PUBLIC HEALTH LEADERS PETITION THE FDA TO ACT ON MENTHOL

Citizen Petition Highlights

With the Family Smoking Prevention and Tobacco Control Act of 2009, Congress took an important step to prevent youth smoking by banning flavored cigarettes. Because tobacco manufacturers use flavors, herbs and spices to mask the harshness of tobacco and attract new generations of underage smokers, Congress prohibited fruity and candy-like additives as characterizing flavors in cigarettes and cigarette smoke.

There was one exception, however. Despite menthol’s minty flavoring and youth appeal, as well as its popularity among adult smokers, including a large proportion of smokers from minority populations, menthol was exempted from Congress’ flavor prohibition. The Tobacco Control Act did, however, provide the U.S. Food and Drug Administration with the authority to prohibit menthol if “appropriate for public health” and made the issue of menthol in cigarettes a priority for FDA consideration.

To ensure that the FDA was advised about menthol and other scientific issues, the Tobacco Control Act established the Tobacco Products Scientific Advisory Committee, made up of leading scientific experts. After a lengthy and careful review of the evidence, the Committee concluded: “Removal of menthol cigarettes from the marketplace would benefit public health in the United States.” More than eighteen months after receiving the Committee’s report, the FDA has yet to act.

On April 12, 2013, twenty leading national organizations filed a formal Citizen Petition, urging the FDA to exercise its regulatory power, and to protect America’s health by prohibiting menthol as a characterizing flavoring in cigarettes. These organizations include –

- Organizations focused on health disparities and communities of color – African American Tobacco Control Leadership Council; Asian Pacific Partners for Empowerment, Advocacy and Leadership (APPEAL); NAATPN, Inc. (the parent organization of the National African American Tobacco Prevention Network); and National Latino Alliance for Health Equity;
- Preeminent health advocacy organizations – American Cancer Society – Cancer Action Network, American Heart Association, and American Lung Association;
- Leading tobacco control advocacy organizations – Campaign for Tobacco-Free Kids, Americans for Nonsmokers’ Rights, and American Legacy Foundation;
• Leading voices for public health and children’s health – American Public Health Association and American Academy of Pediatrics;
• The voice of America’s local health departments – National Association of County and City Health Officials;
• A leading corporate watchdog – Corporate Accountability International;
• Leading scientific organizations and societies – American Association for Cancer Research; Association for the Treatment of Tobacco Use and Dependence; Society for Research on Nicotine and Tobacco; Summit Health Institute for Research, Education, Inc.; and Dr. Valerie Yerger; and
• The national legal network for tobacco control policy – Tobacco Control Legal Consortium.

The pressing need for the FDA to act on the health hazards posed by menthol in cigarettes is supported by a vast body of evidence, including statistics clearly indicating that –

**Smoking remains a critical public health issue**

• Tobacco use remains the leading cause of preventable death and disease in the United States. As of 2011, 19% of U.S. adults – 43.8 million people – smoked cigarettes.
• Cigarette smoking kills more than 440,000 Americans each year and leaves millions more to suffer from tobacco-related chronic disease.
• Smoking costs the U.S. $193 billion annually, including $97 billion per year in lost productivity and $96 billion per year in healthcare costs.
• Each day 3,800 adolescents try smoking for the first time, 1,000 of whom will become addicted.

**Menthol cigarettes hurt kids**

• Kids smoke menthol cigarettes. According to national surveys, 47.7% of adolescent (age 12-17) smokers report menthol cigarette use compared to 40.8% of young adult smokers (age 18-25) and 31.5% of older adult smokers (age 26 or older).
• Among kids, the youngest smokers are the most likely to smoke menthols, with a greater proportion of middle school age smokers reporting menthol use than high school age smokers.
• Menthol in cigarettes results in more youth initiation. Among youth and young adult smokers, menthol cigarette use is also more prevalent among those who started smoking in the past year than among those who started smoking more than one year ago.

**Menthol cigarettes harm minority smokers**

• Many menthol smokers support the elimination of menthol cigarettes. Studies have found that among menthol smokers, nearly half (49.5%) of respondents either supported prohibiting menthol in cigarettes or did not have a strong opinion for or against such a regulation. Another study showed 56.1% of all respondents and 75.8% of African American survey respondents saying that they supported prohibiting menthol cigarettes “like other flavored cigarettes.”
• A national study found that many menthol smokers would quit smoking if menthol cigarettes were prohibited, especially African American (44.5%) and female (44.0%) menthol smokers.
• According to a leading economic model, fully one-third of the lives saved by eliminating menthol cigarettes and causing menthol smokers to quit will be African American.
• Menthol cigarettes are used disproportionately in communities of color. According to the combined 2004-2008 National Survey on Drug Use and Health (NSDUH) data, menthol cigarettes are used at disproportionately higher rates by racial and ethnic minority smokers, including African Americans (82.6%), Native Hawaiian or Pacific Islanders (53.2%), Hispanics or Latinos (32.3%) and Asian Americans (31.2%), relative to White smokers (23.8%).
• Racial and ethnic differences in menthol use appear at young ages. The same NSDUH data shows that among 12-17 year old smokers, 72% of African Americans, 51% of Asians, and 47% of Hispanics, in comparison to 41% of Whites, used menthol cigarettes. The pattern continues into young adulthood (18-25 year olds), with 85% of African Americans, 38.2% of Hispanics, and 35.8% of Asians using menthol cigarettes in comparison to 28.8% of Whites.

Prohibiting menthol cigarettes would benefit health

• One model estimates that if menthol was prohibited as a characterizing flavor in cigarettes, between 2010 and 2020 over 2.2 million would not start smoking. By 2050, the number of people who would not smoke would be 9 million.
• A leading model of smoking in the United States predicts that a 10% quit rate among menthol smokers would save thousands of lives, preventing over 4,000 smoking-attributable deaths in the first ten years, and that 300,000 lives would be saved over forty years. Approximately 100,000 of those whose lives would be saved would be African American.

Smoking is the leading preventable cause of death and disease. It costs the United States almost $200 billion in health costs and lost productivity each year. Moreover, preventing young people from becoming addicted smokers and increasing the likelihood of successful smoking cessation are key health goals that, in fact, are the focus of the Tobacco Control Act’s public health standard and should be the goal of FDA regulation.

The results of study after study are clear: prohibiting menthol in cigarettes is perhaps the single most powerful measure readily available to the FDA to improve America’s health. When menthol cigarettes are the source of addiction for nearly half of all adolescent smokers; when menthol increases the palatability and attractiveness of smoking to both youth and racial and ethnic populations; and when menthol clearly increases the difficulty of quitting smoking, there can be no justification for further delay in eliminating the special treatment of the most harmful of all cigarette flavor additives.