academy of Pediatrics has been a strong and consistent advocate for public health initiatives. We support all efforts to curtail the harmful effects of tobacco products, especially as they affect children. We strongly urge the Legislature to treat e-cigarettes and other nicotine vapor products as tobacco products and ban their sale to children under 18.

Please support H. 3726.

Respectfully submitted,

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Michael McManus, M.D., MPH, FAAP

President, the Massachusetts Chapter of the American Academy of Pediatrics

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Cathleen Haggerty
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July 21, 2014

Honorable Jennifer E. Benson
Vice-Chair, Joint Committee on Health Care Financing
State House, Room 236
Boston, MA 02133

Re: H. 3726, An Act Modernizing Tobacco Control and Protecting the Health of Minors.

Dear Representative Benson,

I write on behalf of the Massachusetts Chapter, American Academy of Pediatrics (MCAAP) which represents approximately 1,800 pediatricians across the Commonwealth. The members of the MCAAP are physicians dedicated to improving the quality of life for children by providing quality health care and advocating for them and their families. The MCAAP is committed to the attainment of optimal physical, mental and social health for all infants, children, adolescents, and young adults.

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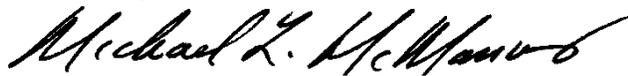
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Please support H. 3726.

Respectfully submitted,

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Michael McManus, M.D., MPH, FAAP

President, the Massachusetts Chapter of the American Academy of Pediatrics

