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Emerging Threat of Herbal and Nicotine Products in India's Tobacco Control Journey

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Strengthening Tobacco Control in India: RCTC's Evidence-Based Advocacy and Strategic Engagement



The Resource Centre for Tobacco Control (RCTC) strengthens tobacco control efforts in India through targeted workshops, webinars, and national and regional consultations. By engaging policymakers, experts, and civil society, RCTC generates evidencebased insights and drafts actionable recommendations. These are shared with decision-makers to inform stronger policies, including bans on tobacco advertising, promotion, and sponsorship, as well as stricter enforcement of smoke-free laws. Through this advocacy, RCTC supports a coordinated and informed response to reduce tobacco-related harm.



Welcome to the 36th edition of Tobacco Free Times, where we spotlight a growing challenge in India's tobacco control efforts—the rise of herbal, nicotine-based, and emerging tobacco products.

While progress has been made, these new products—like herbal sticks, nicotine pouches, and e-cigarettes—pose fresh risks, especially to youth. Marketed as "safer" or "natural," they exploit legal loopholes and aggressive digital marketing.

This edition offers expert insights, field perspectives, and policy reflections to guide our response. As public health stakeholders, we must stay vigilant and ensure that regulation keeps pace with industry innovation.

Let this be a call to action—to strengthen science, close gaps, and raise awareness for a healthier, tobacco-free future.

- Dr Sonu Goel,

Director, RCTC & Professor, Department of Community Medicine & School of Public Health, PGIMER, Chandigarh

EXPERTS SPEAK

RCTC by facilitating multi-stakeholder consultations, capacity-building workshops, and knowledge-sharing platforms not only supports policymakers and implementers across both government and non-government sectors in advancing tobacco control efforts in India but also aids in bridging the gap between policy formulation and on-ground implementation.

- Dr. Upendra Singh Bhadauria, Technical Specialist - Cessation, Vital Strategies



The tobacco epidemic in India is entirely preventable—both in terms of the death toll and the burden of disease. Recognizing this, RCTC is making commendable efforts in the fight against tobacco by conducting a range of courses in tobacco control. These courses aim to educate

various stakeholders, including the families of individuals caught in the grip of tobacco addiction, to help prevent and overcome this challenge.

> Dr. Subita Patil, Professor and Physician, Tata Memorial College, Navi Mumbai



PROJECT UPDATES



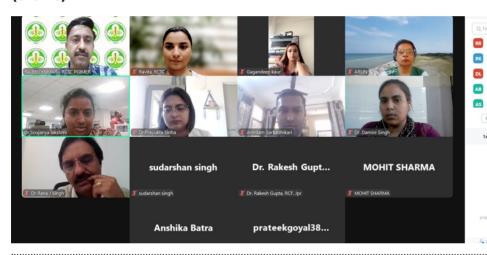
Plenary Session on 'Strengthening Multi-Sectoral Collaboration for Effective Implementation of NTCP in India



On 12th April 2025, the Resource Centre for Tobacco Control (RCTC), PGIMER, Chandigarh, organized a plenary session at IAPSMCON 2025 in Srinagar, titled 'Strengthening Multi-Sectoral Collaboration for Effective Implementation of NTCP in India.' National public health leaders and eminent speakers from AIIMS, NHM, and IAPSM participated in the session. Prof. Sonu Goel, Director of RCTC, served as the session's organizer and moderator. The session highlighted the importance of cross-sectoral partnerships to strengthen the National Tobacco Control Programme.

Online Events

Progress and First Live Interaction Session of the Basic Course on Tobacco Control (BCTC)



RCTC successfully organized the first live interaction session for the BCTC on 28th March 2025. This session, brought together the participants and facilitators, providing an interactive platform to address doubts and enhance understanding of Modules 1 to 4 content. Additionally, RCTC provided participants with individual performance reports for the first four completed modules, reinforcing the importance of timely completion of the course. Overall the session was focused and productive.

3rd Review Meeting for Bibliometric Manuscript Programme



A review meeting was conducted on 9th April 2025 as part of the 3rd Manuscript Writing Programme using Bibliometric Analysis, organized by the Resource Centre for Tobacco Control (RCTC), PGIMER, Chandigarh. The meeting focused on evaluating the progress of manuscript development by various teams, encouraging timely submission, and ensuring ethical compliance. It also emphasized finalizing journals and author details through a Google Form. Mentors were urged to provide stronger support to mentees. Importantly, the top-performing teams will be awarded a fully funded opportunity to present at the National-Level Consultation planned for June/July 2025.



National Webinar on Herbal, Nicotine, and Newer Tobacco Products: Understanding Health Risks and Regulatory Challenges



The webinar brought together 10 distinguished speakers from across the country and witnessed the participation of 74 attendees, including journalists, health advocates, researchers, and program managers. The central theme of the webinar emphasized the pivotal role of media in shaping public discourse around tobacco use and its potential in influencing tobacco control policies. Discussions focused on how media can act as a powerful tool for public health—not only by spreading awareness but also by supporting law enforcement, influencing behavioral change, and challenging the narrative and influence of the tobacco industry.

A power-packed national webinar was successfully conducted on April 24, 2025, on the theme "Strengthening Tobacco Control in India: The Power of Media in Shaping Public Awareness and Policy." The event was organized by the Resource Centre for Tobacco Control (RCTC), PGIMER Chandigarh, in collaboration with Vital Strategies, and served as a high-level platform for dialogue between media professionals, public health experts, government representatives, legal professionals, researchers, and civil society organizations.



Valedictory Ceremony of Advanced Course on Tobacco Control (ACTC)

The Valedictory Ceremony of the Advanced Course on Tobacco Control (ACTC) was held virtually on April 22, 2025, by the Resource Centre for Tobacco Control, PGIMER Chandigarh. The event marked the successful completion of the course conducted from October 2024 to March 2025. It featured acknowledgements to esteemed resource faculty, dissemination of project work by participants, and the awarding of certificates.

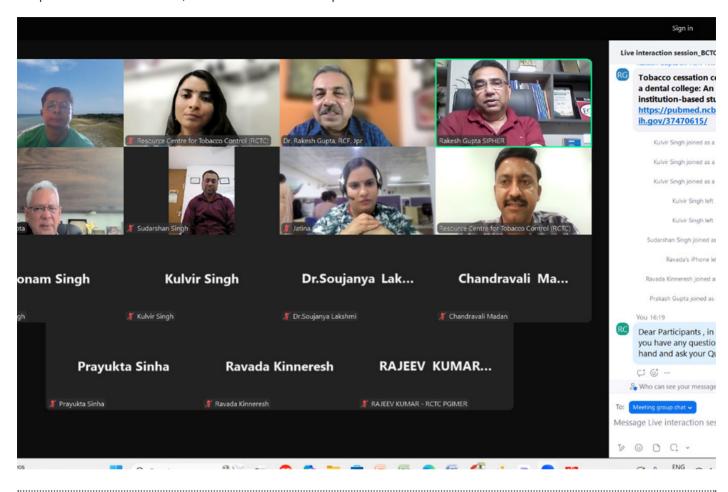
Participants presented innovative research on key tobacco control issues conducted as project work assignment. The ceremony concluded with encouraging remarks, highlighting the importance of continued collaboration and leadership in advancing tobacco control efforts nationwide.





First Live Interaction Session of the Basic Course on Tobacco Control (BCTC)

RCTC successfully organized the first live interaction session for the BCTC on 2nd May 2025. This session, brought together the participants and facilitators, providing an interactive platform to address doubts and enhance understanding of Modules 4-9 content. Additionally, RCTC provided participants with individual performance reports for the first four completed modules, reinforcing the importance of timely completion of the course. Overall, the session was focused and productive.



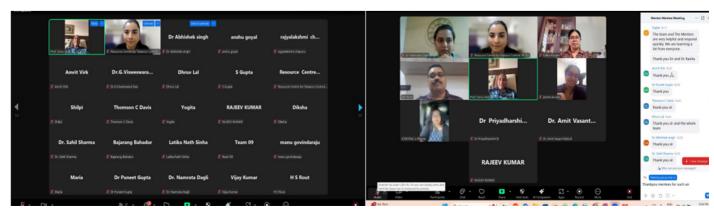
4th Review Meeting for Bibliometric Manuscript Programme

The 4th review meeting under the 3rd Manuscript Writing Programme using Bibliometric Analysis was held on 29th April 2025. Organized by the Resource Centre for Tobacco Control (RCTC), PGIMER, Chandigarh, the meeting aimed to evaluate the progress of manuscript development by various participating teams, encourage timely submission, and ensure adherence to ethical standards. Participants were briefed on the current status of manuscript submissions.

A curated list of recommended journals was shared, along with an extended list made accessible via a Google Sheet link. Participants

were advised to adhere to submission timelines, as some journals have limited submission windows.

The meeting also reviewed responses from mentees regarding journal preferences. So far, 21 teams have submitted their preferences, while the remaining teams were advised to submit by 30th April 2025. Additionally, a fully funded scholarship opportunity was announced for selected mentees (8–10) and mentors (1–2) to attend a national-level consultation on the dissemination of research findings from the programme, scheduled to be held in June/July 2025.





Emerging Threat of Herbal and Nicotine Products in India's Tobacco Control Journey



India is currently navigating a dynamic and complex landscape in tobacco control. With conventional tobacco products like cigarettes, bidis, and smokeless tobacco witnessing a decline due to robust national control programs, a new threat has emerged—herbal and nicotine-based tobacco products. Marketed as HEALTHIER or SAFER ALTERNATIVES, these products are gaining ground, particularly among youth and first-time users. The Global Adult Tobacco Survey (GATS) 2016-17 reported that over 28% of Indian adults use some form of tobacco. Alarmingly, more than 1.3 million deaths annually are attributable to tobacco use in India. Despite policy advances, the rise of new products threatens to derail progress.

Let us read this section to explore the evolving types of herbal and nicotine-based products, their health implications, demographic trends, regulatory shortcomings, global comparisons, and strategic policy recommendations. A comprehensive understanding of these developments is critical for preventing a backslide in India's public health achievements.

Understanding Herbal and Nicotine-Based Tobacco Products

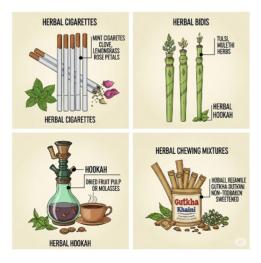
2.1 Herbal Tobacco Products

Herbal tobacco products are typically tobacco-free and are composed of herbs, flowers, and plant-based compounds. They are marketed under the guise of wellness and natural living, promising a similar experience to smoking but without the nicotine content.

Common Forms:

- Herbal cigarettes: Made from dried herbs like mint, clove, lemongrass, or rose petals.
- Herbal bidis: Incorporating tulsi, mulethi, or other traditional Indian herbs.
- Herbal hookah: Consisting of tea leaves, dried fruit pulp, or molasses without tobacco.
- Herbal chewing mixtures: Designed to resemble gutkha or khaini but are non-tobacco and often sweetened.

While marketed as natural and chemical-free, combustion of herbal products releases harmful substances like carbon monoxide, polycyclic aromatic hydrocarbons (PAHs), tar, and heavy motals



2.2 Nicotine-Based Products

Nicotine-based alternatives may contain tobacco-derived or synthetic nicotine and are presented either as cessation aids or recreational devices.

Categories Include:

- Nicotine gums, lozenges, and pouches: Marketed as smoking cessation aids or alternatives.
- Nicotine sprays and patches: Clinically prescribed for nicotine replacement therapy (NRT).
- E-cigarettes, vape pens: Deliver aerosolized nicotine without combustion.
- Mouth fresheners: Contain low-dose nicotine but are labeled as ayurvedic or de-addiction supplements.

Despite their apparent safety compared to combustible tobacco, these products are addictive and poorly regulated in many cases.





3. Health Risks and Public Misconceptions

3.1 Health Consequences

Both herbal and nicotine-based products pose substantial health risks.

	Nicotine-Based Products		Herbal Products
•	Cardiovascular: Elevated blood pressure, increased risk of stroke and heart attack.	•	Respiratory Damage: Inhaling combusted plant material can lead to chronic bronchitis and asthma.
	Neurological: Adverse impacts on brain development, especially in adolescents. Dependency: High addiction potential, particularly with flavored	•	Carcinogenic Exposure: Studies indicate emission of tar and carbon monoxide similar to or greater than traditional cigarettes. False Security: Users assume safety due to the absence of
	options.		nicotine, often delaying cessation.

3.2 Common Myths vs Scientific Evidence

- Myth 1: Herbal products are harmless.
 - o Reality: Combustion generates harmful chemicals, regardless of the source.
- Myth 2: Nicotine alone isn't dangerous.
 - o Reality: Nicotine is addictive, affects brain development, and raises cardiovascular risks
- Myth 3: These products aid in quitting smoking.
 - o Reality: Many users become dual users or relapse into traditional tobacco consumption.

This disconnect between perception and scientific reality underscores the importance of evidence-based public education.



4. Target Demographics and Market Dynamics

4.1 Populations Most at Risk

The marketing and accessibility of these products are tailored to attract:

Youth and Adolescents: Flavored options, modern packaging, and influencer promotions drive appeal.



• Women: Products are positioned as wellness-enhancing and discreet

Economically disadvantaged populations: Lower-priced herbal products cater to those unable to afford regulated cessation aids.

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A 2020 Salaam Bombay Foundation survey showed that 72% of adolescents believed herbal products were non-addictive, and over 50% considered them safe, highlighting the power of marketing in shaping perception.

4.2 Role of Online and Retail Channels

The growth of e-commerce and social media has fueled the spread of these products:

- E-commerce loopholes: Many platforms sell without verifying age.
- Advertising evasion: Products are promoted using influencers and wellness branding.
- Labeling issues: Studies found 40% of online products made unsubstantiated health claims and 21% lacked nicotine disclosure.

5. Policy and Regulatory Landscape in India

5.1 Existing Laws and Their Limitations

India has some of the most comprehensive tobacco control measures in the world, including:

- COTPA (2003): Covers packaging, warning labels, and advertising bans for conventional tobacco.
- PECA (2019): Bans the production, storage, and sale of e-cigarettes.

However, emerging products fall through legal gaps:

- Herbal products are not classified under COTPA, PECA, or the Drugs and Cosmetics Act.
- Nicotine pouches and mouth fresheners bypass regulation by being marketed as ayurvedic or food products.
- Multiple agencies (DCGI, FSSAI, AYUSH) claim jurisdiction, leading to overlaps and confusion.



5.2 Surveillance and Enforcement Weaknesses

The lack of integrated tracking systems hinders effective control:

- No centralized surveillance: GATS does not track herbal products.
- Lack of lab testing: Few accredited labs are testing herbal or synthetic nicotine products.

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 Poor digital enforcement: Online sales often escape monitoring due to weak cyber-surveillance.

6. Global Best Practices and Lessons for India

Several countries have adopted innovative approaches to curb the use of novel tobacco and nicotine products:

- · European Union: Requires detailed ingredient labeling and health warnings on all nicotine products.
- United States: The FDA regulates e-cigarettes, allowing only a handful on the market after reviewing safety data.

• Australia: Permits nicotine products strictly by prescription.

India can adopt these practices by instituting:

- · Pre-market review of herbal and synthetic products.
- · Mandatory labeling with standardized risk warnings.
- · Unified digital marketing guidelines enforced through Al-based tracking systems.

7. Roadmap for Strategic Interventions

7.1 Re-defining "Tobacco Product"

Amend laws to include:

- All nicotine delivery systems, regardless of plant content.
- Herbal smoking products intended for combustion or inhalation.

7.2 Pricing and Taxation

- Impose excise duties on herbal and synthetic nicotine products.
- Use generated revenue to strengthen cessation services and research.

7.3 Strengthening Surveillance and Research

- Incorporate these products in GATS and NFHS.
- Fund research into their health effects and chemical compositions.

 Create a digital platform for real-time tracking and consumer complaints.

7.4 Mass Communication Campaigns

- Design age- and culture-sensitive awareness programs.
- Engage influencers and digital creators to promote cessation.
- Use myth-busting formats (videos, comics, testimonials) on social media.

7.5 Accessible and Inclusive Cessation Support

- Integrate cessation services into primary healthcare and schools.
- Offer helplines, mobile apps, and local support groups.
- Train healthcare workers to address herbal and nicotine alternatives specifically.





8. Call to Action

The window of opportunity is rapidly closing. While India's regulatory framework has historically focused on conventional tobacco, the challenge now lies in addressing these new forms of addiction. Policy inertia may lead to a reversal of decades of progress made under the National Tobacco Control Programme (NTCP).

To protect India's youth and vulnerable populations, decisive action is required in the following areas:

- · Legislative reform to redefine regulated products.
- Inter-agency task forces to enhance coordination.
- · Capacity building for regulators and healthcare providers.



9. Conclusion

The rise of herbal and nicotine-based products in India is not merely a marketing trend—it represents a critical juncture in the country's fight against tobacco. The deceptively safe image of these products belies their significant health risks and the complexity of the regulatory challenge they pose.

To safeguard public health, particularly among the youth and underserved populations, India must act swiftly and

comprehensively. Lessons from global best practices must be localized, and existing laws must evolve to close dangerous loopholes.

Tobacco control is not a static battle—it is a dynamic engagement against an industry that constantly reinvents itself. Only through vigilance, innovation, and coordinated policy action can India truly move towards a tobacco-free generation.

Strategic Public Health and Regulatory Interventions

a. Policy Recommendations

- Expand COTPA's scope to include all nicotine-delivery systems and combustion-based inhalables, regardless of tobacco content.
- Enforce mandatory ingredient and nicotine content labeling.
- Ban health-related marketing claims and impose strict controls on online sales.

b. Public Health Campaigns

Launch targeted, culturally nuanced awareness campaigns, especially for youth and women. Messaging should highlight the scientific reality that "natural" does not mean safe.

c. Surveillance & Research

Incorporate these products into national surveys like GATS and NTCP. Fund toxicological research to map the chemical risks of herbal smoking products and monitor shifting consumption patterns.



Global

ITC Block Deal: British American Tobacco Sells Rs 12,100-Crore Stake

British American Tobacco, the top investor in ITC Ltd., has pare its stake in the Indian cigarette-maker through block deals, it said in a statement on Wednesday. BAT offloaded 2.5% stake representing 31.3 crore shares for Rs 12,100 crore on Wednesday, according to the company statement. NDTV Profit had reported that BAT would be offloading shares in the company on Wednesday at an 8% discount to that BAT would be offloading shares in the company on Wednesday at an 8% discount to the current market price. BAT held a total of 20.31% stake in ITC as of March 31, 2025, according to the shareholding pattern available with the BSE. The shares are owned by its local subsidiary - Tobacco Manufacturers (India) Ltd.

Source: NDTV Profit https://www.ndtvprofit.com/markets/itc-block-deal-british-american-tobacco-sells-rs-12100-crore-stake



Tobacco excise revenue has tanked amid a booming black market

The federal budget has revealed a sharp decline in revenue generated from tobacco excise, with only A\$7.4 billion expected this year—down from \$12.6 billion in 2022–23 and a peak of \$16.3 billion in 2019–20. This downward trend is projected to continue.

Despite annual increases in excise—indexed twice yearly and currently raised by an additional 5% since September 2023—government revenue is being reduced. Cigarettes in Australia are taxed heavily, with about \$1.40 in excise applied per cigarette, plus GST.

While smoking rates have been reduced to 8% among those aged 14 and over, cheaper illicit cigarettes and unregulated vaping products are increasingly being used. Vaping is now used by around 7% of Australians.

As a result, significant pressure is being placed on public health policy, which has long been guided by taxation as a key tool to curb smoking.

Source: The university of Sydney (https://www.sydney.edu.au/news-opinion/news/2025/04/02/tobacco-excise-revenue-has-tanked.html)



'Mothers Against Vaping' urges youth to resist propaganda on vaping as smoking cessation aid



New tobacco control laws have been brought into effect in Australia today, introducing significant changes to the appearance, ingredients, and packaging of tobacco products. These measures were passed by the Australian government in late 2023 as part of a broader effort to reduce smoking rates and limit the appeal of tobacco.

Under the new regulations, tobacco packs and cigarette sticks are required to follow standardised sizes, with novelty pack shapes and varying cigarette lengths being prohibited. Graphic health warnings and quitting advice inserts have been updated and are now mandated inside all tobacco packaging. Additionally, health warnings must be printed directly on individual cigarettes.

Certain ingredients that enhance the taste or make tobacco easier to smoke—such as menthol—have been banned. These reforms have been introduced to strengthen Australia's tobacco control framework and to further discourage tobacco use across the population.

Source: The Conversation (https://theconversation.com/menthol-cigarettes-will-be-banned-from-april-1-heres-why-and-what-else-is-changing-251920)



India

ITC Block Deal: British American Tobacco Sells Rs 12,100-Crore Stake

A new study conducted by the Directorate of Public Health has revealed a 21% prevalence of tobacco use among high school students in Namakkal, a rural district of Tamil Nadu. The majority of usage was found in smokeless forms, with initiation often occurring as early as age 13.

The findings, published in the Tamil Nadu Journal of Public Health and Medical Research, have raised concerns among public health officials, who believe the incidence could be even higher in urban and peri-urban areas such as Chennai and Coimbatore.

The study recommended targeted health education to address early tobacco initiation among adolescents. According to Dr. Arjuhn R, the study's lead author, most students reported using tobacco for three to four years, suggesting that initiation coincided with the COVID-19 lockdown period. "Sustained use highlights the risk of long-term health consequences," he noted.

For this descriptive cross-sectional study, 300 students from Classes IX to XII in Ernapuram block, Namakkal, were surveyed using structured questionnaires and confidential in-person interviews. The study aimed to assess the prevalence, patterns, and influencing factors of tobacco use among adolescents.

Source: Times of India (https://timesofindia.indiatimes.com/city/chennai/one-in-every-5-high-school-kids-in-namakkal-dist-uses-tobacco/articleshow/121421031.cms)

KICK THE HABIT

Total tobacco users	21%
Smokeless tobacco usage	76%
Cigarettes	19%
Bidis	5%
DURATION	
5 years	5%
4 years	43%
3 years	41%
less than three years	11%
FREQUENCY	
More than 5 times	56%
4-5 times	28%
Less than 4 times	16%



A yellow line campaign to keep tobacco away from the vicinity of educational institutions



A 100-yard (300 feet) tobacco-free zone is to be marked around all educational institutions using a thick yellow line within 30 days from May 31, observed as World No Tobacco Day. This action is being taken in compliance with the Cigarettes and Other Tobacco Products Act (COTPA), 2003, which prohibits the sale of tobacco products near educational premises.

The initiative, aligned with this year's World No Tobacco Day theme—"Unmasking the Appeal: Exposing Industry Tactics on Tobacco and Nicotine Products"—was directed by the Directorate of Public Health and Preventive Medicine to District Health Officers. As per revised Tobacco Free Educational Institutions (ToFEI) guidelines, heads of institutions have been asked to implement the marking with support from local bodies and Parent-Teacher Associations. Tobacco sales within this zone are to be strictly prohibited.

An enforcement drive will be carried out at the block level on May 30, June 3, and June 6 by teams comprising health, police, and local officials. Tobacco advertisements, if found, will be removed during these drives.

Source: The Hindu (https://www.thehindu.com/news/cities/chennai/a-yellow-line-campaign-to-keep-tobacco-away-from-the-vicinity-of-educational-institutions/article69625148.ece)



Slump in demand hits tobacco farmers in Andhra Pradesh

Tobacco prices in global markets have been impacted due to overproduction in India and countries like Brazil and Zimbabwe. An estimated surplus of 80 million kg in India and 400 million kg globally has led to reduced international demand and lower prices.

In Andhra Pradesh, while the Tobacco Board approved cultivation of 167 million kg, over 240 million kg have been produced. So far, 35 million kg have been procured, and the current selling price stands at ₹262 per kg, up from ₹231 during the same period last year. A price correction is expected by the end of the month.

However, farmers have expressed concerns. Auctions in Karnataka

began in October, while in A.P., they started only in mid-April. By then, companies had already sourced stock elsewhere and are now rejecting local produce citing "low quality."

Farmer leader Vaddella Prasad noted that prices remain non-remunerative at ₹240 per kg, compared to the usual ₹230–₹350 range. He added that rising input costs this year have further affected farmer income.

Source: The Hindu (https://www.thehindu.com/news/national/andhra-pradesh/slump-in-demand-hits-tobacco-farmers-in-andhra-pradesh/article69572206.ece)



Karnataka hikes fine for public tobacco use to Rs 1,000; buyers must be 21+

In September 2023, the state government decided to amend the law for a complete ban on hookah and shisha bars. It also proposed to increase the legal age for purchase of tobacco products.

Bengaluru: The maximum fine for violating the Cigarettes and Other Tobacco Products Act (COTPA) in Karnataka has been increased to Rs 1,000 from Rs 200. Bengaluru: The maximum fine for violating the Cigarettes and Other Tobacco Products Act (COTPA) in Karnataka has been increased to Rs 1,000 from Rs 200.

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Source: DECCAN Herlad (https://www.deccanherald.com/india/karnataka/karnataka-hikes-fine-for-public-tobacco-use-to-rs-1000-buyers-must-be-21-3564910)





Why India's fight against smoking needs a behavioural shift

A quarter century since the first public smoking bans came into place, smoking still leads to about 1 million deaths every year in India

This year marks the 25th year of the ban on smoking in public places, a landmark judgement of the Kerala High Court.
Subsequently, the Cigarettes and Other Tobacco Products Act (COTPA), 2003 was passed, which prohibited smoking in public places and introduced penalties for violations.

Despite decades of policy action, however, India is the world's second-largest consumer and producer of tobacco, and consequently faces a formidable public health and economic challenge.

Source: https://www.newslaundry.com/2025/05/26/why-indias-fightagainst-smoking-needs-a-behavioural-shift



Allocate ₹300 crore to purchase produce from tobacco farmers, CPI(M) urges Andhra Pradesh government

The government should discuss with the traders and procure at least 25% of tobacco through the STC. If the government starts taking action, the companies will compete to purchase tobacco, says the party State secretary.

The leaders of Communist Party of India (Marxist) have demanded that the state government allocate ₹300 crore to support tobacco farmers and purchase their produce through the State Trading Corporation of India Ltd. (STC), which is a government-owned international trading company, mainly for import and export operations.

The party State secretary V. Srinivasa Rao along with the members

of Andhra Pradesh Farmers' Association visited Ongole-2 (Throvagunta) auction centre on Friday. He enquired about the auction management, the prices available in the market, and other issues with the farmers there. He was angry at the way the Tobacco Board and ITC were behaving with the farmers.

"The ITC company is controlling the farmers by not offering them the right price. The government should discuss with the traders and procure at least 25% of tobacco through the STC. If the government starts taking action, the companies will compete to purchase tobacco," he said, questioning why ITC shares are rising despite the falling price of tobacco.



Source: The Hindu (https://www. thehindu.com/ news/national/ andhra-pradesh/ allocate-300-croreto-purchase-producefrom-tobaccofarmers-cpim-urgesandhra-pradeshgovernment/ article69638129.ece)

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