Dear Sir or Madam,

We are writing to set out Ritmeester Cigars BV's views on the Green Paper "Towards a Smoke-Free Europe: Policy options at EU level" of 30 January 2007.

Ritmeester is a Dutch cigar manufacturer which has been making cigars in Veenendaal since 1887. About 6.8 billion cigars were consumed in the European Union in 2005, which is only about 0.8% of the total consumption of tobacco products in the EU. This means that the "average" cigar smoker, an adult male aged upwards of 25, generally smokes just one or two cigars per day. There are also numerous occasional smokers, who light up the odd cigar now and then.

Ritmeester has a direct interest in the contents of the Green Paper and hereby sets out its answers to the questions contained in it.

1) Which of the two approaches suggested in Section IV would be more desirable?

We take the view that a Community initiative on smoking in public places must be proportionate and take account of both non-smokers and smokers. We believe that the best way to achieve this kind of balance between the two groups' interests is an approach where smoking is allowed in designated, well ventilated smoking areas, and banned in other areas. In our opinion, therefore, "smoke-free regulation with exemptions" of the type described in Section IV, part 2, is the most acceptable and feasible solution. We believe that exemptions should be available at least for the following: 1) testing and tasting rooms for tobacco products; 2) hotel, restaurant and catering establishments with a public area of less than 100 m²; 3) physically separated, ventilated smoking sections in other restaurant or catering establishments; 4) private clubs such as cigar clubs; 5) tasting rooms in specialist tobacco shops; and 6) permanent or temporary accommodation areas such as in prisons and retirement homes.
2) Which of the policy options described in Section V would be the most desirable and appropriate?

We take the view that good legislation can satisfy the legitimate interests of smokers and non-smokers alike. A Commission recommendation seems to us to be the most appropriate way of achieving that goal.

3) Are there any further quantitative or qualitative data which should be taken into account?

Given that the hotels and catering sector in the various Member States takes the brunt of legislation in this area, we believe that the European Commission should become actively involved in consultations with the relevant sector associations.

We believe that the possible economic and social consequences for the various sectors of the tobacco industry (cigarettes, cut tobacco and cigars), their suppliers and customers (the retail and wholesale sectors) merit more extensive research than has been devoted to them in Section II, part 2.3, of the Green Paper.

Reference 78 states that "complete elimination of tobacco smoke using ventilation is not possible". Nevertheless, we believe that the latest research into the development of efficient ventilation systems, as described in the report "Decentralised smoke displacement system using recirculation and filtration" (cited in reference 77 of the Green Paper), deserves thorough scientific assessment.

Lastly, we believe that articles in publications which argue that the health risks of passive smoking are slight, such as the recent article in the Netherlands weekly "Elsevier" (see enclosure) should also be taken into account in the assessment.

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

We support the launch of a broad discussion with the parties involved, and would very much welcome an opportunity to take part in such a discussion.

Yours faithfully,

(signed)

M.C.F.D. Leenheers
General Manager
Risks of passive smoking "slight"

Ab Klink can ban smoking in hotels and restaurants if he wants to, but he should use sound arguments: passive smoking may make your clothes stink, but dangerous it is not.

Ab Klink: Weak argument

By Simon Rozendaal

There's something to be said for the smoking ban which the Public Health Minister, Ab Klink (CDA), is keen to impose. But the health argument is the weakest link. The relationship between active smoking and ill health is undisputed, but the one between passive smoking and illness is tenuous.

The fact is, there's smoking and there's smoking.

The health risks of smoking are determined by the concentration of toxic substances which are inhaled. But the concentrations of dangerous substances in the lungs of an active smoker are between a thousand and ten thousand times greater than those in the lungs of an involuntary passive smoker.

Passive smoking is reckoned to increase the chance of contracting various illnesses (respiratory diseases, heart disease and lung cancer) by about 20-30%. That might seem a lot to a layman, but a seasoned epidemiologist shrugs his shoulders at increases of less than 100%.

Epidemiology, the science which generates this type of risk assessment, is not a "hard" science, and an increase of 20-30% can easily evaporate if a study is based on slightly different assumptions or has a slightly different structure.

Another way of looking at it is to say that a non-smoker has something like a 1% chance of getting lung cancer, and that passive smoking increases the probability to 1.2%.

By way of comparison: an active smoker, especially one who inhales, runs a ten-fold risk of contracting lung cancer. Now, that's what you call big: an increase of the order of 1 000%. Seizing on the 20-30% figure for the increased risk caused by passive smoking, fanatical opponents of smoking (the Netherlands Health Council, among others) brandish estimates that passive smoking claims the lives of several thousand Dutchmen and women every year.

It has to be said that these are not proven deaths, but purely theoretical estimates based on the said risk increase of 20-30%. They are as theoretical as the tens of thousands of deaths which fine dust is said to cause in this country every year.

To obtain a clearer picture of this type of risk, it's useful to make a comparison with other types of risk. The cigarette manufacturer Philip Morris did just that in 1996, taking out full-page advertisements to highlight scientific studies which showed that the health risks of
The dangers of passive smoking were of the same order as those associated with drinking two glasses of full-cream milk a day or regularly eating pepper or biscuits.

Predictably, all hell broke out in response, but many scientists had to grudgingly admit that there was a grain of truth in the advertisements and that the dangers of passive smoking were indeed much smaller than commonly assumed.

In fact, according to a theory known as hormesis, which continues to gain acceptance, low concentrations of toxic substances actually have a protective effect, because they stimulate the immune system. The theory says that toxic substances only become dangerous above a certain threshold. Below that threshold, they are actually good for you.

Of course, there's no denying that many people find passive smoking unpleasant and perceive it as unhealthy. Asthma and bronchitis sufferers, in particular, suffer when they come into contact with irritating, smelly tobacco smoke. But there is no evidence of a major health risk of the type associated with active smoking.

ELSEVIER, 3 March 2007
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