Interviews With “Vapers”: Implications for Future Research With Electronic Cigarettes

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Abstract

Introduction: Awareness and use of electronic cigarettes (e-cigs) has increased dramatically. Electronic Nicotine Delivery Devices deliver an aerosol comprised usually of water, propylene glycol and/or glycerin, nicotine, and flavorings. Scant research exists to evaluate the efficacy and safety of such devices, and only one quantitative survey of European users (N = 81) has been published. This qualitative study explores e-cig users’ ("vapers") experiences.

Methods: Participants attended a convention or club meeting in St. Louis, MO, and were interviewed individually or in small groups. Qualitative methods were used to analyze interview data for both deductive and emergent themes to broad research questions.

Results: Even with a relatively small sample of formal participants (N = 15), there were pervasive themes including the language and culture of vaping; social and informational support among vapers and their use of Internet resources (learning about e-cigs); the learning curve to using e-cigs and the numerous modifications ("mods") available for e-cigs personal vaporizers; motives and perceived benefits of using e-cigs versus cigarettes including cigarette-like enjoyment, cost, restored sense of taste and smell, and improved breathing and exercise tolerance; rapidly reduced nicotine tolerance and dependence; and a strong interest in e-cig–related research and policy.

Conclusions: The learning curve to using e-cigs has important implications for laboratory tests of these devices with novice users. Similarly, the multiple e-cig options and the use of "mods" create challenges for researchers and policy makers. Transdisciplinary research is urgently needed, and experienced "vapers" are very interested and willing research participants.

Introduction

Electronic cigarettes (e-cigs) are novel Electronic Nicotine Delivery Devices (ENDD) embraced by some users as a life-saving innovation but viewed with skepticism by many public health professionals (Cobb, Byron, Abrams, & Shields, 2010; Henningfield & Zaatari, 2010; Pauly, Li, & Barry, 2007). Worldwide awareness and use of e-cigs has increased dramatically since 2004 when e-cigs were introduced in China (World Health Organization, 2008).

E-cigs comprise a battery, automatic or manual switch, heating element, and reservoir of liquid nicotine solution. The solution—also called "juice," "liquid," or "eliquid"—usually contains water, propylene glycol and/or vegetable glycerin, nicotine, and flavorings. When the user draws air through the mouthpiece, the heating element ("atomizer") vaporizes the nicotine solution. The vapor condenses to an aerosol that the user inhales and exhales like cigarette smoke. E-cigs mimic the appearance and ergonomics of cigarettes, which may appeal to some smokers (Rose, Behm, & Levin, 1993).

Although “smoking causes diseases in nearly every organ of the body” (Surgeon General’s Report, 2004), nicotine inhalation without smoke should be less risky for smokers and bystanders (McNeil, Foulds, & Bates, 2001; Sumner, 2005). Nevertheless, there is scant research supporting e-cigs, quality control varies, and some nations have banned e-cigs (Ang, 2009; Kesmodel & Yadron, 2010). Although nicotine accounts for very few of the long-term hazards of smoking, it may contribute to destruction of connective tissue (McAllister-Sistilli et al., 1998), modulation of immune function (Onoda et al., 2001), prevention of apoptosis (Henningfield, Clayton, & Pollin, 1990; Wright, Zhong, Zheng, & Larrick, 1993), and alcohol or other substance abuse (Hipke, 1993; Madden, Heath, Starmer, Whitfield, & Martin, 1995; Narahashi et al., 2001). Research suggests that smokeless tobacco users experience only about 2% of the risks of smoking (Vigneswaran, Tilashalski, Rodu, & Cole, 1995) and that inhaled nicotine is similarly benign in animal models (Hilts, 1996; Loennechen et al., 2002; Syversen et al., 1999); thus, it is unlikely that the harms of inhaled nicotine would compare with the harms of smoking (Sumner, 2005). In addition to nicotine, e-cig users would be exposed to any hazardous chemicals in the nicotine solution or created during use. For example, the U.S. Food and Drug Administration
Scant published research on e-cigs is available, but significant variability in nicotine delivery has been reported. A smoking machine study found nonuniform dosing of nicotine within and across e-cigs (Trichounian, Williams, & Talbot, 2010). In other studies exposing smokers to e-cigs, low serum nicotine levels were observed (Eissenberg, 2010; Vansickle, Cobb, Weaver, & Eissenberg, 2010). Although smokers preferred smoking their own cigarette brand, smokers reported some benefits after their first use of an e-cig compared with an unlit cigarette despite low nicotine delivery from the e-cig (Vansickel et al., 2010). Few differences in desire to smoke or withdrawal symptoms were reported by smokers assigned to e-cigs with either 0 or 16 mg/ml nicotine or a standard nicotine inhaler; nevertheless, participants preferred the 16 mg/ml e-cig for pleasantness of use and as a cessation aid (Bullen et al., 2010).

The only published study of ENDD users involved 81 respondents to a French-language Internet survey (Etter, 2010). Most were former smokers who began using e-cigs within the past three months, strongly believed that e-cigs helped them quit smoking, and chose to use e-cigs because they perceived less health risks, cost, and prohibitions compared with cigarettes. Respondents enjoyed “vaping” (inhaling the vapor) and reported improved breathing, less coughing, no unpleasant odor, and only minor negative effects (e.g., dry mouth and throat). Some respondents reported quality problems and worried about the lack of research on e-cigs’ safety. An English-language survey of ENDD users (n = 303) found similar results (Heavner, Dunworth, Bergen, Nissen, & Phillips, 2009). Most respondents were former smokers who had started using e-cigs within the past six months to replace cigarettes after failing conventional smoking cessation treatments. E-cig users who reported health improvements were more likely to be younger and to have used e-cigs longer and exclusively.

The purpose of this exploratory qualitative study was to better understand e-cigs as well as the personal experiences and motivations of e-cig users. Such understanding will inform future research including clinical trials of ENDD as smoking cessation aids.

Methods

Participants and Procedures

Although all participants were knowledgeable early adopters of e-cigs, we did not systematically recruit experts, leaders, or stakeholders (“key informants”) to report on e-cig users in general (Schensul, 2008). We interviewed a convenience sample of respondents to a French-language Internet survey (Etter, 2010). We interviewed a convenience sample of respondents to a French-language Internet survey (Etter, 2010). We interviewed a convenience sample of respondents to a French-language Internet survey (Etter, 2010). We interviewed a convenience sample of respondents to a French-language Internet survey (Etter, 2010). We interviewed a convenience sample of respondents to a French-language Internet survey (Etter, 2010).
Interviews with “vapers”

Results

Convention attendees were diverse in age (i.e., 20s to 60s), gender, and occupation (e.g., skilled labor, lab technician, computer programmer, artist, marketing, lawyer, professor, electronics research and development, security guard), although predominantly White. Because of the recent introduction of e-cigs to the U.S. market, most attendees we queried had started using e-cigs in the past year and users-turned vendors had started small businesses within the past six months. The unique language shared among vapers was an overarching theme that we felt was important to understanding and appreciating the ENDD subculture, but it was not presented as an independent theme because it was inextricably linked to the content themes. The themes were loosely organized as a chronological experience of an e-cig user who becomes aware of e-cigs, finds a satisfying ENDD, successfully switches from smoking to exclusive vaping (overcomes the learning curve), and experiences specific benefits and the desire to share and safeguard those benefits. We provide identification numbers when specific participants are quoted or discussed but emphasize that these quotes most succinctly or cogently illustrated or embellished themes that were very broadly endorsed. Thus, our selection of quotes was not based on a concern for equal representation across participants.

Theme: Learning About E-Cigs
Users learned about e-cigs from various sources including friends, advertisements, and Internet sites. One vaper can have an important influence on other smokers. For example, two vapers reported distinct but similar work-site stories from the different perspectives of employee and supervisor. In each case, an employee introduced smoking coworkers to vaping. Conversion was facilitated when the supervisor converted to vaping and endorsed vaping in the workplace to improve indoor air quality or reduce unproductive breaks. Some early adopters became entrepreneurs and retailers, and some became unpaid “evangelists” who encourage smokers to try vaping and serve as a personal resource for new vapers. Some built Internet sites and forums dedicated to vaping where users can find e-cig products for sale, reviews of products and retailers, and tips on making, modifying, cleaning, and decorating e-cigs. Users and retailers laud Internet forums as invaluable for new users; “as a community, we come together and we help inform each other on what would be a good purchase and what would be quality” (ID# 1).

Theme: Learning Curve to Vaping
One of the most striking emergent themes was the vaping learning curve. E-cigs are more complex than cigarettes due to the different components and ease of use, especially for novices. Unlike combustible cigarettes, e-cigs comprise a few durable components with a myriad of replacement options. The devices require potentially time-consuming troubleshooting when one component fails. Components are not fully interchangeable: Mismatched components can block airflow. New users must learn to activate the atomizer to heat the liquid prior to vaping either through a manual switch or by taking “priming puffs” before inhaling. One participant (ID# 2) described an effective vaping technique as similar to smoking Swisher Sweets cigars: The user slowly draws aerosol into the mouth and inhales from there into the lungs—the slow inhalation may combine priming and vaping puffs. Experienced vapers advise novice vapers to prepare for problems with e-cig components that cannot be replaced instantly. Additionally, the amount of liquid used daily is not easily predicted from daily cigarette consumption, so new users are advised to obtain extra liquid in advance. In contrast, cigarettes are ubiquitous, certain to work as expected, and pose a relapse temptation to frustrated new e-cig users who quit cigarettes. Some vapers identified the challenge of using and maintaining e-cigs as a significant barrier to converting smoking friends to vaping. Specific vocabulary used by experienced vapers illustrates the learning curve for using e-cigs and modified devices (Table 1).

Starter Versus Modified Devices
Vapers explained that they had wanted their first e-cig to look and feel like a cigarette. Similarly, new vapers generally use tobacco or menthol flavored nicotine solutions despite the large selection of flavors. Novice users often buy e-cig “starter kits” containing basic components, a battery charger, a few liquid refills, and instructions. Many experienced vapers described dissatisfaction with starter kits and sought a more satisfying device or combination of batteries, atomizers, and liquid. Some individuals buy or design their own modified devices or “mods,” which no longer resemble traditional cigarettes. Most mods include larger and/or higher voltage batteries. A larger battery lasts longer after recharging. A higher voltage battery vaporizes a larger amount of liquid, which produces a “throat hit” preferred by some users. Vapers’ individual style is evidenced by the numerous colors, artistic designs, carrying cases, and accessories for mods. Diverse mods and accessories create welcome options for users, retailers, and collectors but some confusion among novices.

The following quotes describe the vaping learning curve or barriers overcome by experienced users.

“Getting the right device and settling into that device and that liquid, that’s a learning curve and nobody’s the same.” (ID# 3)

“Finding the right device . . . there’s so many choices, the atomizer itself and the liquid; finding the flavor that works for you.” (ID# 3)

“I think it’s a matter of knowing when the battery is low and I probably need to get a new atomizer and knowing how much flavoring stuff to put in there and keeping that all in sync, plus technique.” (ID# 4)

“So there’s difference in manufacturers. Okay, so I have to be careful that I’m getting slotted material so that the airflow is right because if I get a no-slate battery and a no-slate cart, I’m dead in the water. And you know it took me a week or so to figure this out one time.” (ID# 5)

Theme: Motives and Perceived Benefits of Using E-Cigs
Most e-cig users were heavy smokers who hope that e-cigs will reduce their health risks. Many tried to quit with traditional pharmacologic cessation aids but described e-cigs as a vast improvement. One user said “as hard as it was to quit smoking, this provided people with enough of the other physical traits of
E-cig: An electronic cigarette is a mechanical nicotine delivery device that includes a battery, automatic or manual switch, heating element, and reservoir of liquid nicotine solution.

Vaping: Behavior defined by inhaling the vaporized solution from an e-cig. Thus, a vaper is one who vapes.

E-liquid or juice: Liquid solution vaporized by e-cigs that generally consists of water, propylene glycol and/or vegetable glycerin, nicotine, and flavorings.

Atomizers (attys): Heating element. The heat from the e-cig atomizer vaporizes the e-liquid. Expected to last weeks or months.

Cartomizers (carts): Although some e-cigs contain a separate e-liquid cartridge and atomizer, a single cartomizer combines the two. Not expected to last as long as atomizers, but some users described cleaning and/or refilling cartomizers to extend their use.

Blanks: Refillable e-liquid cartridges.

Dripping: Some users choose to drip extra e-liquid into the atomizer, and “drip tip” mouthpieces facilitate this practice. Experienced users note that dripping should only be done with manual switch e-cigs that have sealed batteries otherwise e-liquid may leak into the unsealed batteries of e-cigs with automatic switches.

PVs and mods: Personal vaporizers and modified e-cigs may not resemble cigarettes and instead resemble packs or large cylinders. Various colors and styles are available.

Volts: Most e-cig starter kits come with a 3.7 V battery (which ranges from 3.1 to 4.2 volts depending on charge strength), whereas mods may have a 5 or 6 V battery. Higher voltage batteries vaporize a larger amount of e-liquid.

Low-resistance atomizers: Combined with lower voltage batteries, these new atomizers produce effects comparable to standard atomizers with higher voltage batteries.

Pass throughs: Devices that provide continuous power to e-cigs through a USB connection to a computer.

Goose necks: An e-cig accessory that extends the mouthpiece with a flexible metal tube.

Note. USB = universal serial bus.

Vaping was usually perceived to be less expensive than smoking (especially among those from states with higher tobacco taxes). One exception was a user who collected unique personal vaporizers and accessories: “If I didn’t collect them and I found one I was completely happy with and I stuck with that one, I would save money hand over fist on a daily basis.” (ID# 1) Another user reported “I originally thought that I might be able to actually even save some money, but that didn’t turn out to be the case because of the quantity that I personally consume.” (ID# 6)

For example, one vaper recalled feeling anxious and compelled to operate at what to me is normal . . . I needed a way to get the nicotine without getting the tars and everything else and this is perfect.” (ID# 7) Another female participant had already quit smoking and vape exclusively to get her nicotine “fix” and maintain her desired weight. She described her decision to try e-cigs: “I finally found studies online that talked about metabolism and nicotine and all the rest of that and it verified what my sensibilities were telling me, which is that my system needs nicotine to operate at what to me is normal . . .” (ID# 8) Immediate benefits were perceived to outweigh any potential long-term harms. One vaper indicated that using e-cigs “has improved my quality of life so much that whatever negative there is, I’ll deal with it when we discover it.” (ID# 5) Another user echoed this sentiment saying, “Even if this doesn’t add a second to my life, which I’m sure it won’t, the quality of our life is just immeasurably improved.” (ID# 8)

Theme: Reduced Nicotine Tolerance and Dependence

Many vapers reported using lower nicotine concentrations over time, and some planned to use nonnicotine liquids in the future. Some vapers described comfortably waiting long periods without vaping, which they could not do when smoking. For example, one vapor recalled feeling anxious and compelled to replace forgotten cigarettes when he was smoking but had no trouble working all morning when he accidentally left his e-cig at home (ID# 1). Another vapor revealed, “I don’t have the same sort of urgency about vaping that I had about smoking . . . I go all day without vaping and it doesn’t occur to me.” (ID# 9)
We had anticipated that deep inhalation may deliver nicotine rapidly in a highly addictive pattern comparable to a cigarette (Sumner, 2005). Others have described slow (if any) nicotine delivery in e-cig experiments with novice users accompanied by self-reported reductions in cravings comparable to nicotine inhalers or placebo (Bullen et al., 2010; Vansickel et al., 2010). In contrast, vapers’ descriptions suggest an intermediate delivery speed. Vapers routinely described relief of nicotine craving within 5 min of vaping. Those who had tried the prescription inhaler found it unsatisfying (slower or lower nicotine delivery) and those who, after vaping exclusively for days or weeks, tried a cigarette described a dizzy rush “like the first time you smoked” (faster and higher nicotine delivery).

Additional quotes that illustrate vapers’ reduced nicotine dependence include:

“I went from almost 3 packs [of cigarettes] a day to none within 3 days.” (ID# 8)

“I’ve worked from 36 milligrams, which is pretty much the top of the line, down to 6 over the course of the year and a half and in a few months I’ll lean towards zero.” (ID# 3)

“I found that whenever I try to go down a level of nicotine, I’d use this thing [e-cig] a hell of a lot more for about a week or so. I just wasn’t getting what I needed . . . then you start to slow down. It is that easy.” (ID# 3)

Theme: Users’ Interest in Research and Advocacy

E-cig users are vocal about potential bans as suggested by the 13,000 names and 8,000 comments in an online petition to the FDA to keep e-cigs legal (Care2, 2009). Our interviewees were supportive of research to assess the safety and efficacy of e-cigs, had read the scientific literature, and were willing to participate as subjects. The National Vapers Club (2010) is raising money to conduct a chemical analysis to learn what (if any) potentially harmful compounds are associated with ENDD aerosols.

Some users voiced disappointment and concern about devices and liquids from China because of inadequate information, product labeling, and customer support. These disappointments, the negative results of the FDA studies on Chinese products (FDA, 2009b), and users’ pro-American sentiments supported U.S. entrepreneurs entering the market. In general, our participants reported only modest distrust for ENDD sold over the Internet, complained little about broken or incompatible components purchased online, and strongly valued the Internet forums for vetting products and vendors.

Vapers demonstrated enthusiasm for research and advocacy by citing studies they have read, eagerly offering to help with any future studies, encouraging other smokers to try vaping, and actively voicing their support of e-cigs to government authorities:

“You really need to look up the two New Zealand tests, both of them, because they have a lot of information in them . . . .” (ID# 5)

“I am totally willing to participate in any further research and I will go to great lengths to assist you.” (ID# 7)

“The reason that I still smoke this [traditional e-cig] I think I would prefer to go to one of the mods, but I don’t, and the reason is I’m trying to encourage people to do this . . . .” (ID# 5)

“We attended the [State] hearing regarding proposed legislation to ban the sale of e-cigarettes. We testified on behalf of [State] vapers . . . . This was necessary since we were the ones with the legislative packets, studies, toxicology reports, experience, etc. to present to the committee.” (ID# 9)

Discussion

Our interviews with e-cig users contribute new insights and understandings of e-cigs and the vaping community, which were not previously reported in the literature. The language of experienced users conveys a learning curve; it mixes technical, pseudo-technical (“cartomizer”), and popular (“juice”) jargon. The challenges of vaping were overcome by intelligent determined users who formed an active community (both online and in person) to support new users.

The vaping learning curve, diverse device modifications, and numerous liquid options have important implications for future research. Specifically, our results suggest that it may be ineffective to ask new users to “smoke” an e-cig like they would their preferred brand of cigarettes (Bullen et al., 2010; Vansickel et al., 2010). Research is needed to describe the pharmacodynamics of vaping, how vaping changes with experience, and how vaping differs physiologically from smoking. Furthermore, a plethora of mods creates challenges for researchers and policy makers interested in user safety, the smoking cessation process, and the sociocultural aspects of the behavior.

Even if e-cigs are as safe as other smokeless nicotine products, the learning curve has important implications for future clinical and behavioral trials testing e-cigs as a smoking cessation aid. The rates of smokers using traditional nicotine replacement therapies (NRT) to quit smoking are low (22%–32%; Cokkinides, Ward, Jemal, & Thun, 2005; Shiffman, Brockwell, Pillitteri, & Gitchell, 2008), and it is unclear whether e-cigs would achieve higher cessation rates. Both e-cigs and traditional NRT involve complicated instructions and techniques for use as well as high upfront costs if not subsidized. Prices for popular e-cig starter kits are US$50–80, which are comparable to the costs of over-the-counter NRT. Further price declines may make ENDD more accessible for lower income smokers; however, the intricacies of e-cig use and maintenance may hinder widespread adoption. However, unlike other NRT, ENDD might provide a more satisfying and comprehensive replacement for smoking (Bullen et al., 2010; Rose et al., 1993). The delivery of nicotine through NRT is slower and involves less dramatic peaks than cigarette smoking, and substantial individual variability in nicotine and cotinine levels has been reported across cigarette smoking, nicotine patch, and nicotine nasal spray (Benowitz, Zevin, & Jacob, 1997); thus, future research should compare e-cigs with both NRT and cigarette smoking.

Researchers and public health advocates have expressed concerns about e-cigs and caution against their use until
Vapers endorsed e-cigs as “life-saving” and favored unknown e-cig risks over known cigarette smoking risks, despite concerns about long-term health risks and quality control for liquids and components. Evidence of the long-term health effects of vaping will not be available for many years, and results will be confounded by prior smoking. Studies testing the shorter term safety and efficacy of e-cigs are urgently needed. Vaping where cigarettes are banned may undermine clean air policies; research on e-cig aerosols is needed to address this concern. Another concern is that vaping will thwart smoker’s motivation to quit and simply replace cigarettes with another risky behavior. Research is needed on the efficacy of e-cigs as an NRT and the short- and longer term harms to health, especially if used as a permanent replacement for cigarettes. Future research should also address concerns about the attractiveness of e-cigs and flavored liquids among nonsmokers, ex-smokers, and adolescents (FDA, 2009a).

**Limitations**

We conducted only a small number of formal interviews. Nevertheless, themes became quickly saturated, confirmed online sources, and were repeated in informal conversations. Our participants were mostly experienced exclusive vapers, who were early adopters of unregulated, controversial products (i.e., e-cigs); therefore, results may not generalize to the whole population, including novice and former e-cig users. Our participants may differ from vapers who are not involved in Internet and/or in-person vaping communities. Future research could explore the experiences of smokers who tried e-cigs, were dissatisfied, and stopped vaping to better understand the factors that hinder conversion from smoking to vaping. Similarly, as ENDV advance, experiences of users may change over time. Our participants were not struggling financially, were adept Internet consumers, tended to be technology savvy, and clearly distinguished between the harms of nicotine versus smoke (harms that many smokers conflate; Bansal, Cummings, Hyland, & Giovino, 2004). Some users also benefited financially from the sale of e-cig liquids or devices. This may be the demographic for experienced e-cig users or reflects our convenience sample.

**Conclusions**

We did not have to interview many vapers to learn that vaping is not like smoking. Vapers follow a learning curve that involves selecting among numerous devices, components, liquids, and techniques. Additionally, vaping involves adapting to evolving products and maintenance issues and changing personal needs and preferences. The complexities of vaping have important implications for novice users, retailers, scientists, and policy makers. Experienced users report health gains typical for smoking cessation despite continued vaping and appear to be willing research participants. Independent research on the first- and second-hand health effects of e-cig aerosols is urgently needed to inform use and regulation of e-cigs as well as determine the utility of conducting further studies to assess the safety and efficacy of e-cigs as a smoking cessation aid. Additionally, research is needed to assess the effects on health if e-cigs are used long term. Future research will require transdisciplinary efforts, which may be better informed by tapping the expertise of experienced vapers.

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**Ethics Approval**

This research was approved by the Human Research Protection Office at Washington University in St. Louis.

**Declaration of Interests**

None declared.

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**References**


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