

To: WHO Expert Committee on the Selection and Use of Essential Medicines

Re: The inclusion of <u>bupropion hydrochloride</u> on the WHO Model List of Essential Medicines (EML) for the treatment of nicotine dependence as an <u>aid to stopping smoking and tobacco use</u>

The European Network for Smoking and Tobacco Prevention (ENSP) welcomes the review of **Buproprion hydrochloride** to be included on the WHO Model List of Essential Medicines (EML) for the treatment of nicotine dependence as an aid to stopping smoking and tobacco use.

Tobacco smoking remains among the leading causes of preventable death and disease worldwide and is a major global public health challenge. According to WHO estimates, there are 1.3. billion tobacco users worldwide and over 80% of them live in low- and middle-income countries. While the smoking prevalence has been decreasing worldwide, the average global smoking rate remains unacceptably high and approximately 8 million people continue to die every year from smoking related diseases.

Smoking increases the risk of developing cardiovascular disease, respiratory illnesses such as chronic obstructive pulmonary disease (COPD). Also, tobacco consumption as the leading cause of preventable cancer, with 27% of all cancers attributed to tobacco use. In addition, evidence suggests that smokers who are hospitalized with SARS-CoV-2 infection are at higher risk for severe disease and death compared to non-smokers.

There are immediate and long-term health benefits in quitting for all tobacco users. For example, ten years after quitting smoking, the risk of developing lung cancer is 50% lower compared to people who continue to smoke, and after 15 years of quitting, the risk of developing CVD is almost comparable to someone who has never smoked. There are also short-term benefits to health that occur only weeks or months following smoking cessation, such as reduced frequency of cough and shortness of breath, as well as improved circulation and lung function.

Global targets for tobacco use will not be reached unless current tobacco users quit, and indeed, many tobacco users report that they want to quit. According to the Global Adult Tobacco Survey (GATS), over 60% of smokers indicated that they intend to quit, and over 40% had attempted to quit in the 12 months. Yet, without medications or cessation support, only about 4% of attempts to quit tobacco will succeed given highly addictive nature of nicotine. There is an increasing consensus that tobacco dependence is a disease that must be treated by healthcare professionals through a combination of evidence-based cessation medications and behavioural counselling.

Moreover, smoking cessation is one of the main strategies suggested by the WHO's MPOWER package against the tobacco epidemic. The WHO FCTC Article 14 and its implementation guidelines call on its Parties to "facilitate accessibility and affordability for treatment of tobacco dependence". However, the "WHO report on the global tobacco epidemic 2019: offer help to quit tobacco use" shows that cessation policies are still among the least implemented of all WHO FCTC demand reduction measures, with only 23 countries in total providing best-practice cessation services, the majority of which are high income countries. There is room for greater action and adding bupropion hydrochloride on the WHO Model List of Essential Medicines (EML), medicines that satisfy priority healthcare needs to which people should have access at all times in sufficient amounts, has the potential to act as a catalyst for further sustainable tobacco control measures at global and national levels.

ENSP strongly believe that access to evidence-based smoking cessation medication is a key component of a comprehensive, integrated tobacco control programme. Offering tobacco users assistance in their cessation efforts will reinforce other tobacco control policies by increasing support for them and enhancing their acceptability. Effective cessation interventions save lives.

Therefore, ENSP strongly supports the inclusion of bupropion hydrochloride on the WHO Model List of Essential Medicines (EML) for the treatment of nicotine dependence as an aid to stopping smoking and tobacco use.

Thank you for your time and consideration,

Francisco Rodriguez Lozano ENSP President

Cornel Radu-Loghin Secretary General

Brussels, 17.05.2021

The European Network for Smoking and Tobacco Prevention (ENSP) is an international organisation based in Brussels, active for over 20 years in the field of tobacco control. With more than 60 full members, including national coalitions, present in 34 European Countries (20 EU and 14 non-EU), ENSP's mission is to develop a strategy for co-ordinated action among organisations active in tobacco control in Europe by sharing information and experience and through co-ordinated activities and joint projects. ENSP aims to create greater coherence among smoking cessation activities, ensuring a continuous bridge between policy makers, researchers and tobacco cessation specialists and to promote comprehensive tobacco control policies at both national and European levels.

ENSP objectives are to fully implement the WHO Framework Convention on Tobacco Control (FCTC) and to reduce the prevalence of tobacco use in the European region to less than 5% by 2040.