

It's Time for Ireland's Tobacco-Free Future

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Tobacco remains the leading cause of preventable disease and death in Ireland. It claims over 4,500 lives annually, drives deepening health inequalities, and causes more harm than alcohol, drugs, and accidents combined.¹ This slow-moving, large-scale epidemic remains Ireland's greatest health challenge. After decades of progress, smoking prevalence reductions have stalled, with nearly one-in-five adults still smoking, falling far short of Government's target of less than 5% by 2025.¹ The new national tobacco policy and plan expected this year is a critical moment for political leadership. To inform this, the Royal College of Physicians of Ireland Clinical Advisory Group on Smoking and E-Cigarettes has set out six calls to action and an evidence-based pathway with 21 recommended actions to deliver a tobacco-free future.²

The tobacco-harm epidemic is entirely avoidable and wholly driven by a highly addictive commercial product that uniquely kills one-in-two long-term consumers when used exactly as intended by the tobacco industry. Is this socially acceptable? While social norms around

smoking behaviour have shifted dramatically, tobacco products and the industry behind them are still treated as an unavoidable feature of modern life. This framing is no longer justified and must change.

Governments protect the public by eliminating the root causes of preventable harm, such as infectious diseases or hazardous products like lead or asbestos. Tobacco is no different and as such, warrants a move to a tobacco endgame to transform our focus from simply managing harm to eliminating it completely. Endgame policies focus on phasing out lethal tobacco products entirely through a set of political choices made in the interests of public health.³ Almost every person in Ireland has been touched by smoking-related harm and the public is ready for change, with strong majority support for a tobacco-free future and a phase-out of tobacco products.⁴

Now is the time for Ireland to leverage innovative tobacco endgame measures that fundamentally address structural drivers of tobacco use. Central among these is tobacco-free generation legislation, which prevents initiation and addiction by prohibiting tobacco product sales to people born in and after a specified year.³ In 2025, the Maldives became the first country to enact such legislation. Momentum is building internationally, including planned implementation in the UK from 2027.³ Ireland should plan for a tobacco-free generation and ensure alignment in protecting children and young people across the island.

Action is also needed to reduce affordability, attractiveness, addictiveness, and availability of tobacco products. A comprehensive, evidence-based tobacco policy toolkit exists through the WHO MPOWER framework and the Framework Convention on Tobacco Control (FCTC). These proven measures can be better applied in Ireland's new tobacco endgame policy and plan.⁵ Taxation is the single most effective intervention to reduce smoking prevalence; a WHO "best buy" and a "quick buy" for public health. Increasing tobacco prices prevents smoking initiation among youth and enhances health equity by offering the greatest benefit to disadvantaged groups. As a start, increasing cigarette pack prices to over €20 could significantly reduce smoking and save over €1 billion in health and societal costs within five years.⁶

Comprehensive bans on tobacco advertising, promotion, and sponsorship are also critical. Ireland has led internationally with plain packaging and point-of-sale restrictions, but gaps remain. The tobacco industry continues to exploit digital platforms, international media, product placement in film and television, and sponsorship opportunities. Regulation must evolve to address an increasingly complex and global media environment.⁷

Denicotinisation of tobacco products can tackle inherent addictiveness. Reformulation of sugar-sweetened beverages following introduction of the sugar tax shows how government regulation of product standards reduces harm. Tobacco product reformulation to reduce nicotine to non-addictive levels could be mandated along with the removal of filters, which increase palatability without protecting health.⁸

Ireland has almost 12,500 tobacco retail outlets. High retail density is strongly associated with increased initiation, continued smoking and reduced cessation.⁹ Implementing and strengthening tobacco retail licensing provides an opportunity to reduce the wide-scale sale of this deadly and highly addictive product.⁹

We must also ensure that people who want to quit smoking get appropriate support. Ireland's stop-smoking services are well-developed but underutilised. While free nicotine replacement therapy is available, access to other highly effective treatments such as varenicline remains limited by cost. Investment is particularly urgent for smoking cessation in pregnancy and for tailored, community-based services that address smoking inequalities.

Tobacco endgame should be explicitly positioned as a core prevention priority in line with the Sláintecare vision, which embeds prevention at the heart of Ireland's health. The new tobacco policy for 2026 should include the clear goal of reducing smoking prevalence to below 5% by 2035. This target should be supported by cross-party consensus and overseen by the Oireachtas Committee on Health, with explicit commitments to protecting young people and reducing health inequalities. Governance structures must be strengthened, including convening a National Tobacco Epidemic Emergency Team led by the Chief Medical Officer, and building innovation through a Research Centre for a Tobacco-Free Future.

Effective leadership must confront interference from the tobacco industry, whose business model relies on sustaining high levels of cigarette sales, including over 100 million packs sold annually in Ireland. Despite Ireland's obligations to protect health policy-making under Article 5.3 of the WHO FCTC, tobacco and vaping companies persistently lobby our politicians.^{5,10} Ireland must strengthen interference safeguards, join the Global Tobacco Industry Interference Index, and pursue litigation or levy-based mechanisms to recover healthcare costs. Recovered funds should be reinvested in cessation services and supporting retailers to transition away from dependence on sale of deadly tobacco products.

The knowledge and tools to end the tobacco-harm epidemic already exist. What is now required is political leadership and resolve to act decisively. The Royal College of Physicians of Ireland calls on Government to commit to delivering a tobacco-free future by 2035, reducing smoking prevalence to below 5% across all population groups.² Our evidence-based recommendations provide the pathway. Any hesitation sustains avoidable disease, deepens health inequalities, and leaves our next generation in harm's way. Ireland has led the world before in tobacco control. Let's lead again. It's time for Ireland's Tobacco Free Future.

Declarations of Conflicts of Interest:

None declared.

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