

## 有關電子煙 / 加熱煙

### 甚麼是電子煙？

- 即電子尼古丁傳送系統或電子非尼古丁傳送系統
- 系統將溶液汽化再傳遞予使用者
- 含有害化學物質，包括：多環芳香煙、多溴聯苯醚、甲醛、甘油、重金屬(錫、鎳、銅、鉛)及微量尼古丁
- 市面上有 8,000 種不同口味，如水果、汽水、朱古力等，明顯是為滿足青少年貪新鮮和好奇的心態，同時營造成健康及時尚的產品

### 甚麼是加熱煙？

- 即加熱非燃燒煙草製品，透過電子裝置高溫加熱至 350°C，令捲煙產生含有尼古丁和其他化學物質的煙霧，讓使用者使用
- 含尼古丁，可引致上癮
- 屬煙草產品，不應提供予未成年人士，須符合相關法例要求方可出售或使用
- 加熱煙被包裝成潮流產品，宣稱害處較少，同時採用與傳統捲煙不同的名稱，以減低市民尤其是青少年對其害處的警覺性

### 對身體的影響

**電子煙**的有害成份可引致上癮、不適和咳嗽、傷害身體細胞和組織，造成呼吸系統不適和疾病，嚴重的可導致癌症甚至死亡。

**加熱煙**：因煙草本身具毒性，任何形式的煙草產品均對身體構成影響，即使未經加工也含致癌物質。而部份有毒或致癌物質並沒有最低安全標準，危害市民健康。



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### 香港醫學會的立場

要求政府**全面禁止**電子煙及其他新煙草產品。

### 普及程度：

2017 年約有 5,700 人每日使用電子吸煙裝置(包括電子煙及加熱煙)，佔每日吸煙人士約 0.9%。

### 香港現行法例

- 根據《吸煙(公眾衛生)條例》(第 371 章)，在法定禁煙區吸煙(包括加熱煙)亦屬違法，違例者定額罰款港幣 1,500 元。
- 根據《應課稅品條例》(第 109 章)，煙草屬於應課稅品，必須向香港海關申領牌照及許可證，並須繳付有關稅款，方可在本港出售。

## Fact Sheet of E-Cigarette/Heat-Not-Burn Tobacco Products

### What is E-Cigarette?

- Also known as **electronic nicotine delivery systems (ENDS)** or **electronic non-nicotine delivery systems (ENNDS)**
- The devices vaporize a solution the user then inhales
- Harmful chemicals found in e-cigarettes: Polycyclic Aromatic Hydrocarbons, Poly-Brominated Diphenyl Ethers, Formaldehyde, Glycerin, Heavy Metal (e.g. tin, nickel, copper & lead) and trace of Nicotine
- Almost 8,000 different flavours in the market e.g. fruit, soft drinks, chocolate, etc. E-cigarettes are marketed as healthy and trendy products, which fulfil the curiosity of teenagers

### What is HNB Tobacco Product?

- **Heat-Not-Burn Tobacco Products** contain nicotine and other chemicals for users to consume through an electronic device by heating up a tobacco stick with high temperature up to 350°C
- Contain nicotine which can cause addiction
- HNB tobacco is a tobacco product, selling to minors is an offense. Related legislation should be compiled on sale and use
- HNB tobacco products are being marketed as trendy and less harmful, and use different names from traditional cigarettes to reduce public's, especially youth's, awareness on their harms

#### Harm to Health

**E-cigarettes** contain harmful substances which could cause addiction, unwell, coughing, damage to body cells and tissues, and respiratory diseases. Severe cases can cause cancer and death.

**HNB tobacco products:** Tobacco is inherently toxic and contains carcinogens even in its natural form. All forms of tobacco use are harmful. Some of the toxins and carcinogens do not have a safety level and harm human's health.



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### The HKMA's Stand

**A Total Ban on E-Cigarettes and HNB tobacco products.**

#### Prevalence:

There were about 5,700 daily smokers who consumed electronic smoking devices in 2017 (including e-cigarettes and HNB tobacco products), accounting for 0.9% of the daily smokers in HK.

#### Hong Kong Ordinances

- According to Smoking (Public Health) Ordinance (Cap 371), tobacco smoking (including HNB tobacco products) in statutory no-smoking areas is prohibited. Offenders are liable for a fixed penalty of HK\$1,500.
- According to Dutiable Commodities Ordinance (Cap 109), all tobacco products are dutiable commodities. It is obliged to apply for license and permit from the Customs & Excise Department, alongside with all relevant taxes paid, before selling tobacco products in Hong Kong.

## 有關電子煙是否應該禁止的常見問題



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### 一. 電子煙是不是給吸煙者較健康的選擇？

煙草商會告訴你，電子煙給吸煙者比較健康的選擇。我要告訴你，這是詭辯，這是藉口。他們又會告訴你，他們支持立法規管，不讓未成年人士購買電子煙。

事實是，在電子煙可以合法售賣的國家，青少年才是吸食電子煙增長最迅速的群體。這些國家也不乏對電子煙立法規管，禁止售賣予未成年人士。電子煙彩色繽紛，有爆穀、雪糕、糖果、曲奇、水果等萬多種味道，對青少年和小朋友尤為吸引。本港兒童在公園一起吸食電子煙的新聞片段，大家還記憶猶新吧？

### 二. 電子煙有助戒煙？

煙草商會告訴你，電子煙有助戒煙。事實是，沒有充份的醫學證據證明電子煙有助戒煙。英國一項接近 20 萬人的十年追蹤研究<sup>1</sup>顯示，電子煙用量增加的同時，傳統捲煙的用量並沒有減少，顯示電子煙根本不是戒煙的有效方法。

### 三. 電子煙是不是比傳統捲煙安全？

煙草商會告訴你，電子煙比傳統捲煙危害小得多。事實是，任何煙草商也不夠膽說電子煙和加熱煙對人體並無害處，因為電子煙和加熱煙釋出有害物質、重金屬和致癌物是鐵一般的事實，尼古丁更會影響兒童腦部發展。這些產品同樣有二手煙和二手煙的禍害，所釋出的有害的物質並沒有最低的安全標準；這些產品並不含有任何對身體有益的成份。

煙草商會告訴你，電子煙釋出的是水蒸氣，我要告訴你這是謊話。事實是，電子煙釋出的是帶有毒素的煙油微霧，吸食者就是將煙油吸得一肺滿滿的。傳統煙有嗆喉的煙味，帶孩子的家長都會警覺地走開；電子煙有香味，而加熱煙的煙味很淡，家長很容易察覺不到身在電子煙或加熱煙旁邊，因而沒有將孩子帶走，結果往往吸入了數分鐘甚至更久的二手煙而懵然不知。即使電子煙和加熱煙所含的毒素濃度較低，長時間暴露於其中足以令人接觸更多的毒素。*(英格蘭公共衛生 (Public Health England) 電子煙比傳統捲煙害處少 95% 的說法備受質疑<sup>2,3</sup>)*

### 四. 為甚麼不去禁煙，而只禁止電子煙？

煙草商會說，傷害更大的傳統捲煙不去禁止，為什麼禁止傷害較小的電子煙和加熱煙呢？大家動動腦筋想一想，假使香港從來沒有捲煙，到今天才申請輸入的話，以我們今天的醫學知識，很難想像一個負責任的政府會批准。但是，百多年前，當捲煙在香港出現的時候，醫學界根本不知道捲煙的害處。今天大門經已打開，每十個香港人之中就有一個吸煙，要禁煙談何容易？門開了就關不上。

前事不忘後事之師，歷史前車可鑑。在今天電子煙未成氣候之際，我們就不應該容許電子煙輸入香港，遺害一代又一代的青少年。

#### 參考資料：

1. Beard E, Brown J, Michie S, et al. Is prevalence of e-cigarette and nicotine replacement therapy use among smokers associated with average cigarette consumption in England? A time-series analysis. *BMJ Open* 2018;8:e016046. doi:10.1136/bmjopen-2017-016046
2. E-cigarettes: Public Health England's evidence-based confusion, Editorial; *Lancet* 2015; (386) p829
3. Stanton AG: Evidence about electronic cigarettes: a foundation built on rock or sand? *BMJ* 2015;351:h4863

## Frequently-Asked-Questions on Total Ban of E-Cigarette/Heat-Not-Burn Tobacco Products



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### 1. Is E-Cigarette a Healthier Choice for Smokers?

The tobacco industry tells you that e-cigarette is a healthier choice for smokers. This is a total excuse. Tobacco industry might also say they support regulating such products to prevent selling to minors.

The fact is in those countries where e-cigarettes are legal products, youth is the most growing population of users. Among these countries, some do prohibit such products in selling to minors. Marketed as trendy products to youngsters and children, e-cigarettes are usually with colorful packages and produced in flavours like popcorn, ice-cream, candies, cookies, fruit and bizarre flavours. Do you still remember the news clip on a group of children gathered in a park and smoking e-cigarette?

### 2. Is E-Cigarette a Tool for Quitting Smoking?

There is insufficient scientific evidence so far to support the claim that e-cigarettes can help quit smoking. In a 10-year follow-up study<sup>1</sup> in the United Kingdom with almost 200,000 subjects, no clear evidence for an association between e-cigarette use specifically for smoking reduction and changes in daily cigarette consumption.

### 3. Is E-Cigarette Safer than Traditional Tobacco Products?

The tobacco industry tells you e-cigarette is less harmful than traditional tobacco products. The truth is even tobacco industry cannot claim that e-cigarette or HNB tobacco products are harmless to health. These products contain harmful substances such as heavy metals and carcinogenic substances. Nicotine can affect brain development in children. These products also create second- and third-hand smokes, and there is no safety level for substances being released. These products contain no beneficial substances to our body.

“Only steam will be released from e-cigarettes.” This is a lie! E-cigarettes release toxic vapour which affect the users’ lungs. Parents might aware and bring children away from the choking smoke released by traditional tobacco products. While the aromatic and light smoke of e-cigarettes and HNB tobacco products are not easy to identify. Children may be exposed to these potential second-hand and toxic smokes for longer hours. *(The claim from “Public Health England” that e-cigarettes are 95% less harmful than traditional tobacco products is questionable<sup>2,3</sup>)*

### 4. Why Not Banning Traditional Tobacco Products but E-Cigarettes?

Think about it: if traditional tobacco products was ever existed in Hong Kong, and is proposed to be imported to Hong Kong now. Based on our medical knowledge nowadays, our responsible Government would definitely object. However, the story was happened in over a hundred years ago while there was not enough evidences on the harms of cigarettes. With the current 10% smoker population in Hong Kong, it is difficult for the Government to total ban such products.

Learn from the history, while e-cigarette smoking is not yet a morale, we should stand firm by not allowing the import of e-cigarettes to Hong Kong in affecting our generations of youngsters.

#### References:

1. Beard E, Brown J, Michie S, et al. Is prevalence of e-cigarette and nicotine replacement therapy use among smokers associated with average cigarette consumption in England? A time-series analysis. *BMJ Open* 2018;8:e016046. doi:10.1136/bmjopen-2017-016046
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