

PE1774/A

Scottish Government submission of 21 February 2020

The Committee will be aware that reducing the use of and harm from tobacco and other drugs is one of our six public health priorities. To help us realise this priority, our five year Tobacco-Control Action Plan "*Raising Scotland's Tobacco-free Generation*", published in 2018, sets a key target to reduce smoking prevalence to 5%, or less, by 2034. Tackling inequalities and addressing the risks around the use of e-cigarettes will be vital as part of our overall efforts.

Although current evidence suggests vaping e-cigarettes is less harmful than smoking tobacco, I want to assure the Committee that Scotland has the strictest regulation of e-cigarettes in Europe. Admittedly, there is still a lot we do not know about the effect of e-cigarettes, but I am pleased to report that there have been some recent developments in relation to the collation of data on vaping, which the Committee will want to note. The national Scottish Clinical Coding Review Group of National Services Scotland, who decide and publish new national clinical coding standards, has recently approved the use of the ICD10 emergency code for coding vaping related disorder for hospital admissions across NHS Scotland, and has issued a national standard to hospital coding staff which has been applicable for discharges from 1 January, this year.

The associated guidance advises that the following codes and sequencing must be assigned when it is clearly documented in the medical record that a respiratory condition has resulted from vaping or the use of e-cigarettes:-

- J68 - Respiratory conditions due to inhalation of chemicals, gases, fumes and vapours
- U07.0 - Emergency use of U07.0

Whilst the application of the code into our national data collection will be dependent on coders receiving the appropriate information from clinicians, am sure the petitioner will welcome this new development. It will enable us to gather key information and understand the effects of vaping e-cigarettes better than we do at present.

You should also note that the Scottish Government proactively engages with key representative bodies, health bodies, local authorities, third sector campaign groups, academics and the public on tobacco control issues. In particular, we have in place a Ministerial Research and Evaluation Sub Group which keeps us apprised of emerging issues, including e-cigarettes. When Public Health Scotland becomes fully established on 1 April, as the lead national agency for improving and protecting health and wellbeing, it will have a strong leadership role in research and innovation and will strengthen collaborations and relationships, through adopting a whole system approach, to support our work with researchers and academia. This will help to ensure future policy decisions and interventions are evidence and intelligence led.

I trust the Committee will find this response helpful.