

Altria Supports Prompt Enactment of Vermont Senate Bill No. 86 Increasing the Legal Age for Buying and Using Cigarettes, Electronic Cigarettes, and Other Tobacco Products

Altria supports increasing the age for sales, use and possession of tobacco products to twenty-one found in S. 86. We encourage the Vermont State Senate to act without delay.

Our companies have long supported legislation to prevent underage access to tobacco products. We have advocated for strong minimum age laws in all U.S. jurisdictions. We lobbied for federal legislation enacted in 2009 empowering FDA to comprehensively regulate tobacco products – including provisions specifically intended to reduce underage use.¹ And, most recently, we played a leadership role in advancing legislation in all states extending existing minimum age statutes to cover emerging product categories like e-vapor.

While underage tobacco use of conventional tobacco products is at the lowest levels in a generation,² the use of e-vapor products among twelve- to seventeen-year-olds has increased alarmingly in the past year. Citing data showing increases of e-vapor use of 80% among high schoolers and 50% among middle schoolers, FDA Commissioner Scott Gottlieb has characterized this trend as an “epidemic.”³ The U.S. Surgeon General has reached the same conclusion.⁴

In light of the FDA’s call to address this issue, we believe the time has come to enact legislation raising the minimum age for all tobacco products to twenty-one. We are supporting this step because we believe it is the most effective step available to reverse rising underage e-vapor rates. Data shows that youth under eighteen get tobacco products – including e-vapor – primarily through “social access,” that is, from friends or siblings who are eighteen or older.⁵ Approximately 80% of high school students in the U.S. turn eighteen years old before they graduate.⁶ By raising the minimum age to twenty-one, no high school student should be able to purchase tobacco products legally.

We are sensitive to the argument that young people eighteen to twenty are treated as adults in our society for many important purposes – voting, paying taxes, and serving in our military, to name just a few. But the FDA’s recent call to action on underage vapor use has persuaded us that the time has come to take this step. A minimum age of twenty-one will put

¹ <https://www.fda.gov/TobaccoProducts/GuidanceComplianceRegulatoryInformation/ucm246129.htm>.

² http://monitoringthefuture.org/pressreleases/15cigpr_complete.pdf.

³ <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm620185.htm>.

⁴ <https://e-cigarettes.surgeongeneral.gov/getthefacts.html>.

⁵ <https://www.nap.edu/read/18997/chapter/7#143>.

⁶ <https://tobacco21.org/wp-content/uploads/2019/01/T21-Fact-Sheet-1-2-2019.pdf>.



tobacco products and electronic cigarettes in line with alcoholic beverages, which have been subject to state minimum age laws of twenty-one for decades, and in line with cannabis as well, in every state that has legalized it recreationally.

We believe this policy change is important for preserving the reduced harm potential of non-combustible technologies like e-vapor. There is a growing public health consensus that products that do not burn and produce no smoke are significantly less harmful than conventional cigarettes.⁷ While nicotine is addictive, it is the smoke from conventional cigarettes – not the nicotine – that leads to most tobacco-related harm.⁸ New and emerging technologies like e-vapor and heat-not-burn tobacco products offer tremendous promise for reducing harm. But FDA has made clear that this harm reduction future cannot be fully achieved without doing more to reverse underage e-vapor use rates.

For these reasons, we join with others calling for a minimum age of twenty-one to purchase tobacco products, and we therefore encourage the Vermont State Senate to promptly enact this law.

⁷ See, e.g., Mitchell Zeller et al., *The Strategic Dialogue on Tobacco Harm Reduction: A Vision and Blueprint for Action in the US*, 18 *Tobacco Control J.* 324, 325 (2009); Dorothy K. Hatsukami et al., *Developing the Science Base for Reducing Tobacco Harm*, 9 *Nicotine & Tobacco Res.* S537, S546 (2007).

⁸ “[W]hat primarily causes death and disease from tobacco use isn’t the nicotine in these products. It’s the act of lighting tobacco on fire to free that drug for inhalation.” FDA Commissioner Gottlieb, <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm620185.htm>.

