Cyndie Martel

From:

Malone, Ruth < Ruth.Malone@ucsf.edu>

Sent:

Wednesday, November 12, 2025 2:57 PM

To:

CouncilAll; Cyndie Martel

Subject:

[EXTERNAL] Tobacco sales ban ordinance

Attachments:

NovemberLetterMalone.pdf

This letter is submitted in reference to the scheduled discussion of the tobacco sales ban ordinance tomorrow. Thank you!

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City Council, Town of Ross 31 Sir Francis Drake Blvd Ross, CA 94957

November 12, 2025

Dear Mayor and Councilmembers,

I strongly support the passage of the ordinance to prohibit the sale of all tobacco products and electronic smoking devices in Ross. As a nurse, professor and public health professional who has been working in tobacco control for decades, I would also like to address some of the misinformation in the self-serving and frankly condescending letter of opposition from the National Association of Tobacco Outlets (NATO).

While it is indeed the case that the FDA Center for Tobacco Products, which is funded entirely by tobacco industry user fees, has allowed sales of a range of products believed to be less lethal than cigarettes, that is a very low bar given that cigarettes are the single most deadly consumer product in history. None of these products is approved for smoking cessation. The assumption behind the "continuum of risk" idea is that *adults* who are already using cigarettes may switch to these products. The tobacco industry, however, continues to aggressively conflate the concepts of "risk," "harm," and "exposure," and the different pathways to FDA authorization, exploiting public confusion.

The NATO letter misrepresents the role of the FDA. There is a difference between how the FDA evaluates products it may *allow* to be sold, and therapeutic products *approved* by the FDA to help people quit. The Ross ordinance will still allow sales of current and future therapeutic nicotine products that the FDA has approved to help people quit. None of the tobacco companies, however, have pursued this different FDA approval channel. Why? Because their new products are not designed to help people quit, but to keep people hooked on nicotine, a neurotoxin.

The industry simply cannot sustain its profits based upon a dwindling population of former cigarette smokers who switch completely to a new product. The industry requires new users, and it has very effectively marketed e-cigarettes and nicotine pouches to young people who otherwise would likely not have initiated tobacco use. It is no coincidence that at a time when teen smoking rates are at very low levels, all these new addictive products are being so enticingly marketed. Further, the tobacco industry is now minimizing the very real harm of nicotine addiction, which undermines the whole idea of adult "choice."

I served as editor-in-chief of the leading international tobacco control policy journal in the field, *Tobacco Control*, published by BMJ, for 14 years. Our journal published many scientific studies examining these products, as well as studies of tobacco industry strategic positioning. I am very familiar with the controversies in the field in terms of interpreting the science. There are still many things we do not know about the wide range of new products being sold (many of which, even while on the market, are *not* authorized for sale). The science is challenging to assess due to the huge number of products, the different ingredients in each (and in their variants), the lack of

true long term population studies and the use of such a harmful product (cigarettes) as the comparator.

The Town of Ross does not require the advice of NATO or the resources of the FDA to decide whether it wants to allow sales and marketing of addictive and harmful products. The young people of Ross don't require the FDA to give them permission to advocate a policy that is fully in line with a vast body of evidence demonstrating clearly that presence of tobacco retailing is associated with more daily smoking, more difficulty for those trying to quit, and more youth initiation of tobacco product use. The law that created the FDA Center for Tobacco Products expressly reserved the right for state and local governments to regulate sales, including banning sales of some or all tobacco products,

There is no ethical or scientific justification for preserving the possibility of introducing a tobacco retailer into a community without one.

Sincerely,

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