

The United Kingdom's Tobacco and Vapes Act 2026—A landmark in tobacco control, but a missed opportunity for product clarity

The United Kingdom's (UK) Tobacco and Vapes Act 2026, which passed into law on 29 April this year, is probably the most significant piece of tobacco-control legislation in a generation. Its most widely known provision means that tobacco products of any kind will never be able to be legally sold to anyone born after 1 January 2009. However, it also includes new controls on advertising, packaging and displays and the introduction of retail licensing that will save lives and protect children [1].

Unfortunately, it also contains definitions of tobacco, vaping and nicotine products that could create limitations for scientific communication and the classification of tobacco and nicotine products, and even now, if used in research studies, may create difficulties for those studying these products and their harms. Although these definitions were designed primarily for regulatory and legal purposes, their use in research or public health communication risks causing confusion.

The legislation defines 'tobacco product' as a product consisting wholly or partly of tobacco intended to be consumed either by smoking or in some other way [2]. It defines a 'vape' as a device that vaporises substances, other than tobacco and is not a medical device or medicinal product, for the purposes of inhalation through a mouthpiece. It, then, defines a 'vaping substance' as a substance other than tobacco that is intended to be vaporised by a vape. It goes on to define 'nicotine product' as a device intended to enable nicotine to be delivered into the human body or to form part of such a device or nicotine or a substance containing nicotine, which is intended to be delivered into the human body but not a tobacco product, a vaping product, a medical device or a medicinal product.

Therefore, a device that enables inhalation of tobacco vapour from heated tobacco is a tobacco product, not a vaping product or a nicotine product. A product that is intended to deliver nicotine as a medicinal device or through vaping is not a nicotine product.

The rationale for these definitions is presumably to enable the legislation to handle the three different types of products (tobacco, vapes and nicotine products) differently. However, there is potential for confusion when the categories conflict with people's expectations, the question arises as to why the legislators want to make this distinction.

If the basis were physical health risk, then combustible tobacco would be distinguished from smokeless tobacco high in carcinogens,

which would be distinguished from smokeless tobacco low in carcinogens, which would in turn be distinguished from inhaled nicotine products, with non-inhaled nicotine products being a separate class with the lowest risk [3].

If the basis were addictive potential then products that deliver nicotine more rapidly, such as cigarettes and small cigars that are typically inhaled and work synergistically with combustible tobacco, might be distinguished from smokeless tobacco and non-inhaled nicotine products, but see West and Cox [4] for more information.

We have started the process of creating more coherent and meaningful distinctions between different types of tobacco and nicotine products using an 'ontological' approach [5]. This recognises that tobacco and nicotine products can be prepared for use in different ways that have different implications for physical health and addiction and that a given product can be more than one thing and be used for more than one purpose. Therefore—using the ontological definitions—a 'vaping device' can, but does not have to, deliver nicotine. Similarly a 'tobacco product' typically does, but need not, deliver nicotine, and vaping devices can be used to vape tobacco products. Many of these products can be used as temporary or lasting ways of stopping or reducing use of more harmful versions or as recreational products in their own right.

We appreciate that the definitions were designed for regulatory purposes, however, importing statutory terminology into scientific or public health communication risks creating ambiguity, and these definitions may prove limiting as product classifications evolve. There is a risk that this could ultimately undermine regulatory goals [6, 7].

We hope that the authorities in the United Kingdom will take another look at the definitions and labels attached to them with a view to making them more defensible. We also hope that other jurisdictions will refrain from following this example when framing their own legislation. In the meantime, we strongly suggest that research and public health practitioners avoid using these definitions in their work.

KEYWORDS

age of sale, definitions, ontology, smoke free generation, tobacco and vapes bill, vaping

AUTHOR CONTRIBUTIONS

Sharon Cox: Conceptualization; writing—original draft. **Caitlin Notley:** Conceptualization; writing—review and editing. **Robert West:** Conceptualization; writing—review and editing.

DECLARATION OF INTERESTS

S.C. is a Senior Editor for *Addiction*; she has also acted as a paid and unpaid advisor for the UK's National Centre for Smoking Cessation and Training; and is an unpaid advisor for the Smoke-Free mobile application. C.N. is Editor in Chief for the journal *Nicotine and Tobacco Research*. R.W. is a paid advisor to Public Health Wales Behavioural Science Unit, the Freuds communications agency, Godot, the National Institutes of Health-funded APRICOT programme, Lilly, which is evaluating a smoking cessation medication, and Qnovia, which is developing an inhaled licensed nicotine product to aid smoking cessation. He is an unpaid advisor to the UK's National Centre for Smoking Cessation and Training and the Smoke-Free mobile application. He is an unpaid Director of the Unlocking Behaviour Change Community Interest Company (unlockingbehaviourchange.org).

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