Additional background information on the RECIG project can be found on the OTRU website.

The RECIG Expert Panel

An international and multidisciplinary Expert Panel convened in Toronto on January 12 and 13, 2016. The Expert Panel included experts in tobacco control and alternative tobacco products from the UK, USA and Lebanon. Panelists were:

- Dr. Linda Bauld, Professor of Health Policy, University of Stirling, Deputy Director of the UK Centre for Tobacco and Alcohol Studies
- Dr. Mirjana V. Djordjevic, Tobacco Control Research Branch, National Cancer Institute
- Dr. Maciej Goniewicz, PharmD, Assistant Professor of Oncology, Roswell Park Cancer Institute
- Dr. Alan Shihadeh, Professor of Mechanical Engineering, American University of Beirut
- Dr. Thomas Eissenberg, Center for the Study of Tobacco Products, Virginia Commonwealth University

They were joined by members of the RECIG Investigator and Research teams.
The Expert Panel was designed to validate and enrich RECIG study findings with Expert Panelists' knowledge. RECIG researchers presented the study methods and findings to the Expert Panelists. Through discussions following each presentation, the Expert Panelists provided feedback on the interpretation of results. Overall, Expert Panelists were impressed with the RECIG study findings. Expert Panelists provided meaningful insight on how to interpret and translate study findings to policymakers and the public.

**RECIG Study Conclusions**

After nearly two days of discussion with Expert Panelists, the RECIG research has been validated. Key conclusions from the Expert Panel relate to the health effects of e-cigarettes and their effectiveness as a cessation aid.

**Health Effects of E-Cigarettes**

The evidence of the nicotine and toxicant yield of e-cigarettes suggests that there are potential health effects and risks associated with e-cigarette use.

As a result of this evidence, the Expert Panel confidently concludes that anyone who is not a current smoker of tobacco cigarettes should not vape electronic cigarettes.

For current tobacco cigarette smokers, switching to e-cigarettes may decrease risks of tobacco-related diseases. However, the long-term health effects and risks of e-cigarette use are currently unknown.

Findings suggest various compounds, predominantly nicotine, are released into the environment and may result in secondhand and thirdhand exposure during e-cigarette use. Nicotine from e-cigarettes has been found to stick to surfaces and secondhand and thirdhand risks associated with nicotine exposure persist in indoor settings where e-cigarettes are used. Although the levels of compounds detected in the environment are low overall, there may be health risks associated with passive exposure.

Expert Panelists noted the strengthening of evidence about the effects of nicotine on brain development which suggests that people should not vape nicotine e-cigarettes until they are in their 20s. The Surgeon General's conclusion that there is sufficient evidence about the effects of nicotine on the development of the fetus suggests that pregnant women should not be exposed to nicotine e-cigarette aerosol.

More and better research is needed to investigate the effects associated with patterns of use and prolonged use and exposure.

**Effectiveness as a Cessation Aid**

Respected scholars diverge in drawing conclusions from the same studies; however most agree that there are insufficient high-quality studies to know for certain the effectiveness of e-cigarettes as a cessation aid.

It is clear, however, that some smokers using certain kinds of e-cigarettes in certain ways may quit smoking. Evidence from
the RECIG study suggests that e-cigarettes may be more likely to support cessation when they are used daily, with nicotine, and when individuals vape for the purposes of cessation. There was consensus among Expert Panelists that once an individual successfully stops smoking, he/she should eventually stop vaping.

**Prevalence and Patterns of Use**

RECIG findings demonstrate increased acceptability and use of e-cigarettes especially among younger people and smokers. Compared to those who never used e-cigarettes, ever e-cigarette users were more likely to be young adults aged 18-34 (25% vs. 17%), current smokers (62% vs. 46%), and employed (70% vs. 63%).

Consistent with the literature on patterns of e-cigarette use, RECIG data suggests that the majority of e-cigarette users use refillable devices with flavoured and nicotine containing e-liquids. Among current adult e-cigarette users, about half (54%) purchased their last e-cigarette at a vape shop. Smaller proportions bought e-cigarettes at convenience stores (15%) or on the internet (11%). Social acceptability of e-cigarette use is generally high and most e-cigarette users report using e-cigarettes with family or friends. However, the current data does not suggest that e-cigarettes are a catalyst for smoking.

**Policy Action Ideas**

The following policy ideas that follow from the available evidence might be considered in order to minimize potential health and safety risks and at the same time maximize the potential of e-cigarettes for helping some smokers switch from tobacco cigarettes to e-cigarettes. Additional research and data is required before many of these ideas are implemented.

| Policy Ideas | 1. Prevent non-smokers (primarily youth) from initiating | • Restrict use to adults  
• Regulate promotion  
• Restrict use to current smokers  
• Ban vaping in public places  
• Restrict sales to licensed, adult-only outlets  
• Ban all or most flavours |
| --- | --- | --- |
| 2. Make e-cigarettes less harmful for smokers | • Ban all or most flavours  
• Regulate to minimize safety and health risks |
| 3. Make e-cigarettes more effective cessation aids | • Regulate to assure nicotine delivery  
• Reconsider ban on nicotine e-cigarettes  
• Train vendors in level 1 cessation training |
Want to know more?

Dr. Robert Schwartz presented these findings and more as part of a RECIG presentation entitled ‘E-Cigarettes: Policy Making in the Dark’ at Public Health Ontario’s Grand Rounds. The presentation is available online and can be streamed here: http://otr.org/resource-centre/webinar-archives/

RECIG Research Team

• Alexa Minichiello, Research Officer
• Bo Zhang, Research Officer
• Ginnie Ng, PhD Student, Pharmacology, University of Toronto
• Diane Van Abbe, Information Coordinator
• Jaklyn Andrews, Research Officer
• Muhannad Malas, Research Officer
• Aliya Noormohamed, Research Coordinator
• Jan van der Tempel, Research Officer

RECIG Investigator Team

• Dr. Robert Schwartz, Principal Investigator, Ontario Tobacco Research Unit, University of Toronto
• Dr. Laurie Zawertailo, Principal Investigator, Centre for Addiction and Mental Health
• Dr. Roberta Ferrence, Ontario Tobacco Research Unit, University of Toronto
• Dr. Shawn O’Connor, Ontario Tobacco Research Unit, University of Toronto
• Dr. Peter Selby, Centre for Addiction and Mental Health
• Dr. Thomas Eisenberg, Virginia Commonwealth University
• Melodie Tilson, Non-Smokers’ Rights Association

The RECIG Knowledge Exchange Advisory Committee includes representatives from public health entities across Ontario, including representatives from the Ontario Campaign for Action on Tobacco, Non-Smokers’ Rights Association, Canadian Cancer Society, Registered Nurses’ Association of Ontario, Ontario Lung Association, Toronto Public Health, Tobacco Control Area Networks, and the University Health Network.

RECIG Knowledge Exchange Advisory Committee

• Dr. Irmajean Bajnok, Registered Nurses’ Association of Ontario
• Claire Harvey, Toronto Public Health
• Jennifer McFarlane, Tobacco Control Area Networks
• Michael Perley, Ontario Campaign for Action on Tobacco
• Rowena Pinto, Canadian Cancer Society
• Dr. Michael Stanbrook, University Health Network
• Andrea Stevens Lavigne, Ontario Lung Association
• Melodie Tilson, Non-Smokers’ Rights Association

Acknowledgements

We express our gratitude to the five members of the Expert Panel for their time, insights and contributions to the RECIG project. We also express thanks to members of the RECIG Co-investigator team and Knowledge Exchange Advisory Committee for their time and support throughout the RECIG project.

Newsletter Production

Sonja Johnston

The Ontario Tobacco Research Unit (OTRU) is recognized as a Canadian leader in tobacco control research, monitoring and evaluation, teaching and training and as a respected source of science based information on tobacco control.

RECIG is funded by the Ministry of Health and Long Term Care’s Health System Research Fund (HSRF). More information about HSRF can be found at http://www.health.gov.on.ca/en/pro/ministry/research/hsrf_target_research.aspx

The views expressed in this newsletter are the views of the Ontario Tobacco Research Unit and do not necessarily reflect those of the Province of Ontario.

Paid for by the Government of Ontario