

## LETTERS TO THE EDITOR

Letters intended for publication should be a maximum of 400 words and 10 references and should be sent to Simon Chapman, deputy editor, at the address given on the inside front cover. Those corresponding to articles or correspondence published in the journal should be received within six weeks of publication.

### Review of *Legislative Responses to Tobacco Use*

*To the editor* – This letter has two purposes. Firstly, I congratulate you, your editorial board, and the British Medical Association on the decision to publish *Tobacco Control* as an international journal and on its broad design. The first issue is superb – a great combination of excellent research articles and energising reports on tobacco control activities. The journal will certainly provide a means for disseminating the results of research promptly and will inspire imaginative tobacco control activities around the world.

Secondly, I am flattered that one of your book reviewers has attributed to me authorship of *Legislative Responses to Tobacco Use*.<sup>1</sup> I did, indeed, write the foreword, but the real author/editor is Sev S Fluss, Chief, Health Legislation, World Health Organisation (WHO)/Geneva, and editor of WHO's excellent quarterly, the *International Digest of Health Legislation*. Your reviewer is quite right that the book is a reprint of statutes published in the *Digest* from 1978 to 1991. Mr Fluss had the foresight to see that countries seeking to control the tobacco epidemic needed ready access to the laws of different countries. Sev Fluss and WHO deserve credit for this very useful and timely collection of tobacco control legislation.

Every good wish for the continued success of *Tobacco Control*.

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<sup>1</sup> Reynolds C. Legislation and regulation.  
*Tobacco Control* 1992; 1: 64.

*To the editor* – Christopher Reynolds's review of *Legislative Responses to Tobacco Use*<sup>1</sup> brings to light the omission of an important South Australian law. Such omissions (and there are certainly others for many other countries and subnational jurisdictions) are due to no fault of the publishers but rather to the fact that the World Health Organisation's (WHO) health legislation unit (which supplied the materials to the publishers) must perforce rely on the laws and subsidiary legislation which it receives. We depend heavily on what countries themselves send us (under article 63 of WHO's constitution) or on other sources (notably the library of the Geneva based International Labour Office and Harvard Law School Library in Cambridge, Massachusetts, USA). I encourage readers of *Tobacco Control* to send us copies of important new legislation on the control of smoking and other forms of tobacco use.

A word about the origins of the book. Some time ago, Martinus Nijhoff brought out *Legislative Responses to Terrorism* and it was this that served as a model for the first health related book in this series, *Legislative Responses to AIDS* (which appeared in 1989). The second in the series, reviewed in your columns, will be followed by *Legislative Responses to Organ Transplantation* and hopefully other corresponding compilations. Laws and regulations generally speak for themselves and it was deemed inappropriate to include any editorial comment on specific texts. Reynolds's suggestions about the organisation of the material and his advocating some form of index or cross referencing system are helpful and will be brought to the attention of the publishers.

S S FLUSS

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<sup>1</sup> Reynolds C. Legislation and regulation.  
*Tobacco Control* 1992; 1: 64.

### Tobacco sales: Canadian pharmacies ignore professional recommendations

*To the editor* – Canada is one of the few countries in which tobacco is sold in pharmacies. Several provisional licensing bodies have taken steps to eliminate this practice.

A survey was undertaken by Physicians for a Smoke-Free Canada to determine the level of compliance of Ottawa area pharmacies with professional recommendations for the sale and advertising of tobacco products that were established by the Ontario College of Pharmacists on 17 June 1991. These placed increasing restrictions on tobacco displays and promotions, culminating in the elimination of tobacco sales in pharmacies by 1 July 1993 (Ontario College of Pharmacists, unpublished report, 1991).

An onsite inspection of all pharmacies that sell tobacco in the Ottawa area was conducted by Physicians for a Smoke-free Canada on 16, 17, and 20 January 1992.

In the Ottawa area 48 out of 114 (42%) pharmacies did not sell tobacco in any form.

Of the 66 pharmacies that sold tobacco, 41 were found to be displaying cigarettes on, beside, or in front of the service counter, in violation of the recommendation that this be eliminated from 1 October 1991, and 61 were in violation of a recommendation prohibiting the advertising and promotion of tobacco in signs, displays, or advertising material including "back bar" displays as of 1 January 1992.

Over 60% (41/66) of the pharmacies that sold tobacco are not in compliance with the Ontario College of Pharmacists' recommendation that "by October 1, 1991, all tobacco products [should] be behind service counters" (unpublished report, 1991). Independent drugstores are complying at a rate of 55% (16/29) while the chains are complying at a rate of only 24% (9/37).

Over 90% (61/66) of the tobacco selling pharmacies are in violation of the recommendation requiring that "by January 1, 1992... back bar displays and... all activities advertising and promoting tobacco" be discontinued. Independent drugstores are complying at a rate of 17% (5/29), but none of the 37 chain pharmacies are in compliance.

Pharmacists throughout Canada have recognised the essential incompatibility of tobacco sales and the pharmacist's role as a health care provider.<sup>1</sup> In light of this, many privately owned pharmacies have stopped selling tobacco.<sup>2</sup> The Ontario College of Pharmacists is to be commended for putting forth recommendations to eliminate tobacco sales in pharmacies (unpublished report, 1991).

The pharmacies that continue to sell tobacco products give every indication that they – particularly the drug store chains Shoppers Drug Mart and Pharma Plus – have ignored and will continue to ignore professional recommendations. All five of the tobacco selling pharmacies that follow the college's recommendations are pharmacist owned and operated – that is, non-members of a drug store chain. All 48 of the pharmacies that did not sell tobacco are independent – that is, non-members of a drug store chain.

Clearly, recommendations for voluntary removal of tobacco from pharmacies will not be sufficient. This is mainly because large, powerful pharmacy chains, especially Shoppers Drug Mart, continue to violate the recommendations of their own professional governing bodies. Shoppers Drug Mart is owned by Imasco Corporation, which also owns Imperial Tobacco. Voluntary recommendations are unlikely to convince Shoppers Drug Mart to stop selling the products of its sister company.

We have recommended that the Ontario Minister of Health introduce for enactment as soon as possible, legislation to prohibit the sale, advertising, and promotion of tobacco products in all accredited pharmacies.

SHAWN MOREAU

Executive Director

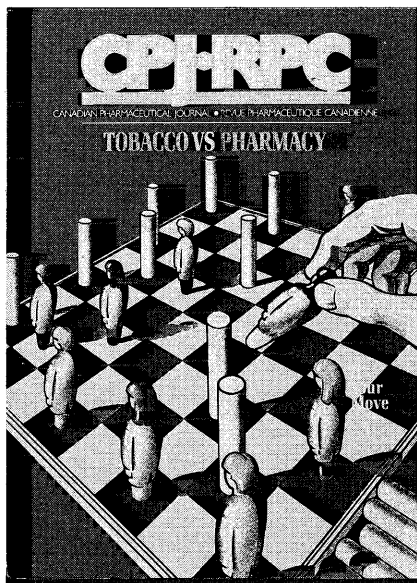
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<sup>1</sup> Gibson B. Pharmacists and tobacco: dollars before duty. *Can Med Assoc J* 1990; 142: 621-2.

<sup>2</sup> Taylor M, Walker J, Esdaile D, Goodyear M, Moreau S. The campaign to promote tobacco-free pharmacies. *Nova Scotia Medical Journal* 1990; 69: 156-7.