



23 November 2020

Senator Hollie Hughes  
Chair of Select Committee on Tobacco Harm Reduction  
Via email: [tobaccoharmreduction.sen@aph.gov.au](mailto:tobaccoharmreduction.sen@aph.gov.au)

Dear Senator Hughes

Thank you for your supplementary questions to my submission and appearance before the Inquiry into Tobacco Harm reduction on 19 November 2020.

In response to the questions:

### QoN 013-01

Do you agree with Dr Skerritt of the TGA statement that “the evidence is that vaping is less harmful than tobacco smoking”.

Answer:

As my colleague from ACOSH, Maurice Swanson, has pointed out in his response to being asked about this statement, Dr Skerritt was responding to the following question from Senator Canavan :

“Senator CANAVAN: We’ve asked a lot of science questions here today. I will ask the scientist who is here. Is smoking more harmful than vaping?”

“Dr Skerritt: I believe that smoking is more harmful than vaping but that does not make vaping harmless-in the same way that being hit by a car on the freeway is less harmful than being hit by a truck but it is not desirable”.

At this relatively early phase of the accumulation of evidence regarding the harms from vaping, I agree with Dr Skerritt’s response with regard to the individual vaper but the scientific evidence regarding the harms associated with vaping is becoming stronger as each week passes.

In the Covid-19 era, when aerosol transmission of the virus is a major danger, the considerable aerosol cloud expired by the vaper may prove to be a significant additional public health risk. This is yet to be proven or disproven.

Question part a. If no, do you think that the current TGA model does not go far enough?

Answer: N/A

Question part b. If yes, do you agree with the Australian Tobacco Harm Reduction Association’s view that “The bottom line is that vaping is not risk free and if you don’t smoke you shouldn’t vape. However, if you are a smoker who can’t quit you will dramatically reduce your risk of dying from cancer, heart and lung disease if you switch to vaping”.

Answer:

No.

As mentioned already, it cannot be assumed that the risks to the individual of the diseases mentioned will be dramatically reduced in the medium to long term because the evidence regarding the health impacts of vaping will take years to be fully understood.

There is increasing evidence that sudden deaths have occurred to vapers. The main threats to health and premature death usually take several decades to become apparent in the addicted smoker. That may well prove to be the case for the vaper as well.

It is probable that switching to vaping will not be successful in enabling the vaper to fully quit smoking, a more likely chance that dual use of smoking and vaping will be the case, and evidence that smokers who have previously quit smoking will try vaping and resume smoking tobacco.

The other major harm to health from vaping is the proven upsurge in vaping among the youth of countries that have liberalised the availability of vaping products, addicting new generations many of whom will become smokers or dual vapers and smokers.

Far from tobacco harm reduction, this is much more likely to lead to tobacco harm increase on a population wide scale, especially in a country like Australia that has led the world in driving down the rates of smoking in 12 to 17 year-olds.

## QoN 103-02

Do you or has your organisation ever received direct or indirect support from the Pharmaceutical industry, including travel, attendance at conference, or events sponsorships, including from the manufactures of Nicotine replacement therapies?

### Answer:

As a former clinician and medical educator, I have never received direct funding or assistance from the pharmaceutical industry, including the manufacturers of Nicotine replacement therapies.

I have attended many conferences where some manufacturers of surgical equipment and pharmaceutical firms give financial support to the conference and display their wares in the Exhibition halls of those conferences. In addition, I have attended luncheons within hospitals, and evening events sponsored by groups such as WACOG (Western Australian Cancer Organisations Group), that have received support at times.

I have never received support for travel, attendance at conferences or payment of any sort to attend such events.

In my almost 37- year association with the Australian Council on Smoking and Health (ACOSH), I have never seen evidence of any occasion where ACOSH received direct or indirect support, in any form, from the pharmaceutical industry and examination of the records has not revealed any such support.

Yours sincerely,

Professor Kingsley Faulkner AM  
President of ACOSH.