George Till: The case for tobacco 21

By Commentary

Editor's note: This commentary is by Rep. George Till, D-Jericho, a doctor.

Raising the minimum age to buy tobacco to 21 would save lives by preventing adolescents from ever taking up smoking. It is the best way to prevent lifelong addiction, associated chronic disease and suffering.

Right now in Vermont, the healthiest state in the nation, there are nearly 10,000 kids under 18 years old who will die prematurely from tobacco-caused illness, if we do nothing. About three out of four teen smokers end up smoking into adulthood. Among youth who persist in smoking, a third will die prematurely from tobacco-related disease. Smokers die on average 10 years earlier than nonsmokers and 1 in 5 deaths in this country are tobacco-related.

The key point is that if people get through adolescence without smoking, it is highly unlikely they will ever start. The flip side is if they do start smoking in adolescence, everything we have learned about teen brain development shows that it will be much more difficult for them to stop. Nicotine's effect on brain development leads adolescents to heavier daily tobacco use, a stronger nicotine addiction and more trouble with quitting later in life. Ninety percent of cigarettes supplied to teens come from 18- to 20-year-olds, so raising the minimum sales age to 21 puts legal purchasers outside the social circle of most high school students. The result is that the age group most who benefit most are those between 15 and 17 years old, who no longer get easy access to tobacco products.

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We know raising the smoking age works. In 2005, the Boston suburb of Needham raised the age for tobacco sales to 21. With no other changes, rate of smoking in the past 30 days decreased 50 percent and frequent smoking decreased 62 percent compared with surrounding towns. Anyone who claims that 18- to 20-year-olds will just go across the state line to buy tobacco products has to explain why the data shows they didn't even go across the town line in Needham to make purchases for the past 10 years. Now two states, Hawaii and California, as well as 200 cities and towns across the country have raised the age to 21.

Yearly, Vermonters spend $348 million on direct medical costs of tobacco-related illness. Whether it is through increased health care premiums or through tax dollars, Vermonters pay that $348 million each and every year. These are preventable expenditures and this is the low hanging fruit for reducing health care spending. On top of direct medical costs, Vermont's economy suffers another $250 million in lost productivity due to tobacco, bringing the total yearly expense to $600 million.

A 2015 study by the Centers for Disease Control and Prevention (CDC) found 75 percent support for tobacco 21 including 70 percent of smokers and 64 percent of 18- to 24-year-olds. The immediate effect on retailers is minimal since only 2 percent of overall tobacco sales go to 18- to 20-year-olds. The cost to the state is a small loss of tobacco tax revenue. The health care savings are enormous. The savings begin almost immediately with a reduction of preterm births and growth-restricted fetuses. Tobacco is responsible for 30 percent of fetal growth restriction and 15 percent of preterm births. There would also be a major reduction in crib deaths.

According to the CDC, Vermont has a higher smoking rate than New York, New Jersey, Massachusetts, Connecticut, Rhode Island, and even Texas. With tobacco 21 we have a tool which can provide major reductions in tobacco addiction, suffering from tobacco related diseases, premature death, and save Vermonters hundreds of

millions of dollars in both health care premiums and taxes. We can't afford to not pass tobacco 21, either morally or financially.