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Tobacco Strategy
Review Team

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(1) THE MAIN ISSUES

These continue to be:

- Primary Health
- Passive Smoking
- Social.

Primary Health

Despite increasing reference to heart disease and pregnancy, lung cancer continues to be the major concern - accounting as it does for some 30% of all cancer deaths in the UK, USA, Germany etc.

But despite 30 years of intensive research, no compound or group of compounds in cigarette smoke have been identified as having a causal link: it is significant that very little new information was contained in the 1983 reports of the Independent Scientific Committee, Royal College of Physicians and US Surgeon General.

In the absence of such specific evidence, there is a general view that the average total delivery or yield of 'tar' should be reduced. But in addition, some authorities (and in particular the ISC) have called for more research into specific smoke components and the effects of cigarette design on the way cigarettes are smoked.

The support for the 'low tar' cigarettes for lung cancer has led to increasing counter-attacks (and confusion) with respect to other diseases - on the basis that smokers 'compensate' for either the lower tar (lower taste) or the correspondingly lower nicotine (less satisfaction) by smoking more intensely - more frequent/deeper puffs or more cigarettes. This leads, it is claimed, to the smoker inhaling more carbon monoxide together with:

- (a) more tar, if compensation is for nicotine
- (b) more nicotine, if compensation is for tar.

In this context, both carbon monoxide and nicotine are frequently linked to heart disease - though, as virtually stated in the 1983 RCP and ISC reports, the scientific evidence for a direct connection is extremely weak.

Over the past year, maternal smoking during pregnancy has received increasing attention, the thesis being that traces of smoke components pass into the foetus, with the subsequent risk of some effect on the child; minor respiratory impairment and slight growth retardation are the most common claims.

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As in the past, the only recourse for the industry is to undertake or support more research.

Passive Smoking

After signs in 1982/early 1983 that there was a reduction in interest or concern for the health consequences of inhaling other peoples' smoke ("passive smoking"), it now appears that research by anti-smoking groups is intensifying. The totality of the findings to date do not support the allegation of a significant health risk - but much capital can be made of any suggestion that despite the low absolute level of risk, the statistical risks for exposed non-smokers exceed those for non-exposed non-smokers.

We must expect the issue of passive smoking to stay with us - perhaps to intensify further.

Social

It is here that we have witnessed the greatest increase in pressure against smoking - generally on the themes:

- (a) other peoples' smoke is annoying/irritating
- (b) smoking is a dirty practice
- (c) why should the majority of non-smokers be inconvenienced by the minority of smokers?

Industry's only redress is to stress freedom of action, democracy etc. But it is difficult to see how industry can sway public opinion to any significant extent. [It is certainly even more difficult for the numerically out-numbered individual smoker to 'defend' himself in many daily situations.]

The issues are clearly of an industry rather than individual company nature; as such, the major thrust to defend the industry and its consumers must come from industry associations (INFOTAB and National Manufacturers Association) and trade organisations such as FOREST. But where appropriate, BAT companies worldwide must seize every opportunity to speak out (eg by letters or interviews) against unfair or biased attacks, and guidance has been given in the matters.

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(2) UP-DATE BY DR THORNTON

At this stage, I should now like to ask Dr Ray Thornton to give a brief account of the work he is doing on Cohort Analysis - the preliminary account of which you will recall he described at the last CAC Conference.

He will also give a summary of some other areas of anomaly that we are including in a planned publication on smoking and health for use within BAT - subject of course to careful scrutiny by the lawyers.

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Product Innovation

Much of the work at GR&DC is related, either directly or indirectly, to the development of products or product designs that respond to issues of smoking and health.

The ultimate need is to get modified products into the market place and this calls for close working between Marketing and R&D. A recent action to improve the effectiveness of this link has been the appointment of Alan Heard to head up a newly created Product Applications Group at Southampton. In addition to creating an effective bridge with Marketing, he and his team are concerned with the effective transmission to Operating Companies of developments that are thought to have commercial potential.

A Marketing and R&D liaison group has been formed, and a joint conference between Marketing and R&D is scheduled for September of this year, which it is hoped will facilitate a cross-fertilisation of ideas in regard to product modification.

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