October – E-Cigarettes

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It seems every time I read the news, there’s an article on e-cigarettes, or e-cigs. Not only that, one of my family members has started using them, and it appears to have become a very popular item. In fact, the Centers for Disease Control, (CDC), recently reported the use of e-cigs among 6-12 graders has doubled. The CDC estimates 1.78 million middle and high school students nationwide have tried e-cigs. Needless to say, this subject has captured my attention. It certainly deserves discussion, because medical and legal arguments have now begun, and they don’t look like they’re going to let up anytime, soon. There are ongoing battles concerning safety, marketing, advertising and restricting the sales of e-cigs. For these reasons, I reviewed the literature, and will provide what seems to be the most current, useful information.

E-cigs are non-flammable devices which deliver synthetic or tobacco-derived nicotine. They consist of three parts contained in a stainless steel shell. These are the mouthpiece, the atomizer chamber (vaporizer) and a smart chip lithium battery. They don’t burn tobacco, as the devices use water vapor to carry nicotine to the lungs and bloodstream. The vapor released contains polyethylene glycol, or PG. It looks like cigarette smoke, and it is also used for theatrical smoke. They are promoted by vendors and manufacturers as a safe alternative to cigarettes. However, manufacturers have not submitted the required applications for FDA approval of these products for smoking cessation. Major U.S. distributors maintain they are not promoting use of their products to help people quit smoking, but the emphasis is stated these products are safer than cigarettes for those who are addicted to or want to use nicotine but do not want exposure to the risks of smoking real cigarettes. A great deal of what is being said has yet to be clinically proven. People may be trading one bad habit for another. We’ll see.

Just to mention, nicotine is a highly addictive substance found in tobacco. Presently, Nicotine Replacement Therapy, or NRT is available in five delivery mechanisms which include a skin patch, chewing gum, nasal spray, throat lozenge and inhaler formulas. E-cigs have not been approved for such use. They have not been thoroughly tested, and therein lies part of the problem. One paper stated that each puff of an e-cig contains one-third to one-half the nicotine in a tobacco cigarette. This is yet another problem, each puff may not deliver what is stated, which brings up lack of quality control issues regarding the manufacturing process. Also, another issue was reported, as one brand was marketed as being nicotine-free, but measurable amounts of nicotine were actually found in the samples. The World Health Organization, WHO, noted that they do not consider e-cigs to be a legitimate therapy for smokers who are trying to quit. To their knowledge; no peer-reviewed studies have been conducted showing the e-cig as a safe, effective nicotine replacement therapy.

Literature also reported that an analysis of two brands of e-cigs found detectable levels of known carcinogens (cancer causing agents), and toxic chemicals, (i.e., diethylene glycol, which is also found in antifreeze, small amounts of nitrosamines and other impurities.

From my readings, I found where the FDA issued a consumer health warning regarding e-cigs. Some of the concerns listed in the article I saw were; they can increase nicotine addiction among young people, and their use may lead to experimentation with other tobacco products. E-cigs may contain ingredients known to be toxic to humans. Clinical studies about product safety and efficacy for intended use have not been formally submitted for evaluation. Consumers have no way of knowing the doses they are inhaling, the types or concentrations of potentially harmful chemicals, or if they are safe for their
intended use. Again, regulation of these products is a major topic of discussion, so we will soon be finding out more information as time progresses.

They also come in various flavors such as cookies and cream, chocolate and strawberry, so the concern is they may appeal to young people.

I am not about to get into all the legal wrangling taking place regarding e-cigs. It is far beyond the scope of this article, and I am not an attorney. However, as a physician and father, I have many concerns based on my readings, as I combed the literature. My main focus is YOU. Most people I’ve seen who smoke, will at some point in their lives try to quit. I am not entering the fight on whether or not e-cigs are better alternatives for people who already are addicted to tobacco products. I’m asking you to never try e-cigs or any tobacco product, for that matter. I can’t see where smoking anything will do your young, healthy bodies any good whatsoever. I can’t see it as being cool. It could be just another health problem waiting to happen, and that’s how I, personally view it. Don’t allow e-cigs to become part of your life. I’ll leave it this way: Why does a person even remotely think their body needs to be exposed to an addictive substance like nicotine? Where does that fit into any category of being a good idea? Is it even slightly possible that e-cigs may be associated with cardiovascular disease or e-cancer? If you decide to try e-cigarettes, ask yourself one question: Why? I reiterate my position. I ask you to never try tobacco products or e-cigarettes.

Remember, you only get one body. Take great care of it, and it will take great care of you when challenged with the competitive challenge regarding athletics and/or a medical/surgical illness. Dr. Steve

Dr. Steven L. Snodgrass, M.D., F.A.C.S. is a former Chief of Surgery, member of the American Medical Association, Fellow of the American College of Surgeons, father of two athletic sons, and the son of a cancer survivor. Because of his experiences, he created a healthy protein snack to help both athletes and patients meet their specific needs. His new product, Nutri Snax will be available, soon.

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