

The Hidden Harms of Menthol

ENDING LEGAL SALES OF MENTHOL COMMERCIAL TOBACCO PRODUCTS WOULD ADVANCE HEALTH EQUITY IN MINNESOTA

March 2024

Why do tobacco companies add menthol?

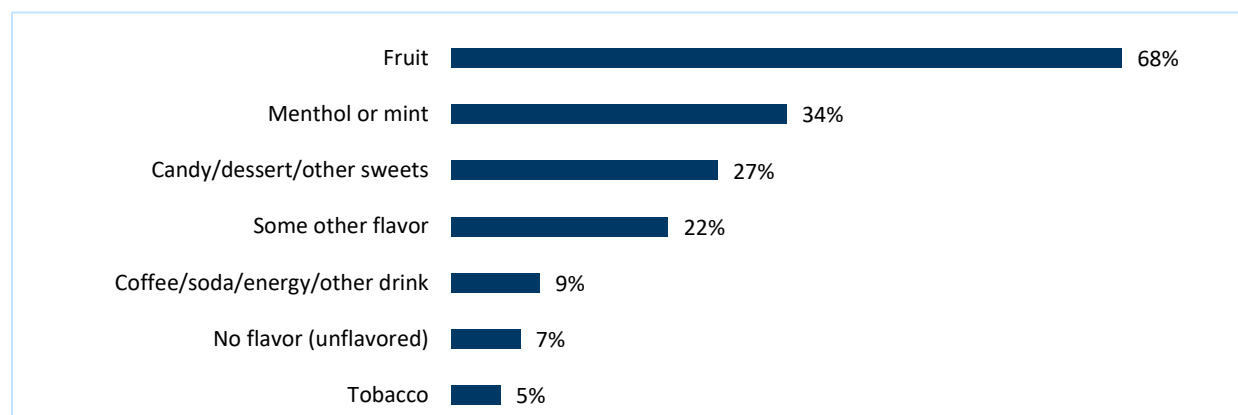
Menthol is more than a minty flavor in commercial tobacco products. Menthol's cooling and numbing properties mask the harshness of commercial tobacco products, making them easier to use and more appealing.¹ Tobacco companies know that flavors like menthol increase the odds that people, especially young adults and teens, will try their products and use them often enough to become regular users.^{2, 3}

The 2009 Family Smoking Prevention and Tobacco Control Act ended the sale of flavored cigarettes. However, menthol cigarettes were exempted, and other flavored commercial tobacco products including cigars, smokeless tobacco, and e-cigarettes (or "vapes") were allowed to remain on the market. E-cigarettes come in over 15,000 flavors,⁴ including menthol, and are the commercial tobacco product used most by teens.⁵

Impact on Minnesotans: In 2020, 78% of Minnesota teens reported that the first commercial tobacco product they ever tried was flavored.⁶ Among students who had recently used a commercial tobacco product, 85% reported having used a flavored product.⁶ "Menthol or mint" was second only to "fruit" as the flavor most used by Minnesota students who had recently vaped (**Figure 1**).

Figure 1. Menthol or mint e-cigarettes are popular among teens.

One in three 11th grade students who vape reported having vaped menthol or mint flavor in the past 30 days.

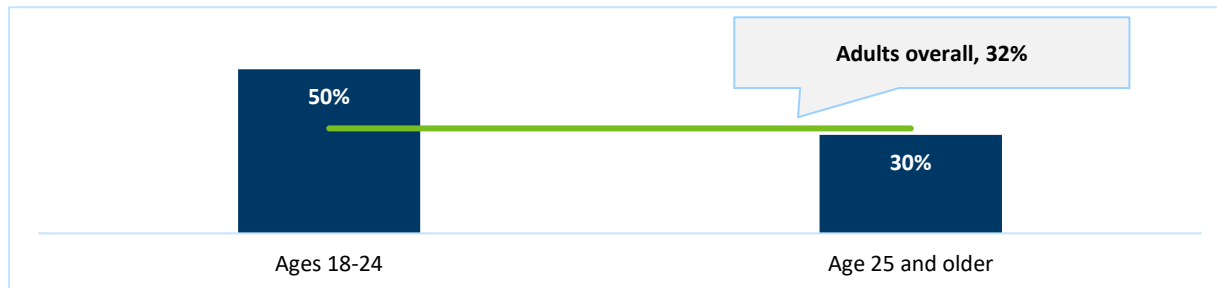


Source: 2022 Minnesota Student Survey. Denominator: 11th grade students that reported having used an e-cigarette in the past 30 days. The flavors, "alcohol," "chocolate," or "clove/spice" were selected by less than 5 percent of respondents.

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Menthol products are used by younger adults more than older adults. Fifty percent of young adults (aged 18-24) who use commercial tobacco, reported having used menthol-flavored products versus 30% of older adults (**Figure 2**).

Figure 2. Young adults are more likely to use menthol products.



Source: 2021 Behavioral Risk Factor Surveillance Survey. Denominator: Minnesota adults who use tobacco products every day or some days.

Menthol makes it harder to quit.

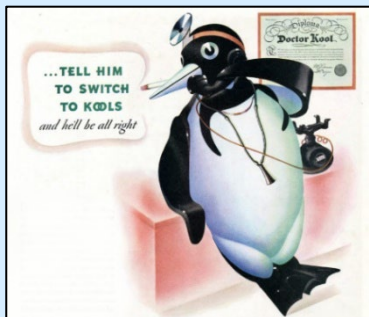
In addition to its sensory effects, menthol enhances the addictive effects of nicotine on the brain. Studies show that people who smoke menthol cigarettes have more nicotinic receptors in their brain making the brain even more dependent on continued use of commercial tobacco.⁷ In addition, menthol added to nicotine increases the communication between a brain area in the reward pathway and another in memory involved in nicotine addiction and withdrawal.⁸

People who smoke menthol cigarettes tend to smoke sooner after waking, a measure of physical dependence.⁹ While those who smoke menthol cigarettes make more attempts to quit smoking than those who smoke non-menthol cigarettes, those who smoke menthol are less likely to succeed compared with those who do not smoke menthol cigarettes.^{10, 11}

Tobacco companies aggressively market to Black, American Indian, and LGBTQ2+ communities, and it works.

The portion of adults who smoke has declined for decades, but it is no coincidence that some communities have much higher smoking prevalence than others. Tobacco companies market to and promote menthol products to specific populations through tailored advertisements, giveaways, price discounts and coupons, lifestyle branding, and event sponsorships.¹²

Figure 3. Menthol advertising



Tobacco companies knew their customers perceived menthol cigarettes as healthier than non-menthol cigarettes and used that theme in their marketing to persuade health-conscious smokers to switch to menthol cigarettes rather than quit smoking.¹³

Figure 3 shows an advertisement with the message that smoking menthol cigarettes is healthier and encourages customers to switch not quit.

Source: Stanford University's Research into the Impact of Tobacco Advertising online collection (<https://tobacco.stanford.edu/>)

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Black Americans: Tobacco companies have heavily marketed menthol products in Black-owned publications and newspapers with high Black readership, through sponsorship of jazz concerts and certain civil rights groups, through ads showing people dressed in clothing popular with rap and hip-hop artists, and in neighborhoods with more Black residents.¹ More recently, the industry has advertised menthol cigars on social media and has used hip-hop and rap artists, models, and music that are appealing to youth.^{1, 14}

American Indians: Tobacco companies manipulated and exploited some American Indians' sacred use of tobacco¹⁵ by using images of American Indians to market their products as "natural" and a spiritual experience.^{16, 17, 18} The practice of marketing to American Indian communities continues today. Congressional testimony revealed that major e-cigarette manufacturer JUUL targeted at least eight American Indian tribes with price discounts and other efforts to promote its products.¹⁸

Learn more about sacred tobacco at [Traditional Tobacco and American Indian Communities in Minnesota](http://www.health.state.mn.us/communities/tobacco/traditional/index.html) (www.health.state.mn.us/communities/tobacco/traditional/index.html).

LGBTQ2+: Tobacco companies designed marketing materials tailored for LGBTQ2+ persons earlier than most other industries, depicted tobacco use as part of the LGBTQ2+ experience, and used corporate philanthropy and sponsorships of social events and pride festivals to gain acceptance and support within the community.¹⁹

Impact on Minnesotans: These focused promotional efforts to increase commercial tobacco consumption and addiction among members of Black, American Indian, and LGBTQ2+ communities resulted in commercial tobacco use prevalence that is higher among these groups than others in Minnesota (**Figure 5**).²⁰

Figure 4. An example of counter-marketing in Minnesota against tobacco industry misappropriation of American Indian tradition.

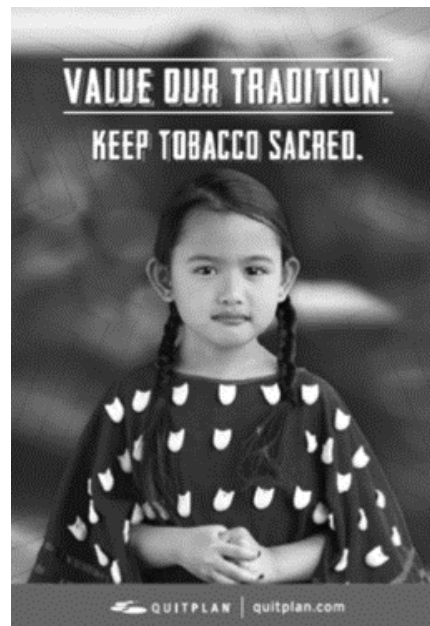
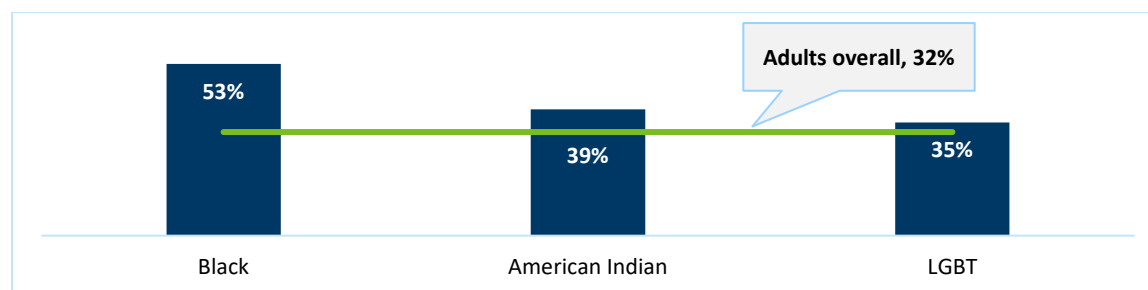


Figure 5. Menthol use is higher among communities targeted with menthol marketing.



Source: 2021 Behavioral Risk Factor Surveillance Survey. Denominator: Minnesota adults who use commercial tobacco products.

Among Minnesota adults who use commercial tobacco, the percentage who report having used menthol is higher among Black, American Indian, and LGBTQ+

What if menthol sales ended?

In 2011, the Tobacco Products Scientific Advisory Committee reported to the FDA that the removal of menthol cigarettes would benefit public health in the United States.²¹ A recent study shows that nearly two-thirds of U.S. adults approve of policies to end menthol cigarette sales, and more than half support ending the sale of all tobacco products.²²

Studies show young adults' and adolescents' willingness to use commercial tobacco products is lower when flavored options, such as menthol, are unavailable. For example, while younger (aged 16-24) nonsmokers were interested in trying all e-cigarettes presented to them, with a marked preference for coffee and cherry flavors, they were substantially less interested in trying tobacco-flavor e-cigarettes.²³ Similarly, Minnesota teens were less susceptible to using e-cigarettes when the flavor offered was tobacco compared with menthol, unspecified, or no flavor at all, and this was true for teens who had never tried e-cigarettes and those who were showing signs of e-cigarette dependence, suggesting that ending sales of flavored commercial tobacco products would advance commercial tobacco prevention and cessation goals in Minnesota.²⁴

A 2014 survey revealed that 46% of Minnesota adults who smoke menthol cigarettes reported they would quit smoking if menthol cigarettes were banned.²⁵ A 2022 survey showed that a ban on flavored e-cigarettes would more effectively reduce public health harms if combined with a ban on menthol cigarettes and flavored cigars, because e-cigarette users would be motivated to quit rather than switch to an unflavored commercial tobacco product.²⁶

Minnesotans Taking Action: Several states, large cities, and many localities have enacted policies to limit or prohibit sales of menthol tobacco products.²⁷ In Minnesota, the cities of Minneapolis, Saint Paul, and Duluth restricted sales of menthol commercial tobacco products. Once these policies were enacted, outlets that sell menthol products substantially decreased and reduced the availability of these products in these communities.²⁸ After Minneapolis and Saint Paul restricted sales of flavored commercial tobacco and later menthol commercial tobacco products, youth use of any commercial tobacco product remained stable or increased less than communities without flavor policies.²⁹

Summary

Menthol makes commercial tobacco products more appealing to new users and interacts with nicotine to make commercial tobacco products more addictive. Tobacco companies disproportionately market menthol products to Black, Native American, LGBTQ2+ communities, and young people. Ending sales of menthol and other flavored tobacco products would improve the health of Minnesota communities targeted by Big Tobacco and protect future generations from nicotine dependence.

Free help to quit smoking, chewing, or vaping

Free quitting help is available to all Minnesotans. [Quit Partner \(http://quitpartnermn.com/\)](http://quitpartnermn.com/) offers a variety of tools, including coaching, quit guides, and starter kits with patches, gum, or lozenges. Minnesota residents with Medical Assistance or MinnesotaCare also have free access to tobacco cessation counseling and medications with a prescription.



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03/21/2024

To obtain this information in a different format, call: 651-201-3535

¹ Centers for Disease Control and Prevention. Menthol tobacco products are a public health problem. Accessed February 8, 2023, https://www.cdc.gov/tobacco/basic_information/menthol/public-health-problem.html

² Klausner K. Menthol cigarettes and smoking initiation: a tobacco industry perspective. *Tob Control*. 2011;20(Suppl 2):ii12-ii19.

³ Kostygina G, Glantz SA, Ling PM. Tobacco industry use of flavours to recruit new users of little cigars and cigarillos. *Tob Control*. 2016;25(1):66-74.

⁴ Hsu G, Sun JY, Zhu S-H. Evolution of electronic cigarette brands from 2013-2014 to 2016-2017: analysis of brand websites. *Journal of Medical Internet Research*. 2018;20(3):e8550.

⁵ Park-Lee E, Ren C, Cooper M, Cornelius M, Jamal A, Cullen KA. Tobacco Product Use Among Middle and High School Students—United States, 2022. *Morbidity and Mortality Weekly Report*. 2022;71(45):1429-1435.

⁶ Minnesota Department of Health. Data highlights from the 2020 Minnesota Youth Tobacco Survey. Accessed February 11, 2023, <https://www.health.state.mn.us/communities/tobacco/data/docs/2020mytshighlights.pdf>

⁷ American Lung Association. The science behind the addictiveness of menthol. *Each Breath* blog. September 23, 2022, 2022. <https://www.lung.org/blog>

⁸ Thompson MF, Poirier GL, Dávila-García MI, et al. Menthol enhances nicotine-induced locomotor sensitization and in vivo functional connectivity in adolescence. *J of Psychopharmacol*. 2018;32(3):332-343.

⁹ Ahijevych K, Garrett BE. The role of menthol in cigarettes as a reinforcer of smoking behavior. *Nicotine & tobacco research*. 2010;12(suppl_2):S110-S116.

¹⁰ Smith SS, Fiore MC, Baker TB. Smoking cessation in smokers who smoke menthol and non - menthol cigarettes. *Addiction*. 2014;109(12):2107-2117.

¹¹ Smith PH, Assefa B, Kainth S, Salas-Ramirez KY, McKee SA, Giovino GA. Use of mentholated cigarettes and likelihood of smoking cessation in the United States: a meta-analysis. *Nicotine & tobacco research : official journal of the Society for Research on Nicotine and Tobacco*. 2019;22(3):307-316.

¹² Centers for Disease Control and Prevention. Tobacco Industry Marketing. Updated 5/18/2020. https://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_industry/marketing/index.htm

¹³ Anderson SJ. Marketing of menthol cigarettes and consumer perceptions: a review of tobacco industry documents. *Tob Control*. 2011;20(Suppl 2):ii20-ii28.

¹⁴ Cruz TB, Rose SW, Lienemann BA, et al. Pro-tobacco marketing and anti-tobacco campaigns aimed at vulnerable populations: a review of the literature. *Tob Induc Dis*. 2019;17

¹⁵ Minnesota Department of Health. Traditional Tobacco and American Indian communities in Minnesota. Accessed 3/15/2023, <https://www.health.state.mn.us/communities/tobacco/traditional/index.html>

¹⁶ D'Silva J, O'Gara E, Villaluz NT. Tobacco industry misappropriation of American Indian culture and traditional tobacco. *Tob Control*. 2018;27(e1):e57-e64.

¹⁷ Lempert LK, Glantz SA. Tobacco industry promotional strategies targeting American Indians/Alaska natives and exploiting tribal sovereignty. *Nicotine & Tobacco Research: Official Journal of the Society for Research on Nicotine and Tobacco*. 2019;21(7):940-948.

¹⁸ Truth Initiative. Tobacco use in the American Indian/Alaska Native community. 2023. <https://truthinitiative.org/research-resources/targeted-communities/tobacco-use-american-indianalaska-native-community>

¹⁹ Spivey JD, Lee JGL, Smallwood SW. Tobacco Policies and Alcohol Sponsorship at Lesbian, Gay, Bisexual, and Transgender Pride Festivals: Time for Intervention. *Am J Public Health*. Feb 2018;108(2):187-188. doi:10.2105/ajph.2017.304205

²⁰ Minnesota Department of Health. Tobacco NUMBRS. Accessed February 10, 2023, <https://www.health.state.mn.us/communities/tobacco/data/index.html>

²¹ Benowitz NL, Samet JM. The threat of menthol cigarettes to US public health. *N Engl J Med*. 2011;364(23):2179-2181.

²² Al-Shawaf M. Support for Policies to Prohibit the Sale of Menthol Cigarettes and All Tobacco Products Among Adults, 2021. *Prev Chronic Dis*. 2023;20

²³ Czoli CD, Goniewicz M, Islam T, Kotnowski K, Hammond D. Consumer preferences for electronic cigarettes: results from a discrete choice experiment. *Tobacco control*. 2016;25(e1):e30-e36.

²⁴ Helgertz S, Kingsbury J. Teens Less Susceptible to Vaping When Restricted to Tobacco-Flavored E-cigarettes: Implications for Flavored Tobacco Policies. *Nicotine & Tobacco Research*. 2022;25(5):991-995. doi:10.1093/ntr/ntac272

²⁵ D'Silva J, Amato MS, Boyle RG. Quitting and switching: menthol smokers' responses to a menthol ban. *Tobacco Regulatory Science*. 2015;1(1):54-60.

²⁶ Yang Y, Lindblom EN, Ward KD, Salloum RG. Reactions to hypothetical flavor bans among current users of flavored e-cigarettes. *Translational Behavioral Medicine*. 2023:ibac109.

²⁷ Public Health Law Center. Fighting Flavors: Updates on State and Local Flavor Ban Legislation & Litigation. Accessed 2/13/23, 2023. <https://www.publichealthlawcenter.org/webinar/fighting-flavors-updates-state-and-local-flavor-ban-legislation-litigation>

²⁸ Bosma LM, D'Silva J, Moze J, Matter C, Kingsbury JH, Brock B. Restricting sales of menthol tobacco products: lessons learned from policy passage and implementation in Minneapolis, St. Paul, and Duluth, Minnesota. *Health Equity*. 2021;5(1):439-447.

²⁹ Olson LT, Coats EM, Rogers T, et al. Youth Tobacco Use Before and After Local Sales Restrictions on Flavored and Menthol Tobacco Products in Minnesota. *J Adolesc Health*. 2022;70(6):978-984.