The tobacco disease epidemic is an industrially produced phenomenon. Though people have used tobacco in various ways for centuries, the modern epidemic resulted directly from the industrialisation, engineering, and aggressive marketing of the cigarette—without doubt the single most deadly consumer product ever made.\(^3\)\(^4\) The industrial production of disease calls for measures that go beyond discouraging unhealthy individual behaviour to tackle policy and social norm changes. Smoke-free policies help, but as long as cigarettes remain ubiquitous, it is easy for people to rationalise: “They can’t be that bad if they are still sold everywhere.” There is a major and increasingly inexplicable lack of congruence between the way cigarettes are regulated and the regulation of many other dangerous products (most of which cause far less disease and death when used as intended).

Yet too many public health professionals remain fearful of even suggesting that to end the epidemic these products should, at some point, no longer be easy to buy. They fear that doing so will incite “nanny state” criticism and charges that government is intruding on consumers’ “choice,” despite the fact that 70% of smokers say they want to quit and despite the fact that 70% of smokers say they want to quit and despite the fact that 70% of smokers say they want to quit and despite the fact that 70% of smokers say they want to quit and despite the fact that 70% of smokers say they want to quit and despite the fact that 70% of smokers say they want to quit.\(^5\)\(^6\) The self imposed silence and aggressive marketing of the tobacco industry and its products.

Most reputable companies confronted with the fact that their products killed half their long time users would pull them from the market.

- A smoking prevalence of 5% or lower, regarded by many experts as an endpoint to achieve, would be insufficient to end the epidemic.
- Countries regarded as tobacco control leaders are instituting endgame planning, calling for specific smoking prevalence targets by specific dates, as Scotland has already done.
- The UK, while a leader in cessation, lags behind other jurisdictions in the use of mass media to “denormalise” the tobacco industry and its products. Despite the worries of some that the word “endgame” isn’t appropriate or that raising its prospect now may distract from more immediate goals, it has recently begun to capture the imagination of the worldwide tobacco control movement, being a theme of a recent international conference in India and discussed in plenaries at major national, regional, and international meetings. A recent special issue of \textit{Tobacco Control} highlighted several endgame proposals and commentary.

Research conducted in several Western countries indicates that the public might be more supportive of a tobacco endgame than is generally thought. For example, a survey in England in 2008 found that 49% of people who had never smoked, 41% of former smokers, and 33% of smokers supported phasing in a tobacco sales ban within 10 years.\(^7\)\(^8\) In Victoria, Australia, in 2010 53% of adults overall and 42% of smokers agreed that a tobacco sales ban should be phased in within 5–10 years.\(^9\) In the United States in 2011 53% of non-smokers and 33% of smokers agreed that cigarettes should be banned in the next decade.\(^10\) A new Hong Kong study found that 68% of people who had never smoked, 59% of former smokers, and 45% of smokers supported a ban on tobacco sales within 10 years.\(^11\)

It is notable that these levels of support were found in the absence of any organised campaign to engage the public in understanding the reasons for and preparing for a tobacco endgame. It’s time to break through the self-imposed silence and declare that a tobacco endgame must be planned. If endgame discussions draw fire from the tobacco companies and their front groups and defenders, that will create opportunities to point out that most reputable companies confronted with the fact that their products killed half their long time users would pull them from the market. One thing is certain: if the public health sector, including government, does not begin the endgame conversation, no one else will. For the sake of future generations we should start now.

Ruth Malone is editor in chief, Tobacco Control, and professor and chair, Social and Behavioral Sciences, School of Nursing, University of California, San Francisco ruth.malone@ucsf.edu Patricia McDaniel is assistant adjunct professor, Social and Behavioral Sciences Elizabeth Smith is associate adjunct professor, Social and Behavioral Sciences Competing interests: Cancer Research UK commissioned the authors to prepare a report on tobacco endgames for the UK discussed in this article but had no role in this article. References are in the version on bmj.com. Cite this as: \textit{BMJ} 2014;348:g1453

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