



Research Repository UCD

Title	Commercial Tobacco and Nicotine Industry-Funded Research Has No Place in SRNT and Nicotine & Tobacco Research
Authors(s)	Rose, Shyanika W., Tan, Andy, Bandi, Priti, Frazer, Kathleen, et al.
Publication date	2024-08
Publication information	Rose, Shyanika W., Andy Tan, Priti Bandi, Kathleen Frazer, and et al. "Commercial Tobacco and Nicotine Industry-Funded Research Has No Place in SRNT and Nicotine & Tobacco Research." Oxford University Press (OUP), August 2024. https://doi.org/10.1093/ntr/ntae109 .
Publisher	Oxford University Press (OUP)
Item record/more information	http://hdl.handle.net/10197/26933
Publisher's version (DOI)	10.1093/ntr/ntae109

Downloaded 2026-05-01 23:34:50

The UCD community has made this article openly available. Please share how this access benefits you. Your story matters! (@ucd_oa)



© Some rights reserved. For more information

Commercial Tobacco and Nicotine Industry-Funded Research Has No Place in SRNT and
Nicotine & Tobacco Research

Shyanika W. Rose¹ and Andy Tan² (co-first)
Priti Bandi³
Raglan Maddox^{4,5}
Micah Berman⁶
Lauren Czaplicki⁷
Babalola Faseru⁸
Kate Frazer⁹
Kelvin Choi¹⁰

1. Center for Health Equity Transformation and Behavioral Science, University of Kentucky College of Medicine, Lexington, KY s.rose@uky.edu
2. Annenberg School for Communication, University of Pennsylvania, Philadelphia, PA andy.tan@asc.upenn.edu
3. Surveillance & Health Equity Science, American Cancer Society, Atlanta, GA priti.bandi@cancer.org
4. Bagumani (Modewa) Clan, Papua New Guinea Raglan.Maddox@anu.edu.au
5. National Centre for Aboriginal and Torres Strait Islander Wellbeing Research, National Centre for Epidemiology and Population Health, Australian National University, Canberra, Australian Capital Territory, Australia
6. College of Public Health and Moritz College of Law, The Ohio State University, Columbus, OH berman.31@osu.edu
7. Department of Health, Behavior & Society, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, lczapli1@jhu.edu
8. Department of Population Health, University of Kansas Medical Center, Kansas City, KS, USA. bfaseru@kumc.edu
9. School of Nursing, Midwifery and Health Systems, University College Dublin, Ireland. Kathleen.frazer@ucd.ie
10. Division of Intramural Research, National Institute on Minority Health and Health Disparities, Bethesda, MD, USA. Kelvin.choi@nih.gov

In this invited editorial, the Health Equity Network (HEN) Advisory Committee calls for necessary changes to policies and procedures of both the Society for Research on Nicotine and Tobacco (SRNT) and its academic journal *Nicotine & Tobacco Research* (N&TR) to:

- (1) update definitions of the ‘tobacco and nicotine industry’ to include all entities affiliated with the manufacturing, marketing, and distribution of recreational commercial nicotine and tobacco products;
- (2) prohibit individuals receiving any financial support from the commercial tobacco and nicotine industry, including industry consultants, from participating in any SRNT activities, including membership and annual conference submissions and attendance;
- (3) exclude individuals receiving support from the tobacco and nicotine industry, including consultants, from the entire publication process at N&TR, including submitting, handling, and reviewing manuscripts;
- (4) implement procedures to ensure SRNT leadership and its members, as well as the entire N&TR editorial team, authors and reviewers, disclose these conflicts of interest and comply with these policies.

The events prompting our editorial highlight the need for reform. In December 2023, SRNT President Chris Bullen emailed SRNT members, stating that it had been a mistake when N&TR published one paper co-authored by JUUL employees and a JUUL-funded consultant¹ and another authored solely by a JUUL-funded consultant.² Since 2021, N&TR’s policy has stated, “[W]e will no longer allow tobacco industry (TI) employees to submit work to the journal in any format... We consider e-cigarette companies that are wholly or partially owned by the TI to be part of the TI.”³ N&TR’s existing policies are intended to be congruent with SRNT, and SRNT’s membership criteria further state that “SRNT considers JUUL to be part of the commercial tobacco industry” because of Altria’s ongoing financial stake in JUUL.

In our view, the publication of the JUUL employee co-authored paper¹ should have clearly been against N&TR’s submission policies. However, N&TR leaders believed the paper was allowed because of Altria’s divestment from JUUL in return for intellectual property rights in March 2023,⁴ further underscoring the need for an unambiguous policy not dependent on editors and reviewers keeping track of shifting financial relationships across corporations. To our knowledge, N&TR did not identify any problem with the papers until contacted by HEN members, and even then, N&TR did not retract the paper as they did not identify any COPE retraction guidelines that covered this situation.

Additionally, N&TR does not have a policy regarding industry funded research or researchers, who are not TI *employees*, and SRNT holds the policy that “Individuals who consult for the tobacco industry are, at this time, eligible for membership.”⁵ Industry-funded consultants continue to be visible participants at SRNT meetings, and N&TR’s reviewer list for 2023 includes individuals who are industry employees or consultants.⁶ The second article,² falls into this ‘consultant’ loophole, even though the article’s disclaimer indicates that JUUL Labs, Inc. funded the research and “reviewed and provided comments on a draft manuscript.” Additionally, SRNT’s policy only applies to JUUL because of the financial relationship between JUUL and Altria; the employees of other e-cigarette and commercial nicotine companies not owned by cigarette companies, remain able to publish in N&TR.

There are four critical reasons for acting *now* and excluding industry influence from our society and journal.

SRNT has “committed to being an anti-racist organization”. As health equity researchers and N&TR authors, Guest Editors, and reviewers, we were particularly disheartened to see N&TR publishing industry work in light of recent SRNT Board policies when SRNT “committed to being an anti-racist organization.”⁷ These policies were informed by the SRNT Racial Equity Taskforce, which recommended that commercial tobacco and nicotine industry influence should be avoided in SRNT’s programming and publishing “*due to the inherent conflicts of interest with health as well as its racist history and continuous practices in targeting racial/ethnic minority populations.*”⁸ These tactics are not unique to cigarette companies and, in fact, recently released internal JUUL documents show how the company engages in racial targeting of Black communities,⁹ including vigorously opposing evidence-based public health measures. The ongoing tobacco industry exploitation and manipulation of Indigenous peoples is another example of contemporary coloniality.¹⁰ Allowing individuals supported by the industry to participate in SRNT and the N&TR publication process wrongfully legitimizes their research and actions to the public. It also undermines SRNT’s ability to provide an open and safe space to share and discuss nicotine and tobacco research and control, especially for researchers from those communities. Given the industry’s historic and *ongoing* targeting of racial/ethnic minority communities, SRNT and N&TR, as the stewards of the field of nicotine and tobacco research, must ensure our field is anti-racist and are not complicit in re-traumatization of our communities.

Industry-funded research published in N&TR risks undermines the integrity of all research in our field. How can research funded by companies that directly profit from the results of their research be credible? Tobacco and nicotine industry-funded research, including research sponsored by e-cigarette companies, is inherently conflicted. These companies are under a legal obligation to maximize their profits and, accordingly, only support and publish research that will advance that goal.^{11,12} Their aim is emphatically *not* to discover scientific truths.¹³ Moreover, a growing body of scientific literature establishes that industry-supported researchers are (whether unconsciously or consciously) subject to motivated bias that increases the likelihood they will produce results favorable to the funder.¹¹ In fact, multiple systematic reviews have found that industry-sponsored research can shift an entire field toward a pro-industry direction.¹⁴⁻¹⁶ These systematic biases are hidden in plain sight and can and do occur without ‘visibility’ of scientific misconduct in any one particular article.¹⁷ Additionally, the extent to which this occurs at N&TR is unclear, particularly given the international evidence on inconsistent reporting of conflict of interest declarations by authors for tobacco and nicotine industry-funded studies.^{14,18} Thus, disclosure and peer review alone *cannot* safeguard against industry influence.¹⁹ Due to these inherent biases, tobacco and nicotine industry-funded research is inherently unethical and has no place in SRNT and N&TR.

The tobacco industry has a well-known, ongoing history of manipulation of scientific discourse on commercial tobacco and nicotine products. This includes funding research organizations, scientists, and consultants to generate scientific opinions and testimony that have created skepticism about cigarettes’ addictiveness and health harms.^{20,21} The 1998 Master Settlement Agreement (MSA) forbade companies from engaging in deceptive practices to obfuscate science, including by dismantling “research” front groups that the industry had established.²² In 2006, Federal District Court Judge Gladys Kessler, ruled that major cigarette manufacturers violated (and, despite the MSA’s restrictions, were continuing to violate) the Racketeer Influenced and Corrupt Organizations (RICO) Act by deceiving the American public. In her ruling, she stated, “over the course of more than 50 years, Defendants lied, misrepresented, and deceived the American public, including smokers and the young people they avidly sought as “replacement smokers,” about the devastating health effects of smoking and environmental tobacco smoke.”²³ Tobacco industry-funded consultants were pivotal in the industry’s efforts to misrepresent harms,^{20,24,25} and appear to be actively involved in the recent

repeal of smokefree measures in Aotearoa New Zealand, which were expected to save approximately \$5 billion in health spending and \$6 billion in increased productivity over the lifetimes of New Zealanders alive in 2020.²⁶ We are also witnessing a similar approach of e-cigarette companies paying consultants and think tanks for favorable research to influence scientific discourse regarding e-cigarettes.^{27,28} Within this context, the aforementioned JUUL-sponsored articles in N&TR are not exceptions.

SRNT and N&TR are behind their peers in recognizing and responding to the corrosive effects of industry-funded research. They should join other organizations and journals in meeting ethical standards consistent with SRNT Values and Guiding Principles to exclude industry-sponsored research and researchers. Multiple societies and journals have far earlier and stronger policies regarding industry influence, including the American Thoracic Society,²⁹ Heart, BMJ and Thorax,³⁰⁻³² the Journal of Health Psychology,³³ PLoS journals,³⁴ and Tobacco Control.³⁵ Such policies would also align SRNT and N&TR with minimum policy standards, including Article 5.3 of the World Health Organization Framework Convention for Tobacco Control, which calls on parties to “act to protect [public health] policies from commercial and other vested interests of the tobacco industry.”³⁶

In short, we have known about the harms of commercial tobacco use for over 70 years, and the deceptive tobacco industry practices used to influence science and maximize profits over health are clear. We call on SRNT and N&TR to actively reject industry influence, close the loopholes in our policies and practices, and truly do the work of becoming an anti-racist organization.

Accepted Manuscript

References Cited

1. Shiffman S, Oliveri DR, Goldenson NI, Liang Q, Black RA, Mishra S. Comparing Adult Smokers Who Switched to JUUL versus Continuing Smokers: Biomarkers of Exposure and of Potential Harm and Respiratory Symptoms. *Nicotine Tob Res.* 2024;26(4):494-502.
2. Foxon F. Discordant device/brand reporting among adolescents who used e-cigarettes in the National Youth Tobacco Survey. *Nicotine Tob Res.* 2023.
3. Nicotine & Tobacco Research. Instructions to Authors. 2024; https://academic.oup.com/ntr/pages/General_Instructions. Accessed 3/26/2024, 2024.
4. Sophia DM. Altria to revive vaping push with \$2.8 bln NJOY bid after Juul fiasco. *Reuters*2023.
5. Society for Research on Nicotine and Tobacco. Join Us! INFORMATION RELATED TO INDUSTRY AND MEMBERSHIP ELIGIBILITY. 2020; https://www.srnt.org/page/Join_Us. Accessed 3/26/2024, 2024.
6. Acknowledgement of Reviewers. *Nicotine Tob Res.* 2024;26(3):405-409.
7. Society for Research on Nicotine and Tobacco. SRNT and Racial Equity: SRNT's Commitment to Anti-Racism & Inclusion. 2022; https://www.srnt.org/page/racial_equity. Accessed 3/26/2024, 2024.
8. SRNT Racial Equity Taskforce. *SRNT Racial Equity Task Force Final Report*. SRNT, RTF;2022.
9. Florke N. Juul spent big to court Black leaders to promote its e-cigarettes, new documents show. *STAT News*. Feb 3, 2024, 2024.
10. Maddox R, Kennedy M, Waa A, et al. Clearing the Air: Conflicts of Interest and the Tobacco Industry's Impact on Indigenous Peoples. *Nicotine Tob Res.* 2022;24(6):933-936.
11. Svirsky L, Howard D, Berman ML. E-Cigarettes and the Multiple Responsibilities of the FDA. *Am J Bioeth.* 2022;22(10):5-14.
12. Ulucanlar S, Fooks GJ, Gilmore AB. The Policy Dystopia Model: An Interpretive Analysis of Tobacco Industry Political Activity. *PLoS Med.* 2016;13(9):e1002125.
13. Farber HJ, Neptune ER, Ewart GW. Corrective Statements from the Tobacco Industry: More Evidence for Why We Need Effective Tobacco Control. *Ann Am Thorac Soc.* 2018;15(2):127-130.
14. Vassey J, Hendlin YH, Vora M, Ling P. Influence of Disclosed and Undisclosed Funding Sources in Tobacco Harm Reduction Discourse: A Social Network Analysis. *Nicotine Tob Res.* 2023;25(12):1829-1837.
15. Hendlin YH, Vora M, Elias J, Ling PM. Financial Conflicts of Interest and Stance on Tobacco Harm Reduction: A Systematic Review. *American Journal of Public Health.* 2019;109(7):e1-e8.
16. Pisinger C, Godtfredsen N, Bender AM. A conflict of interest is strongly associated with tobacco industry-favourable results, indicating no harm of e-cigarettes. *Preventive Medicine.* 2019;119:124-131.
17. Holman B, Elliott KC. The promise and perils of industry-funded science. *Philosophy Compass.* 2018;13(11):e12544.
18. McDonald A, McCausland K, Thomas L, Daube M, Jancey J. Smoke and mirrors? Conflict of interest declarations in tobacco and e-cigarette-related academic publications. *Aust N Z J Public Health.* 2023;47(3):100055.
19. Fabbri A, Lai A, Grundy Q, Bero LA. The Influence of Industry Sponsorship on the Research Agenda: A Scoping Review. *Am J Public Health.* 2018;108(11):e9-e16.
20. U.S. Department of Health and Human Services. *The Health Consequences of Smoking - 50 Years of Progress: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health;2014.

21. Brandt AM. Inventing conflicts of interest: a history of tobacco industry tactics. *Am J Public Health*. 2012;102(1):63-71.
22. Master Settlement Agreement. Master settlement agreement. Retrieved October. 1998;14(<https://www.philipmorrisusa.com/-/media/Project/Altria/PMUSA/Products/Tobacco-Settlement-Agreements/master-settlement-agreement.pdf>):2007.
23. Kessler G. Final Opinion Civil Action No. 99-2496 (GK). In: Colombia USDCftDo, ed2006.
24. National Cancer Institute. Risks associated with smoking cigarettes with low machine-measured yields of tar and nicotine. Bethesda, MD: US Department of Health and Human Services, National Institutes of Health, National Cancer Institute; 2001.
25. Bero LA. Tobacco industry manipulation of research. *Public Health Rep*. 2005;120(2):200-208.
26. Newton K. Shane Jones 'not giving on iota of attention' to tobacco transparency rules. *TE AO Maori News*2024.
27. Lee JGL, Soule EK. Evidence of potential tobacco industry influence in Tobacco Regulatory Science. *Tob Control*. 2023;32(3):400-401.
28. Florko N. Juul's internal playbook opens a rare window into influence in Washington. *STAT News*. Feb 15, 2024, 2024.
29. American Thoracic Society. *Policy on involvement of ATS members and others participating in ATS activities with the tobacco industry*. 2007.
30. Godlee F, Malone R, Timmis A, et al. Journal policy on research funded by the tobacco industry. *Thorax*. 2013;68(12):1090-1091.
31. Godlee F, Malone R, Timmis A, et al. Journal policy on research funded by the tobacco industry. *BMJ*. 2013;347:f5193.
32. Godlee F, Malone R, Timmis A, et al. Journal policy on research funded by the tobacco industry. *Heart*. 2014;100(1):2-3.
33. Marks DF. A higher principle is at stake than simply freedom of speech. *BMJ*. 1996;312(7033):773-774.
34. PLoS Medicine Editors. A new policy on tobacco papers. *PLoS Med*. 2010;7(2):e1000237.
35. Malone RE. Changing Tobacco Control's policy on tobacco industry-funded research. *Tob Control*. 2013;22(1):1-2.
36. Daube M. The WHO Framework Convention on Tobacco Control - time for a civil society equivalent? *Public Health Res Pract*. 2020;30(3).

Accepted Manuscript