## DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES



MARÇ RACICOT GOVERNOR LAURIE EKANGER DIRECTOR

STATE OF MONTANA

July 20, 2000

Secretary, Federal Trade Commission 600 Pennsylvania Avenue, NW, Room H-159 Washington, D.C. 20580

RE: 16 CFR Part 307

Dear Secretary:

This letter is in response to your Request for Comments Concerning Regulations Implementing the Comprehensive Smokeless Tobacco Health Education Act of 1986.

Smokeless tobacco is a serious public health problem in Montana. In fact, only two states had a higher rate of spit tobacco use by men than Montana's 12% rate between 1995 and 1997. During this time, 6% of adult Montana men and women used spit tobacco, double the rate of other Western states surveyed. Among Montana's youth, 9% of students in grades 7-8, and 18% in grades 9-12 used spit tobacco. Thirty-three percent of Montana's high school boys and 8.4% of high school girls used spit tobacco for a combined rate of 18%.

Tobacco use in Montana is assessed periodically through several different surveys. These include the Behavioral Risk Factor Surveillance System (BRFSS) annual telephone survey conducted by the DPHHS and the Montana Youth Risk Behavior Survey (MYRBS) administered by the Montana Office of Public Instruction (OPI) every 2 years to students in grades 7-12.

Clearly, consumers are not receiving sufficient warnings about the health risks associated with smokeless tobacco use. It is crucial that the present safe harbor approach to compliance be abandoned and the details of the warning labels — such as type size, color, and placement — be mandated by regulation and not left to the manufacturers of this product. Citizens of this country deserve at least as much protection as is mandated by law and regulation in Canada and Australia.

It is important that warning labels correspond to the grave dangers presented by smokeless tobacco. The FTC has long advocated stronger labeling than is currently required by law. The Commission should be allowed to pursue these stronger labeling requirements to adequately protect the current users of smokeless tobacco and the potential users of the product, who are mostly minors. This product must be labeled with warnings that are more likely to be seen, understood, and incorporated into decisions by consumers about whether or not to use it. Ideally, these more adequate health messages would be developed the same way that advertisements are – based on information gleaned through research and testing involving users and potential users.

Thank you for considering these comments. I look forward to seeing the FTC take action on this important health issue.

Sincerely,

Laurie A. Ekanger, Director

Montana Department of Public Health and Human Services