Today, we are here again to continue our examination of a growing public health crisis—the soaring use of e-cigarettes by young people. Simply put, our nation faces a youth vaping epidemic.

In September, our panel heard from federal and state health officials about the skyrocketing use of e-cigarettes throughout the United States.

Last year, more than 5 million young people reported using e-cigarettes—up from 3.6 million who reported using such products the year before.

This week, I met with a group of high school students from my district. And while the most recent national survey found that one-in-four high school students are currently vaping, the students I met with tell me they believe the actual rate is much higher.

In fact, one sophomore I met said he thinks more than 60 percent of his peers are using e-cigarettes.

As I have said many times before, this teen vaping epidemic is personal to me. No state has a higher percentage of its teens currently vaping than my state of Colorado.

According to the Centers for Disease Control and Prevention (CDC), e-cigarettes pose risks to all users, but particularly to young people.

The vast majority of e-cigarettes contain nicotine, which according to the National Institutes of Health, can be as addictive as heroin or cocaine.

Nicotine can harm brain development, affect respiratory health, and can lead to heart disease.

Further, research shows that youth who use e-cigarettes are more likely to begin using combustible cigarettes.

E-cigarette manufacturers have been negligent, at best, or intentional, at worst, in attracting young people to their products.

Flavor options, concealable designs, highly addictive nicotine levels, and slick marketing campaigns have all been used to lure millions of young people into using e-cigarettes.

Parents and public officials have been left scrambling to address this epidemic.
And no one—not parents, not public health officials, and not the students who vape—fully understand the health impacts of e-cigarettes.

What’s worse is that many young people actually believe these products are safe or harmless.

That is simply not true.

The CDC has stated that all tobacco products, including e-cigarettes, carry health risks.

The only reason e-cigarettes are available on the market today is because the Food and Drug Administration (FDA) gave them a temporary pass by exercising its enforcement discretion.

No e-cigarette currently being sold in the United States has been fully reviewed by FDA for its impact on public health.

Instead, the e-cigarette industry has essentially been allowed to conduct a public health experiment in real time without knowing what the consequences of these products may be. And young people are paying the price.

That is why Congress decided to act.

In December, Chairman Pallone, myself, as well as some of my other colleagues here today, took an important first step to raise the nationwide minimum age to buy any tobacco product—including e-cigarettes—to 21.

Clearly more needs to be done, such as advancing legislation I, Chairman Pallone, and others have introduced to tackle this public health priority.

These efforts are all the more important given that the Administration recently caved to industry influence.

Despite the FDA’s announcement last September that it intended to ban all non-tobacco-flavored e-cigarette products to address the rising youth use rate, the final policy issued in January includes exemptions and loopholes.

Not only are menthol-flavored e-cigarettes still allowed under the FDA’s new guidelines, so too are the fruity and sweet-flavored e-liquids and disposable e-cigarette products.

These loopholes may lead to young people shifting to using menthol-flavored products, or disposable e-cigarettes that remain on the market. In fact, there are reports that shift is already happening.

While companies claim that their e-cigarettes have the potential to help adults who currently smoke combustible cigarettes, it is important to note that CDC cautions such a health benefit
would only apply if the smoker is able to quit *completely*.

We know that a majority of adult e-cigarette users, however, are “dual users,” meaning they both smoke and vape, which could actually be more dangerous than using either product alone.

The question now is: for every adult smoker who may quit smoking because they start using an e-cigarette, how many young people will start using e-cigarettes and develop a lifelong nicotine addiction?

We must ensure we are not attempting to solve one public health problem by creating another—at the expense of young people’s health.

The responsibility to protect young people from these dangerous products cannot fall solely on parents, teachers, and health officials.

This industry caused this mess, and it needs to be responsible for cleaning it up.

Today, we will hear from the companies responsible for these products. The executives here today represent the five companies with the largest e-cigarette market share in the country.

Gentlemen, your industry ignited this fire. Now we all must put it out.

I want to know how you intend to do it.

I want to know what your company is doing today to prevent youth from getting their hands on your products.

I want to know what your company will do if the youth vaping rate doesn’t start to go down.

And, I want to know how far your company is willing to go to help us fix this public health crisis that your industry has created.