

Peddling Harm:

How the Tobacco Industry Continues to Mislead Our Communities

Protecting Profits by Rebranding Harm

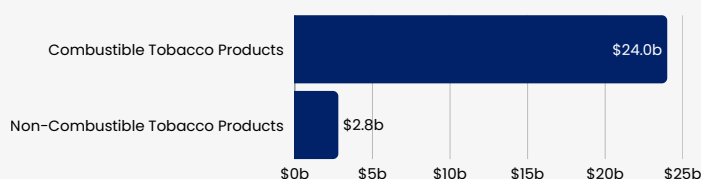
Since its inception, the tobacco industry has relied on deception to peddle its deadly products.⁹ Now, as cigarette use in the U.S. continues to decline and the industry faces mounting regulatory pressure, it is expanding its tactics. The industry is attempting to rebrand itself and co-opt the language of public health. The goal hasn't changed—sell as many addictive products to as many people as possible—but the messaging has. **By framing the conversation around so-called harm reduction, the industry seeks to distract from the deadly nature of its products.** For tobacco companies, harm reduction is not about saving lives. It is about protecting profits.

Today, manufacturers are flooding the market with “next-generation” products such as e-cigarettes, nicotine pouches and heated tobacco devices, the vast majority of which are illegally marketed as “less harmful” or alternatives to quitting. This playbook isn't new; the industry used it before when it falsely marketed light and low-tar cigarettes as safer, with deadly results. **Once again, the tobacco industry is simply peddling harm in new packaging.**

Follow the Money

For Altria, the parent company of Philip Morris USA, which manufactures Marlboro and other leading cigarette brands, the rhetoric of becoming a ‘tobacco harm reduction’ company stands in stark contrast to its financial reality. In 2024, the company generated about \$24 billion from combustible products—cigarettes, cigars, and cigarillos—compared to just \$2.8 billion from non-combustibles such as nicotine pouches, heated tobacco products, and e-cigarettes.¹ An industry that claims to be concerned about the harms of tobacco is **still profiting primarily from products that kill most of its users.**

Altria's Revenue Reality: Combustibles vs. Non-Combustibles (2024)¹



Countering Tobacco Industry Harmful Propaganda

- **The tobacco industry makes a majority of its billions each year from selling products it knows kill a majority of the people who use them.**¹ Its sole interest is making money by selling products that keep people addicted.
- **The tobacco industry claims minimal harm from e-cigarettes, vapes, and nicotine pouches** despite emerging evidence that these products present health risks and still lack long-term study.²
- **Tobacco products are not cessation products.** They are designed to create and sustain addiction, not help people quit. In contrast, FDA-approved cessation medications are highly regulated, tested for safety and effectiveness, and designed to help people quit.
- **Dual use of tobacco products escalates harm** by sustaining tobacco use, maintaining nicotine dependence, and potentially increasing overall exposure to toxicants.³
- **E-cigarettes and nicotine pouches are the most commonly used tobacco product among U.S. youth,** despite claims that these products are marketed to adults.⁴
- **Youth-appealing flavors¹⁰ in products** such as nicotine pouches and e-cigarettes **have fueled uptake by youth and young adults.**⁴
- **If the industry's concern for public health were genuine, its behavior would look very different.** Instead it fights all regulations, markets its products to youth, and peddles in misleading and false claims that downplay the harms of its products.
- **A fact-based public health approach to tobacco use and addiction** incorporates behavior change strategies including prevention, cessation, and health promotion to equip tobacco users with life-saving tools and information.

Harm Escalation: Targeting of Young People

Although the look and names of the novel tobacco products entering the market may have changed – **e-cigarettes, vapes, heated tobacco products (HTPs) and nicotine pouches** – they have many things in common with combustible cigarettes. **All deliver nicotine which is addictive. All contain chemicals proven to cause harm.** None have been FDA-approved to help people quit smoking and all have been deliberately targeting a new generation of tobacco users.

New tobacco products – including e-cigarettes and nicotine pouches – **escalate harm by hooking young people who might never have used tobacco otherwise.**

The long-term health effects of these newer tobacco products are just starting to be understood, however, **what is already clear is that these products are not without potentially significant health risks.** From their impact on Chronic Obstructive Pulmonary Disease (COPD) to their role in cancer, these products are unsafe, particularly for people who do not currently use any form of tobacco.^{6,7} **These products also escalate harm by attracting young people who never used a tobacco product before.**⁴

The industry markets “novel” flavored tobacco products on social media to entice new users, including youth, many of whom have never smoked a combustible cigarette. Following the decades old playbook, nicotine pouches are now being marketed to youth through colorful packaging, social media influencers, and enticing flavors. The result has been significant youth uptake: an estimated 480,000 middle and high school students used nicotine pouches in 2024, with 85% choosing a flavored product.⁴

Harm Escalation: Dual-Use of Tobacco Products

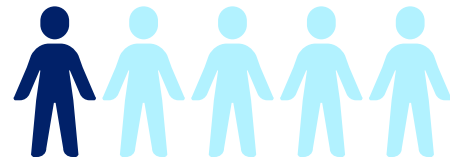
People who use more than one tobacco product are engaging in ‘dual use.’ Dual use of combustible cigarettes and e-cigarettes is the most common multiple tobacco-use pattern. **The tobacco industry promotes dual use to keep nicotine levels high and dependence strong,** using targeted marketing messages like “for when you can’t smoke” to keep people addicted. This strategy appears to be working: instead of switching completely, people often continue to use these products at the same time and may then be exposed to toxicants at even higher levels than single product use, all while maintaining nicotine dependence.³

Blurring the lines: The Pharmaceuticalization of the Tobacco Industry

If the industry’s concern for public health were genuine, its behavior would look very different. Instead, it promotes novel tobacco products as “healthier” and “clean,” increasingly blurring the lines between their products and pharmaceutical nicotine-replacement therapies, while evading the strict regulatory oversight required of pharmaceutical products. In fact, no tobacco product has been approved by FDA as a cessation product.

The Center for Tobacco Control Research and Education at the University of California San Francisco termed this behavior “*the pharmaceuticalization of the tobacco industry*”, in which the tobacco industry strives to *transition into a pharmaceutical-like industry through the manufacture and sale of noncombustible tobacco and nicotine products for smoking cessation or long-term nicotine maintenance without the testing and oversight required of traditional pharmaceutical products.*”

1 in 5 tobacco users
use two or more types of tobacco products⁸



Countering Tobacco Industry Efforts

Ensuring tobacco control policies are comprehensive and evidence-based is the most effective way to counter the tobacco industry’s efforts to weaken existing laws and reduce tobacco use. **All tobacco products should be subject to all tobacco control laws because they pose serious health risks.**

The tobacco industry’s persistent push for exemptions or delays in implementing strong tobacco control policies serves only to protect industry profits at the expense of public health.

1. Altria. (2025, January 30). Altria reports 2024 fourth-quarter and full-year results [Press release]. Investor Relations. <https://investor.altria.com/press-releases/news-details/2025/Altria-Reports-2024-Fourth-Quarter-and-Full-Year-Results-Provides-2025-Full-Year-Earnings-Guidance-Announces-New-1-Billion-Share-Repurchase-Program/default.aspx>
2. Felicione NJ, Ozga JE, Eversole A, Hart JL, Tackett A, Hrywna M, Halquist M, Stanton CA. Oral Nicotine Pouches: Rising Popularity and State of the Science. *Public Health Rep.* 2025 Apr 28;333549251313668. doi: 10.1177/00333549251313668. Epub ahead of print. PMID: 40293136; PMCID: PMC12037535.
3. Nighbor T, Wang S, Xue Z, et al. Electronic cigarette use, related health outcomes and policy interventions in the USA: a call for research to fill evidence gaps. *Tobacco Control* Published Online First: 15 April 2025. doi: 10.1136/tc-2024-059019
4. Jamal A, Park-Lee, E, Birdsey J, et al. Tobacco product use among middle and high school students — National Youth Tobacco Survey, United States. *MMWR Morb Mortal Wkly Rep.* 2024;73(41):917–924.
5. Harris E. Most Young Adults Who Use E-Cigarettes Have Never Smoked. *JAMA.* 2023;330(21):2045. doi:10.1001/jama.2023.22357
6. Petrella, F., Faverio, P., Cara, A., Cassina, E. M., Libretti, L., Torto, S. L., Pirondini, E., Raveglia, F., Spinelli, F., Tuoro, A., Perger, E., & Luppi, F. (2025). Clinical Impact of Vaping. *Toxics*, 13(6), 470. <https://doi.org/10.3390/toxics13060470>
7. John Erhabor, Zhiqi Yao, Erfan Tasdighi, Emelia J Benjamin, Aruni Bhatnagar, Michael J Blaha, E-cigarette Use and Incident Cardiometabolic Conditions in the All of Us Research Program, *Nicotine & Tobacco Research*, Volume 27, Issue 9, September 2025, Pages 1651–1656, <https://doi.org/10.1093/ntr/ntaf067>
8. Cornelius ME, Loretan CG, Jamal A, et al. Tobacco Product Use Among Adults – United States, 2021. *MMWR Morb Mortal Wkly Rep* 2023;72:475–483. DOI: <http://dx.doi.org/10.15585/mmwr.mm7218a1>
9. US District Court Judge Gladys Kessler found in the landmark racketeering case against the tobacco industry that “[o]ver the course of more than 50 years, Defendants lied, misrepresented and deceived the American public, including smokers and the young people they avidly sought as ‘replacement’ smokers about the devastating health effects of smoking and environmental tobacco smoke.” *United States v. Philip Morris*, 9F. Supp. 2d (D.D.C. 2006).
10. Zare S, Nemat M, Zheng Y. A systematic review of consumer preference for e-cigarette attributes: Flavor, nicotine strength, and type. *PLoS One.* 2018 Mar 15;13(3):e0194145. doi: 10.1371/journal.pone.0194145. PMID: 29543907; PMCID: PMC5854347.