

Vaping versus Smoking:

A guide for NHS staff on successfully getting patients to quit smoking through vaping

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Introduction to this guide

Smoking remains an immense burden on public health, claiming almost 78,000 lives annually and placing a £2 billion per year strain on an already stretched NHS.

While smoking rates have reached record lows, England alone is still almost a decade behind its Smokefree 2030 target. Vaping – as an evidence-backed quitting tool - has a crucial role to play in getting those ambitions back on track and helping the UK's remaining six million adult smokers finally quit.

However, widespread misperceptions are deterring smokers from making the switch.

Healthcare professionals are uniquely positioned to educate smokers on the facts about vaping and give them the knowledge to switch to a reduced risk alternative which has already helped millions of adults move away from or completely cut out cigarettes.

This simple guide has been compiled by the UK Vaping Industry Association (UKVIA) to provide healthcare professionals with the latest evidence from trusted medical institutions, such as Cancer Research UK and the NHS, so they can confidently seize every teachable moment and discuss vaping as a quitting tool with their smoking patients.

Good luck supporting your smoking patients on their quit journey.

The latest evidence on vaping

1.

Some 5.2 million adults have used vaping to cut down on or stop smoking in Great Britain alone.

Action on Smoking and Health UK, 2024

2. Vaping poses a 'small fraction' of the risks of smoking.

Office for Health Improvement and Disparities, 2022

3. Nicotine e-cigarettes are amongst the most effective stop smoking tools available.

Cochrane Review, 2023

 The NHS could save £500 million per year if just half of England's smokers made the switch to vaping.

Brunel University London, 2023

5. There is 'no good evidence' that vaping causes cancer – nicotine does not cause cancer.

Cancer Research UK, 2023

Your vaping questions answered

Q: Is vaping more or less harmful than smoking?

A: Vaping is not completely risk free, but the Office for Health Improvement and Disparities (OHID) confirms that it poses 'only a small fraction of the risks of smoking'.

Cancer Research UK also states that evidence so far indicates that e-cigarettes are far less harmful than smoking as they don't contain tobacco or involve combustion.

Cigarettes release around 7 thousand chemicals when they burn – many of which are harmful and 70 of which cause cancer.

NHS Better Health Guidance tells us that switching to vaping has been shown to reduce exposure to toxicants linked to cancer, lung disease and heart disease. If just half of smokers in England made the switch, the NHS could save £500 million per year.

Q: How can I support successful quitting attempts with vaping?

A: Alarmingly, half of all smokers wrongly and worryingly believe vaping to be as or more harmful than smoking. By helping to address misperceptions, you can arm your patients with the right information to support them making the switch.

The UKVIA's Vaping to Quit Smoking Guide is also a useful tool, offering critical guidance to smokers on choosing the best devices, nicotine levels and flavours to give them the best chance of a successful quit. Encouraging them to visit their local stop smoking service is also crucial.

Q: Where can I access more information about vaping and quitting tools?

A: It is critical that you and your patients have access to accurate, up-to-date information about vaping and other cessation tools. There are a range of sources that can be used for this, including NHS Better Health guidance and websites for trusted medical institutions such as Cancer Research UK. Support and guidance can also be accessed through stop smoking services and specialist vape stores.

The UKVIA has created its Healthcare Hub to arm healthcare professionals and smokers with the latest evidence on vaping. It also runs its annual VApril campaign – a dedicated initiative which offers advice to smokers looking to quit through vaping.

Q: What if my patient doesn't take to vaping?

A: While vaping is widely recognised as the most effective quitting tool available, not every smoker will take to it right away and it may not be the right solution for others. It is important that those who do try vaping experiment with different device types, nicotine levels and flavours to find the best option for them – the UKVIA's Vaping to Quit Smoking Guide offers key advice on this.

There are other quit methods available, such as gums and patches, that people have used to quit successfully.

Q: Is it better to vape or smoke while pregnant?

A: The Smoking in Pregnancy Challenge Group warns that smoke exposure in pregnancy is responsible for increased rates of still birth, miscarriage and birth defects.

The NHS says protecting your baby from tobacco smoke is 'one of the best things you can do to give your child a healthy start in life', saying it can be 'difficult to stop smoking' but it's 'never too late to quit'.

It also highlights that using e-cigarettes is 'much safer for you and your baby' if they help you stop smoking.

A recent study from Queen Mary University found that e-cigarettes helped pregnant smokers quit 'without posing any detectable risks to pregnancy compared with stopping smoking without further nicotine use'.

Q: Can vaping cause popcorn lung?

A: Popcorn lung (bronchiolitis obliterans) is a serious, but uncommon, lung disease caused by a build-up of scar tissue in the lungs which hinders the flow of air.

It got its name when workers in a popcorn factory developed the condition after breathing in the chemical diacetyl, which was used to give popcorn a buttery flavour.

According to Cancer Research UK:

- E-cigarettes don't cause the condition known as popcorn lung
- There have been no confirmed cases of popcorn lung reported in people who use e-cigarettes

Diacetyl is banned as a vape flavouring in the UK but it is one of the thousands of chemicals found in cigarette smoke.

Q: Does vaping cause EVALI?

A: In 2019, there were reports that vaping had caused an outbreak of lung illness in the US called E-cigarette or Vaping-use Associated Lung Injury.

Despite the name, an investigation ultimately found the cases were linked to contaminated illegal products and NOT regular or long-term vaping. However, there are media stories as recently as 2024 that link vaping with EVALI. The Office for Health Improvement and Disparities said there were 'lessons to be learnt from the mislabelled US EVALI outbreak' and stressed communications about the illness should separate vaping illicit substances from nicotine vaping.