







House Ways and Means Committee Senate Bill 248 by Sen. Nathan Johnson Testimony by Maria Monge, MD

On behalf of:
Texas Pediatric Society
Texas Medical Association
Texas Public Health Coalition
Texas Tobacco Control Partners

May 3, 2021

Chair Meyer, Vice Chair Thierry, and committee members,

My name is Dr. Maria Monge, and I am a practicing pediatrician in Austin. Thank you for the opportunity to testify on behalf of the Texas Pediatric Society, the Texas Medical Association, the Texas Public Health Coalition, and Texas Tobacco Control Partners. We strongly support Senate Bill 248.

Texas physicians are concerned about the high rates of e-cigarette use among youth and the current and future health risks associated with that. In 2019, 27.5% of high school students in the United States and 10.5% of middle school students reported current use of e-cigarettes. In Texas, that means more than 1.2 million young people were using e-cigarettes and vaping products. According to the Texas Department of State Health Services, nearly 40% of teens have vaped at least once. E-cigarettes are the most commonly used tobacco product among teens, and have been since 2015.

Vaping exposes adolescents to a variety of health risks both in the present and in the future. First, the nicotine in these devices is not benign. Nicotine is a psychoactive drug that is easy to become addicted to, requiring additional levels of nicotine as the body becomes more tolerant. Research has shown that adolescent brains are uniquely susceptible to nicotine addiction,⁴ and nicotine exposure modifies developing brains with long-term effects into adulthood.⁵ Vaping also puts adolescents at risk for ecigarette or vaping use-associated lung injury (EVALI). In addition to nicotine, we must also be

Wang TW, Neff LJ, Park-Lee E, Ren C, Cullen KA, King BA. E-cigarette Use Among Middle and High School Students — United States, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1310–1312. DOI: http://dx.doi.org/10.15585/mmwr.mm6937e1

² Department of State Health Services. "Time to Talk?" www.dshs.state.tx.us/vaping/TimetoTalk/.

Texas Adolescent Tobacco and Marketing Surveillance Study (TATAMS). Michael & Susan Dell Center for Healthy Living. TATAMS project details available online at http://go.uth.edu/TATAMS. TATAMS follows a large, population-based cohort (n=3,907; N=491,096) of middle school and high school students in Houston, Dallas-Ft. Worth, San Antonio, and Austin.

Difranza JR, et al. Initial symptoms of nicotine dependence in adolescents. Tobacco Control. 2000,9:313-319. Difranza JR, et al. Symptoms of Tobacco Dependence After Brief Intermittent Use. Arch Pediatr Adol Med. 2007;161(7):704-710.

U.S. Department of Health and Human Services. The Health Consequences of Smoking: 50 Years of Progress. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014 (Health consequences of nicotine exposure, pages 120-122).

concerned about the multiple chemicals used in the liquid solution. These chemicals, include propylene glycol and other known carcinogens, are not safe for inhalation.

Teens who vape are more likely to progress to cigarette smoking than their peers who do not – putting them at increased risk for a variety of tobacco-related deaths. We, as a state, are aware of the harmful effects of tobacco. Texas has made major progress in addressing tobacco-related deaths. However, with the increase in e-cigarette use and the progression from vaping to smoking, it is estimated that as many as 498,000 Texas teens will die prematurely from smoking if it is not curbed. We cannot move backward in addressing tobacco-related injury and mortality.

An additional concern is the considerable risk that smoking and tobacco use become normalized once again. Since the recognition of the harmful effects of smoking and significant intervention efforts to educate youth, smoking has become an unpopular behavior among most young people. However, because e-cigarettes are not subject to the same advertising and other restrictions as tobacco, the behavior is becoming more acceptable. This is especially problematic for children who often cannot perceive the difference between electronic or traditional cigarettes.

We strongly support the provisions in SB 248 to require retailers to obtain permits and strengthen enforcement. Requiring permits for retailers and penalties for underage sales to regulate cigarette and tobacco products have been successful tools in decreasing the smoking rate among adolescents. As ecigarettes are both dangerous in their own right and because they are a gateway to other tobacco products, the regulation and enforcement mechanisms for e-cigarettes should be the same as those for tobacco products. This bill takes important steps to recognize the serious health risks of vaping and to limit youth access to e-cigarettes.

Thank you for the opportunity to provide comments on SB 248. For any questions or follow-up please contact Clayton Travis, director of advocacy and health policy, Texas Pediatric Society, at Clayton.Travis@txpeds.org.

⁶ The Toll of Tobacco in Texas. (Jan. 31, 2020). Retrieved May 21, 2020, from www.tobaccofreekids.org/problem/toll-us/texas