Report
drawn up on behalf of the Committee on the Environment, Public Health and Consumer Protection
on the campaign against smoking

Reproriate: Mr A. DEL DUCA
On 18 and 19 September 1980 the motions for resolutions tabled by Mr Petronio (Doc. 1-398/80) and Mrs Squarcialupi (Doc. 1-416/80) pursuant to Rule 47 of the Rules of Procedure on the campaign against smoking were referred to the Committee on the Environment, Public Health and Consumer Protection.

On 26 February 1981 the committee appointed Mr Del Duca rapporteur.

It considered the motions for resolutions at its meetings of 14 April 1981, 27 October 1981 and 4 February 1982 and, at the latter meeting unanimously adopted the motion for a resolution together with explanatory statement.

The following took part in the vote: Mrs Weber, vice-chairman and acting chairman; Miss Hooper, vice-chairman; Mr Del Duca, rapporteur; Mr Alber, Mr Eisma (deputizing for Mr Vandemeulebroucke), Mr Ghergo, Mrs Krouwel-Vlam, Mrs Maij-Weggen (deputizing for Mrs Lentz-Cornette), Mr Martens (deputizing for Mr Clinton), Mr Radoux (deputizing for Mr Muntingh), Mrs Schleicher, Mrs Scrivener, Mrs Seibel-Emmerling and Mrs Van Hemeldonck.
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The Committee on the Environment, Public Health and Consumer Protection hereby submits to the European Parliament the following motion for a resolution together with explanatory statement:

MOTION FOR A RESOLUTION

on the campaign against smoking

The European Parliament,

- having regard to the motions for resolutions tabled by Mr Petronio and Mrs Squarcialupi on smoking (Docs. 1-398/80 and 1-416/80),
- having regard to Petition No. 49/80 by the Italian Committee on the anti-smoking campaign;
- having regard to the report of the Committee on the Environment, Public Health and Consumer Protection (Doc. 1-1053/81);

1. Approves and supports all initiatives designed to safeguard public health;

2. Sees the campaign against smoking as one of the specific themes which should be developed in the context of the Community's public health policy, the guidelines for which were laid down at the second meeting of the Council of the Public Health Ministers of the Community on 16 November 1978;

3.Recalls that this objective was confirmed in the oral question with debate (Doc. 1-701/79) by Mrs Schleicher, Mr Alber, Mr Ghergo, Mrs Cassar-Magnaghi-Cerretti, Mrs Maij-Weggen, Mr Verroken, Mr Michel, Mr Mertens and Mr Nordlohne, in which special emphasis was placed on, amongst other things, the need to propose appropriate measures at Community level in the field of public health education;

4. Recalls that Mr Vredeling reaffirmed the Community's commitment in this matter when replying on behalf of the Commission to the abovementioned oral question;

5. Considers that serious attention must be given to the problem of smoking in view of the harmful effects which it can cause and that, to this end, a useful contribution could undoubtedly be made by the provision of a clear indication on packets of cigarettes placed on sale of the tar and nicotine content of each cigarette, expressed either in figures or by means of categorisation as high, medium or low tar and nicotine content, where this is considered more meaningful to the public;
6. Recommends that coordinated study and research programmes should be encouraged, with adequate financial provisions, with a view to devising solutions capable of substantially reducing the damage caused by smoking, in the light of the continuing need for more extensive information to be made available;

7. Calls for research into the production of tobacco with a low nicotine content to be carried out in the context of the Common Agricultural Policy;

8. Considers that in order to ensure an equal degree of protection for the health of European citizens in all the Member States, the ban on smoking should be extended to public places not provided with adequate ventilation;

9. Calls on the Commission to draw up a list of the measures taken in the Member States and the results obtained in the campaign against smoking, particularly as regards prevention amongst young people;

10. Calls upon the Commission to strive to attain these aims by speeding up the public health policies called for above and, in the context of these policies, taking specific initiatives such as those now proposed - and approved by Parliament - and by designating the prohibition of smoking in schools and public places as a priority;

11. Further calls upon the Commission to make proposals for the harmonization of the laws of Member States concerning the advertising of tobacco, as at present these differ so widely from country to country as to create unfair competition in violation of the principles of the Treaty of Rome; and to regulate the laws governing the sale of tobacco, including fixing maximum permissible units for tar, carbon monoxide and nicotine content;

12. Considers it appropriate for initiatives to be taken in the context of the Community development policy to prevent the export to emergent countries of cigarettes with a high nicotine content which have been rejected by the industrialized countries in view of their harmful effects and for measures to be taken against aggressive publicity for these cigarettes in line with the action already taken in respect of substitutes for mother's milk, in conjunction with other international institutions such as the World Health Organization;

13. Calls on the Commission to introduce as a matter of urgency Community initiatives aimed at reducing smoking as specifically requested by the European Parliament in its resolution of 10 November 1980 on the second action programme for consumers;

14. Calls for immediate implementation of the requests made by the Council
of Health Ministers in 1978;

15. Calls also on the Commission to draw up a comparative study of the Member States' legislation on smoking;

16. Instructs its President to forward this resolution to the Council and Commission of the European Communities.
EXPLANATORY STATEMENT

1. Tobacco is a nervous stimulant. Its pharmacological action is due to nicotine, which, in moderate quantities, creates a sense of pleasurable well-being, stimulates the imagination, and according to some increases the secretion and peristalsis of the digestive system, which is why it is beneficial to digestion.

2. Nevertheless, nicotine is a poison. It poisons the nervous system, weakening will-power, memory and association of ideas and inducing indifference, abulia and lower work productivity; it causes hyperchlorhydria and gastric atonies. Smoking has harmful effects on the nervous system and excessive smoking causes violent headaches, insomnia, vertigo, pains, neuritis, tremors and disturbances of vision such as amblyopia or scotori kraurosis. However, the most harmful consequences of smoking are the effects which it has on the liver, the blood and the respiratory system.

3. Smoking is a causative factor of diseases of the peripheral arteries, particularly Burger's syndrome, of coronaries, angina pectoris and arteriosclerosis. It is a contributory factor of cancer of the larynx and bronchopulmonary cancer.

4. The effects of nicotine, harmful in themselves, are aggravated by the other toxic substances which form during the process of smoking (pyridine bases, ammonia, phenolic and pyrrolic substances, prussic acid, carbon monoxide, formaldehyde, etc.).

5. Smoking produces an abnormal deposit of anilide substance in the liver and alters the lipidic substances in the blood. It is also a cause of pharyngitis (the classical example of this being 'smoker's cough'), laryngitis, chronic bronchitis and pulmonary emphysema. It is of considerable significance, however, that the parts of the organism which are most affected by smoke are those organs which come most directly and most constantly into contact with it.

6. It is not the alkaloids present in tobacco which are responsible for the development of cancers, but the products of tobacco tar and of the combustion of tobacco and paper. These products alter the epithelial fundi of the organs affected by smoking and cause or assist the development of a tumour.

The motion for a resolution tabled by Mr Petronio (Doc. 1-398/80) touches on one aspect of the campaign against the harmful effects of smoking: the need for greater information on the dangers thereof.
This proposal comes within the framework of the initiatives called for in the oral question with debate (Doc. 1-701/79) by Mrs Schleicher, Mr Alber, Mr Ghergo, Mrs Cassanmagnago-Cerretti, Mrs Maij-Weggen, Mr Verroken, Mr Michel, Mr Mertens and Mr Nordlohne, in the context of the guidelines for the Community's public health policy which were laid down at the second meeting of the Council of the Public Health Ministers of the Community on 16 November 1978.

In the light of the recommendation for a clearer and more wholehearted commitment in the field of study and research, with a view to finding solutions capable of reducing the damage caused by smoking - a commitment that was reaffirmed by Commission Vredeling in his reply to the abovementioned oral question - there are valid reasons for Parliament to deliver a favourable opinion on the motion for a resolution tabled by Mr Petronio and Mr Squarcialupi.
ANNEX I

MOTION FOR A RESOLUTION (Doc. 1-398/80)

tabled by Mr PETRONIO pursuant to Rule 25 of the Rules of Procedure on the campaign against smoking

The European Parliament,

- whereas addiction to nicotine is considered by the whole of medical science to be a source of lung cancer and a primary cause of the destruction of the main and peripheral blood vessels,

- noting that, notwithstanding all the declarations of good intent by governments and the authorities concerned, no really effective measures have been taken to reduce smoking, a habit that is extremely deleterious to public health,

1. Calls upon the Commission of the EEC to issue regulations to ensure that it becomes a requirement in every Member State for a clear indication to be given on packets of cigarettes placed on sale of the amount of:

   (a) tar,
   (b) nicotine,

present in each cigarette,

In line with the practice followed in the Federal Republic of Germany and Austria, for example, this information should be given, not only on the packet, but also on a suitable notice regularly displayed on the premises of every authorized retailer.

These measures would help all those who so wished to arrest the process of poisoning of his body and to reduce the amount of nicotine and tar daily absorbed through smoking.

2. Instructs its President to forward this resolution to the Council and Commission of the European Communities.

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ANNEX II

MOTION FOR A RESOLUTION (Doc. 1-416/80)
tabled by Mrs SQUARCIALUPI pursuant to Rule 25 of the Rules of Procedure on measures to combat tobacco addiction

The European Parliament,

- considering that health is one of the most valuable assets of the citizens of the nine Member States and conscious therefore of its duty to protect it in every respect and particularly in the sectors within its competence,

- recalling that, in the countries of the European Economic Community, at least 100,000 people die of lung cancer each year and that many other deaths may be ascribed to other consequences of smoking,

- conscious of and concerned by the hazards of tobacco smoking, which also affect non-smokers,

- noting the many authoritative opinions given on the dangers of smoking by eminent specialists in the Nine countries, including those invited by the European Parliament to a hearing on carcinogenic substances present in the environment held on 22/23 May 1978,

- recalling the request addressed by the Council of Ministers of Health to the Commission on 16 November 1978 to set in train:
  - an exchange of experience on measures already taken in the Member States,
  - the establishment of common methods by which to compare the results and to assess the effectiveness of health education campaigns on smoking,
  - health education programmes aimed particularly at young people;
  - the search for a common attitude on advertising,

- considering the opinion issued by the Consumers' Consultative Committee on the damage caused by smoking and the present situation in the various countries of the EEC to be still valid,

- whereas on 17 January 1978, in answer to a question on tobacco addiction tabled by the Committee on the Environment, Public Health and Consumer Protection of the European Parliament, Commissioners Vredeling and Burke - each speaking for his own sphere of responsibility - gave precise undertakings on this subject and - in particular - the former one on research into tobacco substitutes, and the latter one on tobacco advertising,

- concerned by the distortions of competition caused by the fact that, while some EEC countries have put a ban on tobacco advertising, others allow it and often transmit it to the countries that do not have it,

- considering it extremely worrying that this Western habit should have
spread to the countries of the Third World to which, moreover, cigarettes are sent that have been rejected by Western consumers because of their high nicotine content,

- regretting that the Commission of the European Communities has not yet taken any special action in this year of 1980, which the WHO has dedicated to the subject of smoking and health setting out certain objectives to be attained within a period of three years,

- surprised that the answers the Commission has given to various questions on this subject have been uncertain, evasive, out of date and very often late,

- referring to Council of Europe recommendation 716 of 1973 on the control of tobacco and alcohol advertising and on measures to curb consumption of these products,

- conscious of the increasing awareness of public opinion of health problems and particularly those connected with soft and hard drugs, legal and illegal,

1. Asks the Commission of the European Communities to ensure that:

- the requests made by the Council of Ministers of Health in 1978 are met as soon as possible,

- a survey is immediately presented of the legislation on smoking in the Member States,

- a comparative study is made of the States' tax revenue from the sale of tobacco and the economic and social costs (hospitalization, medicines, working days lost) incurred as a result of illness caused by tobacco smoking (lung cancer, bronchitis, emphysema, cardiovascular disease),

- research programmes are financed into new varieties of tobacco with a lower nicotine content which can be used to replace existing varieties,

- studies are made of ways to prevent the sale to Third World countries of cigarettes which have been shunned on Western markets because they are too harmful and to replace tobacco crops with food crops as part of the campaign against hunger and to avoid the waste of raw materials, such as wood, which are used in excessive quantities for the drying of tobacco;

2. Asks furthermore to draw up a report on this subject in view of the important social and economic effects of tobacco addiction and the sensitivity which the peoples of Europe are beginning to show to it.