



## THE FDA TOBACCO BILL: AN OPPORTUNITY FOR A 12-STEP PROGRAM TO HEAL FROM INSTITUTIONAL ADDICTION

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Reading the latest FDA Tobacco Bill <sup>[1]</sup> is no fun – not only because it is a heavy legal document, but especially because of the strident contradictions it contains. It seems to be a pastiche of concepts and rhetoric stolen from a great number of pre-existing documents, pasted together to feed the hungry antismoking beasts in the political forest. But some new and previously ignored concepts have also made it in – concepts that could be somewhat revolutionary for tobacco policy. That the document is loaded with confusion and contradictions and thus dangers and opportunity makes its exploration worthwhile.

The drafters of the document have not explored the implications of much of what they put forward. The proposal that “*Cigarette standards will include provisions for the reduction of nicotine*” <sup>[2]</sup> would favour an illegal market and is contrary to the scientific evidence that nicotine is safe and that high nicotine in smoke will reduce inhalation and thus risk. Such are the conclusions of the Institute Of Medicine (IOM) Report <sup>[3]</sup> -- to which the Bill later on (page 100, line 12) defers on all scientific questions. The proposal on reducing nicotine also contradicts the general tone of the proposed legislation, which does not seem to be hostile to nicotine.

The Bill directs that “*the regulations or guidance issued under paragraph (1) shall be developed in consultation with the Institute of Medicine, and with the input of other appropriate scientific and medical experts, on the design and conduct of such studies and surveillance.*” Let it be clear, once again, that the Institute Of Medicine Report endorses the concept of a safer cigarette that reduces inhalation through **increased delivery of nicotine**. That report has been ignored for over five years by antismoking groups that continued to repeat, endlessly, that nicotine is “one of the most addictive substances known”.

The incoherence is not over. The Bill would direct the Tobacco Product Scientific Advisory Committee to explore “...*whether there is a threshold level below which nicotine yields do not produce dependence on the tobacco products involved*”. As there is no real, scientific way to establish “dependence” in the first place - let alone a threshold - it is clear that the existence of any threshold will be the product of arbitrary and ever-changing judgement calls dictated more by beliefs and political, social and financial agendas than by science.

Furthermore, it is stated elsewhere that “*Nicotine is an addictive drug*” and that “*only Congress has authority to remove all nicotine from cigarettes.*” The Bill thus **acknowledges the central role**

**of nicotine** – a role that is so paramount, in fact, that only a top political body such as the Congress can have power over it. Moreover, the Bill admonishes repeatedly against regulation that would favour the illegal trade, which a reduction of nicotine would certainly do. And it endorses the idea that “*No flavor additives will be added, other than menthol*”,<sup>[4]</sup> a splendid provision to favour an illegal market.

If we try to put those concepts all together to make sense out of them, the Bill as it stands comes out as saying something like along these lines: Nicotine is an addictive drug and, because of this tremendous power of addiction, smokers keep inhaling deadly toxics and over 400,000 of them die each year. Therefore, we will try to establish a threshold of that addiction and thus **try to reduce** the nicotine contents of cigarettes. To that end we will defer to the authority of the IOM, which states that nicotine contents of cigarettes **must be maintained or increased** to reduce inhalation of the toxics, thus obtaining a safer product!

The incoherence and confusion of the antitobacco establishment cannot be more glaring.

Regardless, the new concept that we see in this bill – a real revolution in the antitobacco industry – is the acknowledgment that a less risky product **can be made**. This alone is a refreshing contrast to all the propaganda and abolitionist philosophy that “a cigarette cannot be safe (or safer)”. Of course nothing is (absolutely) “safe”, and “safety” has become a rhetorical cultural fixation with chimerical overtones. However, many products can indeed be made to be *safer or less risky* – cigarettes included.

One could argue that the legislative proposal points an accusing finger towards those antismoking groups and public health “authorities” that for decades have suppressed both the development of a safer cigarette and the notion of its feasibility, thus causing – using their own statements that we don’t share – an immense number of deaths in the world.

Assuming this as reality and considering that a safer cigarette was conceived, developed and researched by the US National Cancer Institute Smoking and Health Program (killed in 1978 to embrace smoking abolitionism),<sup>[5]</sup> American and international “public health authorities” are responsible for **the deaths of hundreds of millions**. According to antitobacco’s own figures, in fact, if safer cigarettes were introduced in 1980, they would have prevented hundreds of millions of “premature” (whatever that really means) deaths world-wide. It would be nice to see international tribunals at work, now, to bring to account those responsible for this state of affairs – but that is just a fantasy: the perpetrators of the virtual carnage get promoted in rank, power, and money instead.

Because Philip Morris seems to be the only major manufacturer that supports the bill, legitimate suspicions arise that PM is seeking a position of market monopoly. How may PM “put the bag” on smokers, politics and “public health”? From his point of view, tobacco control analyst Michael Siegel points out many of the potential traps of this bill in his piece “*Tobacco bill would cause countless deaths: by hindering, not enhancing development of safer cigarettes, proposal would kill people, not save lives*”.<sup>[6]</sup> Siegel’s observations are well-reasoned, and continued with his article “*Harvard report continues to deceive: FDA bill would preclude single most effective regulatory action to protect health that is politically feasible*”.<sup>[7]</sup> In the latter article Siegel (who is of course in favour of less risky cigarettes) comes to the only possible logical conclusion on how to achieve them: *a safer cigarette is a product with much more nicotine and far less toxic constituents*, although the political opportunity for a safer cigarette based on this principle does not seem to be

caught. However, were Siegel to be correct in his interpretation that the Bill intends to actually reduce nicotine content, that would turn into the greatest public health disaster in history.

### A 12-step program to recovery

We have already indicated that this Bill is a most visible manifestation of the intellectual, moral, and rhetorical enmeshment of a movement that is utterly drunk with nihilism, abolitionism, moral poisoning and prohibition. But there is still hope for recovery. To recover, the tobacco politics should go through a 12-step program that can bring it back to the sobriety of coherence and reason. To that end many political admissions (or even confessions?) must be forthcoming:

1. The official admission of the dramatic failure of the tobacco control goal of a “smoke-free America by the year 2000”, swept under the rug along with the information that nicotine is not a dangerous substance. The fact that about 1/3 of the adult population still smokes in the United States does not mean a failure of “public health” but rather a failure of the concept of social engineering propaganda.
2. The admission that smoking is part of the culture and of the way of life of millions, and that it is a simple but important reward that over a billion people in the world share and **don’t intend to surrender**.
3. That such reward is so important for smokers (and, in a climate of persecution, so much identified with personal liberty and self-determination) that they endure the frustration, humiliation, harassment, segregation and social “denormalization” programmes perpetrated against them and carried out by dishonest and obtuse “authorities” all over the world.
4. “Pro-smoking” groups should admit that cigarettes constitute an *increased statistical risk* and – on top of the rights issue and of the fight against the passive smoke fraud <sup>[8]</sup> – they should demand, *as consumers and in unison, the production of a safer cigarette based on more nicotine and lower toxic constituents. The production of a cigarette that keeps the characteristics of a normal cigarette* (burning, flavour, and actual smoke inhalation) and not those of a “nicotine delivery device”. The latter is more associated with syringes and heroin than with a time-honoured habit and ritual which, once devoid of risky components, is also capable of delivering psychological and physical benefits to the consumer besides pleasure and joy of living.
5. Smokers should also be prepared to *change and adapt their tastes and preferences* -- and abandon the stiff “loyalty” to a particular brand or type which is typical of so many of them.
6. The antitobacco campaigns laden with rhetoric, instigation, false information, exaggeration, hatred, “denormalization”, fear and social pressures should stop – along with smoking bans – to reduce/eliminate social and emotional hysteria. The social environment should be relaxed and normalized to **prepare for the acceptance of a new, safer product**. It is essential that smokers, as a group, *do not feel pressured or driven into a decision*, but adopt the new product(s) truly **by their own volition**, thus ensuring stability of choice and avoiding the temptation to turn to a black market environment to obtain “the good stuff” -- *for the good stuff may well become the safer product*.

7. If smoking were as deadly as they say it is (a position that – we emphasize - **we do not share** as there are *only statistical bases with a multiplicity of co-factor*), the marketing of a product based on high nicotine content greatly reducing the inhalation of toxics *makes sense even in the absence of epidemiological studies*. These studies (by their very nature) not only require time, but *would not be able to reliably measure improvements* (unless they could freeze time and any change in society and environment for about 20 years), let alone reliably account for a myriad of confounders.
8. Coherence with the point above demands an *immediate end* of all misinformation and scare propaganda against nicotine and its “addictiveness”. The whole “addictiveness” rhetoric should be dropped – along with the antismoking “education” against it directed to young and old: *smoking must go back to being a socially accepted way of life worthy of dignity and respect* – but, this time, *with a product that is safer and is getting safer every day* thanks to technological improvements and ever-changing taste and preference of the consumers. Simple logic and common sense dictates that consumers will be willing to adapt their tastes, and demand a safer product without the need of being pushed into a forced choice through behaviour modification programmes.
9. The definition of addiction itself should be revisited and actually re-written – reserving the word only to those substances that are **psycho-toxic**, as they alter personal behaviour in a *socially destructive manner* while producing no scientifically demonstrable benefit for the user. The mere repetition of use or rituals does not constitute addiction, as pleasurable experiences of all kinds *induce the natural desire to repeat the experience*. Even in the presence of compulsion to the use of a substance that not only is harmless, but could even be beneficial (such as nicotine) the negative connotation of the word *addiction* should be avoided – for “addiction” to good things should be at the core of honest Public Health.
10. Taxation and price policies should be designed to facilitate the use of the safer products. Better yet, prices should be allowed to fluctuate according to a free market. States should be allowed to compete through taxation and in the full respect of freedom of interstate commerce.
11. Advertisement of an ever-safer cigarette should be permitted and encouraged, while allowing endorsement of the safer cigarettes by current public icons. This, along with point (10), is in diametrical opposition to this bill which is not just un-American, but *anti-American* both in spirit and intents.
12. At the same time, “health authorities” should stop the demonization of the tobacco industry along with that of smoking and smokers. All form of antismoking radical postures should be discouraged – and politicians could easily achieve that by *demanding the cutting of public financing to radical antismoking groups*. Instead of demonization, a form of cooperation between industry, health authorities, consumers and media should be encouraged

All that, of course, spells out a radical change in approach, politics and philosophy towards the habit – to the point that the very words “antismoking” and “tobacco control” should change their meaning. Better yet, they should be eliminated altogether because of the emotions, obtuseness, resentment and dishonesty they have become synonyms of. They should be replaced with definitions inspired to *risk reduction, social acceptance and cooperation with smokers*, whose voice should be heard and respected as **consumers** – **not addicts** - while *involving them as contributing*

*stakeholders and actors in the process* rather than “passive patients” in need of “therapies”, “help” and “preventions” that **they never really asked for**. That would allow this organization and all the other smokers’ representatives to stop writing “public health” in quotes and lowercase, and to write it again in capital letters, as respect for the institution would be restored.

The “war on smoking” and smokers must end and be replaced with a cooperation of all to build a product that is safer every day. Wars have always been bad for Public Health anyway – and that is a fact which is truly scientifically demonstrated.

-- *The FORCES International Board of Directors*

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[1] See: <http://www.data-yard.net/prohibition/bill.2007.pdf>

[2] Page 55, line 1.

[3] See Institute Of Medicine Report Clearing the Smoke at <http://books.nap.edu/catalog/10029.html>

[4] Page 53, line 10.

[5] See: [Virtually Safe Cigarettes: Revisiting an Opportunity Once Tragically Rejected](#), by Gio Batta Gori, ISBN: 1-58603-057-4, Publisher: IOS Press.

Also: [Less Hazardous Smokes, Regulation, Winter 2002-2003](#).

[6] See: <http://tobaccoanalysis.blogspot.com/2007/02/fda-tobacco-bill-would-cause-countless.html>

[7] See: <http://tobaccoanalysis.blogspot.com/2007/02/harvard-report-continues-to-deceive-fda.html>

[8] See: Passive Smoke: an Institutional Problem - Fabricated risks attributed to passive smoke (<http://www.forces.org/evidence/psaip.htm>)

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