To: Jo Churchill, Public Health Minister

Dear Minister,

You will be aware of the deep concern within the healthcare community at the sale of Vectura to Philip Morris International (PMI), the world’s largest tobacco company. Tobacco is a uniquely dangerous, addictive consumer product which costs the British economy £14.7 billion each year, causing around 90,000 deaths across the UK, and 35,500 cases of cancer and nearly 15,000 cases of heart and circulatory disease in England alone.ii

The tobacco industry has an extremely poor reputation and PMI in particular has been accused of running marketing campaigns that target childreniii and was taken to court for complicity with tobacco smuggling to boost its own profits,iv leading to a $1.25 billion settlement with the EU.v There is evidence that it continues to fail to control its supply chain with many of its cigarettes ending up in the illegal market.ivi

PMI and other tobacco companies have a long history of subverting tobacco control policies for their own financial gain and of research manipulation,vi and concerns have been raised that such conduct may be ongoing with irregularities reported in their recent clinical studies.vii For these reasons, we have strongly opposed the takeover from the beginning.

PMI is only in a position to takeover Vectura because it has profited enormously from cigarette sales while avoiding responsibility for the external costs of smoking including health harms, lost productivity and environmental degradation. This market failure could be addressed by the introducing a polluter pays levy on tobacco industry profits, as set out in the recent report from the APPG for Smoking and Health, and we strongly support this proposal.

Our concerns that this takeover will allow PMI to legitimise tobacco industry participation within health debates and provide a greater platform from which to deploy similar tactics in support of tobacco industry interests have previously been raised with the Government. We are however aware of your knowledge of, and commitment to, the WHO Framework Convention on Tobacco Control, including article 5.3 which explicitly aims to reduce industry influence in public health policymaking. The UK is right to be proud of its association with this convention, but PMI’s takeover of Vectura does pose difficult questions in terms of its implementation.

Article 5.3 states that ‘in setting and implementing their public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law.’ Guidance on the implementation of article 5.3 adds to this that ‘parties should implement measures in all branches of government that may have an interest in, or the capacity to, affect public health policies with respect to tobacco control.’

Issues mentioned within this guidance which are particularly relevant here include recommendations, across all branches of government, to:

- Raise awareness about the addictive and harmful nature of tobacco products and about tobacco industry interference with Parties’ tobacco control policies.
- Establish measures to limit interactions with the tobacco industry and ensure the transparency of those interactions that occur.
• Reject partnerships and non-binding or non-enforceable agreements with the tobacco industry.
• Avoid conflicts of interest for government officials and employees.
• Require that information provided by the tobacco industry be transparent and accurate.
• Denormalize and seek to regulate activities described as “socially responsible” by the tobacco industry, including but not limited to activities described as “corporate social responsibility”.
• Do not give preferential treatment to the tobacco industry.

While we are aware of your familiarity with article 5.3, and the fact that there are well established precautions within the Department for Health and Social Care, this may not yet be the case for other government departments, local government, or other public authorities including arm’s length bodies. Given that the acquisition of Vectura significantly broadens PMI’s potential engagement with government, there is a need to ensure that officials at all levels are aware of the issues raised above and that they will now need to interact with Vectura in a different manner.

For example, the government’s Life Sciences Vision 10 year strategy includes a commitment to reducing mortality and morbidity from respiratory disease, which is directly relevant to the research undertaken by Vectura. Now that Vectura is owned by the tobacco industry any potential involvement in this programme could create significant conflicts of interest, something that must be managed carefully and with full transparency. We would like to request that, as Public Health Minister, you work with DHSC to support and oversee a cross-governmental approach to the continuing enforcement of FCTC Article 5.3, issuing clear department specific guidance to all departments and associated bodies now likely to interact with Vectura. We would like to request that you make this guidance public.

We also request that you raise the role of the Competition and Mergers Authority in cases like this with fellow Ministers. We think it clear that this deal is not in the public interest and that it creates perverse incentives for PMI to increase harm through smoking so they might then profit again through treating smoking related diseases. While the Competition and Mergers Authority typically considered monopolies within a product market, they have not in this instance considered monopolies of harm – we think this is a clear deficit in need of attention.

Kind regards,

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