

HB

224

<TARGET><BILL>HB 224</BILL><SUBJECT>HB
224</SUBJECT><COMM>HFIN27</COMM></TARGET>

FISCAL NOTE

STATE OF ALASKA
2012 LEGISLATIVE SESSION

Bill Version CSHB224(JUD)
 Fiscal Note Number _____
 () Publish Date _____

Identifier (file name) HB224CS(JUD)-DHSS-BHA-12-14-11 Dept. Affected Health and Social Services
 Title Sales of Nicotine Products to Minor Appropriation Behavioral Health
 Allocation Behavioral Health Administration
 Sponsor Rep. Seaton
 Requester House Finance Committee OMB Component Number 2665

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	FY13 Appropriation Requested	Included in Governor's FY13 Request	Out-Year Cost Estimates					
			FY13	FY14	FY15	FY16	FY17	FY18
OPERATING EXPENDITURES								
Personal Services								
Travel								
Services								
Commodities								
Capital Outlay								
Grants, Benefits								
Miscellaneous								
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

FUND SOURCE		(Thousands of Dollars)						
1002	Federal Receipts							
1003	GF Match							
1004	GF							
1005	GF/Prgm (DGF)							
1037	GF/MH (UGF)							
1178	temp code (UGF)							
TOTAL		0.0	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS								
Full-time								
Part-time								
Temporary								

CHANGE IN REVENUES								

Estimated **SUPPLEMENTAL (FY12) operating costs** _____ (separate supplemental appropriation required;
 (discuss reasons and fund source(s) in analysis section)

Estimated **CAPITAL (FY13) costs** _____ (separate capital appropriation required)
 (discuss reasons and fund source(s) in analysis section)

Why this fiscal note differs from previous version (if initial version, please note as such)

Updated fiscal note to reflect current fiscal year.

Prepared by Melissa W. Stone
 Division Division of Behavioral Health
 Approved by Nancy Rolfzen, Assistant Commissioner
DHSS Finance & Management Services

Phone 269-3410
 Date/Time 11/30/11 5:00 PM
 Date 12/14/2011

FISCAL NOTE

STATE OF ALASKA
2012 LEGISLATIVE SESSION

BILL NO. CSHB224(JUD)

Analysis

This bill will have no significant fiscal impact on the Division of Behavioral Health (DBH). HB224 will broaden AS 11.76.100, which currently prohibits selling or giving tobacco products to persons under 19, to encompass all nicotine products, with an exception for tobacco cessation products provided by the minor's parent or prescribed by a licensed physician.

If enacted, this bill would not impact DBH's Synar Tobacco Enforcement requirements, but will have some limited impact on the division's general compliance and enforcement activities that occur outside of Synar. We do not believe the legislation's impact will be to the extent that additional funds or a change in practices will occur.

FISCAL NOTE

STATE OF ALASKA cost # codes
2012 LEGISLATIVE SESSION

Bill Version HB 224
Fiscal Note Number _____
Publish Date _____

Identifier (file name) HB224CS(JUD)-LAW-CIV-12-08-11 Dept. Affected Law
Title An Act prohibiting the sale or gift of a product containing Appropriation Civil
nicotine to a minor under certain conditions. Allocation Commercial and Fair Business
Sponsor Representative(s) Seaton
Requester (H) Finance OMB Component Number 2717

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	FY13 Appropriation Requested	Included in Governor's FY13 Request	Out-Year Cost Estimates				
			FY14	FY15	FY16	FY17	FY18
OPERATING EXPENDITURES	FY13	FY13	FY14	FY15	FY16	FY17	FY18
Personal Services							
Travel							
Services							
Commodities							
Capital Outlay							
Grants, Benefits							
Miscellaneous							
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0	0.0

FUND SOURCE		(Thousands of Dollars)					
1002	Federal Receipts						
1003	GF Match						
1004	GF						
1005	GF/Prgm (DGF)						
1037	GF/MH (UGF)						
1178	temp code (UGF)						
TOTAL		0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS							
Full-time							
Part-time							
Temporary							

CHANGE IN REVENUES							

Estimated SUPPLEMENTAL (FY12) operating costs _____ (separate supplemental appropriation required)
(discuss reasons and fund source(s) in analysis section)

Estimated CAPITAL (FY13) costs _____ (separate capital appropriation required)
(discuss reasons and fund source(s) in analysis section)

Why this fiscal note differs from previous version (if initial version, please note as such)

Updated for new fiscal year form.

Prepared by Eileen Donahue, Division Operations Manager
Division Administrative Services
Approved by John J. Burns, Attorney General
Department of Law

Phone 465-5427
Date/Time 12/08/11 3:30PM
Date 12/8/2011

FISCAL NOTE

STATE OF ALASKA
2012 LEGISLATIVE SESSION

BILL NO. HB 224

Analysis

HB 224 amends AS 11.76 by adding a new section AS 11.76.109 ("Selling or giving product containing nicotine to a minor," defined in the statute as anyone under 19). The bill broadens the statute and its title to include the negligent sale to a minor of any product containing nicotine, not just tobacco, adding an exception for nicotine products approved by the FDA for, and marketed solely as, tobacco cessation uses (e.g., nicotine gum, patches, lozenges) if prescribed by a physician or given to the minor by a parent or guardian.

There is no anticipated fiscal impact to Department of Law.

CS FOR HOUSE BILL NO. 224(FIN)

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SEVENTH LEGISLATURE - SECOND SESSION

BY THE HOUSE FINANCE COMMITTEE

Offered:

Referred:

Sponsor(s): REPRESENTATIVE SEATON

A BILL

FOR AN ACT ENTITLED

1 **"An Act prohibiting the sale or gift of a product containing nicotine to a minor under**
2 **certain conditions."**

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 *** Section 1.** AS 11.76 is amended by adding a new section to read:

5 **Sec. 11.76.109. Selling or giving product containing nicotine to a minor. (a)**

6 A person commits the offense of selling or giving a product containing nicotine to a
7 minor if the person

8 (1) negligently sells a product containing nicotine to a person under 19
9 years of age; or

10 (2) is 19 years of age or older and negligently exchanges or gives a
11 product containing nicotine to a person under 19 years of age.

12 (b) The provisions of (a) of this section do not apply to the sale, exchange, or
13 gift to a person under 19 years of age of a product containing nicotine that is intended
14 or expected to be consumed without being combusted if the product

1 (1) has been approved by the United States Food and Drug
2 Administration for sale as a tobacco use cessation or harm reduction product or for
3 other medical purposes;

4 (2) is being marketed and sold solely for the approved purposes; and

5 (3) is

6 (A) prescribed by a health care professional;

7 (B) given to a person by the person's parent or legal guardian;

8 (C) provided by a state-approved tobacco cessation program
9 administered by the Department of Health and Social Services; or

10 (D) provided by a pharmacist to a person 18 years of age or
11 older without a prescription.

12 (c) In this section, "product containing nicotine" does not include a cigarette, a
13 cigar, tobacco, or a product containing tobacco.

14 (d) Selling or giving a product containing nicotine to a minor is a violation
15 and, upon conviction, is punishable by a fine of not less than \$300.

Adopted
2/27/12

27-LS0466X
Gardner
2/23/12

CS FOR HOUSE BILL NO. 224(FIN)

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SEVENTH LEGISLATURE - SECOND SESSION

BY THE HOUSE FINANCE COMMITTEE

Offered:

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REPRESENTATIVE Paul Seaton

District 35

Sponsor Statement HB 224 Banning the Sale of Products Containing Nicotine to a Minor

Faced with lagging sales given the unpopularity and banning of smoking in many public places, tobacco companies are investing in new and innovative ways to deliver their product. Some of the newest items on the market, called "dissolvable products" are mints, lozenges, strips and toothpicks containing nicotine. These products slowly dissolve in the mouth and deliver a nicotine hit between 0.6 and 3.0 mg per item while a cigarette contains 1 mg of nicotine (Brandweek, 2008). Some have legitimate uses for promoting smoking cessation and providing smokers relief when they are in situations where they cannot smoke. However, the opportunity for abuse is wide with the over the counter availability of dissolvable products containing nicotine.

HB 224 makes it illegal to sell or give a product containing nicotine to a minor. Under this bill an individual is fined \$300 if convicted of selling or giving a product containing nicotine to an individual under 19. HB 224 addresses the need for minors to access products that are regulated and marked for smoking cessation, such as nicotine gum, by allowing a minor to purchase products containing nicotine with the prescription of a health care provider or to be given the product by an adult parent or guardian.

There is a very real risk that increased nicotine use in youth and adolescents promotes addiction to nicotine at a young age and could encourage future tobacco use and addiction (Science Daily, 2003). A recent Harvard School of Public Health study found dissolvable nicotine products to be toxic if ingested by children (Harvard School of Public Health, 2010). A 14-year old boy in England was hospitalized after overdosing on nicotine gum (Vapure News, 2009).

Many of the products containing nicotine that are entering the market now look and taste like candy. A study conducted by student volunteers in Virginia surveyed 1400 teens and 42% identified Camel Orbs as a candy based on their packaging (Virginia Foundation for Healthy Youth, 2010). According to Brandweek, a professional publication on brand identity marketing, "camel dissolvable will not be positioned as a smoking cessation or reduced risk product, per the company" (Brandweek, 2008). Products containing nicotine are not subject to FDCA Chapter IX, the regulations that govern tobacco (Chicago Breaking News, 2011).

Without the regulation of products containing nicotine by the state there is an increased chance of children becoming addicted to nicotine, and tobacco later in life. Many of these products are new to the market and have not yet been introduced in Alaska. HB 224 takes a proactive approach to encouraging the responsible use of dissolvable nicotine products.

Alaska State Legislature

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REPRESENTATIVE Paul Seaton

District 35

HB 224 Changes between CSHB224 (JUD) and HB224 and original:

CSHB224(JUD)v.D creates a new section in AS 11.76 instead of adding “banning product containing nicotine” to the statute banning the sale of products containing tobacco, AS. 11.76.100. This keeps products containing nicotine out of title 43 and complications with violations regarding the sale of tobacco products and licensing.

Page 2 Sec. 2 of HB224v.A. We deleted this section because it made an exemption for minors in a correctional facility (mirroring language in the statute banning the sale of a product containing tobacco to a minor). There is no need for this carve-out.

Page 2 lines 16-17 of HB224v.A. We expanded the individuals who are allowed to prescribe smoking cessation products that contain nicotine from physicians only to “health care professional” to cover physician’s assistants, nurse practitioners and others with the authority to prescribe. This allows minors in rural settings that may not have access to a physician access to smoking cessation aids.

Page 1 line 13 and Page 2 line 5 of HB224v.A changed the age limit from 19 to 18. The intent of this change was to allow the Alaska Tobacco Quit Line to provide smoking cessation products to kids 18 and older. *A small conforming amendment in House Finance needs to be considered to fully achieve this (changing the age from 19 to 18 in two places).*

dailyamerican.com/da-ot-tobacco-products-may-fool-some-20110324,0,6985965.story

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Tobacco products may fool some

VICKI ROCK

Daily American Staff Writer

Somerset -

They look like mints, chewing gum, a green marking pen and bottled water. They have healthy sounding flavors including peach and apple, and they smell like fruits. They are tobacco products.

“The Washington County Health Partners Inc. created the backpack of non-tobacco items and their tobacco product look-alikes to show schools and legislators what the very ingenious tobacco people are doing to market to our youth,” said Clara Hinton, Somerset County tobacco educator. She is also on the executive coalition of the Washington County Health Partners Inc.

There is Camel Snus, a spitless tobacco product, that comes in flavors. The package looks like a cell phone or a container of mints. Skoal cut tobacco’s package also looks like mints or beef jerky. Ariva and Stonewall dissolvable tobacco products look like breath mints. White Owl Blunts in flavors including grape and strawberry look like the marking pen. Revved Up, a caffeinated energy dip, looks like mints. NicLite, a nicotine water sold as a homeopathic product, looks like a small bottle of regular water.

“This is one you won’t guess,” Hinton said. “It looks like a single packaged alcohol wipe. It blew me away. It is Nicogel. A kid could sit in class and the teacher would think he’s using a sanitizing gel and he is getting a fix in class.”

The dissolvable tobacco products contain two milligrams of nicotine, which is slightly higher than a cigarette.

“Little kids can overdose on just 10 milligrams,” she said. “This is serious stuff.”

The “What’s in Your Child’s Backpack” educational tool kit was developed as a regional effort across 10 counties.

“Most of these products are under \$3, easy to hide, and look, taste and smell like candy,” Lee Rutledge-Falcione, director of Washington County Health Partners Inc., said in a written statement. “Aggressive marketing and development of these new products is promoting the use of smokeless products and putting our youth at risk. It is very important that tobacco use prevention education continues, even in

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this tight budget year.”

Tobacco companies spend \$534 million to market their products in Pennsylvania, according to the Washington County Health Partners. Each year 18,500 Pennsylvania young people become new daily smokers.

Adults are also using the products, which cost much less than cigarettes, Hinton said. She teaches a smoking cessation class at Somerset Hospital and many of the adults in the class had already seen all the tobacco products.

“Pennsylvania is sadly the only state that does not have a tax or user-fee on other tobacco products,” she said. “Thirty percent of all teens who try nicotine products get addicted. It is a drug. It works on the brain. It has a permanent effect on the structure of the brain. We know kids are buying it — it’s affordable and it’s available and more products are coming out. Parents and teachers need to be aware because they may think something’s harmless and it’s not. Young people already know about it.”

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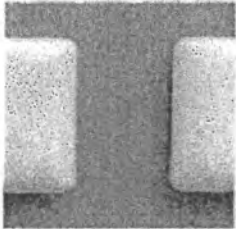


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Anti-Smokers Give Nicotine Gum to 14 year old, Child Overdoses

Posted by vapor in [Buzz](#), [News](#), [Other Topics](#) on 07 21st, 2009 | [no responses](#)

A 14-year-old boy was hospitalised after overdosing on nicotine gum handed out at school, it [Share](#) emerged today.

Aiden Williams is thought to have chewed up to 45 sticks of the gum before collapsing in the playground at Menzies High School Science College in West Bromwich, West Midlands.

Anti-smoking advisers from Sandwell Council's Drug Education, Counselling and Confidential Advice (Decca) gave the gum to another boy after the school raised concerns about that pupil's smoking habit.

But the boy, a friend of Aiden, passed it on and Aiden was taken to Sandwell General Hospital with stomach pains on July 8 after bingeing on the gum.

He was kept in overnight for observation and discharged the following day.

About the Virginia Foundation for Healthy Youth:

Established by the Virginia General Assembly, the **Virginia Foundation for Healthy Youth** was formerly known as the Virginia Tobacco Settlement Foundation. The Foundation is responsible for statewide efforts to prevent and reduce youth tobacco use and childhood obesity. Since the Foundation began its work in 2001, teen smoking in Virginia has been almost cut in half.

The Virginia Foundation for Healthy Youth directly reaches more than 141,000 children through classroom-based prevention programs in hundreds of public schools, after-school programs, community centers, daycares and prevention programs statewide. The Foundation's award-winning "Y do u think" marketing campaign delivers prevention messages to 600,000 children annually through TV and radio ads and Internet content.

The Foundation is funded through a portion of Virginia's share of the 1998 Master Settlement Agreement (MSA).

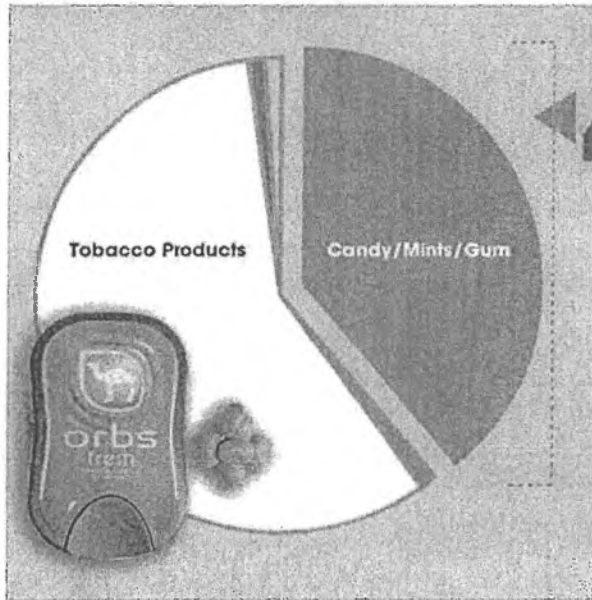
For more information about the Virginia Foundation for Healthy Youth, please see our brochure at HealthyYouthVA.org/pdf/HealthyYouthBrochure_lores.pdf.

###



Virginia Survey on New Tobacco Products

Virginia youth collected 2,433 surveys from the general public from May 2009 to June 2010. These opinion surveys assessed whether the new smokeless and spitless tobacco products are mistakenly perceived as candy or mints because of their packaging and flavoring. The facts featured below are major findings from the survey. Please visit meltdownva.com for more survey findings.



42% OF TEENS THOUGHT CAMEL ORBS WERE **CANDY, MINTS OR GUM** BASED ON ITS PACKAGING.



81% OF RESPONDENTS BELIEVED THAT **WINTERGREEN**, A SMOKELESS TOBACCO PRODUCT FLAVOR, WAS ASSOCIATED WITH CANDY, GUM OR MINTS.

53% OF RESPONDENTS BELIEVED THAT **FROST**, A SMOKELESS TOBACCO PRODUCT FLAVOR, WAS ASSOCIATED WITH CANDY, GUM OR MINTS.



28% OF TEENS WHO **DO NOT CURRENTLY USE TOBACCO** SAID THEY WOULD TRY CAMEL ORBS FRESH BASED ON ITS PACKAGING.



Some Recent Media Reports about Camel Orbs:

Richmond Times-Dispatch, May 7, article about Va. Foundation for Healthy Youth survey:

http://www2.timesdispatch.com/rtd/business/local/article/B-TOBA07_20100506-210802/342684/

New York Times, April 19, article about Camel Orbs controversy:

<http://www.nytimes.com/2010/04/19/business/19smoke.html>

The Columbus Dispatch, May 2, article about Sen. Brown wanting Camel Orbs taken off market:

http://www.dispatch.com/live/content/local_news/stories/2010/05/02/brown-wants-candylike-tobacco-taken-off-market.html?type=rss&cat=&sid=101

Convenience Store News, May 3, article about RJ Reynolds Tobacco's focus on new smokeless tobacco products

http://www.csnews.com/csn/cat_management/tobacco/article_display.jsp?vnu_content_id=1004088365&imw=Y

The Colbert Report, April 28, humorous satire about Camel Orbs:

<http://www.colbertnation.com/the-colbert-report-videos/308747/april-28-2010/cheating-death---tobacco-mints--breast-milk---hallucinogens>



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Many teens mistook smokeless tobacco products for candy

One out of three teenagers younger than 18 mistakenly identified a new type of smokeless tobacco product as candy or gum in a survey conducted by a Virginia tobacco-prevention group.

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tweets

Conducted last year by student volunteers with the Virginia Foundation for Healthy Youth, the survey asked about 1,400 people, including 728 younger than 18, to identify package images for several types of novel, smokeless tobacco products, along with package images of conventional mints and gums.

tweet



About 39 percent of survey participants younger than 18 identified Camel Orbs as mints or gum.

About 39 percent of the people younger than 18 identified Camel Orbs as mints or gum.

Camel Orbs are a pelletlike type of oral tobacco that dissolves in the mouth, delivering a dose of nicotine to the user.

Developed by R.J. Reynolds Tobacco Co., the nation's second-largest cigarette maker, Camel Orbs are part a wider trend in the tobacco industry to introduce new smokeless products to the market as cigarette sales have declined and as indoor smoking bans become more common.

The smokeless products have been criticized by health officials and tobacco-control advocates, who say they appear too much like candy and pose a poison risk to young children.

The U.S. Food and Drug Administration is planning to review dissolvable tobacco products, and U.S. Sen. Frank R. Lautenberg, D-N.J., last month urged the agency to pull the products from stores pending more study.

The results of the survey indicate that packaging of the products alone may appeal to youth, said Danny Saggese, director of marketing for the Virginia Foundation for Healthy Youth.

"It poses a significant risk to youth and raises the possibility of them not only using these products, but using them in places where smoking is now prohibited, and potentially becoming nicotine addicts," he said.

Of the teenagers younger than 18 surveyed, 28 percent said they would try Camel Orbs based on packaging alone.

Camel Orbs are not available in Virginia, said David Howard, a spokesman for Winston-Salem, N.C.-based Reynolds. The company is test-marketing the product in Columbus, Ohio; Indianapolis; and Portland, Ore.

Howard said Camel Orbs are sold behind the shelf along with other tobacco products.

"They are clearly tobacco products," he said. "Their sale is age-restricted. It is illegal to sell them to minors. The packages carry the same warnings as other smokeless tobacco products." Starting late next month, the FDA will require smokeless tobacco products to have warning labels that cover one-third of the front and back of the packages, Howard said.

Christine Hou, a senior at the Maggie L. Walker Governor's School, said she thinks the novel smokeless products are not widely known among teens, "but it is something [tobacco companies] are putting out there, which is scary."

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FDA ruling clears tobacco lozenges for sale

By Associated Press

Posted March 23 at 1:31 p.m.

Tobacco maker Star Scientific Inc. said Wednesday that the Food and Drug Administration has informed it that two of its dissolvable tobacco lozenges aren't covered by the law regulating tobacco, clearing the way for them to be marketed.

The small Virginia company, which has sold tobacco products that dissolve in the user's mouth since 2001, said the FDA's Center for Tobacco Products say that its Ariva-BDL and Stonewall-BDL products aren't subject to regulation.

The news drove Star's stock up 33 cents, or 9 percent, to \$3.95.

Star Scientific had asked the FDA to certify the lozenges as "modified risk" tobacco products under a 2009 law, making itself the test case for a big issue of whether the agency would allow certain products to be marketed as less harmful than cigarettes.

The company says the lozenges contain “below detectable levels” of certain cancer-causing chemicals found in tobacco and its smoke. The tablets contain tobacco’s addictive component, nicotine. Star Scientific has said its method of tobacco cultivation and preparation creates tobacco leaves with low levels of some carcinogens.

How the FDA handles “modified-risk” products is being closely watched by the public health community and bigger tobacco companies, which are looking for new products to sell as they face declining cigarette demand.

But Star Scientific said the agency’s notices from Dr. Lawrence Deyton, the center’s director said, “At this time, only cigarettes, cigarette tobacco, smokeless tobacco and roll-your-own tobacco are subject” to the law and that based on the company’s submissions, the products are not subject to regulation.

In a statement Wednesday, the FDA said it recognizes there are uncertainties whether nicotine-containing products derived from tobacco should be regulated as drugs or tobacco products. The agency added that it is considering its legal and regulatory options regarding these products.

Star Scientific had believed the products fell under the jurisdiction of the Center for Tobacco Products, and the company was somewhat surprised by the agency’s determination, spokeswoman Sara Troy Machir said in an interview with The Associated Press.

However, the distinction may come in how the product is made.

“Yes they are absolutely tobacco products under the definition, but when we get into the manufacturing process that’s where we are hamstrung because it’s absolutely proprietary information,” Machir said.

The FDA still must address the issue of dissolvable tobacco. By next March, its scientific advisory panel must complete a report and recommendations on the products being sold by Star and other tobacco companies. The agency also has expressed concerns that dissolvable products contain a lot of nicotine and could be particularly appealing to kids and young adults.

R.J. Reynolds, which is owned by Reynolds American Inc. in Winston-Salem, N.C., is test-marketing dissolvable, finely milled tobacco tablets, strips and a toothpick shape under the names Camel Orbs, Camel Strips and Camel Sticks. Richmond-based Altria Group Inc., owner of the nation’s largest tobacco company, Philip Morris USA, is test marketing wooden sticks coated with finely milled tobacco under the top-selling Marlboro brand in Kansas.

Read more about the topics in this post: [FDA](#), [Tobacco lozenges](#), [Tobacco products](#)

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Tobacco Company's New, Dissolvable Nicotine Products Could Lead to Accidental Poisoning in Infants and Youth

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For immediate release: Monday, April 19, 2010

Boston, MA—A tobacco company's new, dissolvable nicotine pellet--which is being sold as a tobacco product, but which in some cases resembles popular candies--could lead to accidental nicotine poisoning in children, according to a new study from the Harvard School of Public Health (HSPH), the Northern Ohio Poison Control Center, the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA). The researchers also say the candy-like products could appeal to young people and lead to nicotine addiction as well.

The study appears in an advance online edition of the journal *Pediatrics* on April 19, 2010 and will appear in a later print issue.

In 2009, the R.J. Reynolds Tobacco Company launched a dissolvable nicotine product called Camel Orbs, which according to the company's promotional literature contains 1 mg nicotine per pellet and is flavored with cinnamon or mint. The company also introduced Camel Strips (to contain 0.6 mg nicotine per strip) and Sticks (to contain 3.1 mg nicotine per strip).



It appears that the product is intended as a temporary form of nicotine for smokers in settings where smoking is banned. However, the potential public health effect could be disastrous, particularly for infants and adolescents, said Professor Gregory N. Connolly, lead author of the study and director of the Tobacco Control Research Program at HSPH.

Ingestion of tobacco products by infants and children is a major reason for calls to poison control centers nationwide. In 2007, 6,724 tobacco-related poisoning cases were reported among children five years of age and under. Small children can experience nausea and vomiting from as little as 1 mg of nicotine.

“This product is called a ‘tobacco’ product, but in the eyes of a 4-year-old, the pellets look more like candy than a regular cigarette. Nicotine is a highly addictive drug and to make it look like a piece of candy is recklessly playing with the health of children,” said Connolly.

The researchers computed, based on median body weight, how much nicotine ingestion would lead to symptoms of poisoning in children: A one-year-old infant could suffer mild to moderate symptoms of nicotine poisoning by ingesting 8 to 14 Orbs, 14 Strips or 3 Sticks; ingesting 10 to 17 Orbs, 17 Strips or 3 to 4 Sticks could result in severe toxicity or death. A four-year-old child could have moderate symptoms by ingesting 13 to 21 Orbs, 14 Strips or 4 Sticks and could suffer severe toxicity or death by consuming 16 to 27 Orbs, 27 Strips or 5 Sticks. The researchers report that a poison control center in Portland, Oregon, a test market for Orbs, reported a case in which a three-year old ingested an Orbs pellet.

R.J. Reynolds claims that Orbs packaging is “child resistant,” but the researchers say adults could unknowingly leave the pellets out in the open where children could easily access them. The researchers also say that the candy-like appearance and flavoring and ease-of-use of the product could appeal to children.

“Unintentional Childhood Poisonings Through Ingestion of Conventional and Novel Tobacco Products,” Gregory N. Connolly, Patricia Richter, Alfred Aleguas Jr., Terry F. Pechacek, Stephen B. Stanfill, Hillel R. Alpert, *Pediatrics*, online April 19, 2010.

photo: Andrew Seidenberg

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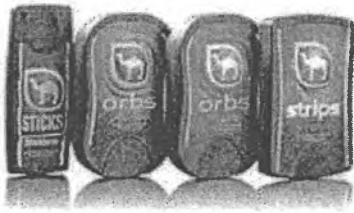
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R.J. Reynolds Preps Dissolvable Tobacco

Oct 8, 2008

- Mike Beirne



R.J. Reynolds Tobacco will dive deeper into the smokeless category next year by nationally distributing Camel Snus and introducing in test markets dissolvable alternatives to cigarettes called Camel Sticks, Camel Orbs and Camel Strips.

The new products, grouped under the Camel Dissolvables banner, are smokeless and spit-free; they are made from finely milled tobacco and held together with food grade binders. The products will launch in the first quarter in Columbus, Ohio, Portland, Ore., and Indianapolis. The Camel Dissolvables Sticks can be placed in the mouth like a loophick or broken into a piece that is placed between the upper lip and gum, where it dissolves after 10 minutes. RJR recommends the same usage for Orbs, which is a pellet that lasts about 15 minutes, and Strips, which dissolve after about 3 minutes.

The three forms of smokeless tobacco will be packed in plastic, child-resistant packaging. Strips will come in Fresh mint flavor and Sticks in Mellow; Orbs will be available in both flavors. Camel Dissolvables deliver between 0.6 to 3.1 milligrams of nicotine, while cigarette smokers typically inhale about 1 mg per cigarette.

Advertising is still being developed, but a company rep said print ads, direct marketing, sampling (at bars and nightclubs) and POP will support. The Reynolds American unit currently has a company policy that restricts advertising cigarettes in consumer publications. That self-imposed ban does not apply to other tobacco products and trade publications. Gyro, Philadelphia, and Agent 16, New York, are the lead agencies.

By introducing the products in select test markets, RJR hopes to find out which forms of Camel Dissolvables are the most popular, and how demographics or usage determines preferences. The product concept partly evolved from consumer feedback, following a test of Camel Snus in 2006. Camel Snus is also spitless, but some smokers said they didn't care for loose tobacco or pouched smokeless products, particularly ones they had to remove from their mouth after use.

The smokeless category has been a magnet for cigarette makers with sales averaging 5% to 7% annually, per various estimates. Although there is a growing body of literature contending that smokeless tobacco is less harmful than smoking cigarettes, a 2007 study by the American Cancer Society found that male smokers who switched to smokeless had higher death rates than men who quit or never smoked. Camel Dissolvables will not be positioned as a smoking cessation or reduced risk product, per the company.

"The consumer should be aware of the information available about the potential risks of each tobacco product. There are none that are safe and there are none that are without risks," said RJR rep David Howard.

In addition to introducing the new dissolvable alternatives, RJR will expand distribution for Camel Snus (pronounced snooze) by offering retailers countertop and under the counter refrigerator units to keep the product cold.

In 2006, Reynolds American acquired Conwood, the second largest maker of smokeless products in the U.S. Philip Morris USA's smokeless products include Marlboro Snus and Marlboro Snuff. Altria, Philip Morris' parent company, expects to close by January on its purchase of UST, the holding company for U.S. Smokeless Tobacco, the largest smokeless product company and maker of Skoal and Copenhagen.

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Early Nicotine Use May Lead To Lasting Addiction, Study Finds

ScienceDaily (Sep. 10, 2003) — Durham, N.C. -- People who begin smoking in their teens may be particularly vulnerable to long-term nicotine addiction, according to an animal study conducted by Duke University Medical Center pharmacologists.

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In their study, the researchers compared the amount of nicotine self-administered by adolescent rats to the amount used by animals first exposed during adulthood.

The adolescents' heavier nicotine use persisted into adulthood, the team reports in the September 2003 issue of the journal Psychopharmacology.

"The results indicate that early nicotine exposure can leave a lasting imprint on the brain," said Edward Levin, Ph.D., professor in the

psychiatry and behavioral sciences department at Duke University Medical Center and a researcher at Duke's Nicotine Research Center. The study was supported by grants from the National Institute on Drug Abuse and the National Institute of Mental Health.

Most tobacco use begins during adolescence, Levin pointed out. Among smokers in the United States, 88 percent smoked their first cigarette before the age of 18 and 60 percent before age 14.

"The great majority of tobacco addiction begins during adolescence, yet little is known about differential effects of nicotine in adolescents versus adults," Levin said.

Other studies have suggested that smokers who take up the habit at a young age are more likely to continue to smoke, Levin said. However, researchers find it difficult to assess the underlying cause of an association between age and addiction in humans, he added, because the same factors that make people prone to nicotine addiction may also encourage them to begin using the drug at a young age.

To clarify the basis of early nicotine addiction, Levin and colleagues tested for a link between the age of initial nicotine use and addiction in female rats in the laboratory. The researchers provided some rats with nicotine at 40 to 46 days of age, while others were provided nicotine only after 70 to 76 days, once they had reached adulthood.

The adolescent rats self-administered significantly more nicotine than did adults, the researchers found. In a test for chronic nicotine use in the rats during a period of four weeks, animals that began using nicotine during adolescence continued to use more of the drug even after they became adults.

The results suggest that people who begin using nicotine during adolescence may be at greater risk for long-lasting addiction, the team reports.

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"The brain continues to develop throughout the teenage years," Levin said. "Early nicotine use may cause the wiring of the brain to proceed inappropriately. In essence, the brains of adolescents who use tobacco may be sculpted around an addiction to nicotine."

Other Duke participants in the study included Amir Rezvani, Ph.D., Daniel Montoya, Jedd Rose, Ph.D., and H. Scott Swartzwelder, Ph.D., also of the Durham Veterans Administration Hospital.

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Early Nicotine Use May Lead To Lasting Addiction, Study Finds

Durham, N.C. -- People who begin smoking in their teens may be particularly vulnerable to long-term nicotine addiction, according to an animal study conducted by Duke University Medical Center pharmacologists. The study emphasizes that the age at which individuals begin using nicotine can have a major physiological impact to encourage later use of the drug.

In their study, the researchers compared the amount of nicotine self-administered by adolescent rats to the amount used by animals first exposed during adulthood. Young rats showed nearly double the rate of nicotine use compared with those initially exposed as adults, the study found.

The adolescents' heavier nicotine use persisted into adulthood, the team reports in the September 2003 issue of the journal *Psychopharmacology*.

"The results indicate that early nicotine exposure can leave a lasting imprint on the brain," said Edward Levin, Ph.D., professor in the psychiatry and behavioral sciences department at Duke University Medical Center and a researcher at Duke's Nicotine Research Center. The study was supported by grants from the National Institute on Drug Abuse and the National Institute of Mental Health.

Most tobacco use begins during adolescence, Levin pointed out. Among smokers in the United States, 88 percent smoked their first cigarette before the age of 18 and 60 percent before age 14. Adolescence is also a crucial period for the brain, he said, in which the final phase of neuron development occurs.

"The great majority of tobacco addiction begins during adolescence, yet little is known about differential effects of nicotine in adolescents versus adults," Levin said.

Other studies have suggested that smokers who take up the habit at a young age are more likely to continue to smoke, Levin said. However, researchers find it difficult to assess the underlying cause of an association between age and addiction in humans, he added, because the same factors that make people prone to nicotine addiction may also encourage them to begin using the drug at a young age.

To clarify the basis of early nicotine addiction, Levin and colleagues tested for a link between the age of initial nicotine use and addiction in female rats in the laboratory. The researchers provided some rats with nicotine at 40 to 46 days of age, while others were provided nicotine only after 70 to 76 days, once they had reached adulthood. Rats could self-administer a dose of nicotine by pressing a lever.

The adolescent rats self-administered significantly more nicotine than did adults, the researchers found. In a test for chronic nicotine use in the rats during a period of four weeks, animals that began using nicotine during adolescence continued to use more of the drug even after they became adults.

The results suggest that people who begin using nicotine during adolescence may be at greater risk for long-lasting addiction, the team reports.

"The brain continues to develop throughout the teenage years," Levin said. "Early nicotine use may cause the wiring of the brain to proceed inappropriately. In essence, the brains of adolescents who use tobacco may be sculpted around an addiction to nicotine."

Other Duke participants in the study included Amir Rezvani, Ph.D., Daniel Montoya, Jed Rose, Ph.D., and H. Scott Swartzwelder, Ph.D., also of the Durham Veterans Administration Hospital.

Editor's Note: The original news release can be found [here](#).

This story has been adapted from a news release issued by [Duke University Medical Center](#).

The Earlier You Light Up, the Harder to Quit

Early nicotine use linked to long-term addiction

FRIDAY, Sept. 12 (HealthDayNews) -- If you started smoking as a teenager, you may be particularly vulnerable to long-term nicotine addiction.

An animal study by Duke University Medical Center researchers found the age at which rats begin using nicotine can have a major physiological impact to encourage later use of nicotine.

The researchers compared the amount of nicotine self-administered by adolescent rats to the amount used by rats first exposed to nicotine during adulthood. The study found the young rats used nearly double the rate of nicotine compared to the adult rats. The young rats' heavy nicotine use persisted into adulthood.

The study appears in the September issue of *Psychopharmacology*.

"The results indicate that early nicotine exposure can leave a lasting imprint on the brain," researcher Edward Levin, a professor of psychiatry and behavioral sciences, says in a news release.

He notes that among smokers in the United States, 88 percent smoked their first cigarette before the age of 18 and 60 percent took their first puff before age 14.

"The great majority of tobacco addiction begins during adolescence, yet little is known about differential effects of nicotine in adolescents versus adults," Levin says.

"The brain continues to develop through the teenage years. Early nicotine use may cause the wiring of the brain to proceed inappropriately. In essence, the brains of adolescents who use tobacco may be sculpted around an addiction to nicotine," Levin adds.

More information

Here's where you can learn more about [nicotine addiction](#).

--Robert Preidt

SOURCE: Duke University, news release, Sept. 8, 2003

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