



COVID-19 AND TOBACCO INDUSTRY INTERFERENCE

I. Background

On February 14, 2020, the head of the WHO Health Emergencies Programme posited that smoking is a risk factor for the severity of any lower respiratory tract infection, and that the same would be expected in COVID-19, a respiratory disease.¹ To identify smokers as a potential vulnerable group for COVID-19, health experts have subsequently called for outright quitting of smoking in Indonesia (WHO),^{2 3} Israel (Israeli Medical Association for Smoking Cessation and Prevention),⁴ Japan (Tokyo Medical Association),⁵ Ireland (Health Service Executive),⁶ and South Africa (National Council Against Smoking [NCAS]).⁷ To avoid COVID-19 transmission, some countries in the Eastern Mediterranean Region have banned the use of shisha in public places.⁸

On March 2, 2020, when the New York City mayor announced that [smoking or vaping](#) makes people “more vulnerable to suffer” with COVID-19 and encouraged individuals to quit;^{9 10} authors/ publishers with links to Philip Morris International (PMI) or the PMI-funded Foundation for a Smoke-Free World (FSFW) actively challenged the same. They also reacted negatively^{11 12} to an expert who warned against the dangers of vaping during the coronavirus outbreak by asserting that those inhaling the fumes produced by the cigarette substitute is equivalent to “someone spitting in your face.”¹³ On March 16, 2020, an article published by Reason, an organization with known links to PMI,^{14 15} stated that the US Center for Disease Control and Prevention’s (CDC) “scaremongering about e-cigarettes undermined its credibility on the eve of a true public health crisis (referring to COVID-19).”¹⁶

Scientists have opined that the “COVID-19 epidemic provides a ‘teachable moment’ in which smokers may be uniquely receptive to stop smoking advice” and that “it is plausible that a spike in quit rates could help reduce community transmission of SARS-CoV-2.”¹⁷ However, an analysis of the tobacco industry’s public relations and social media responses reveals that it is utilizing the global COVID-19 crisis to promote “switching” (to heated tobacco)¹⁸ or vaping;¹⁹ and condemning those who call for outright quitting (see Annex 1).^{20 21} To this end, it has even propagated the speculation that the “antiviral” and “antibacterial” properties of a vape ingredient could be beneficial to curb COVID-19 transmission.²² It has also taken the opportunity to market its stocks,^{23 24 25 26} ensure continuous availability of its products despite the lockdowns,^{27 28} encourage stocking-up on vaping supplies/ novel tobacco products,^{29 30} and even provide discounts for the same.³¹ The tobacco industry has also reportedly approached policymakers in low- and middle-

income countries to offer so-called “donations”, while at the same time, seeking favors to ensure continuous delivery of its products during the lockdown.³²

II. Issue

The tobacco epidemic kills 8 million people annually.³³ Because of the tobacco industry's role in the epidemic, it is subject of a global treaty, the WHO Framework Convention on Tobacco Control (WHO FCTC),³⁴ with over 180 Parties. To date, it is the only industry that a treaty law requires to be strictly monitored.³⁵ Because of tobacco's adverse impacts on health, environment, and economy, the WHO FCTC is now embedded in the United Nations Sustainable Development Goals (UN SDGs), enshrining the tenet that good governance in public health involves treating tobacco companies differently from the rest of industry.³⁶

While the COVID-19 crisis presents an opportunity to encourage the world's smokers to quit smoking outright, including quitting cold turkey, the tobacco industry is taking the opportunity to counter this by camouflaging the links between tobacco and COVID-19; and promoting vaping products or heated tobacco, even when there is no evidence that these products are safe in the context of transmitting or acquiring COVID-19.

While governments can seize the opportunity to save more lives than COVID-19 can take, the tobacco industry is poised to undermine governments' credibility and ability to do so by “partnering with” or “donating to” them in the guise of so-called “corporate social responsibility,” and shifting public attention towards the use of vaping products and heated tobacco.

III. Recommendations

1. Use the COVID-19 crisis to urge smokers to quit outright

Smokers are more vulnerable to influenza as well as the corona virus that causes the Middle East Respiratory Syndrome (MERS).^{37 38} Once infected with COVID-19, smokers are likely to suffer more serious conditions³⁹ that could lead to premature deaths.

The disease progression of smokers with COVID-19 demonstrates what the adverse effects of smoking look like when there is no latency period. This makes the harms of smoking more real, and makes the urgency to quit more imminent. Quarantine and lockdown regulations instill an environment that fosters health and safety, leaving less room for harmful practices such as smoking. There is widespread concern over the under-capacity of healthcare systems and personnel to address COVID-19; and this provides further motivation to maintain healthy practices, especially to those who are concerned that treatment of smoking-related or smoking-aggravated diseases puts undue strains on healthcare systems.

Hence, a growing number of governments and health experts see the COVID-19 crisis as an opportunity to encourage over 1 billion smokers⁴⁰ in the world to quit smoking outright, in order to reduce the 8 million deaths annually.

COVID-19 and SMOKING

Smoking can increase your risk of developing severe disease if you become infected with COVID-19.
--WHO Director General, March 20, 2020

A systematic review of evidence shows that based on limited data "[smoking is most likely associated with the negative progression and adverse outcomes of COVID-19;](#)" and based on the largest study, the authors calculated that "smokers were 1.4 times more likely ..to have severe symptoms of COVID-19 and approximately 2.4 times more likely to be admitted to an intensive care unit (ICU), need mechanical ventilation or die compared to non-smokers.⁴¹ The paper also cited previous studies^{42 43} showing "that smokers are twice more likely than non-smokers to contract influenza and have more severe symptoms, while smokers were also noted to have higher mortality in the previous MERS-CoV outbreak."⁴⁴

As to vaping and use of heated tobacco products (HTPs), while no evidence exists to directly link COVID-19 risks, there are also no studies that show the safety of vaping or use of HTPs in the context of COVID-19. Nevertheless, there is a study showing vaping-related damage to parts of the respiratory system (in terms of immune suppression and inflammatory response in nasal cells).⁴⁵

2. Raise awareness about the tobacco industry and its tactics and reject its approaches

As part of treaty obligations, WHO FCTC Parties are required to encourage quitting and to protect their respective tobacco control measures from the commercial and vested interests of the tobacco industry (Article 5.3); and the Guidelines for the Implementation of Article 5.3 recommend that Parties raise awareness about tobacco industry tactics. Tobacco companies must be monitored and their tactics exposed in accordance with treaty guidelines⁴⁶ because their corporate behavior resulted in the tobacco epidemic that kills 8 million people annually,⁴⁷ Hence, partnerships with the tobacco industry could erode governments' credibility in upholding public health and in delivering anti-smoking messages in the time of COVID-19.

COVID-19 also highlights the affliction caused by tobacco products to society, and provides a sharp contrast to tobacco companies' claims of being "partners in development." Yet, the tobacco industry, despite its claims of having "transformed and committed to make smokers quit," downplays the role of smoking in COVID-19, questions those calling for outright quitting of smoking, and paves the way to promote the use of novel tobacco and nicotine products (i.e., vaping devices and heated tobacco products).⁴⁸ Further, tobacco companies' messages to investors reveal the industry strategy to further grow alternative addictive products in order to offset investment declines.^{49 50} Finally, the tobacco industry uses "public relations" activities such as "partnerships" and "donations" to enhance its corporate image to enable itself to better market its addictive products including in a manner that attracts children.⁵¹

3. Hold the tobacco industry accountable for harms and deaths suffered by smokers including those suffering from COVID-19

The COVID-19 pandemic magnifies the liability of the tobacco industry in inducing smokers to use its addictive products. The science linking the health harms, including respiratory damage, to tobacco products is robust;⁵² but the tobacco industry has yet to be made accountable for the global scourge.

Tobacco manufacturers can be made accountable for harms suffered and deaths caused by its products and/or its behavior; based on either consumer / product liability laws, or equity and justice provisions in laws that exist in many countries. WHO FCTC Article 19 encourages Parties to strengthen legal and court procedures to facilitate lawsuits against the tobacco industry, while establishing mechanisms for international cooperation. Governments must take the opportunity to exhaust means to recover healthcare costs of tobacco-related harms from large tobacco manufacturers⁵³ (e.g., cases filed in Canada,⁵⁴ Nigeria,⁵⁵ South Korea,⁵⁶ and United States⁵⁷); and explore other means to make them accountable, including by imposing taxes and surcharges to compensate victims and governments for the massive harms caused.

ANNEX 1: TOBACCO INDUSTRY-BACKED ARTICLES IN RELATION TO COVID-19

Publisher/ Date	Author/ Title	Tobacco Links	Messages relating to COVID-19
Filter Magazine March 17, 2020	Helen Redmond A Scientist Persuaded Italy to Exempt Vape Shops from COVID-19 Lockdown ⁵⁸	Filter magazine received funds from FSFW. ⁵⁹ Dr. Riccardo Polosa who was interviewed for the article, is founder of the Center of Excellence for the Acceleration of Harm Reduction in Catania, Italy, which is funded by FSFW.	Convinced the Ministry of Health and the prime minister of Italy to open vape shops after Dr. Polosa said that a number of vapers would return back to smoking after switching to vape, if vape shops are closed. Furthermore, Dr. Polosa justified that due to stress caused by COVID-19, people will smoke at their homes, and if there are no available vape shops open, children will be at risk when exposed to cigarette smoke. Explained how the vaping industry was mobilized to lobby the prime minister of Italy to keep vape shops open amid a lockdown due to COVID-19.
Filter Magazine, March 10, 2020	McGrady, M. COVID-19 and Tobacco Harm Reduction: What's the Relationship? ⁶⁰	Authors declared receiving grants from FSFW. Spokesperson Marewa Glover's links to FSFW was also disclosed. ⁶¹ Filter magazine received funds from FSFW. ⁶²	Concedes the fact that the "general rate of infection from respiratory viruses is higher among smokers" but questioned authorities' statements ⁶³ urging the public to stop smoking and vaping. Highlighted the speculation that large-scale switching (to vaping) would significantly mitigate against future respiratory viruses, utilizing a fallacious argument anchored on tobacco control researchers' theoretical example. ⁶⁴ Posited that smokers' susceptibility to COVID-19 is an opportunity to encourage switching to "vape" (instead of just quitting smoking). ⁶⁵
E-cigarette Research Blog March 9, 2020	Farsalinos, K. Smoking, vaping and the coronavirus (COVID-19) epidemic: Rumors vs. evidence ⁶⁶	E-cigarette Research website is linked to Konstantino Farsalinos who is a cardiologist and researcher at the Onassis Cardiac Surgery Center, University of Patras , which is a grantee of FSFW. ^{67 68}	Pointed to the evidence linking smoking and COVID-19 disease progression as being "weak and inconclusive," while the vaping link to COVID-19 as being non-existent; highlighted the possibility that e-cigarette liquid's main ingredient (propylene glycol) might have some beneficial "anti-bacterial" effects. Failed to mention evidence on potential harms of inhaled propylene glycol, ⁶⁹ and encouraged

Publisher/ Date	Author/ Title	Tobacco Links	Messages relating to COVID-19
			inclusion of propylene glycol nebulizing as part of clinical trials. ⁷⁰
Vice Media March 5, 2020	Hicks, J. Coronavirus Attacks the Lungs. Here's What That Means for Smokers and Vapers ⁷¹	Vice Media received funds from PMI to create content in 2016. ^{72 73 74} Ties between author and tobacco industry were not found.	Provided facts on the link between smoking and vaping but downplayed the risk factors (of smoking/ vaping) that contribute to respiratory vulnerability by suggesting that smokers and vapers just do what others do—wash hands and cough into elbows—without mentioning the importance of quitting smoking.
Metronome March 2, 2020	Scientific research - Coronavirus mostly affects non-smokers ⁷⁵	Metronome is a digital media outlet in Georgia. No further information on tobacco industry link was found. Author not named.	Claimed that the virus is affecting mostly non-smokers and promoted the "benefits" of smoking ⁷⁶ by utilizing a February 17, 2020 study of 140 Wuhan COVID-19 patients in one hospital, where only 2 were smokers. ⁷⁷
Politico February 15, 2020	Owermohle, S. Could tobacco cure coronavirus? Don't laugh. ^{78 79}	Politico previously received funds from PMI for advertisements. ^{80 81} Ties between author and tobacco industry were not found.	Reported on Reynolds American's ongoing research about a potential cure for COVID-19 by genetically manipulating tobacco plants. ^{82 83} (Notably, this news was reported in other media outlets, likely a "press release" from the company.)
American Council on Science and Health (ACSH) January 24, 2020	Alex Berezow WHO Damages Its Reputation On Vaping, Coronavirus	ACSH received funds from BAT, PMI, and Reynolds ⁸⁴	Used UK's critique of WHO's "anti-vaping" position as basis to question WHO's credibility as an institution in light of its restraint from calling the then "novel coronavirus" a public health emergency.

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ENDNOTES:

¹ World Health Organization (14 February 2020). Press conference on Coronavirus disease (COVID-19). Retrieved from https://www.who.int/docs/default-source/coronaviruse/transcripts/who-audio-emergencies-coronavirus-full-press-conference-14feb2020final.pdf?sfvrsn=a96402ed_4 (accessed on 20 March 2020).

² World Health Organization - South-East Asia Indonesia (08 March 2020). Media Statement: Knowing the risks for COVID-19. Retrieved from <https://www.who.int/indonesia/news/detail/08-03-2020-knowing-the-risk-for-covid-19> (accessed on 20 March 2020).

³ News Desk (14 March 2020). 'Smokers in Indonesia are at high risk for COVID-19': WHO. The Jakarta Post. Retrieved from <https://www.who.int/indonesia/news/detail/08-03-2020-knowing-the-risk-for-covid-19> (accessed on 20 March 2020). – "Smokers in Indonesia are at high risk of "severe or critical" infection considering that 63% of adult men in the country are smokers; thus, making them more susceptible to COVID-19."

⁴ Sukes S (15 March 2020). Smokers appear to be at higher risk from coronavirus – expert. The Times of Israel. Retrieved from <https://www.timesofisrael.com/smokers-appear-to-be-at-higher-risk-from-coronavirus-expert/> (accessed on 20 March 2020). – "Smokers appear to be at higher risk from the coronavirus than non-smokers because in China, mortality rates are higher in men than women considering that about 50% of men in China smoke, compared to only 2% of women, according to the chair of the Israeli Medical Association for Smoking Cessation and Prevention."

⁵ Sakuta M (15 March 2020). "[fca_all] Document Industry Manipulation by COVID19." Email message to fca_all@lists.fctc.org.

⁶ Health Service Executive (15 March 2020). At-risk groups and coronavirus. Retrieved from <https://www2.hse.ie/conditions/coronavirus/at-risk-groups.html> (accessed on 20 March 2020). – "Announced 4 countermeasures to prevent the spread of COVID-19: (1) If you feel ill, rest at home and do not overexert yourself. (2) If you are worried about infection, consult your doctor by telephone. (3) Smokers should quit smoking. (4) Consider the secondary harm for elderly people in nursing care...Health Service Executive in Ireland emphasized that smoking increases the risk of getting acute respiratory infection; greater risk of infection lasting longer; and, greater risk of infection being more serious than non-smokers. Smoking affects the immune system and lung tissue which leads to serious infection particularly when a smoker acquires COVID-19."

⁷ The National Council Against Smoking (n.d.). Smoking associated with worse COVID-19 symptoms and outcomes. Retrieved from <https://www.againstsmoking.co.za/single-post/2020/03/13/Smoking-Associated-with-worse-COVID-19-Symptoms-and-Outcomes> (accessed on 20 March 2020). – Recognized that smoking and exposure to secondhand smoke, though do not cause COVID-19, still increase people's vulnerability to infection. Hence, to control the transmission, NCAS encourages people to stop smoking including e-cigarettes or vapes.

⁸ FCTC Secretariat Knowledge Hub on Waterpipe Tobacco Smoking (n.d.). Increased risk of COVID-19 infection amongst smokers and amongst waterpipe users. Retrieved from <https://untobaccocontrol.org/kh/waterpipes/covid-19/> (accessed on 20 March 2020).

⁹ Ritschel C (16 March 2020). Coronavirus: Does Smoking or Vaping Put You at Higher Risk? Independent. Retrieved from <https://www.independent.co.uk/life-style/health-and-families/coronavirus-smoking-vaping-risk-increase-covid-19-symptoms-a9403211.html> (accessed on 20 March 2020).

¹⁰ Feuer, M (02 March 2020). Watch live: New York officials hold press conference on state's first coronavirus case. CNBC. Available at <https://www.cnbc.com/2020/03/02/watch-live-new-york-officials-hold-press-conference-on-states-first-coronavirus-case.html>

(accessed on 20 March 2020). – “‘If you are a smoker or a vaper, that does make you more vulnerable,’ New York Mayor Bill de Blasio said at a March 8 press conference. ‘If you are a smoker or a vaper this is a very good time to stop that habit and we will help you.’”

¹¹ See, e.g., tweet of BAT Belgium (@BE_BAT_official) on 17 March 2020.

¹² See, e.g., retweet of Linda Bauld's tweet by Moira Gilchrist (@DrGilchrist) on 18 March 2020, PMI Vice President on Strategic and Scientific Communications.

¹³ Carrick H (17 March 2020). Coronavirus: Vaping in public places could lead to spread of condition. The Herald. Retrieved from <https://www.heraldscotland.com/news/18310654.coronavirus-vaping-public-places-lead-spread-condition/> (accessed on 20 March 2020).

¹⁴ Glenza J, Kelly S, and Adolphe J (2019). Free-market groups and the tobacco industry - full database. The Guardian. Available at <https://www.theguardian.com/world/ng-interactive/2019/jan/23/free-market-thinktanks-tobacco-control-polices-database#0/?american-conservative-union-foundation> (accessed on 20 March 2020).

¹⁵ TobaccoTactics (n.d.). Reason Foundation. Retrieved from https://www.tobaccotactics.org/index.php?title=Reason_Foundation (accessed on 20 March 2020).

¹⁶ Sullum J (16 March 2020). The CDC's Shift From Vaping to COVID-19 Highlights the Crucial Differences Between Real and Metaphorical Epidemics. Reason Foundation. Retrieved from <https://reason.com/2020/03/16/the-cdcs-shift-from-vaping-to-covid-19-highlights-the-crucial-differences-between-real-and-metaphorical-epidemics/> (accessed on 20 March 2020).

¹⁷ Simons D, et al. (20 March 2020). Covid-19: The role of smoking cessation during respiratory virus epidemics, The BMJ Opinion. Retrieved from <https://blogs.bmj.com/bmj/2020/03/20/covid-19-the-role-of-smoking-cessation-during-respiratory-virus-epidemics/> (accessed on 23 March 2020).

¹⁸ Bloomberg (25 February 2020). Philip Morris CEO Sees Supply Chain Lesson in Coronavirus Crisis [video interview]. Retrieved from <https://www.bloomberg.com/news/videos/2020-02-24/philip-morris-ceo-sees-supply-chain-lesson-in-coronavirus-crisis-video> (accessed on 20 March 2020).

¹⁹ DashVapes (29 February 2020). Coronavirus & Vaping | Should you be worried? [video]. YouTube. Retrieved from <https://www.youtube.com/watch?v=e07u8dUaedk> (accessed on 20 March 2020).

²⁰ McGrady M (10 March 2020). COVID-19 and Tobacco Harm Reduction: What's the Relationship? Filter. Retrieved from <https://filtermag.org/coronavirus-tobacco-harm-reduction/> (accessed on 20 March 2020).

²¹ Redmond H (17 March 2020). A Scientist Persuaded Italy to Exempt Vape Shops from COVID-19 Lockdown. Filter. Retrieved from <https://filtermag.org/italy-vaping-coronavirus/> (accessed on 20 March 2020).

²² Farsalinos K (09 March 2020). Smoking, vaping and the coronavirus (COVID-19) epidemic: Rumors vs. evidence. E-cigarette Research. Retrieved from <http://www.ecigarette-research.org/research/index.php/whats-new/2020/278-corona> (accessed on 20 March 2020).

²³ Supra note 18.

²⁴ Sun L (19 February 2020). These 3 Dividend Stocks Are Immune to the Coronavirus Crisis. The Motley Fool. Retrieved from <https://www.fool.com/investing/2020/02/19/these-3-dividend-stocks-are-immune-to-the-coronavi.aspx> (accessed on 20 March 2020).

²⁵ Franke P (16 March 2020). The Bottom Fishing Club: Altria Group. Seeking Alpha. Retrieved from <https://seekingalpha.com/article/4332111-bottom-fishing-club-altria-group> (accessed on 20 March 2020).

²⁶ British American Tobacco p.l.c. (18 March 2020). BAT Capital Markets Webcast: Building a Better Tomorrow. Investigate. Retrieved from <https://www.investigate.co.uk/article.aspx?id=202003181200076363G> (accessed on 20 March 2020).

²⁷ Supra note 19.

²⁸ Supra note 18.

²⁹ Ibid.

³⁰ Supra note 19.

³¹ DashVapes (13 March 2020). Coronavirus & Vaping | What you need to know [video]. Youtube. Retrieved from <https://www.youtube.com/watch?v=gGTsJDIBu4s> (accessed on 21 March 2020).

³² Personal communications with advocates.

³³ GBD 2017 Risk Factor Collaborators (2018). Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and territories, 1990–2017: A systematic analysis for the Global Burden of Disease Study 2017. The Lancet. Vol. 392, Issue 10159, pp. 1923-1994. Retrieved from [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)32225-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)32225-6/fulltext) (accessed on 23 March 2020).

³⁴ World Health Organization (2003). WHO Framework Convention on Tobacco Control. Retrieved from https://www.who.int/tobacco/framework/WHO_FCTC_english.pdf (accessed on 20 March 2019).

³⁵ World Health Organization (2008). Guidelines for implementation of Article 5.3 of the WHO Framework Convention on Tobacco Control. FCTC/COP3(7). Retrieved from https://www.who.int/fctc/guidelines/article_5_3.pdf?ua=1 (accessed on 20 March 2019).

³⁶ United Nations. WHO Framework Convention on Tobacco Control. Retrieved from <https://sustainabledevelopment.un.org/index.php?page=view&type=30022&nr=186&menu=3170> (accessed on 20 March 2019).

³⁷ Park JE, Jung S, and Kim A (2018). MERS transmission and risk factors: A systematic review. BMC Public Health. Vol. 18, No. 1, pp. 574. Retrieved from <https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-018-5484-8> (accessed on 23 March 2020).

³⁸ Arcavi L & Benowitz NL (2004). Cigarette smoking and infection. Arch Intern Med. Vol. 164, No. 20, pp. 2206-2216. Retrieved from <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/217624> (accessed on 23 March 2020).

³⁹ Vardavas CI & Nikitara K (2020). COVID-19 and Smoking: A systematic review of evidence. Tob. Induc. Dis. Vol. 20. Retrieved from <http://www.tobaccoinduceddiseases.org/COVID-19-and-smoking-A-systematic-review-of-the-evidence,119324,0,2.html> (accessed on 23 March 2020).

⁴⁰ World Health Organization (n.d.). Global Health Observatory data: Prevalence of tobacco smoking. Available at <https://www.who.int/gho/tobacco/use/en/> (accessed on 23 March 2020).

⁴¹ Supra note 39.

⁴² Supra note 37.

⁴³ Supra note 38.

⁴⁴ Supra note 39.

⁴⁵ Martin E, et al. (2016). – E-cigarette use results in suppression of immune and inflammatory-response genes in nasal epithelial cells similar to cigarette smoke. American Journal of Physiology-Lung Cellular and Molecular Physiology. Vol. 311, No.1, pp. L135-L144. Retrieved from <https://journals.physiology.org/doi/prev/20160610-aop/abs/10.1152/ajplung.00170.2016> (accessed on 20 March 2020). – “E-cigarette use results in suppression of immune and inflammatory-response genes in nasal epithelial cells similar to cigarette smoke.”

⁴⁶ Supra note 35.

⁴⁷ Supra note 33.

⁴⁸ Supra note 18.

- ⁴⁹ Supra note 25. – Altria, on the other hand, tries to invite investment by luring on possible favorable economy by January 2021, saying that “holding Altria may prove a smart defensive investing idea.”
- ⁵⁰ Supra note 26. – While BAT takes pride in stating that the “business is resilient and supported by a geographically diversified supply chain from both a manufacturing and distribution standpoint,” and that it has seen “no material impact” on its products, even during the COVID-19 situation.
- ⁵¹ Boseley S, et al. (09 March 2018). How Children Around the World are Exposed to Cigarette Advertising. The Guardian. Retrieved from <https://www.theguardian.com/world/2018/mar/09/how-children-around-the-world-are-exposed-to-cigarette-advertising> (accessed on 11 February 2020).
- ⁵² WHO (2006). Tobacco: Deadly in any form or disguise. Geneva, Switzerland: World Health Organization. Retrieved from https://www.who.int/tobacco/communications/events/wntd/2006/Report_v8_4May06.pdf (accessed on 11 February 2020).
- ⁵³ WHO FCTC Secretariat (n.d.). FCTC Article 19 Civil Liability Toolkit. Available at <https://untobaccocontrol.org/impldb/tobacco-control-toolkit/#/> (accessed on 11 February 2020).
- ⁵⁴ Smoking and Health Action Foundation/ Non-Smokers' Rights Association (2017). Tobacco-Related Litigation in Canada. Retrieved from https://nsra-adnf.ca/wp-content/uploads/2017/04/tobacco-related_litigation_in_canada_2017.pdf (accessed on 11 February 2020).
- ⁵⁵ See, e.g., The Attorney General of Kano State v. British American Tobacco (Nigeria) Limited, et al., High Court of Kano State, Kano, Nigeria.
- ⁵⁶ National Health Insurance Service v. KT&G Corporation and the local units of Philip Morris International and British American Tobacco.
- ⁵⁷ See, e.g., U.S. v. Philip Morris: 1,683 Page Final Opinion; 449 F.Supp.2d 1 (D.D.C. 2006). Retrieved from <https://www.publichealthlawcenter.org/sites/default/files/resources/doj-final-opinion.pdf> (accessed on 08 February 2020).
- ⁵⁸ Supra note 21.
- ⁵⁹ Stopping Tobacco Organization and Products (STOP) (03 June 2019). Latest Tax Return Sheds Light on the Foundation for a Smoke-Free World. Retrieved from https://exposetobacco.org/wp-content/uploads/2019/09/FSFW_Tax_Return.pdf (accessed on 20 March 2020).
- ⁶⁰ Supra note 20.
- ⁶¹ Ibid. – “The author is a recipient of Tobacco Harm Reduction Scholarship from Knowledge-Action-Change (KAC), independently administered by KAC and supported by a grant from the Foundation for a Smoke-Free World (FSFW). Dr. Marewa Glover's Centre of Research Excellence: Indigenous Sovereignty & Smoking, has also received grants from FSFW. The Influence Foundation which operates Filter, has received restricted and unrestricted grants, respectively, from KAC and FSFW.”
- ⁶² Supra note 59. – “Now, the Foundation is similarly funding media outlets, with \$190,000 allocated to Filter Magazine for ‘feature-length pieces, short pieces and original videos.’”
- ⁶³ Supra note 20. – “Current use of e-cigarettes appears to be an independent risk factor for respiratory disease in addition to all combustible tobacco smoking... high prevalence of dual use, which is associated with increased risk beyond combustible tobacco use. – Bhatta, D. and Glantz, S.”...“Dr. Alex Wodak, an addiction medicine physician, prominent drug policy reform advocate and board member of the Australian Tobacco Harm Reduction Association, raised this question in a February 27 email to colleagues...we are in ‘uncharted territory’ when it comes to determining any efficacy of tobacco harm reduction in curtailing COVID-19. He pointed out that public health authorities in a number of countries are recommending that people refrain from smoking to reduce their risks of infection, ‘Although of course that’s not proven yet.’”
- ⁶⁴ Bhatta D & Glantz S (2019). Association of E-Cigarette Use with Respiratory Disease among Adults: A Longitudinal Analysis. American Journal of Preventive Medicine. Vol. 58, Issue 2, pp. 182-190. Retrieved from [https://www.ajpmonline.org/article/S0749-3797\(19\)30391-5/fulltext](https://www.ajpmonline.org/article/S0749-3797(19)30391-5/fulltext) (accessed on 20 March 2020). – The author based its argument on Bhatta & Glantz’s article that mentions a theoretical reduced risk of respiratory infections for vapers vis-a-vis smokers, when this was mentioned in the context of challenging the value of the alleged theoretical risk reduction due to dual use (use of both vaping devices and cigarettes)—not to prove the matter. “Conclusions: Use of e-cigarettes is an independent risk factor for respiratory disease in addition to combustible tobacco smoking. Dual use, the most common use pattern, is riskier than using either product alone.”
- ⁶⁵ Supra note 20. – “The fast-developing situation with COVID-19 requires public health authorities to make decisions without the benefit of substantial evidence, but balanced communications are essential. The far more predictable health harms of smoking continue to contrast with the substantial relative benefits of switching to risk-reduced nicotine products (of which some, such as oral snus, have no known respiratory impact). If that key message—already denied by the WHO and many others—were to be further obscured by stop-vaping calls amid the COVID-19 crisis, there’s every likelihood that it will further exacerbate the harms of this outbreak.”
- ⁶⁶ Supra note 22.
- ⁶⁷ Southeast Asia Tobacco Control Alliance (14 September 2019). The ‘harm reduction trio’ peddle a harmful message. Retrieved from <https://tobaccowatch.seatca.org/index.php/2019/09/16/the-harm-reduction-trio-peddle-a-harmful-message/> (accessed on 20 March 2020).
- ⁶⁸ TobaccoTactics (n.d.). Global Tobacco and Nicotine Forum. Retrieved from https://www.tobaccotactics.org/index.php?title=Global_Tobacco_and_Nicotine_Forum_2019 (accessed on 20 March 2020).
- ⁶⁹ National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Population Health and Public Health Practice; Committee on the Review of the Health Effects of Electronic Nicotine Delivery Systems (2018). Toxicology of E-Cigarette Constituents. In: Public Health Consequences of E-Cigarettes. Eaton DL, Kwan LY, and Stratton K (eds.). Washington, DC: National Academies Press. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK507184/> (accessed on 20 March 2020). – “Finding: Substantial toxicological data indicate that oral exposure to propylene glycol is not likely to be associated with adverse health effects. However, the data from inhalation exposure to propylene glycol are limited. In some individuals, exposure to propylene glycol aerosols in concentrations found in e-cigarettes has been shown to cause irritation to the eyes and throat.”
- ⁷⁰ Supra note 22.
- ⁷¹ Hicks J (05 March 2020). Coronavirus Attacks the Lungs. Here's What That Means for Smokers and Vapers. Vice Media. Retrieved from https://www.vice.com/en_in/article/n7j9jw/coronavirus-lungs-risks-for-smokers-or-vapers (accessed on 20 March 2020).
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⁷⁶ Ibid.

⁷⁷ Ibid.

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⁸⁰ Supra note 72.

⁸¹ Supra note 59. – *"The tobacco industry has a history of co-opting media outlets in order to disseminate industry-favourable messages. In 2018 and 2019, PMI funded Filter Magazine, Politico and Vice Media."*

⁸² Supra note 78.

⁸³ Supra note 79.

⁸⁴ Kroll A & Schulman J (28 October 2013). Leaked Documents Reveal the Secret Finances of a Pro-Industry Science Group. Retrieved from <https://www.motherjones.com/politics/2013/10/american-council-science-health-leaked-documents-fundraising/> (accessed on 20 March 2020).