



Catania, 10 Ottobre 2023

All'attenzione della
Sig.ra Stella KYRIAKIDES
Commissaria europea per la Salute e la sicurezza alimentare
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Oggetto: Lettera aperta per una ridefinizione delle politiche antifumo

Gent.ma Sig.ra Stella KYRIAKIDES,

le scriviamo in qualità di membri del Centro di Eccellenza per l'Accelerazione della Riduzione del Danno (CoEHAR) dell'Università di Catania, insieme ad un gruppo di esperti esterni e scienziati internazionali.

A vent'anni dall'entrata in vigore della Convenzione quadro per il controllo del tabacco (FCTC) dell'Organizzazione Mondiale della Salute (OMS), le malattie legate al fumo continuano a essere una delle principali cause di malattie non trasmissibili. La lotta al fumo rimane una priorità.

In Europa, attualmente, fumano circa 100 milioni di persone. Secondo i dati ufficiali di Eurobarometro, i fumatori nell'Unione Europea sono diminuiti soltanto del 2% tra il 2014 e il 2020, nonostante l'attuazione delle misure di controllo del tabacco previste dalla FCTC. A questa velocità, ci vorranno almeno 60 anni per raggiungere l'obiettivo dell'eradicazione del fumo (i.e. prevalenza del tabagismo al di sotto della soglia del 5%).

Alla luce di questi dati, è tempo di ammettere che le attuali misure di controllo del tabacco non producono i risultati auspicati in tempi sufficientemente rapidi. **Occorre integrare le attuali politiche di contrasto al fumo con nuove strategie, come quella basata sulla riduzione del danno, mettendo a disposizione dei fumatori adulti prodotti privi di combustione alternativi alle sigarette convenzionali, mitigando così il danno legato all'emissione di sostanze tossiche da combustione del tabacco.** Questo approccio è sostenuto con forza da autorità di salute pubblica prestigiose, incluso l'Institute of Medicine - IOM, che ha prospettato come i prodotti senza combustione siano in grado di ridurre sostanzialmente la mortalità e la morbilità complessive legate al tabacco, nonostante comportino una certa esposizione residua, sebbene a livelli significativamente ridotti (1).

Paradigmatico l'esempio dello "snus" (una tipologia di tabacco per uso orale) che in Svezia ha portato a una notevole diminuzione del fumo di sigarette con una significativa riduzione dei tassi di mortalità per cancro ai polmoni e malattie cardiovascolari (2).

L'esempio della Svezia non è isolato. Altri paesi, come il Regno Unito, la Norvegia, il Giappone e la Nuova Zelanda, che hanno adottato il principio di riduzione del danno, hanno tutti registrato una significativa riduzione della prevalenza del fumo - anche tra i giovani, ben oltre quanto stimato con la semplice applicazione delle tradizionali misure di prevenzione e cessazione (3).



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Il programma di ricerca del Centro di Eccellenza CoEHAR ha indagato gli effetti tossicologici dei prodotti senza combustione (4,5), la loro efficacia e tollerabilità tra i fumatori (6,7), ma anche il loro impatto sulle condizioni di salute tra le persone affette da broncopneumopatia cronica ostruttiva che hanno utilizzato questi prodotti per fare lo switch (8,9). Ciò che abbiamo scoperto è che **i prodotti senza combustione:**

- 1) **offrono una notevole riduzione dell'esposizione/rischio rispetto alle sigarette tradizionali;**
- 2) **aiutano i fumatori a smettere di fumare;**
- 3) **sono associati a miglioramenti clinicamente rilevanti in utilizzatori con patologie fumo correlate, come ad es. in chi ha la broncopneumopatia cronica ostruttiva.**

Pertanto, le alternative senza combustione non vanno equiparate alle sigarette convenzionali. Eppure l'OMS e diverse istituzioni europee continuano a ignorare i benefici derivanti dalla transizione dai prodotti a combustione alle alternative senza combustione, e tendono a focalizzarsi solo ed esclusivamente sul loro rischio assoluto.

Il nostro auspicio è quello che, alla luce delle evidenze scientifiche, l'FCTC e l'Unione Europea conducano una review attenta, bilanciata, e trasparente sulle evidenze scientifiche disponibili riguardo ai prodotti senza combustione, a paragone con le sigarette convenzionali, tale da offrire informazioni indispensabili per poter prendere decisioni utili nell'interesse di milioni di fumatori.

Ci mettiamo a disposizione della Commissione Europea anche per eventuali audizioni di esperti sul tema.

Cordialmente,

Membri CoEHAR

(elencati in ordine alfabetico)

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