

Attachment 2b - Public Comments to the 60-day Federal Register Notice

From: jean public <jeanpublic1@gmail.com>

Sent: Monday, November 21, 2022 6:07 PM

To: John Gilmore <JGILMORE@autismactionnetwork.org>; OMB-Comments (CDC) <omb@cdc.gov>; info@njaicv.org; sue@njaicv.org; info@icandecide.org; info@childrenshealthdefense.org

Cc: editor@mercola.com

Subject: Fwd: nobody can trust surveys done by this agency - its a lying corrupt agency pal of moneymaking big pharma

public comment on federal register

i bet this has been done the same nonsense way since 1970 so that there is no real information here on the state of american health. citizens are dying younger than ever before in history. ever before. we have lousy food that is full of chemicals to kill us. our air/water and soil is chemically tainted. and this agency has been not finding anything wrong for a ver long time and infact putting into our bodies dog cells, primate cells, viruses and mras experimental gene thereapy. and they send out the same information they sent in 1970. i think we need a change at the dr fauci craphouse called the cdc right now. because the filth coming from it is just too much. this comment is for the public record. we want cdc closed down. we want to start fresh. we dont want any more animals abused either. no more taxpa dollars to abuse dogs/primates, cats, etc inj labs anymore. this comment is for teh public record. the ethics of this dept cdc is beyond belief corrupted. please receipt. jean publiee jeanpublic1@gmail.com

----- Forwarded message -----

From: jean public <jeanpublic1@gmail.com>

Date: Mon, Nov 21, 2022 at 12:31 PM

Subject: nobody can trust surveys done by this agency - its a lying corrupt agency pal of moneymaking big pharma

To: <jeanpublic1@gmail.com>

[Federal Register Volume 87, Number 223 (Monday, November 21, 2022)]

[Notices]

[Pages 70828-70830]

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[FR Doc No: 2022-25245]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-23-0950; Docket No. CDC-2022-0133]

Proposed Data Collection Submitted for Public Comment and
Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of
Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of its continuing efforts to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed revision of the information collection project titled National Health and Nutrition Examination Survey (NHANES). NHANES produces descriptive statistics, which measure the health and nutrition status of the general population.

DATES: CDC must receive written comments on or before January 20, 2023.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2022-0133 by either of the following methods:

Federal eRulemaking Portal: www.regulations.gov. Follow the instructions for submitting comments.

Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to www.regulations.gov.

Please note: Submit all Federal comments through the Federal eRulemaking portal (www.regulations.gov) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329; Telephone: 404-639-7570; Email: omb@cdc.gov.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected;

4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses; and

5. Assess information collection costs.

Proposed Project

The National Health and Nutrition Examination Survey (NHANES), (OMB Control No. 0920-0950, Exp. 04/30/2023)--Revision--National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 306 of the Public Health Service (PHS) Act (42 U.S.C. 242k), as amended, authorizes that the Secretary of Health and Human Services (DHHS), acting through NCHS, shall collect statistics on the extent and nature of illness and disability; environmental, social and other health hazards; and determinants of health of the population of the United States.

The National Health and Nutrition Examination Survey (NHANES) has been conducted periodically between 1970 and 1994, and continuously since 1999 by the National Center for Health Statistics (NCHS), CDC.

NHANES produces descriptive statistics, which measure the health and nutrition status of the general population. With physical examinations, laboratory tests, and interviews, NHANES studies the relationship between diet, nutrition and health in a representative sample of the United States. NHANES monitors the prevalence of chronic conditions and risk factors and is used to produce national reference data on height, weight, and nutrient levels in the blood. Results from more recent NHANES can be compared to findings reported from previous surveys to monitor changes in the health of the U.S. population over time.

In this Revision, the program is not considering any substantial changes to NHANES content or procedures. The proposed changes being requested

[[Page 70829]]

include modifications previously approved via non-substantive change requests in addition to a request for three years of approval. As in previous years, the base sample will remain at approximately 5,000 interviewed and examined individuals annually. It is possible that the survey may have to adapt its plans in response to the novel Coronavirus Disease (COVID-19) or related concerns.

NCHS collects personally identifiable information (PII). Participant level data items will include basic demographic information, name, address, Social Security number, Medicare number and participant health information to allow for linkages to other data sources such as the National Death Index and data from the Centers for Medicare and Medicaid Services (CMS).

A variety of agencies sponsors data collection components on NHANES. To keep burden down and respond to changing public health research needs, NCHS cycles in and out various components. The 2021-22 NHANES physical examination includes the following components:

anthropometry (all ages), liver elastography (ages 12 and older), standing balance (ages 20-69), 24-hour dietary recall via phone (all ages), blood pressure measurement (ages eight and older), and dual X-ray absorptiometry (DXA) (ages 8-69, total body scan). While at the examination center, additional interview questions are asked of participants and a second 24-hour dietary recall (all ages) is scheduled to be conducted by phone 3-10 days later.

The 2021-22 survey is similar to what was fielded in 2019-20. NHANES may conduct developmental projects, with a focus on planning for NHANES 2024 and beyond. These may include activities such as tests of new equipment, crossover studies between current and proposed methods, test of different study modes, settings or technology, outreach materials, incentive strategies, sample storage and processing or sample designs. The biospecimens collected for laboratory tests include urine and blood. Serum, plasma and urine specimens are stored for future testing, including genetic research, if the participant consents. Consent to store DNA is continuing in NHANES.

Beginning in 2021, NHANES added the following laboratory tests: Acetylcholinesterase Enzyme Activity in whole blood; an Environmental Toxicant in Washed Red Blood Cells (Hemoglobin Adducts); Environmental Toxicants in serum (seven terpenes); Environmental Toxicants in urine (seven volatile organic compound (VOC) metabolites); Infectious Disease Markers in serum (Enterovirus 68 (EV-D68) and Human Papilloma Virus (HPV) in serum); Nutritional Biomarkers in plasma (Four trans-fatty acids (TFA)); and two Nutritional Biomarkers in serum.

Additionally, at the start of the 2021 survey year, the following Laboratory Tests were modified: Steroid hormones in serum (eleven steroid hormones). Cycling out of NHANES is the Blood Pressure Methodology Study and laboratory tests of Adducts of Hemoglobin (Acrylamide, Glycidamide) and Urine flow rate.

Most sections of the NHANES interviews provide self-reported information to be used in combination with specific examination or laboratory content, as independent prevalence estimates, or as covariates in statistical analysis (e.g., socio-demographic characteristics). Some examples include alcohol, drug, and tobacco use, sexual behavior, prescription and aspirin use, and indicators of oral, bone, reproductive, and mental health. Several interview components support the nutrition-monitoring objective of NHANES, including questions about food security and nutrition program participation, dietary supplement use, and weight history/self-image related behavior.

NHANES will continue multi-mode screening and electronic consent procedures. Our yearly goal for interview, exam and post exam components is 5,600 participants. To achieve this goal, we may need to screen up to 8,300 individuals annually. Burden for individuals will vary based on their level of participation. For example, infants and children tend to have shorter interviews and exams than adults. This is because young people may have fewer health conditions or medications to report so their interviews take less time or because certain exams are only conducted on individuals 18 and older. In addition, adults often serve as proxy respondents for young people in their families.

Participation in NHANES is voluntary and confidential. CDC requests OMB approval for a three-year extension, with 65,630 annualized burden hours. There is no cost to respondents other than their time to participate.

Estimated Annualized Burden Hours

					Number	
of	Average burden		Form name	Number of	responses	
per	Type of respondent	Total burden		respondents	respon	
t	(in hours)	(in hours)			nden	
Individuals.....			Screeners.....	8,300		
1	10/60	1,383				
in households.....						
Individuals in						
households.....	Household		5,600	1		
1	5,600					
			Interview.			
Individuals in households.....			MEC Interview			
&	5,600		1	2.5	14,000	
			Examination.			
Individuals in						
households.....	Telephone		5,600	1		
1.3	7,280					
			Dietary Recall			
			& Dietary			
			Supplements.			
Individuals in						
households.....	Flexible		5,600	1	2	
0/60	1,867					
			Consumer			
			Behavior Survey			
			Phone Follow-Up.			
Individuals in						
households.....	Developmental		3,500	1		
3	10,500					
			Projects &			
			Special Studies.			
Individuals in households.....			24-hour			
wearable	1,000		1	25	25,000	
			device projects.			
Total.....						
...		65,630				

[[Page 70830]]

Jeffrey M. Zirger,
Lead, Information Collection Review Office, Office of Scientific
Integrity, Office of Science, Centers for Disease Control and
Prevention.

[FR Doc. 2022-25245 Filed 11-18-22; 8:45 am]

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PUBLIC SUBMISSION

As of: 1/23/23, 1:38 PM Received: January 19, 2023 Status: Posted Posted: January 19, 2023 Tracking No. ld3-3db8-l6ak Comments Due: January 23, 2023 Submission Type: Web
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Docket: CDC-2022-0133
National Health and Nutrition Examination Survey 0920-0950

Comment On: CDC-2022-0133-0001
National Health and Nutrition 2022-25244

Document: CDC-2022-0133-0002
Comment from Truth Initiative

Submitter Information

Email: makbar@truthinitiative.org
Organization: Truth Initiative

General Comment

See attached file from Truth Initiative.

Attachments

Truth Initiative comment on NHANES



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CEO and President
Truth Initiative

January 19, 2023

Jeffrey M. Zirger

Information Collection Review Office
Centers for Disease Control and Prevention
1600 Clifton Road, N.E.
MS H21-8
Atlanta, GA 30329

Re: The National Health and Nutrition Examination Survey (NHANES), (OMB No. 0920-0950, Exp. 04/30/2023) – Revision — National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC) Docket No. CDC-2022-0133

Dear Mr. Zirger:

Truth Initiative welcomes the opportunity to submit comment regarding the National Health and Nutrition Examination Survey (NHANES).

Truth Initiative is America's largest nonprofit public health organization dedicated to a future where tobacco and nicotine are things of the past. Our mission is clear: achieve a culture where young people reject smoking, vaping and nicotine. We believe each individual has the right to live in a world free from tobacco and nicotine dependence and tobacco-related death and disease. Our proven-effective, nationally recognized truth® public education campaign has prevented millions of young people from smoking, our This is Quitting vaping cessation program has helped over 500,000 young people begin their journey to quit vaping, and over 590,000 students have engaged with our Vaping: Know the Truth school curriculum. These programs and others, along with our rigorous scientific research and policy work, are making strides to end the tobacco epidemic.

Truth Initiative applauds the goal of the NHANES to collect data measuring the health and nutrition status of the U.S. population. Because of the importance of the NHANES, we want to take this opportunity to suggest ways to improve the survey to enhance our understanding of tobacco product use among Americans.

Truth Initiative urges the CDC to consider the following recommendations regarding the NHANES.



1. Truth Initiative recommends changing the past day range in Questions SMQ.682, SMQ.710, SMQ.720, SMQ.740, SMQ.771, SMQ.845, SMQ.846, SMQ.849, SMQ.851, and SMQ.863.

Several questions throughout the NHANES survey ask about current use of tobacco products by asking if the participant used these products within the past 5 days. However, other national surveys that ask about current use of tobacco products, including the Population Assessment of Tobacco and Health Study, the National Youth Tobacco Survey, the Behavioral Risk Factor Surveillance System, the National Youth Risk Behavior Surveys, and the National Health Interview Survey, all ask if the participant used these products within the past 30 days. For consistency, we urge CDC to do the same in the NHANES.

2. Truth Initiative recommends adding more brand names of e-cigarettes to SMQ.846.

Currently, SMQ.846 asks the following: “During the past 5 days, including today, did you use e-cigarettes? You may also know them as JUUL™, vape-pens, vapes, hookah-pens, e-hookahs, or vaporizers. These are battery-powered, usually contain liquid nicotine, and produce vapor instead of smoke?” While JUUL remains a popular brand, it is important to include other brands that are popular with youth. We recommend that SMOK, Suorin, Vuse, blu, Elf Bar, and Stig be added as brand examples, which are all popular e-cigarette brands and most of which are used as brand examples in the National Youth Tobacco Survey.

Further, research suggests that youth may be using e-cigarette products and know them only by brand name, thus leading them to not consider themselves e-cigarette users. A study using 2018 data found that a notable proportion of adolescents reported using JUUL but did not answer affirmatively to questions about e-cigarette use, suggesting that asking about e-cigarettes alone will underestimate prevalence.¹ Thus, it is important to include brand-specific questions when assessing e-cigarette use.

3. Truth Initiative recommends adding brand examples of regular cigars, cigarillos, and little filtered cigars to SMQ.682, SMQ.692, and SMQ.771.

Similarly, brand name examples are important in questions about cigars in order to more accurately measure prevalence of use, especially of little cigars and cigarillos. A study of youth tobacco users found that 41 percent reported smoking Black & Milds (a leading cigarillo brand) or wrote in another cigar brand as the type of cigarette they usually smoke. This is likely due to the similarities in product design between little cigars/cigarillos and cigarettes. A third of these respondents answered “no” when asked if they had smoked a cigar in the past 30 days. Assessment of brand-specific cigars nearly doubled the reporting among adolescent users.² Thus, we would recommend changing SMQ.682, SMQ.692, and SMQ.771 to include brand name examples used in the National Youth Tobacco Survey: Swisher Sweets, Black and Mild, Garcia y Vega, Cheyenne, White Owl, and Dutch Masters.



4. *Truth Initiative recommends asking about use of nicotine pouches.*

Tobacco companies have begun selling nicotine pouches, which are sold as pouches similar to snus but do not contain tobacco leaf. Instead, the pouches are filled with a nicotine powder. Tobacco companies have indicated in applications submitted to the FDA that these products are for consumers who want alternatives to smoking cigarettes – or even to quit smoking cigarettes - but not necessarily stop nicotine consumption. Anecdotal evidence from Twitter indicates many young vapers are recommending Zyn nicotine pouches to their friends who are looking to quit vaping or smoking. Additionally, sales of nicotine pouches have increased considerably since 2016.³ Thus, we recommend adding the following questions:

Nicotine pouches are small, flavored pouches that contain nicotine, and are placed between the lip and gum. Nicotine pouches are different from other smokeless tobacco products such as snus, dip, or chewing tobacco, because they do not contain any tobacco leaf. Common brands are Zyn, on!, and Velo.

During the past 30 days, including today, did you use a nicotine pouch?

Yes

No

REFUSED

DON'T KNOW

5. *Truth Initiative recommends adding questions about flavored tobacco product use.*

Flavors play a significant role in drawing youth and young adults to tobacco products. Federal law bans flavors in cigarettes — excluding menthol — but not in other tobacco products, such as smokeless tobacco, cigars, hookah and e-cigarettes. These products come in an array of candy, fruit, dessert and cocktail flavors, such as sour apple, cherry, grape, chocolate, strawberry margarita, appletini, piña colada, cotton candy and cinnamon roll. Flavored tobacco products also typically have bright, colorful packages and are often sold individually and cheaply, making them even more appealing to youth and young adults. It would be helpful to know the prevalence of flavored tobacco product use among youth and adults to inform policymakers making policy decisions regarding flavored tobacco products. This information would also be useful for identifying disparities in flavored tobacco use.

The CDC should add questions regarding the use of flavored e-cigarettes, cigars, pipes, and smokeless tobacco products in the NHANES because:

- E-cigarette manufacturers capitalize on offering many kid-friendly flavors, such as mint, cotton candy and gummy bear.⁴ Youth e-cigarette users cite flavors as a top reason they began using e-cigarettes, second only to use by a family member or



friend.⁵

- As a result of the Family Smoking Prevention and Tobacco Control Act in 2009, the Food and Drug Administration banned flavored cigarettes, except menthol. Because the FDA did not at that time have jurisdiction over cigars, cigar manufacturers took advantage of this loophole and began to heavily market and promote flavored cigar products.⁶
- Many hookah tobacco companies offer multiple flavors in their product lineup, which may entice hookah use among young people.⁷ A focus group of young adult hookah smokers showed that participants found the wide variety of hookah flavors appealing and liked that they could personalize their smoking experience by mixing and customizing flavors.⁸ Additionally, young adults perceive hookah as less harmful and less addictive than cigarettes.^{9–12}
- A study of internal tobacco industry documents found that smokeless tobacco product manufacturers added flavors to their products to attract new users, especially young males.¹³

A number of tobacco products are available in “concept” flavors, with vague non-characterizing descriptions on packaging that do not expressly refer to the flavors therein. For example, Elf Bar’s Elfbull Ice, Tropical Rainbow Blast, and Energy and Swisher Sweets’ Purple Swish, Island Bash, Tropical Storm, Diamonds, Green, and Smooth are all concept-flavored tobacco products. Because youth and young adults may not recognize these products as being flavored, it is important to include examples of concept flavors in questions regarding flavored tobacco products.

Thus, we recommend adding the following questions after SMQ.692A and SMQ.692B:

Were any of the products that you smoked flavored to taste like menthol, mint, clove or spice, alcoholic drinks, candy, fruit, chocolate, or concept flavors such as “ice”, “purple”, or “island bash”, or any other flavor?

Yes

No

REFUSED

DON’T KNOW

What flavors were the cigarettes, pipes, regular cigars, cigarillos, little filtered cigars, water pipes, and hookahs with tobacco that you used in the past 30 days? (Select one or more)

Menthol

Mint

Clove or spice

Fruit

Chocolate

Alcoholic drinks (such as wine, margarita, or other cocktails)

Candy, desserts, or other sweets

Concept flavors like ice, purple, or island bash



Some other flavor not listed here
REFUSED
DON'T KNOW

We recommend adding the following question after SMQ.849:

What flavors were the e-cigarettes that you used in the past 30 days? (Select one or more)

Tobacco
Menthol
Mint
Clove or spice
Fruit
Chocolate
Alcoholic drinks (such as wine, margarita, or other cocktails)
Candy, desserts, or other sweets
Concept flavors like ice, purple, or island bash
Some other flavor not listed here
REFUSED
DON'T KNOW

We recommend adding the following questions after SMQ.853:

Were any of the smokeless tobacco products that you used in the past 30 days flavored to taste like menthol, mint, clove or spice, alcoholic drinks, candy, fruit, chocolate, or concept flavors such as “frost”, “mellow”, or “robust”, or any other flavor?

Yes
No
REFUSED
DON'T KNOW

What flavors were the smokeless tobacco products that you used in the past 30 days?
(Select one or more)

Menthol
Mint
Clove or spice
Fruit
Chocolate
Alcoholic drinks (such as wine, margarita, or other cocktails)
Candy, desserts, or other sweets
Concept flavors like ice, purple, or island bash
Some other flavor not listed here
REFUSED
DON'T KNOW



6. Truth Initiative recommends asking about the nicotine strength of e-cigarettes used.

Given that the use of higher concentration of nicotine is associated with greater dependence¹⁴ and that nicotine strengths have increased in e-cigarettes in the last several years,¹⁵ we recommend asking about the strength of nicotine in the e-cigarettes used. A recent study from the CDC in partnership with Truth Initiative shows that sales of e-cigarettes with the highest levels of nicotine (5% or greater nicotine strength) have grown drastically in the past five years, increasing from 5% of total e-cigarette sales in 2017 to 81% in 2022, a nearly 15-fold increase. For disposable e-cigarettes, which are the most popular type of e-cigarette with youth and come in many flavors, the increase is even steeper. More than 90% of disposable e-cigarettes sold contained the highest levels of nicotine, compared to 0% in 2017.¹⁵

What was the concentration of nicotine in the e-cigarette you used most often in the past 30 days?

- 1-3mg/mL or 0.1-0.3%
- 4-6mg/mL or 0.4-0.6%
- 7-12mg/mL or 0.7-1.2%
- 13-17mg/mL or 1.3-1.7%
- 18-24mg/mL or 1.8-2.4%
- 25-39mg/mL or 2.5-3.9%
- 40-49mg/mL or 4.0-4.9%
- 50-59mg/mL or 5.0-5.9%
- 60+mg/mL or 6.0+%
- REFUSED
- DON'T KNOW

7. Truth Initiative recommends adding a question about whether any attempts to quit e-cigarettes have been made.

We recommend asking respondents who currently use e-cigarettes if they have made any attempts to quit e-cigarette use in the past 12 months:

During the past 12 months, have you stopped using e-cigarettes for longer than one day because you were trying to quit using e-cigarettes?

- Yes
- No
- REFUSED
- DON'T KNOW

Truth Initiative appreciates CDC taking these comments into account as it develops the NHANES. As we stated above, Truth Initiative greatly values data from the NHANES. It is



critical that we have the appropriate information about tobacco products in order to best determine how to protect the public health from the deadly effects of tobacco, especially as the breadth and variety of tobacco products continues to change. Please do not hesitate to contact Maham Akbar, Public Policy Director at makbar@truthinitiative.org or 202-454-5932, should you need more information or have questions about this submission.

Sincerely,

A handwritten signature in black ink that reads "Robin Koval". The signature is fluid and cursive.

Robin Koval
CEO and President



References

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