



European Pharmaceutical Union

EPU Response to Consultation on the Green Paper:

“Towards a Europe free from tobacco smoke: policy options at EU level”

May 2007

Contact Person:

Jaka Brumen
Director of Professional Affairs
e-mail: jaka.brumen@epu.eu

European Pharmaceutical Union:
22 rue Lamartine
21000 Dijon - France
www.epu.eu

About the European Pharmaceutical Union (EPU)

The European Pharmaceutical Union (EPU) is a non-profit, non-political European organisation. The EPU was established to bring European pharmacy together. At the time EPU was established, there was no overall organisation representing all European pharmacists. Several different European pharmaceutical organisations did exist but they were all specialised in a particular field. The creators of EPU felt that a forum was needed to fill this gap.

The idea behind EPU is to bring all European pharmacists together. Encouraging discussion and dialogue between different players in the European pharmacy, makes it easier to achieve consensus on issues that affect European healthcare, European pharmacy and European pharmacists.

EPU aims to:

- help to unify and improve everything that concerns European pharmacy,
- advance general society in order to improve all that is, directly or indirectly, concerned with health, from a European pharmacy perspective and within the competences of the organisation and,
- in general, any actions directly or indirectly connected to these objectives, or any similar or related actions, that are likely to improve or develop the organisation.

EPU consists of individual members and association members. All members have a say in the running of the organisation and have the right to benefit fully from the organisation. Together, members of the association discuss and form policies and opinions of the association, and then move to influence the way European pharmacy evolves.

1. Which of the two approaches suggested in Section IV would be more desirable in terms of its scope for smoke-free initiative: a total ban on smoking in all enclosed public spaces and workplaces or a ban with exemptions granted to selected categories of venues? Please indicate the reason(s) for your choice.

The EPU supports a total ban on smoking, without any exceptions, only this would ensure the complete protection of employees and non-smokers from the harmful effects of smoking. It is difficult to make people stop smoking; this is why it is necessary to use all actions necessary to decrease the harmful effects of smoking on the non-smokers and on smokers themselves. It is about time that European states and the EU stop dragging their feet and takes the necessary action to completely ban smoking. There is no reason not to since a total ban can no longer be considered unpopular. 80% of European citizens are in favour of a ban as stated by Eurostat.

The longer European politicians take to restrict smoking the more money will be wasted on unnecessary healthcare costs. It is the task of politicians all around the world including Europe to make decisions for the long-term benefit of the people they represent. By not banning smoking they are doing a disservice to the majority of people that elected them to their positions.

The examples set by Ireland, Italy, Malta and Sweden should be followed by all European countries.

2. Which of the policy options described in Section V would be the most desirable and appropriate for promoting smoke-free environments? What form of EU intervention do you consider necessary to achieve the smoke-free objectives?

The EPU feels that a strategy of increasing pressure should be implemented. Essentially what this means is to start of with the more flexible options such as option 3 and gradually move to more restrictive options such as 4 and 5 depending on the compliance and successes achieved by each European country. Sharing experiences and best practices amongst European countries would be the best and most open option. However a certain realism must be held on to and if progress is not made then the more drastic action of options 4 and 5 should be taken. The evidence shows that health campaigns in tobacco simply are not cost effective. The money used in such campaigns should be more effectively used. An anti-smoking campaign aimed at smokers who have no intention of quitting is not going to work. Instead anti-smoking campaigns should provide information to those who wish to quit but are having difficulty in doing so. This can be done for example by informing such people about the different options available and from where to get help e.g. the local pharmacy. Any campaigns should also be aimed at preventing smoking. Trying to “demonise” smoking from an early age should be one of the methods used.

3. Are there any further quantitative or qualitative data on the health, social or economic impact of smoke-free policies which should be taken into account?

The EU should take its own statistics into use. Namely, the substantial economic burden that tobacco consumption causes the EU's economy should be taken into account. A conservative estimate of these costs falls between €8-130 billion a year, or between 1.04-1.39 % of the region's Gross Domestic Product for 2000. The true costs are undoubtedly higher, and will continue to escalate if appropriate measures are not taken. Smokers, but also non-smokers, governments and employees have to cover these costs. Empirical evidence shows that tobacco consumption represents a net burden for state budgets even after accounting for collected tobacco tax and savings in social security payments due to premature mortality among smokers. Whilst governments can't force people to stop smoking it can try to educate people as well as make it difficult for them to smoke like with a total ban on smoking in all enclosed public spaces and workplaces.

(Source: European Commission. Tobacco or health in the European Union - Past, present and future. 2004 October)

4. Do you have any other comments or suggestions on the Green Paper?

The EU should take a bigger step in promoting effective ways on quitting smoking. The EU should take notice of and encourage the efforts of pharmacists providing custom made "quit smoking" packages for individuals. Quitting smoking is not an easy process and can take three months. It is very difficult to successfully quit by using Nicotine Replacement therapy (NCT) instead. Instead it has to be done gradually starting with a suitable dose of NCT to replace the cigarettes smoked and then gradually over a suitable timeframe reduce the dose of NCT. Also psychological support can be provided by the pharmacists in the form of regular phone calls and meetings and by having an appropriate sponsor.

In addition to this NCT should be available in bars, restaurants and other places where cigarettes are usually sold. However the appropriate authorities must emphasize that a suitable "quitting" plan must be developed first e.g. with a local pharmacist, before just randomly buying NCT products.

The EU could also encourage member states to subsidize or reimburse such services. Whilst this would be a cost in the short term in the long run governments would gain a huge return on investment.

In addition to this the EU should continue to emphasize on prevention. Aiming campaigns or projects at young people to prevent them from smoking would be more effective than trying to make them quit. Enforcement of laws prohibiting sale of tobacco to minors should be increased.

This paper represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumer Protection DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.