

Principles for Regulating Non-Medicinal Nicotine Products

Introduction

The growing accessibility of non-medicinal nicotine products poses public health threats. These include driving nicotine initiation and addiction among youth and non-users of tobacco, and perpetuating addiction in tobacco users.

Of concern is the substantial association that youth, who use e-cigarettes, are more likely to later begin smoking conventional cigarettes.^{1,2,3} ⁴These products also create opportunities for public health policy interference and complicate progress in global and national tobacco control efforts.

In this document, ***non-medicinal nicotine products*** (hereafter referred to in the text as *nicotine products*) means substances or mixtures containing nicotine manufactured for human consumption, other than a tobacco product. The nicotine may be in any chemical form, including any salt or complex, regardless of whether the chemical is naturally or synthetically derived, and includes alkaloids and analogues. “*Nicotine products*” also include any product or device, whether containing nicotine or other ingredients, that is designed, marketed or may be used to imitate or as a substitute for nicotine products. **Throughout this document, references to “*nicotine products*” do not include products approved for therapeutic use by the relevant medicines (or drugs) authority.**

Multinational tobacco companies have increasingly marketed nicotine products like electronic cigarettes (e-cigarettes) and nicotine pouches as a means of offsetting declining tobacco sales. Despite their risks, these companies are marketing these products in a way that drives commercial profit by appealing to non-users and youth.

Recognizing the tobacco industry’s strategies, the *Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health* recognizes that “[t]he skepticism towards the tobacco industry’s harm reduction initiatives stems from their long and well-documented history of duplicitous behaviour, concealing and downplaying the health risks of their products, while deceptively marketing alternatives as harm reduction or quitting alternatives as ascertained in judicial proceedings.”⁵ The *Special Rapporteur* also notes

¹ Banks E, Yazidjoglou A, Brown S, Nguyen M, Martin M, Beckwith K, Daluwatta A, Campbell S, Joshy G. Electronic cigarettes and health outcomes: systematic review of global evidence. National Centre for Epidemiology and Population Health: Canberra, Australia, 2022. Available from: https://nceph.anu.edu.au/research/projects/health-impacts-electroniccigarettes#health_outcomes.

² O’Brien, D., Long, J., Quigley, J. et al. Association between electronic cigarette use and tobacco cigarette smoking initiation in adolescents: a systematic review and meta-analysis. *BMC Public Health* 21, 954 (2021). <https://doi.org/10.1186/s12889-021-10935-1>

³ Kim, M.M., Steffensen, I., Miguel, R.T.D. et al. A systematic review and meta-analysis of the association between e-cigarette use among non-tobacco users and initiating smoking of combustible cigarettes. *Harm Reduct J* 21, 99 (2024). <https://doi.org/10.1186/s12954-024-01013-x>

⁴ Golder S, Hartwell G, Barnett LM, et al. *Tob Control* Epub 2024, doi:10.1136/tc-2024-059219

⁵ Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health on harm reduction for sustainable peace and development. UN doc A/79/177. Paragraph 45. Published 18 July 2024. <https://docs.un.org/en/A/79/177>

that corporations like tobacco companies seek “to position themselves as part of the solution to problems that they have largely created.”⁶

The tobacco industry continues to disseminate misinformation often via the publication of biased research papers with undisclosed conflict of interest⁷ and the specific targeting of young demographics, women, and marginalized communities.^{8,9,10} This has created new challenges in countries that have made progress in tobacco control and are observing declining prevalence of tobacco use, and in countries that are struggling with implementing tobacco control measures.

Nicotine products, along with the strategies employed by the tobacco industry to promote them, continue to pose significant and evolving challenges to tobacco control efforts in many countries. In response to these concerns, and in line with the urgency underscored by the decisions adopted by the Conference of the Parties (COP),^{11,12,13} the Global Alliance for Tobacco Control has developed these Principles for Regulating Nicotine Products to assist Parties in facing these new challenges.

Fueling Addiction: Industry Narratives and Youth Targeting

The tobacco control community advocates for, and implements, evidence-based tobacco control public health policy to promote healthier populations. The tobacco industry aggressively interferes with and undermines those efforts with their tactics impacting directly on the age of initiation of tobacco and nicotine use. Statistically, the likelihood of adults starting to smoke in their mid-20s is very low.¹⁴ People who currently use tobacco have mostly started their use in their teen years or as young adults. According to evidence found by The Lancet Health, most people who smoke today began using tobacco during their adolescence or early adulthood, with 82.6% initiating between ages 14 and 25 years old.¹⁵

Youth uptake of e-cigarettes is increasing at alarming rates in many countries around the world. Data from the Global Youth Tobacco Survey show that, across WHO regions, current e-cigarette use among 12–16-year-olds ranges from 3.3% in Southeast Asia to 10.8% in the

⁶ Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health on harm reduction for sustainable peace and development. UN doc A/79/177. Published 18 July 2024.

<https://docs.un.org/en/A/79/177>

⁷ Tobacco Tactics (2024) “Influencing Science Case Studies” accessible [here](#)

⁸ Truth Initiative (2023) “Old tactics, new products: how big tobacco targets women in e-cigarette marketing” accessible [here](#)

⁹ Tobacco Tactics (2024) “Shaping Retail: Targeting Specific Communities” accessible [here](#)

¹⁰ WHO (2024), “The tobacco industry is targeting the youth”, accessible [here](#)

¹¹ FCTC/COP6(9) Electronic nicotine delivery systems and electronic non-nicotine delivery systems. Available from:

[https://apps.who.int/gb/fctc/PDF/cop6/FCTC_COP6\(9\)-en.pdf](https://apps.who.int/gb/fctc/PDF/cop6/FCTC_COP6(9)-en.pdf).

¹² FCTC/COP7(9) Electronic nicotine delivery systems and electronic non-nicotine delivery systems. Available from:

[https://fctc.who.int/resources/publications/m/item/fctc-cop7\(9\)-electronic-nicotine-delivery-systems-and-electronic-nicotine-delivery-systems](https://fctc.who.int/resources/publications/m/item/fctc-cop7(9)-electronic-nicotine-delivery-systems-and-electronic-nicotine-delivery-systems).

¹³ FCTC/COP10(11) Panama Declaration. Available from: <https://storage.googleapis.com/who-fctc-cop10-source/Decisions/fctc-cop-10-11-en.pdf/>

¹⁴ American Cancer Society (2025), “Why People Start Smoking and Why It’s Hard to Stop”, accessible [here](#)

¹⁵ Reitsma, Marissa B et al. (2021) The Lancet, Volume 397, Issue 10292, 2337 – 2360, “Spatial, temporal, and demographic patterns in prevalence of smoking tobacco use and attributable disease burden in 204 countries and territories, 1990–2019: a systematic analysis from the Global Burden of Disease Study 2019”, accessible [here](#)

Western Pacific, with reported rates of 7.8% in the Americas, 9.3% in Europe, 9.9% in Africa, and 10.6% in the Eastern Mediterranean.¹⁶

While prevalence and regulatory landscapes differ from country to country, there is wide-spread concern regarding the use of nicotine products by young people and non-tobacco users, and the protection of these groups from the health impacts of these products, particularly as research on the long-term use is evolving.

Many tobacco users who use nicotine products end up engaging in dual use, continuing their tobacco consumption while using these additional products.¹⁷ The risk of dual use was recognized in the COP7 report on Electronic Nicotine Delivery Systems and Electronic Non-Nicotine Delivery Systems (ENDS/ENNDS)¹⁸

WHO FCTC Obligations, Guidance by the COP and Domestic Implementation

Article 5.2(b) of the WHO FCTC places legal obligations on Parties to adopt and implement measures to prevent and reduce tobacco consumption, nicotine addiction, and exposure to tobacco smoke, in accordance with their national capabilities.¹⁹ Article 5.3 requires Parties to protect their public health policies with respect to tobacco control from the commercial and other vested interests of the tobacco industry in accordance with national law. Measures regulating nicotine products, including prohibiting or restricting their commercialization are consistent with Parties' general obligations under the WHO FCTC.

Regarding e-cigarettes, Parties have been invited by COP to apply regulatory measures, such as prohibiting or restricting advertising, promotion, and sponsorship and flavours that appeal to minors, to prohibit or restrict the manufacture, importation, distribution, marketing, sale, and use of ENDS/ENNDS in accordance with their national laws and public health objectives.²⁰

Parties are also urged to consider a range of factors when regulating these products, including their health risks, potential for youth and non-user uptake, likelihood of dual or poly-use, and the risk of undermining existing tobacco control progress. Regardless of whether a Party decides to prohibit, restrict or allow commercialization, it is essential to ensure that such decisions are supported by the appropriate measures within national regulatory frameworks.

As of 2023, according to WHO, 133 countries have implemented measures to address e-cigarettes. Among them, 42 countries have enacted complete bans on the sale of these

¹⁶ Greenhalgh, EM, Jenkins, S, EM, Bain and Scollo, MM. 18.3 Prevalence of e-cigarette use. In Greenhalgh, EM, Scollo, MM and Winstanley, MH [editors]. Tobacco in Australia: Facts and issues. Melbourne: Cancer Council Victoria; 2025. Available from <https://www.tobaccoinaustralia.org.au/chapter-18-e-cigarettes/18-3-prevalence-of-e-cigarette-use>

¹⁷ Krishnan N, Berg CJ, Elmi AF, Klemperer EM, Sherman SE, Abrams LC. Trajectories of ENDS and cigarette use among dual users: analysis of waves 1 to 5 of the PATH Study. *Tob Control*. 2024 Mar 19;33(e1):e62-e68. Doi: 10.1136/tc-2022-057405. PMID: 36601793

¹⁸ WHO (2016), Appendices to WHO report (FCTC/COP/7/11). Electronic nicotine delivery systems and electronic non-nicotine delivery systems (ENDS/ENNDS), accessible at [https://www.who.int/publications/m/item/electronic-nicotine-delivery-systems-and-electronic-non-nicotine-delivery-systems-\(ends-ennds\)](https://www.who.int/publications/m/item/electronic-nicotine-delivery-systems-and-electronic-non-nicotine-delivery-systems-(ends-ennds))

¹⁹ WHO FCTC Article 5.2(b).

²⁰ FCTC/COP7(9) (Inviting Parties to consider applying regulatory measures such as those referred to in [FCTC/COP/7/11](#) to prohibit or restrict the manufacture, importation, distribution, presentation, sale and use of ENDS/ENNDS, as appropriate to their national laws and public health objectives.)

products, while the remaining 91, covering 3.7 billion people, allow their sale under a regulatory framework.²¹

Principles for Regulating Non-Medicinal Nicotine Products for consideration by Parties:

- **Align with the WHO FCTC:** All regulatory approaches should be grounded in Parties' obligations under the WHO FCTC, its Guidelines for implementation, and decisions adopted by the COP, ensuring a comprehensive, evidence-based approach to tobacco control, in accordance with national public health objectives and context.
- **Emphasize the protection of non-tobacco users, particularly youth and young adults in the prevention of nicotine addiction:** Parties should urgently emphasize the prevention of youth uptake and uptake among other non-tobacco-users. Strong preventative measures are essential to protect youth and young adults from nicotine addiction and long-term health risks.
- **Reject the tobacco industry narrative on harm reduction:** Parties must reject the tobacco industry's use of public health language to undermine tobacco control. The concept of harm reduction should not be driven by industry interests and should be reclaimed by the public health community and understood as the full set of evidence-based measures already contained in the WHO FCTC, including policies to reduce, prevent, and ultimately eliminate the harms of tobacco use and nicotine addiction. Any consideration of nicotine products must be based on independent evidence, subject to regulation, and overseen by public health authorities.
- **Recognize that the COP has adopted a decision regarding the regulation of certain nicotine products:** COP²² has recognized that the restriction or prohibition of the sale, import, manufacture and distribution of ENDS/ENNDS is a legitimate form of regulation by Parties when considering existing legal measures, industry tactics and the public health objectives they wish to achieve for their country.
- **Implement WHO FCTC Article 14:** Regardless of the regulatory framework adopted, Parties should invest in cessation support systems, including healthcare provider training, quit lines, and access to medically licensed and regulated nicotine replacement products to treat nicotine dependence.
- **Promote comprehensive tobacco control plans:** Nicotine products should be addressed as part of comprehensive tobacco control plans that implement all provisions of the WHO FCTC to reduce nicotine addiction, tobacco use, and exposure to tobacco smoke.
- **Encourage assessment of regulatory context and risk factors:** When taking regulatory action, Parties would benefit from evaluating the legal status of products, health risks at individual and population levels, risk of youth or non-user uptake, dual use potential, existing tobacco control measures, and the strategies used by the tobacco industry to expand markets or weaken existing regulations.

²¹ WHO (2025) "WHO Report on the Global Tobacco Epidemic, 2025", accessible [here](#)

²² COP7 (9) decision invites Parties to consider applying regulatory measures such as those referred to in FCTC/COP/7/11 to prohibit or restrict the manufacture, importation, distribution, presentation, sale and use of ENDS/ENNDS, as appropriate to their national laws and public health objectives.

GATC supports strong and proactive measures, recognizing regulatory approaches may vary as appropriate to Parties' national laws and public health objectives.

Conclusion

Nicotine products present an urgent and evolving threat to public health and tobacco control efforts. These products are being aggressively promoted by the tobacco industry through misleading narratives and tactics that appeal to youth and non-users.

Now more than ever, coordinated and decisive action is essential. By implementing strong regulations consistent with the WHO FCTC and rejecting tobacco industry interference, Parties have the opportunity to prevent another generation from falling into nicotine addiction.