



MEETING MINUTES

City of Melrose
City Hall
562 Main Street
Melrose, MA 02176

Committee/Board: Board of Health
Meeting Day/Date/Time: Thursday, October 19, 2023

Location: Milano Center, 201 West Foster Street
Tierney Hall

Call to Order: Frank Brincheiro
Second by: Carol Ann Licitra

Time Called: 5:32 PM

In Attendance/Roll Call:

Board Members: Frank Brincherio, Carol Ann Licitra, Lillian Kelly

Health Department: Director, Anthony Chui; Administrative Assistant, Christy Bolduc

Public Hearing – Nicotine Free Generation

Frank Brincherio made a motion to open the public hearing at 6:32 PM

Vote to open the public hearing for Nicotine Free Generation:

Frank Brincheiro– Yes

Carol Ann Licitra – Yes

Lillian Kelly – Yes

PASSED 3-0-0

Carol Ann Lictria made a motion to open the floor for the public hearing so that Anthony Chui could read letters submitted.

Lillian Kelly second the motion.

Vote to open the floor for the public hearing:

Frank Brincheiro– Yes

Carol Ann Licitra – Yes

Lillian Kelly – Yes

PASSED 3-0-0

Anthony Chui reads the proposed changes to the Board of Health tobacco regulations include, but are not limited to the following:

1. "Prohibition of sales – No person, firm, corporation, establishment, or agency shall sell tobacco or e-cigarette products to anyone born on or after 1/1/2004.

Any person, firm, corporation, establishment, or agency who or which shall violate any provisions of this regulation and upon written notification shall be fined and suspended in accordance with the schedule set forth under the Regulations of the Melrose Board of Health Restricting the sale of Tobacco Products"

Anthony Chui then reads the following letters from: Jason Lewis and Kate Lipper Garabian, anonymous Melrose High School student, Dr. Ron Sen, Edward Smitt, Lester MD MPH, Kyle Feldman (National Convenience Distributors), David Spross (NATO), Lisa Stevens-Goodnight (ESQ Director of Tobacco Control), Kate Silbow Professor of Law, Mark Gotleaf (Public Health Advocacy Institute), Jeff Bolduc, Peter Brennan Esquire (NECSEMA), Daniel Jurayji (North Suburban Cardiology).

Public Comment:

Frank Brincheiro made a motion to open Public Comment 3 minutes per person, comments to the board only, no open dialogue at 7:14 pm.

Chris Duffey CEO of James J Duffey Inc, distributors to convenient stores, coffee shops, and smoke shops. He is expressing his concern that no one wants to see tobacco in the hands of kids. His second point was that everyone in the room was asked to be there, and he doesn't see the people of Melrose barging in the doors with a public outcry that this should be put into place. However, kids are not buying tobacco products from convenient stores, they are buying them from the black market and online. Kids are smart enough to not buy them from convenient stores where there is a 75% vape state tax in Massachusetts. Convenience stores sell things other than tobacco products, and this is going to devalue their business every day until there is nothing left for them. We should be focusing on resources to get kids to quit smoking and educate them to never start smoking to begin with. Claiming the state of Massachusetts received an F from the Campaign for Tobacco Kids and spends 2% of the \$200,500,000 funding they get annually from consumers of tobacco to prevent kids from starting to smoke.

Emily Hatchouel Public Health Specialist – See attached letter

Maddie Bolduc from 9 Everett St Melrose – See attached letter

Daniel Geluhun district manager for Shell Gas Station – He agrees the age should be 21 but if this passes it will be bad for the retailers but help the street dealers. Also, NH is not far from here and they will go buy tobacco products there.

Micheal Carlino 601 Lynn Fells Parkway Melrose – See attached letter

Jaya Karamcheti MVPHC – States that vaping is normal and there is no avoiding it. In school kids shove paper towels in the smoke detectors so they can vape. Also, on the way to the high school football game they had to pull over so her friends could smoke. She was also able to buy nicotine products at 3 different stores being a youth buyer.

Leah Mallozzi MVPHC – States students in high school are spending more time vaping than studying, as a result doing poorly academically. Also, kids just want to fit in. If one student gets their hands on a vape it is a domino effect and the group of students that vape gets larger. There is nothing to gain but everything to lose from nicotine and we need this legislation to give us the best chance to live our best lives.

Brian Moore Sherwood Rd – He started smoking at a young age and was immediately addicted and continued to smoke for 30 years. His father has COPD and his mother had a heart attack as a result of smoking. He quit about 3 years ago but has had a few slip ups, but it has been the most difficult thing that he has ever had to do. Once we are addicted, we lose the choice about smoking because we are already addicted.

Maureen Buzby Tobacco Program – See attached letter

Paul Brodeur City of Melrose Mayor – Argued that smoking is bad, and it needs to stop and we need to structure a system that leads that to zero. Hopefully the SJC will pass this ordinance and we will be in great shape. He also has a personal story about his family that smoked, and it took them 10 years to quit. He also compared his dad and uncle George, his dad passed away in his 80's and his uncle passed away in his 60's. The only difference between the two was his uncle smoked till the day he died, and his dad did not.

Sandra Brown 130 Tremont St Melrose – See attached letter

Melissa Lowry Regional Public Health Nurse – See attached letter

Lillian Kelly made a motion to close Public Comment at 6:19 pm.

Carol Ann Licitra second the motion.

Vote to close Public Comment:

Frank Brincheiro– Yes

Carol Ann Licitra – Yes

Lillian Kelly – Yes

PASSED 3-0-0

Lillian Kelly made a motion to adjourn the meeting at 6:33 p.m.

Carol Ann Licitra second the motion to adjourn the meeting.

Further Discussion: None

Vote to adjourn the meeting

Frank Brincheiro– Yes
Carol Ann Licitra – Yes
Lillian Kelly – Yes
PASSED 3-0-0

Meeting Adjourned at 6:33 p.m.



Melrose Health and Wellness Coalition Nicotine Free Generation

The Melrose Health and Wellness Coalition's mission is to partner with residents, community-based organizations, and agencies to foster a well-integrated network of support with the purpose of preventing substance use, increasing access to critical resources, and promoting health and quality of life for all Melrose residents.

The Nicotine-Free Generation policy is a forward-thinking approach that aims to protect our young people and embodies our mission and vision. The Coalition's goal is to prevent youth from starting harmful habits young, thus promoting health and quality of life as stated in our mission. This coincides with the long-term goal of this policy.

Our Coalition has continuously worked to support prevention efforts in the city, understanding the need for programming and policies like Nicotine-Free Generation. We have been informed over the years, through YRBS data and youth voices, of the concerning trends pertaining to nicotine use, indicating that students are starting to use at younger and younger ages. This increases their risk of developing a substance use disorder and increases the risk of chronic diseases such as cancer, heart disease, and respiratory disorders.

Research has shown that vape use can lead to nicotine addiction, negatively impacting brain development during crucial adolescent years, and poses risks to respiratory health. Marketing campaigns are targeting youth, creating products that appeal to young people, making them more enticing. These products are widespread, and some products are lower in price, which increases appeal due to affordability. This policy is a vital step in the right direction to protect the youth of Melrose from these risks.

Nicotine-Free Generation sends a powerful message to our community, highlighting our continued effort to safeguard the health and future of our children. We are ready to take action in protecting our children, ensuring they grow up in a nicotine-free environment. As a Coalition, we aim to protect the youth of Melrose in all areas of their life and that includes protecting them from the harms of nicotine.

As a Coalition, this policy aligns with our mission, promoting health and quality of life for all Melrose residents. It highlights the continued need for prevention programs and policies to protect our youth. We encourage local policy makers to stand with the coalition and support this policy. Please join us in our mission of promoting health and quality of life for all residents, especially for the young people in Melrose.

Juan J. Corrales
Lindsey Roberts
Lenneth Howell

Bolduc, Christy

From: krissy2977@aol.com
Sent: Wednesday, January 17, 2024 1:38 PM
To: Bolduc, Christy

hello melrose! i am maddie bolduc, a junior here at mhs. two years ago, we sadly lost my grandfather due to lung cancer from his excessive smoking addiction. growing up, i always remembered ridding in his big pick up truck that reeked of cigarettes. in 2nd grade, we learned about second hand smoking in health class, and all i could think about was how much second hand smoke i was inhaling while in his car. i would always try and hold my breath or stick my head out the window in search of clean air. my grandmother also lived with me at the time, who's also a big smoker. i hated her smoking so much, that me and my younger sister hid her cigarettes behind the couch one day. to make a long story short, would not recommend. to this day, she still smokes cigarettes even though her lungs are starting to seriously deteriorate, and she can barly go up the stairs without getting winded. over 500,000 people die each year because of smoking just in the us. not to mention the cause it has on the greenhouse effect. by banning the sales of tobacco products, we are not only saving people's lives, but also the environment. thank you Sent from the all new AOL app for iOS ****CITY OF MELROSE PUBLIC RECORDS NOTICE: Please be advised that the Massachusetts Attorney General has determined that email is a public record unless the content of the email falls within one of the stated exemptions under the Massachusetts Public Records Laws.****

NFG Statement

I want to express my support for Nicotine Free Generation.

My late grandmother started smoking at the young age of 11, well before her brain was fully developed and had her life significantly shortened due to smoking. I can only think if she had not become reliant on nicotine and smoked for over 50 years, she would be with us here today.

Similarly, I witness the same trend in many of my friends who are facing addiction but haven't yet experienced the adverse health effects of nicotine. Many who picked up a vape in 2016 when they became popular amongst the youth, and haven't been able to put it down since, nor can imagine leaving the house without their vape.

Based on data driven analytics on decades of study, tobacco use causes approximately 480,000 deaths per year in the United States and is the leading cause of preventable death.

Per the CDC "If smoking continues at the current rate among U.S. youth, 5.6 million of today's Americans, younger than 18 years of age are expected to die prematurely from a smoking-related illness."

By adopting NFG as a community we will be implementing a pledge to end a public health crisis and cease the most preventable cause of pre-mature death, chronic illness and addiction amongst the youth and future generations.

-Former MURCS Student

References:

U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta: 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 [accessed 2018 Feb 22].

World Health Organization. WHO Report on the Global Tobacco Epidemic, 2017. Geneva: World Health Organization, 2017 [accessed 2019 Jan 31].

World Health Organization. WHO Report on the Global Tobacco Epidemic, 2011. Geneva: World Health Organization, 2011 [accessed 2018 Feb 22].

Jha P, Ramasundarahettige C, Landsman V, et al. 21st Century Hazards of Smoking and Benefits of Cessation in the United States. New England Journal of Medicine 2013;368:341–50 [accessed 2018 Feb 22].

October 17, 2023

Dear Board Members,

Thank you for this opportunity to speak tonight.

In my role as Regional Tobacco Prevention Program Coordinator I have been inspecting stores and conducting compliance checks for the past twelve years

I have watched the evolution from pink and purple foil-wrapped, \$.69 and \$.79, flavored cigars that look like candy, to Juul devices that look like flash drives, to nicotine pouches, (high in nicotine content, made with nicotine salts for a quicker jolt to the brain, very cheap and very discrete), to Newport's new "Non-Menthol cigarettes for the Menthol smoker", to the latest vapes that look just like highlighters. One product innovation after another. Nicotine gummies? What's next?

Tobacco prevention organizations and Public Health professionals have advocated for public policy to reduce youth access to these products for years. We've done so much. Cigar minimum price, flavor ban, T-21, pharmacy ban, permit cap. But year after year, new products. Band-aid after band-aid is not enough.

The mental health crisis among our nation's, our state's, our community's youth, is very real. Many youth are self-medicating. The evidence is real. Using nicotine doesn't treat anxiety and depression. Nicotine exacerbates anxiety and depression. Addiction to one substance increases the chances of using another substance. And nicotine is a substance; in fact, it is a poison.

It is time to remove these poisons from our store shelves. It's time to adopt a strategy that actually moves us towards a generation of young people who will never experience tobacco. Just as we now have a generation of young people who have never been in a restaurant, movie

theater, or ridden on a plane, train, subway or bus where someone is smoking. We can and we need to make this change.

Thank you.

My name is Sandra Brown I am a Registered nurse, an employee at the Wakefield Health Department, a grandmother, a mother, daughter, sister, a friend and an acquaintance to many. The effects of nicotine have affected my life in all of these roles. I support the Nicotine-Free Generation Policy.

We all have been informed that Nicotine is harmful to our health and causes cancer, by the Surgeon General, CDC, the Heart Association, the American Lung Association, the National Cancer Society our own Doctors and our children's pediatricians and etc. All of these and many other organizations have done research or studied the science proving nicotine causes cancer, heart disease, stroke and other chronic illnesses. It also contributes to the worsening of many other illnesses and can adversely interfere with the treatment of many illnesses. **If you are not aware of the effects of nicotine then I hope you will listen to the experts speaking here tonight.**

I have witnessed the effects of nicotine throughout my professional career in every health care setting that I have ever worked in for over 50 years. I have also cared for many of my friends and family members who have undergone treatment for cancer with chemotherapy, radiation, surgery, even holistic medicine. Some have gone into remission; some have had recurrences and some have passed away after long and difficult battles with cancer caused by nicotine use. Some even continued to smoke or vape until the end while struggling for breath.

My father, a WWII veteran began smoking while in service, he was able to quit eventually after learning about the serious effects of nicotine, and with the support and persuasion of his 5 daughters, all nurses, but the damage was already done. Dad's cancer spread quickly from his lungs to his throat to his stomach. He was young in his fifties, and looking forward to being a grandfather and helping his daughters and son with their homes and families. We 5 daughters cared for him for 6 months as he lay in a rented hospital bed in the dinning room of our family home. We bathed and changed him, fed him through his feeding tube and administered fluids and medication through his IV. I'm sure some of you can relate! It's not a rare scenario. I remember him with tears in his eyes telling me how grateful, but how broken hearted he was that his daughters were having to care for him in this way.

Many of my adult friends and loved ones, who still use nicotine products wish they had never started and wish they could quit. Many have switched to vaping hoping to lessen the dose bit by bit in an effort to quit, but after a while they have actually increased the dose bit by bit. I think they have just given up at this point on trying to quit. Some now say, I choose this and have a right to this. I'm not sure they really feel it is has anything to do with a right or choice, but rather an excuse for a deep denial of an overwhelming addiction. All had started smoking in their teens.

The addiction starts in our youth. It happens quicker and is deeper for them due to their age, brain development and body metabolism. Peer pressure, and well-funded targeted advertising, portraying nicotine use as a normal every day and helpful activity, are no match in many cases for parental guidance, opportunities for healthy and productive activities, or even in-depth education about the dangers of nicotine through our schools and other community initiatives.

The Nicotine-Free Generation policy is practical with enormous benefits, saving lives and saving billions of our tax dollars in health care cost. It gives retailers the opportunity over time to gradually replace tobacco sales with other products.

Thank you for the opportunity to share my experiences and thoughts with you.

Public Health Nurse Statement in Support of the Nicotine-Free Generation Policy

As a Public Health Nurse, I endorse and support the implementation of the Nicotine-Free Generation policy. This initiative represents a critical step towards safeguarding the health and well-being of our community's youngest members, and it aligns with our overarching goal of promoting public health and preventing tobacco-related diseases.

The Nicotine-Free Generation policy is an approach that seeks to create a healthier and smoke-free environment for our youth. It is essential to address the evolving landscape of tobacco use, including the rising popularity of e-cigarettes among our youth. Research has raised significant concerns about the potential adverse effects of e-cigarette use on cardiovascular and respiratory health.

Studies have shown that the aerosols produced by e-cigarettes contain harmful substances such as nicotine, fine particles, and various toxic chemicals. These substances, when inhaled, can have detrimental effects on the cardiovascular system, including an increased risk of heart disease and stroke. For example, a study published in the Journal of the American Heart Association in 2019 found that e-cigarette users had a higher risk of having a heart attack compared to non-users (Bhatta, 2019).

Beyond cardiovascular concerns, e-cigarette aerosols can also harm the respiratory system. Research has linked e-cigarette use to lung injury cases, known as e-cigarette or vaping product use associated lung injury (EVALI). The outbreak of EVALI cases among young users in 2019 highlighted the serious risks associated with e-cigarette use, leading to hospitalizations and even fatalities (Angela K. Werner, 2020).

Adolescence is a crucial period for brain development, and exposure to nicotine during this time can harm cognitive functions such as attention, memory, and impulse control. Studies have shown that the developing brains of adolescents and young adults are particularly vulnerable to the adverse effects of nicotine (Kathleen Stratton, 2018).

I firmly believe that the Tobacco Free Generation policy is a necessary step in our ongoing efforts to improve public health, protect our youth, and reduce the devastating impact of nicotine-related diseases. We have known smoking is bad since 1957; Surgeon General Leroy E. Burney declared it the official position of the U.S. Public Health Service that the evidence pointed to a causal relationship between smoking and lung cancer. We can ensure that our policy helps create a healthier, safer, and nicotine-free environment for the generations to come, while also mitigating the risks associated with emerging tobacco products like vapes and smokeless tobacco. The generous timeline associated with the implementation of this initiative will allow businesses the time they need to replace nicotine products with other sources of income. Together, we can all make a significant and lasting impact on the health and well-being of our community.

Thank you for your time and consideration.

Melissa A. Lowry
Regional Public Health Nurse
Melrose, Wakefield & Stoneham

References

- Angela K. Werner, P. E.-S. (2020). Hospitalizations and Deaths Associated with EVALI. *The New England Journal of Medicine*, 382:1589-1598.
- Bhatta, D. N. (2019). Electronic Cigarette Use and Myocardial Infarction Among Adults in the US Population Assessment of Tobacco and Health. *Journal of the American Heart Association*, 8(12), e012317.
- Kathleen Stratton, L. Y. (2018). *Public Health Consequences of E-Cigarettes*. Washington, DC: National Academies of Sciences, Engineering, and Medicine.