

FAQ's About Vaping Devices and the Smoking in Public Places Law



What are vaping devices?

Vaping devices are also known as electronic cigarettes, e-cigarettes, e-cigs, e-devices, e-pens, personal vaporizers, electronic nicotine delivery systems, vape-pens, mods, and an increasing variety of new names. Vaping devices heat a liquid solution, usually containing nicotine, to simulate the feeling of smoking. Vaping devices produce an exhaled vapor that mimics smoke. Devices can be battery-powered or rechargeable; disposable or refillable. The liquid solution is often referred to as e-juice. E-juice can contain numerous ingredients and comes in a variety of flavors and nicotine strengths. There are over 400 different brands of vaping devices and thousands of e-juice solutions. Vaping refers to the use of a vaping device. When a person inhales on a vaping device, the device heats the e-juice which produces an aerosol. This aerosol is typically referred to as “vapor.”

What are the public health concerns with vaping devices?

Vaping devices are relatively new and are largely unregulated. Their use is becoming increasingly popular. In addition to vaping devices being used to deliver highly addictive and poisonous nicotine, the vapor may expose bystanders to harmful chemicals like formaldehyde and heavy metals. Of particular concern are:

Secondhand vapor: Evidence indicates that the vapor/aerosol emitted by the use of vaping devices is a threat to public health. The aerosol produced by vaping devices can contain heavy metals, ultrafine particulate, and cancer causing agents like formaldehyde and nitrosamines.^{1,2} Vaping device emissions also contain volatile organic compounds (VOCs) and fine/ultrafine particles.³ These ultrafine particles can travel deep into the lungs and may lead to tissue inflammation.⁴ When vaping devices are used, bystanders are exposed to the toxic chemicals and carcinogens through secondhand vapor. People exposed to vaping aerosol have been found to absorb nicotine at levels comparable to people exposed to secondhand smoke.⁵ The long-term health impacts of inhaling this vapor are unknown. Vulnerable populations, including pregnant women, children and people with cardiovascular conditions, may be at elevated risk.

Unknown Substances: Vaping devices can be used to consume any liquid, including liquid THC, the active ingredient in marijuana. Users can also create their own e-juice. It is impossible to know what product is being used in a vaping device, thus exposing bystanders to unknown substances and particulates.

Rising Youth Initiation: In 2014, 26 percent of high school sophomores in Spokane County reported using a vaping device in the past 30 days. This is over twice the rate of sophomores who reported smoking a cigarette in the past 30 days in the same year.⁶ Preventing youth from addiction to nicotine is critical to continuing to drive down tobacco use. Youth are vulnerable to nicotine addiction and emerging research indicates that the use of vaping devices by youth may ultimately lead them to smoke cigarettes.⁷

¹ Goniewicz Maciej Lukasz et al., “Levels of selected carcinogens and toxicants in vapor from electronic cigarettes,” National Institutes of Health Public Access, pg. 6.

² Federal Drug Administration, “FDA and Public Health Experts Warn About Electronic Cigarettes,” News and Events, 2009.

³ Schripp et al., “Does e-cigarette consumption cause passive vaping?” *Indoor Air* 2013, 23: 25-31.

⁴ Schober et al., “Use of electronic cigarettes (e-cigarettes) impairs indoor air quality and increases FeNO levels of e-cigarette consumers” *International Journal of Hygiene and Environmental Health* 2014, 217: 628-637.

⁵ Flouris et al., “Acute impact of active and passive electronic cigarette smoking on serum cotinine and lung function,” *National Center for Biotechnology Information* 2013 Feb;25(2): 91-101.

⁶ Washington State Healthy Youth Survey <http://www.askhys.net>

⁷ Rigotti, “e-Cigarette Use and Subsequent Tobacco Use by Adolescents New Evidence About a Potential Risk of e-Cigarettes,” *The Journal of the American Medical Association*, Vol 314, No. 7 2015;314(7):673-674.

What is Spokane Regional Health District (SRHD) doing to address electronic cigarette use?

SRHD's Tobacco Prevention and Control Program works to prevent youth initiation, increase cessation and eliminate harmful secondhand exposures due to smoking and vaping.

SRHD staff are also responsible for the enforcement of Washington's Smoking in Public Places (SIPP) law that passed in 2005. This law was enacted to protect the public and employees from exposure to secondhand smoke. Due to the public health concerns about exposure to secondhand vapor, SRHD is proposing to enforce a prohibition on the use of vaping devices anywhere that smoking is prohibited under SIPP. This change will need to be approved by the agency's governing body, the Board of Health. If approved, use of vaping devices will be prohibited in all public places and places of employment.

Why is SRHD proposing to include vaping devices under the SIPP law?

Enforcing vaping devices under SIPP will protect the public from the potential harms associated with inhaling vapor, particularly vulnerable populations like pregnant women, children, and people with cardiovascular conditions.

The vapor produced by vaping devices can contain nicotine and numerous other harmful substances and cancer causing agents.^{8,9} The vapor can also contain propylene glycol and flavorings, which are recognized as safe for use as food additives, but have not been deemed safe for inhalation.¹⁰ Use of vaping devices exposes bystanders to the toxic chemicals and carcinogens in the vapor. The long-term health impact this vapor is unknown.

SRHD staff and other health districts have found that the use of vaping devices in public places and places of employment complicates enforcement of smoke-free laws and the prohibition on the use of marijuana in public. In addition, the use of vaping devices in public places and places of employment represents a renormalization of smoking, increases social acceptance of smoking and vaping, and provides models of unhealthy behavior that are contrary to public health efforts of the last 50 years.

Restricting vaping devices under SIPP may also benefit people who have already quit smoking cigarettes and those who want to quit. Research indicates that when people who have quit smoking see someone using a vaping device they have an increased desire to smoke.

Have other Washington state jurisdictions done this?

Similar regulations have been enacted in King, Pierce, Grant, Clark and Snohomish counties. Nationally, as of July, 2015, there were 394 local and three state laws that restricted use in public places.

What has SRHD heard from local businesses about vaping devices?

Many business owners have contacted SRHD to express their concerns over the use of vaping devices in their business. Some business owners are worried about the safety of the devices and the vapor they emit. Other business owners shared that they believe allowing people to use vaping devices in their place of business is bad for their image. Some Spokane businesses have already banned the use of vaping devices in their place of business.

⁸ Goniewicz Maciej Lukasz et al., "Levels of selected carcinogens and toxicants in vapor from electronic cigarettes," National Institutes of Health Public Access, pg. 6.

⁹ <http://www.fda.gov/%20NewsEvents/Newsroom/PressAnnouncements/ucm173222.htm>

¹⁰ Centers for Disease Control and Prevention, Electronic Nicotine Delivery Systems: Key Facts, July 2015
<http://www.cdc.gov/tobacco/stateandcommunity/pdfs/ends-key-facts2015.pdf>

Shouldn't business owners be able to decide what is/is not allowed to happen in their place of business?

The SIPP law was designed to protect people from secondhand exposure to the known harm of combustible smoking products. By including vaping devices under SIPP, the public and employees will be protected from the potential harms associated with exposure to secondhand vapor. Some Spokane business owners have already banned the devices in their place of business out of concern for public and employee health. Others have requested that vaping devices be included under the SIPP law.

As a business owner, what will be required of me if vaping devices are included under the Smoking in Public Places law?

The SIPP law requires business owners, lessees, or other person(s) in charge to post signs concerning SIPP and to actively prohibit smoking in public places and places of employment. If vaping devices are to be enforced under the SIPP law, signs that include language concerning vaping devices will be made available and owners will then be required to prohibit their use in all areas where smoking combustible products is prohibited.

How will this impact businesses that sell vaping devices?

The proposed action will not impact a business's choice to sell vaping devices to customers over 18 years of age. It will only impact the locations where vaping devices can be used.

Businesses who sell vaping devices are trying to help people quit smoking. Why would you want to stop them from helping people quit smoking?

The proposed action will not impact a business's choice to sell vaping devices to customers over 18 years of age. In addition, vaping devices are not FDA-approved as a smoking cessation medication. If a person wants to quit using tobacco they should consult with their doctor or call 1-800-QUIT-NOW to learn what medication would be best for them. At this time, there are several FDA-approved smoking cessation medications that have been scientifically shown to be effective at helping people quit smoking. The best way to quit smoking is to use a combination of counseling and nicotine replacement gum, patch or medication.¹¹

Are vaping devices regulated?

Vaping devices are not regulated at the state or federal level, unlike cigarettes and other tobacco products that are regulated by the federal Food and Drug Administration (FDA). This means that there are no regulations on the manufacturing, marketing, packaging, labeling or ingredients of vaping devices and the e-juice used in them. The FDA proposed a deeming rule to regulate vaping devices similarly to the way that they regulate tobacco, but the rule approval process may take years to finalize. State legislation has been proposed, targeted at preventing youth access to vaping products. Provisions include: child-proof packing, warning labels and ingredient disclosures; storing products behind counter; restricting sampling, coupons and vending machines; and taxation.

Neither the proposed federal nor state regulations would include a prohibition on the use of vaping devices in public places to protect the public from secondhand vapor.

¹¹ Fiore MC, Jaén CR, Baker TB, et al. "Treating Tobacco Use and Dependence: 2008 Update—Clinical Practice Guidelines," Rockville (MD): U.S. Department of Health and Human Services, Public Health Service, Agency for Healthcare Research and Quality, 2008.

What is a public place?

According to SIPP (RCW 70.160), a public place is defined as:

"Public place" means that portion of any building or vehicle used by and open to the public, regardless of whether the building or vehicle is owned in whole or in part by private persons or entities, the state of Washington, or other public entity, and regardless of whether a fee is charged for admission, and includes a presumptively reasonable minimum distance of twenty-five feet from entrances, exits, windows that open, and ventilation intakes that serve an enclosed area where smoking is prohibited. A public place does not include a private residence unless the private residence is used to provide licensed child care, foster care, adult care, or other similar social service care on the premises. Public places include, but are not limited to: Schools, elevators, public conveyances or transportation facilities, museums, concert halls, theaters, auditoriums, exhibition halls, indoor sports arenas, hospitals, nursing homes, health care facilities or clinics, enclosed shopping centers, retail stores, retail service establishments, financial institutions, educational facilities, ticket areas, public hearing facilities, state legislative chambers and immediately adjacent hallways, public restrooms, libraries, restaurants, waiting areas, lobbies, ((and reception areas)) bars, taverns, bowling alleys, skating rinks, casinos, reception areas, and no less than seventy-five percent of the sleeping quarters within a hotel or motel that are rented to guests. A public place does not include a private residence."

What is a place of employment?

According to SIPP (RCW 70.160), a public place is defined as:

"Place of employment" means any area under the control of a public or private employer which employees are required to pass through during the course of employment, including, but not limited to: Entrances and exits to the places of employment, and including a presumptively reasonable minimum distance, as set forth in RCW 70.160, of twenty-five (25) feet from entrances, exits, windows that open, and ventilation intakes that serve an enclosed area where smoking is prohibited; work areas; restrooms; conference and classrooms; break rooms and cafeterias; and other common areas. A private residence or home-based business, unless used to provide licensed childcare, foster care, adult care, or other similar social service care on the premises, is not a place of employment."

What is the timeline for considering this policy change?

Public comment: The public comment period will be from January 4 through February 5, 2016. Once the comment period closes, all comments will be compiled and shared with SRHD's Board of Health prior to a public hearing.

Public hearing: A public hearing will occur during the Board of Health's regular scheduled meeting on February 25, 2016. The public will be able to provide verbal comment to the Board of Health. Providing verbal comments is not necessary if an individual has provided written comments.

Board of Health Action: The Board of Health will have the option to take action on a resolution at the conclusion of the public hearing in February, or defer the vote to its regularly-scheduled meeting in March 2016 or a later meeting.