E-cigarette use and access among two samples in Australia who regularly use illicit drugs, 2023

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Key Findings

National, 2023

Few people who regularly use ecstasy and/or other illicit stimulants (EDRS: 3%) and people who regularly inject drugs (IDRS: 1%) reported using prescribed e-cigarettes in the past six months.

Among EDRS participants who recently used prescribed e-cigarettes (n=18), 50% reported obtaining them from an online overseas website, and one third (33%) from an online Australian pharmacy.

Much higher proportions of both EDRS (68%) and IDRS (34%) participants reported using non-prescribed e-cigarettes in the past six months.

Among EDRS participants who recently used non-prescribed e-cigarettes (n=481), most (58%) reported obtaining them from a physical vape store, followed by a friend, relative or acquaintance (30%).

The majority of both samples reported that they either had no difficulty accessing (EDRS: 59%; IDRS: 27%), or had not tried to access (EDRS: 37%; IDRS: 71%), e-cigarettes in the past six months.

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Introduction

Electronic cigarettes, also known as e-cigarettes, are battery-powered devices that vaporise e-liquids, commonly referred to as vape juice. These liquids can contain a variety of flavours and substances, including cannabis and nicotine. E-cigarettes are available in a range of shapes and sizes, from cigarette-like models to larger, more customisable options. The diverse flavour options, models and adjustable nicotine levels, combined with the perception of reduced harm compared to traditional cigarette smoking, have arguably contributed to the popularity of e-cigarettes both in Australia and globally.

Different countries have adopted varying approaches to e-cigarette regulation. While some countries have moved to actively endorse e-cigarettes containing nicotine as a less harmful alternative to traditional tobacco smoking (1), the Australian Government has taken a more cautious approach that restricts the marketing, sale, and use of these products in Australia. In 2021, regulation was introduced requiring people who wanted to use e-cigarettes containing nicotine to obtain a prescription from their doctor. This prescription pathway limited legal access to e-cigarettes containing nicotine to people who were 18 years of age or older and utilising these products for smoking cessation purposes, while prohibiting all other non-prescribed use of e-cigarettes (2). However, ongoing reports suggest that e-cigarettes containing nicotine continue to be readily available without a prescription at various retailors, such as tobacconists (3).

Thus, the aim of this bulletin is to examine recent use of, and access to, prescribed and non-prescribed e-cigarettes among the 2023 EDRS and IDRS samples.

Methods

This bulletin utilises data collected from the 2023 Ecstasy and Related Drug Reporting System (EDRS) and the Illicit Drug Reporting System (IDRS). The EDRS consists of annual interviews with people who regularly use ecstasy and/or other illicit stimulants and the IDRS consists of interviews with people who regularly inject illicit drugs. Participants are recruited from each capital city, with a total of 708 participants interviewed for the 2023 EDRS and 820 participants interviewed for the 2023 IDRS. Please refer to the EDRS Background and Methods (4) and IDRS Background and Methods (5) for further details. For information regarding the characteristics of the national EDRS and IDRS samples, please refer to the 2023 National EDRS report and 2023 National IDRS report.

In 2023, participants were asked about their prescribed and non-prescribed use of e-cigarettes in the six months preceding the interview. This included questions regarding adherence to the prescription pathway protocol, and where they obtained their prescribed e-cigarette products from. Participants were also asked about their use of non-prescribed e-cigarettes in the six months preceding the interview, including where they obtained any non-prescribed e-cigarettes that contained nicotine. All participants were asked about difficulties accessing e-cigarettes that contained nicotine. Given that the IDRS has historically reported lower percentages of participants reporting e-cigarette use (6), a condensed set of questions was included in the 2023 IDRS questionnaire.

Results

Recent use of prescribed e-cigarettes among the 2023 EDRS and IDRS samples

In 2023, 3% of the EDRS sample and 1% of the IDRS sample reported using prescribed e-cigarettes in the six months preceding interview. Among the EDRS sample who reported recent use (n=18), most (89%) obtained a prescription from an Australian prescriber, with few (n≤5) participants utilising an international prescriber. Half (50%) of those who reported recent use obtained their prescribed e-cigarettes containing nicotine products from an overseas website, while a further one third (33%) reported obtaining them from an online Australian pharmacy.

Table 1: Past six month use of prescribed e-cigarettes, EDRS and IDRS, nationally, 2023.

	EDRS N=708 % (n)	IDRS N=820 % (n)
Prescribed e-cigarette use in the six months preceding interview	3 (18)	1 (9)
Who prescribed your e-cigarettes containing nicotine products in the last six months?	n=18	
Australian Prescriber	89 (16)	/
International Prescriber#	-	/
Where did you obtain your prescribed e-cigarettes containing nicotine products in the last six months?	n=18	/
Overseas website	50 (9)	/
Online Australian pharmacy	33 (6)	/
Physical vape store	-	/
Physical pharmacy	-	/
Other (e.g., from friends, darknet)	-	/
The last time you purchased your e-cigarettes containing nicotine products in the last six months, were you asked to provide a copy of your prescription?	n=18	/
Yes	50 (9)	/
No	50 (9)	/
The last time you purchased your e-cigarettes containing nicotine products in the last six months, did the vendor include a copy of your prescription in your package?	n=14	/
Yes	64 (9)	/
No	-	/

Note. (-) Values suppressed due to small size (n≤5 but not 0). / Indicates question was not asked in 2023. #Participants were asked if their obtained their prescription from an international prescriber to identify use of prescription channels not recognised by the Therapeutic Goods Association (TGA).

Recent use of non-prescribed e-cigarettes among the 2023 EDRS and IDRS samples

In 2023, 68% of the EDRS sample and 34% of the IDRS sample reported recent non-prescribed e-cigarette use. Among the EDRS sample who reported recent use (n=481), the majority (96%) of participants reported using e-cigarettes that contained nicotine. Similarly, four fifths (81%) of the IDRS sample who reported recent use (n=266) confirmed that their e-cigarettes contained nicotine.

Among the EDRS sample who reported using non-prescribed e-cigarettes that contained nicotine (n=456), the largest percentage of participants (58%) reported obtaining their e-cigarette products from a physical vape store, followed by a friend, relative or acquaintance (30%). Fewer participants reported sourcing their non-prescribed e-cigarettes from a dealer (11%) and online store (including surface and dark web) (9%).

Table 2: Past six month use of non-prescribed e-cigarettes, EDRS and IDRS, nationally, 2023.

	EDRS N=708 % (n)	IDRS N=820 % (n)
Non-prescribed e-cigarette use in the six months preceding the interview	68 (482)	34 (276)
	n=481	n=266
Among those who reported recent non-prescribed use, the percentage of participants using e-cigarettes containing nicotine	96 (463)	81 (215)
Among those who reported recent use of non-prescribed e-cigarettes containing nicotine, where did you obtain your e-cigarette products from in the past six months?	n=456	/
Physical vape store	58 (266)	/
Friend, relative or acquaintance	30 (136)	/
Dealer	11 (49)	/
Online store (surface or dark web)	9 (41)	/
Stockpiled supply	-	/
Other	16 (72)	/

Note. (-) Values suppressed due to small size (n≤5 but not 0). / Indicates question was not asked in 2023. The response option 'Don't know' was excluded from analysis.

Difficulty accessing e-cigarettes that contained nicotine in the six months preceding the interview

Among the total EDRS sample (n=705), 37% had not tried to access e-cigarettes containing nicotine in the six months preceding the interview, while 59% reported being able to access these products without any difficulty. Only four per cent of the sample reported any difficulty accessing e-cigarettes containing nicotine in the six months preceding interview (Table 3). The most common reason for recently experiencing difficulty was related to no longer being able to obtain e-cigarettes from locations previously known to supply them, such as physical stores.

In contrast, 71% of the IDRS sample reported that they had not tried to access e-cigarettes containing nicotine products in the six months preceding the interview while 27% were able to access these products without any difficulty. Only two per cent of the sample reported any difficulty accessing e-cigarettes containing nicotine in the six months preceding interview.

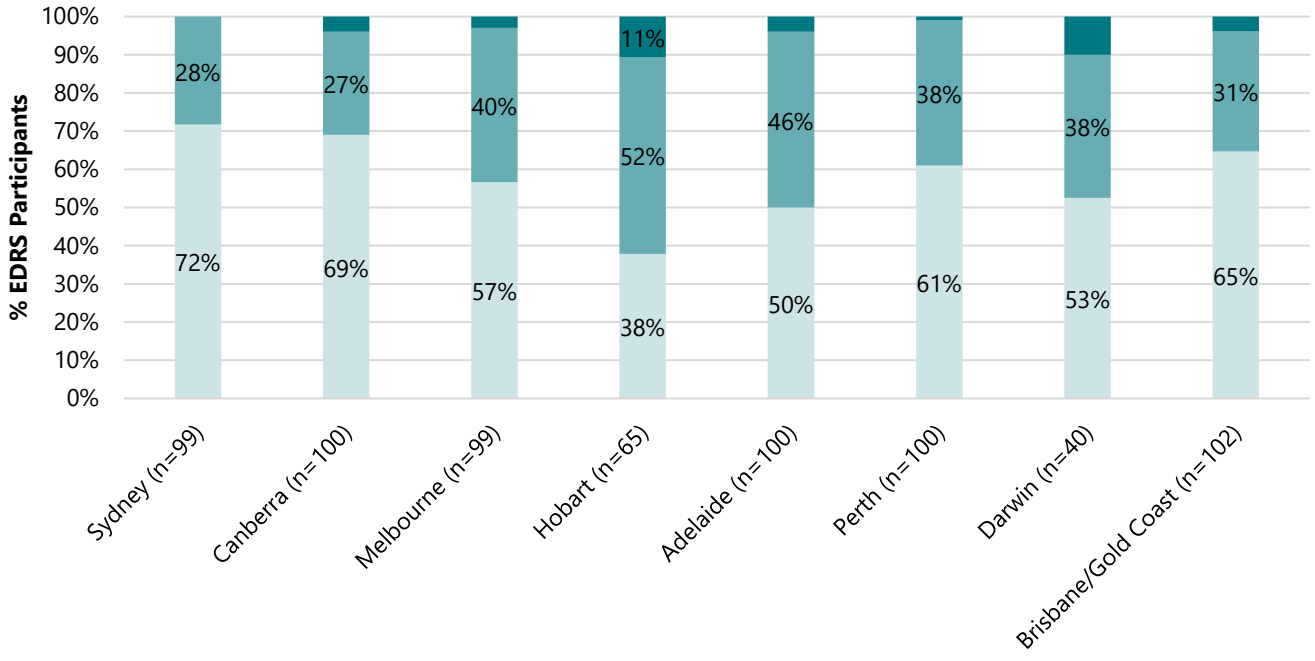
Little jurisdictional difference was observed among the EDRS and IDRS samples (Figure 1 and Figure 2).

Table 3: Difficulty accessing e-cigarettes containing nicotine in the past six months, EDRS and IDRS, nationally, 2023.

	EDRS N=705 % (n)	IDRS N=818 % (n)
Have you had any issues accessing e-cigarettes containing nicotine in the six months preceding the interview?^		
No, I was able to access these products without any difficulty	59 (419)	27 (223)
No, I have not tried to access these products	37 (260)	71 (580)
Yes, I couldn't find a prescribing doctor	-	-
Yes, the doctor wound not give me a prescription	0	-
Yes, I obtained a prescription but was unable to get it filled	-	-
Yes, I tried to purchase it online but was asked to provide a prescription (which I did not have)	-	-
Yes, I purchased it online, but it never arrived	-	0
Yes, I purchased it online, but the package was intercepted and I was asked to provide a copy of my prescription	-	0
Other (specify)	3 (21)	1 (8)
Total percentage of participants who reported trouble accessing e-cigarettes containing nicotine	4 (27)	2 (15)

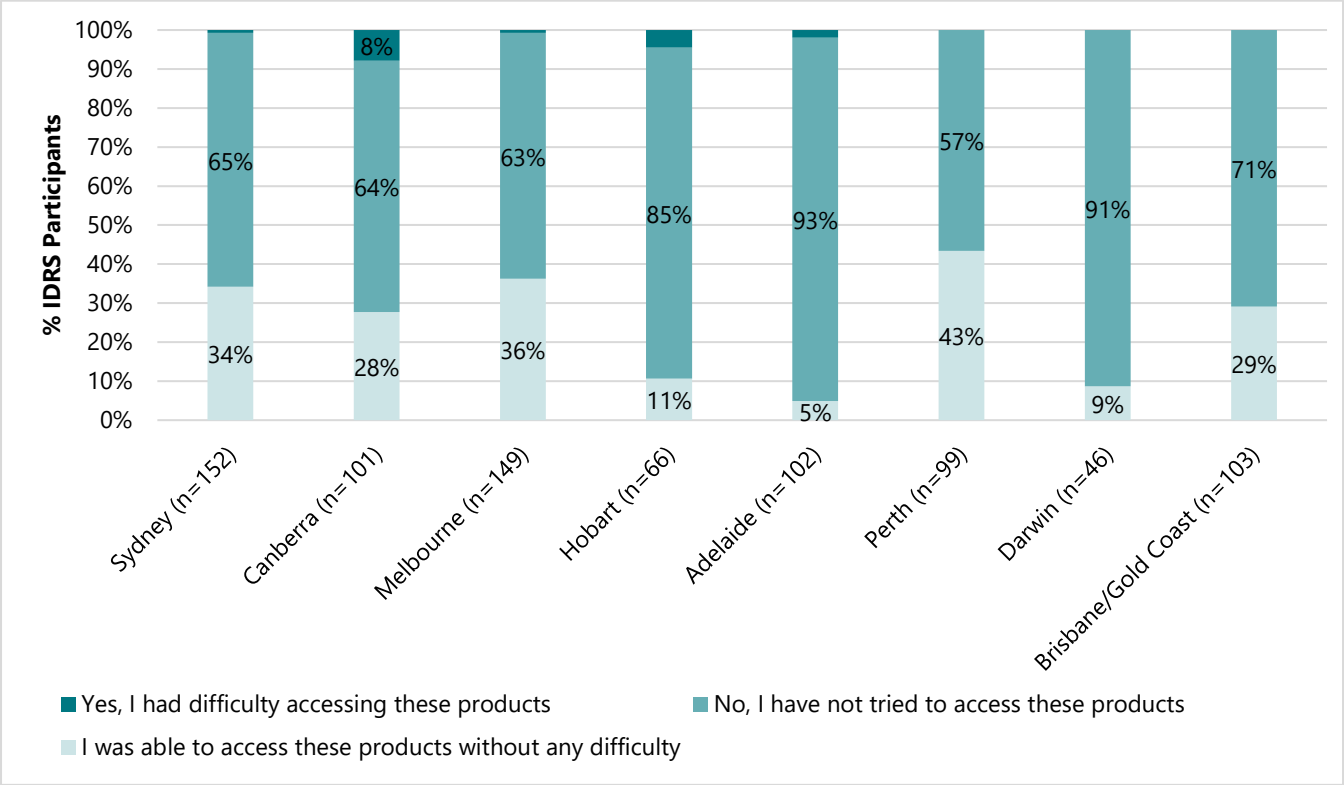
Note. (-) Values suppressed due to small size (n≤5 but not 0). / Indicates question was not asked in 2023. The response option 'Don't know' was excluded from analysis. ^Participants could endorse multiple responses.

Figure 1: Access to e-cigarettes containing nicotine in the past six months, EDRS, stratified by state or territory, 2023



Note. Data labels are suppressed where there are small numbers (i.e., n≤5 but not 0). The response option 'Don't know' was excluded from analysis.

Figure 2: Access to e-cigarettes containing nicotine in the past six months, IDRS, stratified by state or territory, 2023.



Note. Data labels are suppressed where there are small numbers (i.e., n≤5 but not 0). The response option 'Don't know' was excluded from analysis.

Discussion

Few EDRS and IDRS participants reported recent use of prescribed e-cigarettes, suggesting that the utilisation of the prescription pathway is relatively low among our samples. Among the EDRS sample who reported recent prescribed use, the majority (89%) reported accessing them from an Australian prescriber, indicating the prescriptions were accessed legitimately, although only half (50%) were asked to provide a copy of their prescription upon purchase.

Much higher percentages of participants in the EDRS and IDRS reported recently using non-prescribed e-cigarettes (68% and 34%, respectively). Among the EDRS sample who reported recent non-prescribed use, the largest percentage of participants reported accessing them from a physical vape store, although a substantial proportion had obtained them from their broader social network. Among the *total* EDRS and IDRS samples, only 4% and 2%, respectively, reported any difficulties accessing e-cigarettes that contained nicotine in the six months preceding the interview. Combined, these findings indicate that, to-date, legislation has had little impact on the accessibility of e-cigarettes containing nicotine.

The Therapeutic Goods Administration has announced that the personal importation of all vaping substances and reusable vaping devices will be banned, even with a prescription, from 1st of March 2024, and the lawful sale of e-cigarettes containing nicotine will be limited to pharmacies only (7). Combined with the government's intention to increase investment in the enforcement of these restrictions 'on the ground', it will be crucial to continue monitoring access to these products from unauthorised retailers, such as vape stores, to assess the effectiveness of these control efforts. The use of social networks to acquire e-cigarettes poses a

regulatory challenge as it creates uncertainty surrounding the original source of these products, and it is unclear whether restrictions and enforcement measures will directly impact these distribution channels.

Additionally, the national EDRS and IDRS reports show that 64% and 44% of participants who use non-prescribed e-cigarettes, respectively, report *not* using these products for smoking cessation purposes (8, 6). While those who are using non-prescribed e-cigarettes for smoking cessation purposes may be eligible to obtain a prescription and transition to prescribed e-cigarettes, there are limited options available for people using e-cigarettes for reasons unrelated to smoking cessation. Coupled with the perception that e-cigarette use is less harmful compared to traditional tobacco smoking (which can be accessed without a prescription) and the varied evidence on the harms and benefits associated with e-cigarettes (9), increased bans and enforcement may feed demand for diverted and black-market products among this group.

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