

Health Impact of Menthol Cigarettes and Flavored Cigars



Flavors are a marketing ploy tobacco manufacturers use to target youth and young people to a lifetime of addiction. Adding flavors can improve the ease of use of a product by masking harsh effects, facilitating nicotine uptake, and increasing a product's overall appeal.ⁱ

Menthol is derived from natural mint products or developed synthetically.ⁱⁱ Menthol was first added to tobacco products in the 1920s and 1930s as a way to reduce the harshness of cigarette smoke and to advertise cigarettes as a "smoother, healthier" option.ⁱⁱⁱ Tobacco manufacturers add menthol to cigarettes to improve the taste, flavor, aroma of cigarettes and create a smoothing or cooling effect - making it easier for non-users, especially youth, to start smoking.^{iv}

Candy, fruit, mint and menthol flavorings in tobacco products are a promotional tool to lure new, young users, and are aggressively marketed with creative campaigns by tobacco companies.^v Cigars, cigarillos, and little cigars are all sold in many flavors that are appealing to young people, such as banana, mango, chocolate, and grape. The negative health impact of menthol cigarettes and flavored tobacco products have been substantial.

The Food and Drug Administration (FDA) and its tobacco products advisory committee have concluded that menthol poses additional risks as compared to cigarettes without menthol.^{xxiii, xxiv}

Initiation, Addiction, and Cessation

Menthol has been shown to increase smoking initiation, decrease successful quitting, and lead to greater addiction, all independent of the damaging effects of nicotine. Menthol may also contribute to youth progressing to regular smoking as compared to non-menthol cigarettes. Many youth report starting to use tobacco with a flavored product.^{vi} First use of a flavored cigar was associated with current regular use of these products compared to first use of an unflavored cigar.^{vii} Furthermore, youth report flavors as a leading reason why they use tobacco products and perceive flavored products as less harmful.^{viii, ix}

All tobacco products, including cigars, contain nicotine, which may induce dependence and harm health.^x Use of flavored cigars are associated with increased tobacco dependence.^{xi} And unfortunately, young people who use tobacco products are more likely to become addicted than adults.^{xii}

In addition, adults who smoke menthol cigarettes make more quit attempts but have less success compared to adults who smoke non-menthol cigarettes.^{xiii} This is exacerbated by race/ethnicity where non-Hispanic Black adult smokers report the greatest interest in quitting, but the least success.^{xiv}

Cancer in the Black Community

Black people have the highest death rates and shortest survival rates of any racial/ethnic group in the US for most cancers.

- 25,690 Black people will be diagnosed with and 14,160 will die from lung cancer in 2022.
- Lung cancer is the most common cause of cancer death among Black men.

Cancer disparities are largely driven by social mechanisms like structural racism, but also the direct actions of the tobacco industry in targeting its products to these communities.

Disease and Death

From 1980 to 2018, menthol cigarettes were responsible for 10.1 million more people smoking, 3 million life-years lost and 378,000 premature deaths.^{xv} African Americans made up 15% of the increase in people smoking, 41% of the life-years lost and 50% of premature deaths despite only comprising 12% of the total U.S. population.^{xvi} This amounted to 1.5 million new people who smoked, 1.5 million life-years lost, and 157,000 smoke-related premature deaths among African Americans.

In 2011, FDA's Tobacco Products Scientific Advisory Committee concluded that without FDA's action on menthol, by the end of 2020, over 4,700 excess African American deaths will have been caused by menthol and over 460,000 more African Americans will have started smoking because of the presence of menthol in cigarettes.^{xvii}

Cigarette smoke, including menthol, is responsible for 480,000 preventable premature deaths in the U.S. every year, and costs more than \$300 billion in medical costs and lost productivity.^{xviii} Smoking accounts for almost 30% of all cancer deaths, including 80% of lung cancer deaths, as well as contributing to other illnesses like heart and lung disease.^{xix}

Regular cigar smoking increases the risk of cancers of the lung, oral cavity, larynx, and esophagus.^{xx} In fact, people who smoke cigars are four to ten times more likely to die from laryngeal, oral or esophageal cancers than non-smokers.^{xxi} Heavy cigar smoking also increases the risk of developing lung diseases, such as emphysema and chronic bronchitis.^{xxii}

April 2022

ⁱ FDA Guidance for Industry and FDA Staff, "General Questions and Answers on the Ban of Cigarettes that Contain Certain Characterizing Flavors (Edition 2) ("FDA Guidance on Characterizing Flavors").

ⁱⁱ Tobacco Products Scientific Advisory Committee. Menthol Cigarettes and Public Health: Review of the Scientific Evidence and Recommendations pdf icon[PDF–15.3 MB]external icon. Rockville, MD: US Department of Health and Human Services, Food and Drug Administration; 2011.

ⁱⁱⁱ Food and Drug Administration. Preliminary Scientific Evaluation of the Possible Public Health Effects of Menthol Versus Nonmenthol Cigarettes pdf icon[PDF–1.6 MB]external icon. 2013.

^{iv} U.S. National Cancer Institute. A Socioecological Approach to Addressing Tobacco-Related Health Disparities. National Cancer Institute Tobacco Control Monograph 22. NIH Publication No. 17-CA-8035A. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, National Cancer Institute; 2017.

^v Delnevo, C, et al., "Preference for flavoured cigar brands among youth, young adults and adults in the USA," Tobacco Control, epub ahead of print, April 10, 2014. King, BA, et al., "Flavored-Little-Cigar and Flavored-Cigarette Use Among U.S. Middle and High School Students," Journal of Adolescent Health 54(1):40-6, January 2014.

^{vi} Villanti AC, Johnson AL, Glasser AM, et al. Association of Flavored Tobacco Use With Tobacco Initiation and Subsequent Use Among US Youth and Adults, 2013-2015. JAMA Netw Open. 2019;2(10):e1913804. doi:10.1001/jamanetworkopen.2019.13804

^{vii} Villanti AC, Johnson AL, Glasser AM, et al. Association of Flavored Tobacco Use with Tobacco Initiation and Subsequent Use Among US Youth and Adults, 2013-2015. JAMA Netw Open. 2019; 2(10):e1913804.

^{viii} Ambrose et al. Flavored tobacco product use among U.S. youth aged 12-17 years, 2013-2014. JAMA, 2015; 314(17): 1871-3.

^{ix} Huang L-L, Baker HM, Meernik C, Ranney LM, Richardson A, Goldstein AO. Impact of non-menthol flavours in tobacco products on perceptions and use among youth, young adults and adults: a systematic review. Tobacco Control 2016.

^x *The Health Consequences of Smoking - 50 Years of Progress*. U.S. Department of Health and Human Services; 2014.

<https://pubmed.ncbi.nlm.nih.gov/24455788/>

^{xi} Odani S, Armour B, Agaku IT. Flavored Tobacco Product Use and Its Association With Indicators of Tobacco Dependence Among US Adults, 2014-2015. Nicotine Tob Res Off J Soc Res Nicotine Tob. 2020;22(6):1004-1015. doi:10.1093/ntr/ntz092

^{xii} *A Report of the Surgeon General: Preventing Tobacco Use Among Youth and Young Adults*. Centers for Disease Control and Prevention Office on Smoking and Health; 2012.

https://www.cdc.gov/tobacco/data_statistics/sgr/2012/consumer_booklet/pdfs/consumer.pdf

^{xiii} Villanti AC, Collins LK, Niaura RS, Gagosian SY, Abrams DB. Menthol cigarettes and the public health standard: a systematic review external icon. BMC Public Health 2017;17:983.

- ^{xiv} U.S. National Cancer Institute. A Socioecological Approach to Addressing Tobacco-Related Health Disparities. National Cancer Institute Tobacco Control Monograph 22. NIH Publication No. 17-CA-8035A. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, National Cancer Institute; 2017.
- ^{xv} Le TT, Mendez D. An estimation of the harm of menthol cigarettes in the United States from 1980 to 2018. *Tob Control*. 2021 Feb 25:tobaccocontrol-2020-056256. doi: 10.1136/tobaccocontrol-2020-056256. Epub ahead of print. PMID: 33632809; PMCID: PMC8384947.
- ^{xvi} Mendez D, Le TTT. Consequences of a match made in hell: the harm caused by menthol smoking to the African American population over 1980-2018. *Tob Control*. 2021 Sep 16:tobaccocontrol-2021-056748. doi: 10.1136/tobaccocontrol-2021-056748. Epub ahead of print. PMID: 34535507; PMCID: PMC8924008.
- ^{xvii} Tobacco Product Scientific Advisory Committee, FDA. Menthol Cigarettes and Public Health: Review of the Scientific Evidence and Recommendations. 2011.
- ^{xviii} U.S. Department of Health and Human Services. The Health Consequences of Smoking: 50 Years of Progress. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014. Printed with corrections, January 2014.
- ^{xix} Islami F, Goding Sauer A, Miller KD, Siegel RL, Fedewa SA, Jacobs EJ, McCullough ML, Patel AV, Ma J, Soerjomataram I, Flanders WD, Brawley OW, Gapstur SM, Jemal A (2018) Proportion and number of cancer cases and deaths attributable to potentially modifiable risk factors in the United States. *CA Cancer J Clin* 68: 31-54
- ^{xx} *Cancer Facts and Figures*. American Cancer Society; 2017. <https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2017.html>
- ^{xxi} Oral Cancer and Tobacco. Johns Hopkins Medicine. <https://www.hopkinsmedicine.org/health/conditions-and-diseases/oral-cancer-and-tobacco#:~:text=Smokers%20are%20also%20at%20a,60%20known%20cancer%2Dcausing%20agents.>
- ^{xxii} Cigars. Centers for Disease Control and Prevention. https://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_industry/cigars/index.htm
- ^{xxiii} Tobacco Products Scientific Advisory Committee. Menthol Cigarettes and Public Health: Review of the Scientific Evidence and Recommendations pdf icon[PDF–15.3 MB]external icon. Rockville, MD: US Department of Health and Human Services, Food and Drug Administration; 2011.
- ^{xxiv} Food and Drug Administration. Preliminary Scientific Evaluation of the Possible Public Health Effects of Menthol Versus Nonmenthol Cigarettes pdf icon[PDF–1.6 MB]external icon. 2013.