SB 2688 SD1 – RELATING TO THE SALE OF E-LIQUID

Chair Keith-Agaran, Vice Chair Shimabukuro, and Members of the Committee:

The University of Hawai‘i Cancer Center strongly supports this bill.

The UH Cancer Center is one of only 69 institutions in the United States that hold the prestigious National Cancer Institute (NCI) designation, and is the only NCI-designated center in the Pacific. The NCI designation provides cancer researchers in Hawai‘i with greater access to federal funding and research opportunities. More importantly, it gives the people of Hawai‘i and the Pacific region access to many innovative and potentially life-saving clinical trials without the necessity of traveling to the mainland.

Our passion at the UH Cancer Center is to be a world leader in eliminating cancer through research, education, and improved patient care. Because tobacco consumption is a leading preventable cause of cancer, we take all issues related to tobacco in Hawai‘i very seriously. Whereas the UH Cancer Center always has supported strong tobacco control measures in Hawai‘i, the recent emergence of electronic smoking devices (e-cigarettes) presents new challenges for tobacco control and tobacco-related legislation. To address these challenges, UH Cancer Center researchers have been actively involved in conducting studies about cigarette smoking and e-cigarette use among adolescents in Hawai‘i, a vulnerable population for initiation of both cigarette smoking and e-cigarette use.

The UH Cancer Center perspective on electronic smoking devices is informed by data recently obtained from Hawaii adolescents and young adults who are participants in original research conducted by our own faculty. Research conducted in Hawai‘i high schools by Thomas Wills, PhD, has confirmed that rates of e-cigarette use by Hawai‘i adolescents are at least double the rate of e-cigarette use observed in studies of mainland adolescents. Furthermore, his study published in the peer-reviewed journal Pediatrics clarified a reason why e-cigarette use is growing nationally among teens, as his data suggest that e-cigarettes may be operating to recruit lower-risk adolescents to smoking. And recently Pallav Pokhrel, PhD, and Thaddeus Herzog, PhD, published
on the topic of e-cigarettes and motivation to quit smoking. Drs. Pokhrel and Herzog also assessed differences between smokers who used e-cigarettes to quit versus those who used FDA-approved nicotine replacement therapy. Additionally, these researchers have published on the effects of e-cigarette marketing on harm perceptions, as well as e-cigarette use expectancies and their impact on e-cigarette use among young adults.

This research is vital to gaining an evidence-based understanding of what drives acceptance of this emerging technology, what users believe regarding its safety, and what the consequences are for adolescents, whose brains are particularly susceptible to nicotine.

We have also learned that the potential for electronic smoking devices to be used as drug delivery devices for substances other than nicotine exists. Electronic smoking devices and the various liquids offered on the market are attractively packaged so as to be enticing to adolescents and children. Not only is nicotine potentially poisonous, the liquids in the e-liquid containers can also pose serious health risks to children. Packaging e-liquid in child-resistant packages and placing warning labels on those packages would reduce potential health risks to children.

We respectfully urge you to pass this bill.