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U.S. Medical Professionals Survey

The following memo outlines key findings from the recent U.S. Medical Professionals Survey. The survey was fielded among 1,565 medical professionals across the US from March 10th to April 5th, 2025.

The sample included primary care physicians (n=600), dentists (n=200), psychiatrists (n=150), nurses (n=115), cardiologists (n=100), oncologists (n=100), pulmonologists (n=100), licensed social care workers (n=100), and mental health nurses (n=100).

The survey was commissioned by Philip Morris International and fielded by Povaddo LLC, an independent research firm specializing in public opinion and societal expectations research.

Medical Professionals See Public Health Deteriorating in the Post-COVID Years

Only one-quarter (24%) of US medical professionals believe public health in the country is "getting better" since the end of the COVID pandemic. Instead, four-in-ten (42%) see public health "getting worse," while the remaining one-third (34%) believe it is "staying about the same."

Despite Decades of Action on Tobacco Control, Three Quarters of Medical Professionals Believe Addressing Smoking and Tobacco Use Should be a Priority for the US Government

When asked about the prioritization of several public health topics, 77% of medical professionals said that smoking and tobacco use should be a "high priority" for the US government to address. This was the third highest response out of seven items tested.

US Medical Professionals See a Greater Role for FDA in Addressing Smoking and Smoke-Free Products

The data contained within the survey finds that even though medical professionals have a high familiarity with tobacco and nicotine products, high confidence discussing these products with their patients, and a recognition that these products are on a spectrum of risk, there is still a level of misinformation and some reluctance to discuss smoke-free products on a regular basis with patients. To overcome these barriers, the survey provided significant findings on what medical professionals expect from the FDA.

- 86% indicate that they consider the FDA to be a trusted source to learn more about tobacco and nicotine products and the science behind them.
  - This was the highest response of all entities tested with the CDC in a distant second place at 69%, and medical associations and scientific literature statistically tied for third place at 60% and 59%, respectively.
- Three-quarters (75%) believe the FDA needs to spend more time and resources regulating tobacco and nicotine products, compared to just 14% who feel the FDA is currently spending about the right amount of time/resources regulating tobacco and nicotine products (see table on the following page).
- High demands exist for specific actions which FDA can undertake to not only regulate tobacco/nicotine products but also increase awareness among Americans on these products (see table on the following page).
- 93% believe the FDA has an obligation to convey information to medical professionals if it finds that a certain product has less risk of cancer, cardiovascular disease, or COPD compared to continued smoking.
  - Among these medical professionals, nearly all (95%) indicate they would convey this information to their patients.

	% Believing FDA Should be Dedicating More Time / Resources to this Action
Educating youth on the dangers of tobacco and nicotine products	**77**%
Educating at-risk audiences on the dangers of smoking	**75**%
Ensuring tobacco and nicotine products comply with regulations by conducting inspections, investigations, and monitoring	**74**%
Reviewing applications from manufacturers to allow products deemed appropriate for the promotion of public health to be sold in the market as authorized products	**69**%
Conducting research to support regulatory decisions	**69**%
Reviewing and authorizing new smoke-free alternatives to cigarettes	**67**%
Establishing strong product standards for tobacco products	**67**%
Issuing rules and guidance for manufacturing, distributing, importing, and selling tobacco and nicotine products	**66**%

There Are Misperceptions about Nicotine Among Medical Professionals

Only one-third (34%) of medical professionals in the survey correctly disagree with the statement "Nicotine, on its own, is a carcinogen and causes cancer," with two-thirds either incorrectly agreeing with the statement (47%) or giving a "neutral" response (19%). The attitudes of those who agree or provide a neutral response are contradictory to the statements made by the FDA Commissioner in 2017 who stated "Nicotine, though not benign, is not directly responsible for the tobacco-caused cancer, lung diseases, and heart disease that kills hundreds of thousands of Americans each year."

Agreement with this statement ("nicotine, on its own, is a carcinogen and causes cancer") varies significantly among medical professionals. For example, while agreement with primary care physicians is slightly below the overall at 41%, it increases to 56% among general nurses, 53% among cardiologists, 55% among oncologists, 53% among pulmonologists, and 56% among licensed social workers. In fact, primary care physicians are the only audience where agreement matches disagreement, 41% each. All other groups have higher levels of agreement than disagreement.

One other notable finding is that agreement that nicotine, on its own, is a carcinogen and causes cancer increases to 59% among medical professionals who indicate that half or more of their patient base smokes cigarettes.

Medical Professionals Recognize a Spectrum of Risk Exists for Tobacco and Nicotine-Containing Products

The survey asked medical professionals to provide their perceived level of harm both to individual consumers and non-consumers for each of the tobacco and nicotine products tested. For these exercises, medical professionals were asked to provide their response on a ten-point scale with 1 meaning "not very harmful" and 10 meaning "very harmful."

On both measures, medical professionals recognize that certain tobacco and nicotine products have the potential to pose less harm, whether to the individual consumer or those around them. The table below shows the mean scores for both questions for each of the products tested.

	Perceived Individual Harm	Perceived Harm to Others
Cigarettes	**9.7**	**8.4**
Chewing tobacco / "Chew"	**8.6**	**2.7**
Heated tobacco products	**8.0**	**5.8**
E-cigarettes / Vapes	**7.6**	**6.2**
Dip or snuff	**7.4**	**2.9**
Nicotine pouches	**6.8**	**2.5**
Snus	**6.8**	**2.8**
Nicotine replacement therapies	**5.2**	**1.8**

While medical professionals recognize that a spectrum of risk exists among these various tobacco and nicotine products, their assessment of the relative harm does not align with the scientific data regarding the harm differential among these products. For example, medical professionals rate heated tobacco products as 8.0 and nicotine pouches as 6.8, but scientific data would suggest these ratings should be much lower when compared to cigarettes.

Smoke-Free Products Are Not Always Present in Conversations with Patients

Medical professionals were asked to indicate how often they discuss smoke-free products with their patients who either consume these products or smoke cigarettes. Only one-in-five (21%) indicate that they "always" have these conversations with their patients, while one-third (35%) say these conversations happen "most of the time." Instead, the plurality (43%) responded that they only have these conversations "sometimes."

While there is a slight increase among those medical professionals who indicate that more than half of their patient base smokes cigarettes, the results are still low. Among this group, only one-third (34%) say they "always" discuss smoke-free products, with a statistically equal number (36%) saying these conversations happen "most of the time."

Oncologists, pulmonologists, licensed social workers, and mental health nurses report the highest frequency of conversations about smoke-free products with their patients who consume these products or smoke cigarettes. The percentage saying they "always" discuss smoke-free products increases to 30% among oncologists (+9pp), 49% among pulmonologists (+28pp), 32% among licensed social workers (+11pp) and 37% among mental health nurses (+16pp).

Notable and significant differences exist by tenure of practice. Among those with 0-2 years' experience only 8% say they "always" speak about smoke-free products with their patients who consume these products or smoke cigarettes, whereas this figure increases to 31% among those with 3-5 years' experience. Those with 6-10 years' experience and 10+ years' experience are close to the overall at 19% and 21%, respectively.

Although Medical Professionals Have Uncertainty About the Evolved Nicotine-Product Market, they Clearly Believe FDA Reform is Needed to Better Regulate New Products

US medical professionals are broadly unaware of the number of products which FDA has deemed "appropriate for the protection of public health" (PMTA) or "appropriate for the promotion of public health" (MRTPA). For both questions, the vast majority (68%) indicated they were unsure about the number of products which the FDA authorized in either category.

Despite this uncertainty, there is near universal agreement that reform is needed to allow the FDA to regulate new nicotine containing products: 93% of medical professionals agree with the statement "When the FDA began regulating tobacco products in 2009, e-cigarettes and nicotine pouches were not on the market. To better product public health, reform of the FDA is needed so the agency can regulate these products appropriately."

Medical Professionals Send Clear Guidance on What they Most Need from the FDA

Medical professionals are also clear on the type of information that they would like to see from the FDA regarding smoke-free products. When asked what they would believe to be helpful to receive from FDA, half or more of medical professionals selected: clinical evidence, clear guidelines, evidence-based comparisons, public awareness campaigns, information on FDA authorized products, and updates on FDA's regulatory framework. Conversely, training materials and patient-friendly education materials scored the lowest with only 36% and 39%, respectively, believing these would be helpful.

The full results can be found in the table below:

	% Believing this Type of Information Would Helpful to Receive from FDA
Clinical evidence that demonstrates the role of smoke-free products in harm reduction	**69**%
Clear guidelines on counseling patients about transitioning to smoke-free alternatives as part of harm reduction strategies	**68**%
Evidence-based comparisons of the relative risks of smoke-free products versus cigarettes	**62**%
Public awareness campaigns for smokers about where different tobacco and nicotine products fall on the FDA's continuum of risk	**58**%
Information on FDA-authorized smoke-free products, including their intended use and populations for whom they may be appropriate	**57**%
Updates on FDA's regulatory framework for assessing smoke-free products and their health impacts	**53**%
A centralized platform or database with real-time FDA updates on smoke-free product authorizations and research	**48**%
FAQs addressing common myths or misconceptions about smoke-free products and their risks	**45**%
Patient-friendly educational materials that healthcare providers can share in clinical settings	**39**%
Training modules or resources designed specifically for healthcare providers on tobacco harm reduction	**36**%

Conclusion

Although medical professionals in the US have strong levels of familiarity with tobacco and nicotine-containing products and confidence discussing these products with their patients, the rate of actual patient conversations lag. The data uncovered that not only does misinformation exist, but also uncertainty about the number of products which FDA has authorized under either the PMTA or MRTPA frameworks.

Despite this uncertainty, medical professionals do send a clear message about the future. They broadly see the need for real reform of the FDA and have given guidance on the most helpful items for FDA to prioritize. The Congress and Administration have an opportunity to improve the public health of the nation by driving reform of the FDA to not only improve the regulation of smoke-free products, but also to provide medical professionals with the information they need to have more frequent and more informed conversations with their patients who smoke cigarettes or consume smoke-free products.