

**Texas House of Representatives
House Committee on Public Health
Testimony Regarding House Bill 749
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Chairwoman Thompson and Members of the Committee, thank you for the opportunity to submit this testimony on the behalf of Altria and its affiliates Philip Morris USA, John Middleton, and US Smokeless Tobacco Company regarding the legal age of purchase for tobacco products.

Altria Supports Prompt Enactment of House Bill 749

Altria supports raising the minimum age to purchase tobacco products to twenty-one. We encourage the Texas Legislature to enact House Bill 749 without delay.

Our companies have long supported legislation to prevent underage access to tobacco products. We have advocated for strong minimum age laws in all U.S. jurisdictions. We lobbied for federal legislation enacted in 2009 empowering FDA to comprehensively regulate tobacco products – including provisions specifically intended to reduce underage use.¹ And, most recently, we played a leadership role in advancing legislation in all states extending existing minimum age statutes to cover emerging product categories like e-vapor.

While underage tobacco use of conventional tobacco products is at the lowest levels in a generation,² the use of e-vapor products among twelve- to seventeen-year-olds has increased alarmingly in the past year. Citing data showing increases of e-vapor use of 80% among high schoolers and 50% among middle schoolers, FDA Commissioner Scott Gottlieb has characterized this trend as an “epidemic.”³ The U.S. Surgeon General has reached the same conclusion.⁴

1 U.S. Food & Drug Administration, “Family Smoking Prevention and Tobacco Control Act - An Overview,” <https://www.fda.gov/TobaccoProducts/GuidanceComplianceRegulatoryInformation/ucm246129.htm>.

2 Monitoring the Future dataset, University of Michigan, 2018, <http://www.monitoringthefuture.org/data/data.html>. (The survey is funded by the National Institute on Drug Abuse (NIDA), which is housed in the National Institutes of Health (NIH). The survey is conducted by the University of Michigan.)

3 U.S. Food & Drug Administration, “Statement from FDA Commissioner Scott Gottlieb, M.D., on new steps to address epidemic of youth e-cigarette use,” Sept. 12, 2018, <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm620185.htm>.

4 U.S. Surgeon General, “Get the Facts,” 2019, <https://e-cigarettes.surgeongeneral.gov/getthefacts.html>.



In light of the FDA's call to address this issue, we believe the time has come to enact legislation raising the minimum age for all tobacco products to twenty-one. We are supporting this step because we believe it is the most effective step available to reverse rising underage e-vapor rates. Data shows that youth under eighteen get tobacco products – including e-vapor – primarily through “social access,” that is, from friends or siblings who are eighteen or older.⁵ Approximately 80% of high school students in the U.S. turn eighteen years old before they graduate.⁶ By raising the minimum age to twenty-one, no high school student should be able to purchase tobacco products legally.

We are sensitive to the argument that young people eighteen to twenty are treated as adults in our society for many important purposes – voting, paying taxes, and serving in our military, to name just a few. But the FDA's recent call to action on underage vapor use has persuaded us that the time has come to take this step. A minimum age of twenty-one will put tobacco products in line with alcoholic beverages, which have been subject to state minimum age laws of twenty-one for decades, and in line with cannabis as well, which is subject to a minimum age of twenty-one in every state that has legalized it recreationally.

We believe this policy change is important for preserving the reduced harm potential of non-combustible technologies like e-vapor. There is a growing public health consensus that products that do not burn and produce no smoke are significantly less harmful than conventional cigarettes.⁷ While nicotine is addictive, it is the smoke from conventional cigarettes – not the nicotine – that leads to most tobacco-related harm.⁸ New and emerging technologies like e-vapor and heat-not-burn tobacco products offer tremendous promise for reducing harm. But FDA has made clear that this harm reduction future cannot be fully achieved without doing more to reverse underage e-vapor use rates.

For these reasons, we join with others calling for a minimum age of twenty-one to purchase tobacco products, and we therefore encourage the Texas Legislature to promptly pass House Bill 749.

5 Altria Client Services analysis of Population Assessment of Tobacco and Health (PATH) Study, Wave 3 data (2015-16). PATH is a joint project of the National Institutes of Health (NIH) and the U.S. Food and Drug Administration (FDA).

6 “Tobacco 21 Fact Sheet,” Tobacco 21, <https://tobacco21.org/tobacco-21-fact-sheet/>.

7 See, e.g., Mitchell Zeller et al., “The Strategic Dialogue on Tobacco Harm Reduction: A Vision and Blueprint for Action in the US,” 18 Tobacco Control, 324, 325 (2009); Dorothy K. Hatsukami et al., Developing the Science Base for Reducing Tobacco Harm, 9 Nicotine & Tobacco Res. S537, S546 (2007).

8 “[W]hat primarily causes death and disease from tobacco use isn't the nicotine in these products. It's the act of lighting tobacco on fire to free that drug for inhalation.” FDA Commissioner Gottlieb, <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm620185.htm>.

