SCIENTIFIC COMMITTEE ON EMERGING AND NEWLY IDENTIFIED HEALTH RISKS (SCENIHR)

Request for a scientific opinion on

Health Effects of Smokeless Tobacco Products

1. Background

The prohibition on the marketing of tobacco for oral use (moist snuff, oral tobacco) was introduced in 1992 (Directive 92/41/EEC) and maintained in Article 8 of the recast Tobacco Products Directive (2001/37/EC).

The rationale behind the ban was to protect public health by preventing people from starting to use a new tobacco product and to ensure proper functioning of the Internal Market since three Member States had already adopted such bans.

Sweden, where the use of oral tobacco called snus has been widespread since the 1970s, was granted derogation from the ban in its Act of Accession. Outside the EU, oral tobacco is used on a relatively wide scale in Norway, in the United States and in the Indian subcontinent.

The Directive did not prohibit the marketing of other smokeless tobacco products - such as chewing tobacco and nasal snuff - which had a long tradition of use in the Community and were perceived as marginal products.

The literature suggests that smokeless tobacco, including all of the above-mentioned tobacco products, is not harmless and the harm posed could vary from one product to another, depending on the production techniques and the levels of addictive, carcinogenic and other toxic substances a product contains.

Given recent developments with regard to the composition of some smokeless tobacco products and the claims that the use of smokeless tobacco could reduce harm related to other tobacco products, DG SANCO wishes to review the scientific basis for the current regulatory framework.

2. Terms of reference

In the light of most recent scientific information, the Scientific Committee is requested to answer the following questions:

1. What are the adverse health effects of smokeless tobacco products?

2. What is the addiction potential of smokeless tobacco products?

3. Does the available data support the claim that smokeless tobacco may constitute a smoking cessation aid comparable to pharmaceutical nicotine replacement products?

4. What is the impact of smokeless tobacco use on subsequent initiation of smoking?

5. Is it possible to extrapolate the information on the patterns of smokeless tobacco use, smoking cessation and initiation from countries where oral tobacco is available to EU-countries where oral tobacco is not available?

3. Deadline

June 2007