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In Reply

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Dr Hrywna and colleagues highlight synthetic nicotine pouch products as an emerging area of concern with implications for public health policy and practice at the national, state, and local levels in the US. We agree and add that synthetic nicotine is not limited to nicotine pouches. e-Cigarette manufacturers are also marketing disposable e-cigarettes and e-liquids with synthetic nicotine in the US, using claims such as “our nicotine-based products are crafted from a patented manufacturing process, not from tobacco.”¹

Introduction of synthetic, flavored nicotine products that fall outside of existing statutory definitions of tobacco products¹ may undermine existing efforts to reduce youth tobacco product use and to support youth tobacco cessation. As noted in our Research Letter,² nicotine pouch flavors and marketing mirror e-cigarette marketing themes and tactics known to attract nicotine-naive young people.

Whether derived from tobacco plants or synthetically developed in a laboratory, nicotine is an addictive drug with known adverse health consequences. Nicotine harms fetal development, and use during adolescence can cause addiction and can harm parts of the brain that control attention, learning, memory, mood, and impulse control. Nicotine use may also increase adolescents’ risk of future addiction to other drugs.³ In 2021, based on survey data, more than 2 million US middle- and high-school students are current users of e-cigarettes; most youths who use tobacco products want to quit and have already tried quitting.^{4,5}

Given these public health considerations, synthetic nicotine products warrant urgent attention from policy makers, clinicians, and researchers. Sufficient scientific evidence about nicotine’s harmful effects exists to caution young people and pregnant adults against use of synthetic nicotine and to justify inclusion of synthetic nicotine products in existing regulatory efforts.³ Public health practitioners and policy makers can clarify the scope of practice and policy to include all nicotine products not approved for therapeutic purposes, regardless of source. Researchers can study both the prevalence of and adverse events

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associated with synthetic nicotine use by young people, including poisonings. In addition, consumer risk perceptions can be examined, including the potential for consumers to confuse these products with approved cessation aids or regard them as safe for use in pregnancy. Clinicians can emphasize that nicotine use in any form is addictive and harmful during adolescence and fetal development and encourage use of evidence-based cessation treatments proven to help people quit.^{3,6}

Disclaimer:

The findings and conclusions herein are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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