And even with the tremendous spike in opioid deaths recently, he points out, diseases related to tobacco use are still far bigger killers.

Tobacco use should be addressed alongside any other substance use disorders, says Giovenco, whether it’s opioids, alcohol, or other drugs. And he also believes that, as with opioid use itself, harm reduction is critical. Some forms of tobacco, such as smokeless tobacco or vaping products, are less dangerous than cigarettes. But the tobacco companies aren’t currently allowed to suggest that one of their products is “safer” than another, and Giovenco says health agencies are often reluctant to make statements endorsing harm reduction.

In any case, he says, harm reduction efforts have the greatest potential when they are equally accessible to everybody, which isn’t currently the case. For a study funded by a 2016 NIH Director’s Early Independence Award, Giovenco and his colleagues visited stores selling tobacco all over New York City. “The most harmful products were more likely to be advertised, heavily promoted, and cheaper in neighborhoods that were predominantly African-American,” he says, as well as in low-income neighborhoods and places with low levels of education. Less risky products, on the other hand, were more likely to be found in more affluent neighborhoods.

There are similar disparities in both treatment options and harm reduction efforts for opioids, with similar implications. “Innovative technologies really have potential to improve public health,” says Giovenco, “but they are often first adopted by people who are already at an advantage. Any kind of innovative approach should be equally accessible across strata to reduce health disparities.”

— Alisa Roth