

Prohibition Through the Hookah Looking-Glass

Kamal Chaouachi (TICAP, The Hague, 15 March 2010)

This talk is twofold. After a quick and necessary foreword, I will first describe the complexity of the hookah issue and then present a project for a healthy radical change to put an end to the global prohibition nightmare.

Ladies and Gentlemen, Peoples of the World !

Before I came here, it occurred to me that nothing occurred to me... I was contacted by the head of a national European antismoking group who "implored" me not to attend what he called this "unsavoury conference". I wished to share with you this funny anecdote, as he said that such conferences "*are clearly set up by the tobacco industry and its front organisations*" and "*clearly directed against the health interests.*" He added that I would therefore be "*serving the interests of the tobacco industry*" and the consequence would be that "*[my] future statements concerning conflicts of interest on tobacco issues will be challenged and [my] reputation as independent scientist be questioned*". Since this person is also a member of the world antismoking Globalink organisation, I would like, as a quick preamble, to say a few words about it.

Globalink. My position against prohibition is not new or recent as I have worked against the catastrophe of drug prohibition from an early date and at an international level. As for the reason of my past affiliation with the Globalink network, it has been a mere accident (like, let us say, being a peace-loving United States citizen during the bombing of Japan, Vietnam, Iraq or Afghanistan. Because of my early comprehensive research, I was, ten years ago or so, approached by several members of Globalink and subsequently invited to become a member of it. I did not know anything about it and unlike drug abuse, I had never worked in the very field of tobacco. So, I accepted to see what would happen and I remained there as a mere observer for years. Then, I began to chime in by highlighting the poor science and numerous errors that were officially published. Most importantly, I criticised prohibition measures in various parts of the world on behalf of activists who were the first-hand experts of health ministers in their countries. I was banished several times and eventually expelled once and for all. Over the years, I have also been amazed by the extent of endorsed intolerance. For instance, there have been, believe it or not, "debates" on whether it is ethical or not to give a last cigarette to a person confined to bed and doomed to death... Then, one discovers the pharmaceutical industry connections (Pfizer in particular)(WCTOH, 2009 ; Mesbah 2009) and how Globalink's policy has been drawn with "a velvet glove" pulled on an iron fist named Simon Chapman, ex-Editor-in-Chief of the world famous antismoking Tobacco Control journal. It is also noteworthy that many editors of world biomedical journals are not

always aware that when they submit, for evaluation, smoking related manuscripts to peer-reviewers, the latter often are Globalink members whose recommendation to accept or reject the article is ideologically influenced. This represents a blatant conflict of interest that has remained invisible so far. In sum, Globalink's motto is that of the previous US-Administration during its war against the so-called "Axis of Evil": something like *He who is not with us is against us...*

"Tobacco Control". As for the "tobacco control" phrase I personally used to describe my activity, I realised later that I understood it the wrong way: it was not the control over the quality of products (cigarettes, cigars, etc.) and the promotion of harm reduction solutions (Eclipse cigarette, modern smokeless tobacco, E-cigarette, hookah, etc.). I found out that prevention of the real harm caused by tobacco smoking is one thing and that "Tobacco control" is another completely different one. In the post-Prohibition era, and given the extent of the human damages, the first thing to do will be to consider "tobacco control" as historical garbage. Indeed, independent researchers will not be able to go on using this phrase as if nothing had happened for decades.

Hospitality. The title of the conference reads: *"Are Guests Welcome? Prohibition within the Hospitality Industry"*. Here, I wish to point out that hospitality, sociability, and conviviality in particular, are at the core of the hookah smoking tradition. Indeed, hookah –also and mainly known as narghile and shisha- is an ancestral symbol of guest hosting (**SLIDE: Lebanon Smoking Crowds**). From an anthropological standpoint, this can be explained by the fact that hookah involves a very unique triad (threesome): 1) time passing; 2) a playful (ludic) situation and; 3) a talking activity (similar to what happens during a psychoanalytic "talking cure"). English speaking interviewees often use the "social smoking" phrase to describe their related motives. In French, one will often hear "conviviality" (from Latin *convivialis*, i.e. related to sharing a meal).

Description (SLIDE: Alice). So, what is a hookah ? Of course, it is what the caterpillar, in the Alice in Wonderland tale, uses, a scene that made a recent movie on it be rated "P.G." (i.e. Parental Guidance needed)... (**SLIDE: Description**) Hookah is the pre-Colombian harm reduction method of smoking whose continuous growing popularity across the world, for one decade now, is also a backlash effect of the vehement anti-cigarette campaigns of the past two decades.

Origins. Regarding origins, this very country (The Netherlands) has its importance: first, because the Dutch travellers were the first to discover water pipe use in South Africa at the beginning of the 17th century. Then, it is worldwide famous for its coffee shops in which non-tobacco hookahs have been served. Then we have a great Dutch physician named Johann Neander (**SLIDE: Neander**). Neander might be the author of the first medical treaty on tobacco that he titled *Tabacologia*, i.e. tobacco science. Its subtitle (Latin) is; *"Tabacologia : hoc est Tabaci, seu nicotianæ descriptio medico-cheirurgico-*

pharmaceutica vel ejus præparatio et usus in omnibus ferme corporis humani incomodis". This book includes a substantial interesting scientific correspondence between physicians of that time. For four centuries, such a comprehensive scientific perspective had been forgotten until Pr Molimard in France, who was invited to TICAP last year, set up the first learned so-called "Societe de Tabacologie" in his country. A few years later, he launched "tabacologie" as a new scientific discipline to be taught to medical doctors in French universities, emphasising the multidisciplinary human-centred approach of all aspects of tobacco use. I have not heard of any other scholar in the world having done something similar. Now, Neander's book also offered to the world the first human representation of water pipes of the Persian type in use as early as 1622 (**SLIDE: Neander**). Neander reference was dismissed in the World Health Organisation flawed expert report on ""waterpipe"" but also another key reference about pre-Colombian artefacts dug out in an Ethiopian cave by archaeologists (Van der Merwe, 1975). And because antismoking researchers are rather dull individuals, as expected, they also discarded a poem of love and smoking, yet to be likely the first one in history, written in year 1535 by Shirazi in Iran (**SLIDE: Shirazi**).

Instead, ""waterpipe"" antismoking researchers have kept hammering for years, based on a mere anecdote, that by year 1605 in India, a physician invented the device to make tobacco (recently arrived in this country) less harmful to the Emperor (Chattopadhyay, 2000). The function of this brainwashing (the two first sentences of the WHO report contain related errors and misquotations) was to leave no doubt that hookah filtration has been, let us quote them: "a myth as old as its invention" (Chaouachi, 2006).

Cigarette and Hookahs

Antismoking researchers first advertised everywhere the famous equivalences as: 1 hookah session equals 20, 40, 100, 200 and even 900 cigarettes (in a BBC programme of last Autumn)(Snowdon, 2009). Further to the debunking of their claims, they now contend that hookah, from a chemical and health standpoint, is not very different from cigarette and represent a same hazard (**SLIDE: Gallows**).

They have, on purpose, glossed over many striking differences that I invite you to quickly review now (leaving aside the socio-cultural aspects): size; quantity of product (1 g against up to 60 g of tobacco and 120 g of a tobacco + molasses mixture); distance run by the smoke (10 cm *vs.* 250 cm); consumption time (5 min *vs.* 60 min and more); smoke chemistry (5000 identified compounds against a few hundreds) particularly due to high differences in temperatures (1000°C *vs.* 100°C) and the water and glycerol components (just like the Electronic Cigarette whose inventors likely found their inspiration there); collective use (*vs.* individual use); recreational use (*vs.* rather addictive); standardisation; and last but not least and certainly the most important, since prohibitionist measures pretend to protect non-smokers from side-stream smoke: almost

no side-stream smoke... In sum, in spite of all these striking differences, antismoking researchers have kept saying that they hookahs and cigarettes are similar...

Antismoking researchers have resorted to **a series of tricks** that, most of the time, violate the basics of research and medical ethics and that I invite you also to quickly review now:

Cigarette and Hookahs/ Smoke composition. For instance, not highlighting the great chemical differences between both smokes would be equivalent to describing the harm reduction Eclipse cigarette or the E-cigarette as a regular cigarette: in other words, comparing oranges with apples, beer with whisky effects. **Imagine a WHO report** whose authors and "peer-reviewers" of the WHO TobReg Study Group could not distinguish between a burning (combustion) process and a heating (distillation) process (Chaouachi, 2006).

Cigarette and Hookahs/ Smoking Machines. It is well known that cigarette smoking machines, set for only a few minutes, offer a poor distorted image of human smoking. So, imagine that the complex hookah smoking behaviour has been modelled by a grotesque machine, endorsed by WHO TobReg, drawing a puff every 17s, with the charcoal placed in the same point atop the bowl, over a full hour.

Cigarette and Hookahs/ Nominalism. Imagine a linguistic reductionist sleight of hand involving the use of a neologism ("waterpipe" in one word) to let people and crowds of so-called researchers believe that all water pipes in the world have, in spite of the different forms and names, the same health effects (**SLIDE: diversity of devices**). This is in fact the biggest trick.

Cigarette and Hookahs/ Bibliographical bias. Imagine a so-called "review", being a recycled version of the WHO flawed report, and containing very serious errors and biases, published in the Cochrane Database supposed to be the "golden standard" in Evidence-based medicine (Maziak et al., 2007). The examples of frequent publication bias are so many. Even Robert Proctor, who wrote a book on Nazis and health, refrained from citing a study on hookah when doing a review on Angel Roffo, a world famous researcher on tobacco and cancer issues (Proctor, 2006).

While independent quality studies of the past decades -on smoke chemistry and health effects led by prestigious independent researchers in Saudi Arabia and Egypt, among others- can be found by the dozens, imagine that the director of the US-funded antismoking Syrian Centre, dared declare in the US press that research on hookah smoking began only in 2002, that is the inception date of his US million dollar "waterpipe" antismoking funded activities (Kozlowski, 2009).

Cigarette and Hookahs/ Pharmaceutical and Tobacco industries. The worst thing the pharmaceutical industry -which funds, directly or indirectly, most of the antismoking

research- fears is the scene of recreational smokers smoking when they want as is the case with hookah users. All studies show this (**SLIDE: Lebanon Smoking Crowds**). Yet, the world anti-“waterpipe”™ experts have recently found in their own experiments that one 45 minute shisha smoking session does not deliver more nicotine than 1 cigarette (Eissenberg and Shihadeh, 2009)...

As for the tobacco industry, few people know that it has not published so far a single study on hookahs. This is the main difference with cigarette smoking. At least, researchers fighting prohibition and the pseudo-science it is based on can rely on studies from the tobacco industry which, from time to time, come up with scientific breakthroughs. In the case of hookah, there has not been any institution or association of researchers who would be ready to challenge and debunk the cumulating pseudo-scientific “consensus” funded by millions of dollars. Then, for the tobacco industry, hookah is also an economic rival, so that in the best case, it wishes it were only but a “call” product to cigarette use. However, for several reasons, this is very unlikely to happen.

In sum, the tobacco smoking market seems tacitly divided between the tobacco and pharmaceutical industries. The silence of the tobacco industry in the recent US Food & Drug Administration “debate” over Electronic Cigarettes is very telling, isn’t it ?

Cigarette and Hookahs/Harm Reduction. Because of the charcoal, the question of ventilation is much more important in the case of hookah than with cigarettes. In spite of this, the WHO and other national agencies experts have never issued a single recommendation in this respect or about the diverse types of charcoal. This is an anti-public health attitude they are accountable for.

Environmental Tobacco Smoke (SLIDES: Inpes, Formindep). While independent studies showed how the hazards of Environmental Tobacco Smoke from cigarettes (visible side-stream smoke) have been hyped in line with a prohibition agenda, public health national agencies (USA, France) went so far as resorting to fake posters showing hookahs emitting huge clouds of side-stream smoke. However, a hookah emits almost no side-stream smoke. A short debunking article was published in the Open General & Internal Medicine Journal which also contains a tribute to Gian Turci to whom this conference is dedicated (Chaouachi, 2009). A 50 page recapitulation was subsequently published (Chaouachi, 2009). Interestingly, direct warnings were sent to the journal Editors in a pitiful failed intent to block its publication...

In this field of health scares, an article published in the British Medical Journal aimed at justifying the United Kingdom ban (Gatrad et al., 2007). However, for years, nobody has realised that the authors of the article took Exhaled MainStream Smoke for Side-Stream. This is a serious error as both types of smoke are completely different from each other.

Exhaled MainStream Smoke smoke has been filtered twice: inside the hookah apparatus itself (or the tobacco rod in the cigarette) and then in the respiratory tract of the smoker.

Pascal Diethelm recently gave lessons on the “good science” of Environmental Tobacco Smoke in a the European Journal of Public Health. He accused those who do not agree with the deadliness of Environmental Tobacco Smoke of being “denialists” (Diethelm, 2009). However, few people noted that in one of his campaigning articles in Switzerland, he did the same mistake of taking one smoke for the other (Diethelm, 2007). Diethelm even said, with no evidence as usual, that children of less than 12 years smoke the hookah at home with their parents aware of this. His imagination was apparently depicting families of immigrants so the his “science” is somewhat xenophobic. This is not all. He is also an active Globalink member and worldwide famous for having brought and won a lawsuit against a researcher named Ragnar Rylander. The complex intricacies of the case may explain why no fearless independent investigative journalist has tried so far to offer another interpretation of what really happened. When contemplating this case, one should keep in mind that Diethelm has also published serious scientific mistakes and led unsubstantiated *ad hominem* attacks on other honest researchers.

Anyway, the huge clouds of smoke emitted by hookah smokers have also been a godsend to antismoking researchers who have found there a way to scare people with the famous equivalences that hookahs are 200 times worse than cigarettes, according to an ASH article based on an interview with Wasim Maziak and Alan Shidhadeh (Action on Smoking on Health, 2007) , two of the four world ““waterpipe”” antismoking experts.

This said, when side-stream smoke is almost inexistent, one can publish a biased study on comparing particulate matter emissions of oranges with that from apples, as Maziak and his team did in the antismoking Nicotine and Tobacco Research journal (Maziak et al., 2008). You can also create a measurable side-stream of particles if you tinker with the charcoal at the top of the hookah and make believe that these tricks are science. The first example is given by a German team from the Department of Environmental Health/Bavarian Health and Food Safety Authority, led by Hermann Fromme (Fromme et al., 2009). The second example is that of a highly politicised study -calling for maintaining prohibition on hookah smoking- led by Nancy Daher and Alan Shihadeh from the US-American University of Beirut (Daher et al., 2009). Interestingly, this study was published in Atmospheric Environment, a journal hosted at the University of East Anglia, the very one where the computers of the Climate Research Unit were recently hacked by the Climate Change so-called “denialists”. As some of you may know, such an attack revealed to the world the extent of ethical violations regarding the peer-review process whereby how dissenting views have been silenced thanks to a world complex network of editorial influences. Therefore, it is no surprise that this journal rejected a critique of the numerous biases and errors to be found in Daher’s paper. Eventually, an official retraction was requested.

Prohibition and the Hookah Lounges (SLIDE: Hookah Lounges). It is important to stress that in contrast with regular cafes, most hookah lounges profits come from the pipes themselves. People patronise these places for hookah smoking in the first instance, not for eating and drinking.

>In France, hookah lounges had set up a national union of owners of hookah lounge and they gained momentum thanks to the parallel debunking of a "book" supposed to demonstrate the deadly hazards of hookah ETS (Dautzenberg and Nau, 2007). To top it, the publication happened to be plagiarised material and the greatest scientific fraud in the history of tobacco research (Chaouachi, 2009). It contained serious errors on almost every page. For instance, and to take the most exotic one, it took one study on Middle-East barbecues for one on hookah smoking. The authors were Bertrand Dautzenberg, president OFT, top national French antismoking authority, and Jean-Yves Nau (medical journalist with Le Monde daily newspaper and prolific scientific writer for *La Revue Medicale Suisse*, author of about 700 hundred articles indexed with PubMed). The publishing house (Editions Margaux-Orange) is openly funded by the great names of the Pharmaceutical Industry. When asked for his opinion, its director, Stéphane Arbouze, said he defends his ""authors"" (4 quotation marks)... As in a novel about Al Capone, Dautzenberg and Nau state, page 72: *"We are heading towards a political conflict when hookah lounges close by the 1st of January 2008"* [original in French: «D'ores et déjà, un risque de conflit politique se profile avec l'arrêt de l'activité des bars à chicha au 1er janvier 2008»).

>These days in the USA, many hookah lounges are resisting. One called The Juggling Gipsy, in North Carolina, is even defying the smoking ban with a permanent legal "reality show"...

>Across the world, bans (specifically targeting hookah lounges) are multiplying.

>In Syria, it seems that the recent ban, enacted further to pressures by US-funded prohibitionists, will be adapted and that hospitalities with sufficient ventilation will be permitted. Iran, Bahrain and the Emirates, have been submitted to the same pressures by US-funded researchers via the Globalink network.

>Iran has lifted a previous ban further to demands from café owners. The coming breach to the world coalition for Prohibition will likely come from Iran thanks to the defiant attitude of its people to maintain their traditional Mass Entertainment Weapons.

This is all for hookah... What can be done right now ?

I would like to suggest a radical threefold project to put an end to prohibition right now. The first component is an anti-imperialist front led by State leaders known for speaking out. In parallel, the momentum will be given a spiritual component thanks to the support

from a great religion of the world. Finally, in order to open a new era of freedom, social harmony and peace between nations, accountability will be demanded by bringing to court those organisations and individuals responsible for the situation which has gathered us here.

1) FCTC. Globalink is like a world octopus promoting prohibition measures by reminding States of the world that they are bound with obligations related to their ratification of the WHO FCTC (Framework Convention for Tobacco Control). The images on cigarette packs and those prepared for hookah are an example (**SLIDE: Regulation**). For instance, in a recent report from the European Union, "*high-profile prosecutions to enhance deterrence*" (sic) are recommended and the FCTC is cited as a chief reference. So, efforts for the abolition of Prohibition should be geared to the other opposite direction; by urging States to withdraw from the FCTC. The so-called Rogue States, who know what big scares and scams are (Venezuela, Cuba, and others), will be more receptive to this issue. Remember Hugo Chavez' speech at the last Summit on Climate Change in Copenhagen. If he were informed of all the frauds, commercial imperialist interests at stake behind the tobacco global prohibition project, we can expect that he could do the same and drag many States to collectively withdraw from the FCTC.

2) Spiritual component. For Judaism, smoking is generally viewed as « treif » (illegal, illicit), i.e. not « kosher »(permissible, licit) and the same would apply to Islam: a "haram" food or behaviour is the equivalent of Jewish "treif". The opposite is "halal", i.e. the equivalent of "kosher".

While Judaism is the religion of commandments and laws, and Christianity that of compassion and love, Islam has put strong emphasis on reason and science. Quran is a permanent invitation to meditate upon the laws of nature. Furthermore, there is a saying by the Prophet himself which reads: "**Seek science from the cradle to the grave**" (in Arabic: Utlub al-ilm min al-mahd ila-l-laahd). These teachings have had tremendous consequences on the world civilisation since they were translated into huge achievements in all scientific disciplines (from medicine to astronomy and from geometry to chemistry), particularly between the 9th and 15th centuries. An environment was created that allowed Muslim scientists but also Jews, Christians and followers of other religions, not only translate and enrich the Greek and other civilisations' scientific heritage but also develop it and, not the least, transmit it to Europe getting out of the obscurantist Middle Ages by that time. Interestingly, the Arabic name for student is Taleb, that is (science) seeker.

From there, it is quite clear that the referred to science in the Prophet' saying is good sound science, not the pseudo-science we have been so familiar with through the permanent public health scares: from avian to swine flu and from second-hand smoke deadly hazards to those of fourth-hand smoke.

The direct consequences of these facts is that Prohibition is antithetic to Islamic culture. Antismoking activists face the greatest opposition in countries where Islam is one of the main religions. Islamic societies have a long tradition of tolerance regarding the use of tobacco, among others. Of course, there are a few exceptions, like that of Sultan Murad IV, which only confirms the rule even more that his successor, Ibrahim the Mad, immediately lifted the ban in 1647.

Today, when a Muslim says that smoking is haram (i.e. treif, not kosher), she or he refers to interpretations based on a balance between what Quran says about the importance of taking care of one's body integrity and the so-called modern science about the deadly hazards of hookahs, cigarettes, first-hand, second-hand, third-hand and fourth-hand smoke.

So, the second component of the plan will be very easy to implement. Just spread the word to one billion Muslim woman and man in the world. When you are told by Muslims that passive smoking is haram (i.e., that it is not kosher), tell them that they have been deceived by modern prohibitionists who justify their prohibition by saying that smoking is banned because there would a related "accumulation of scientific evidence". Inform them of all what you know about the pseudo-science surrounding passive smoking in particular. In the case of hookah smoking, give away the secret about side-stream smoke and show them the fake posters published by national so-called "public health" agencies. Above all, tell them that this obviously collides with the Prophet' saying that sound science should be sought from the cradle to the grave. Just wait and see... Muslims may be mystical people. However, they also firmly stick to Reason. They will also appreciate your scientific interest in their religion. I have personally tested the idea and it works. Tell them that Johann Neander was a great independent scientist. Please spread the word everywhere that what is above all haram (i.e., not kosher) is pseudo-science and that this applies to tobacco smoking pseudo-science. For this reason, people should reject it and, beyond, the Prohibition. Invite them to spread the word in their turn and urge their governments to withdraw from the FCTC.

Let they also submit the case to union of States such as the World Islamic Conference, the Arab League, and a fair number of those of the Asian and African Organisation of States. A collective withdrawal from the FCTC can be reached that stop right now the world Prohibition process. When aware of the extent of the scandals, the same States will be entitled to demand the dissolution of WHO TobReg, and the reimbursement of public money they contributed for suspect tobacco research endorsed by the WHO. Let them demand the redistribution of that money to its own citizens for other world public health priorities.

3) Court. Demand accountability now, not tomorrow. Every new daily scandal (about second, third, fourth-hand smoke, etc.) has not the only function of making us forget

that of yesterday. Since prohibitionists are not capable of producing quality evidence, they rely on quantity so that each new "study" can contain sentences like "There is "an accumulation of evidence that..." environment tobacco smoke kills, etc.... and the not less classical ending call for funding: "More research is needed"... Besides, they have themselves set the criteria for considering acceptable "evidence". For instance, who controls the so-called evidence published in WHO reports ? The WHO Tobacco Study Group (TobReg) experts of course. Who are those experts ? The same who are to be found in the editorial boards and peer-reviewers lists of numerous journals supposed to provide the evidence at the grass-root level. This is a vicious circle, a global trick, a global hold up of science. All blogs, opposition sites and forum discussions of the world weigh almost nothing because the criterion for considering evidence is the so-called publications in the so-called peer-reviewed journals that they control. As of conflicts of interests with the pharmaceutical industry, please note that these have never been and will never be considered as crimes because the somewhat accepted excuse is that the *raison d'être* of this industry is caring for ""public health"". In the worst case, they will say that they may have committed not more than a few "tactical mistakes" and that they may be excused because of the emergency situation. Please note that this "emergency argument" is the one used by George Bush after reports revealed the extent of the civil damages caused by the invasion of Iraq (Schwartz et al 2010, Burnham et al 2006). Indeed, this "emergency" excuse is a modern opium of peoples and these individuals have to be made accountable, from now on, for what they publish, i.e. what they make public, every day. They have to be brought to court and the fact that we are gathered in The Hague, the symbolic city that hosts the International Court of Justice, is not a simple coincidence, is it?

Conclusion

Because of its numerous paradoxes and peculiarities and because its re-emergence was unexpected and remains counterintuitive to antismoking researchers, hookah (narghile, shisha) question will be central in bringing down the global smoking prohibition project even more that its major sociocultural and religious ethos is in favour of lifting the bans (Remember: *Seek good science from the cradle to the grave*). Consequently, the recovery of civil liberties, as far as smoking is concerned, will likely come from Asia and Africa where the hookah was born. Prohibition is an assault on identity. For cigarette smokers, this is quite clear. For hookah smokers, this is also an attack on a collective lifestyle (gatherings, etc.). From a political anthropology perspective, hookah has a libertarian dimension because the alternative values it suggests (talking, idleness and play) are revolutionary in the sense of the French Situationists who, through their political programme of ludic playful urban "situations", paved the way for the May 68 revolt in Paris. Instead of the modern mottos "Gain time" or "Buy time", hookah suggests: "**Dare waste your time**". This is a revolutionary libertarian message indeed.

From there, and particularly outside Asia and Africa, hookah actually gets individuals away from television, its propaganda and commercials. Therefore, it can also be seen as a serious threat to the New World Order. Indeed, through history, authoritarian governments used to send police eavesdroppers to hookah cafes. These times may come back again...

Because I believe that the collapse of tobacco prohibition is just a matter of time, I hope that TICAP will not have to meet again next year.

References

ASH (Action on Smoking and Health). "Shisha 200 times worse than a cigarette" say Middle East experts". 27 March 2007 (prepared by Martin Dockrell)(accessed 13 June, 2008) [based, among others, on an interview with Wasim Maziak and Alan Shihadeh]

http://www.newwash.org.uk/ash_4q8eq0ft.htm

Burnham G, Lafta R, Doocy S, Roberts L. Mortality after the 2003 invasion of Iraq: a cross-sectional cluster sample survey. *Lancet*. 2006 Oct 21;368 (9545):1421-8.

<http://www.ncbi.nlm.nih.gov/pubmed/17055943>

Chaouachi K, Sajid KM. A critique of recent hypotheses on oral (and lung) cancer induced by water pipe (hookah, shisha, narghile) tobacco smoking. *Med Hypotheses* 2009 Dec (in press).

<http://www.ncbi.nlm.nih.gov/pubmed/20036075>

Chaouachi K. Hookah (shisha, narghile, "water pipe") indoor air contamination in German unrealistic experiment. Serious methodological biases and ethical concern. *Food Chem Toxicol* 2010;48(3):992-5. Doi:10.1016/j.fct.2010.01.020

<http://dx.doi.org/10.1016/j.fct.2010.01.020>

Chaouachi K. Hookah (Shisha, Narghile) Smoking and Environmental Tobacco Smoke (ETS). A Critical Review of the Relevant Literature and the Public Health Consequences. *Int. J. Environ. Res. Public Health* 2009; 6(2):798-843.

<http://www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pubmed&pubmedid=19440416>

Chaouachi K. Is Medical Concern about Hookah Environmental Tobacco Smoke Hazards Warranted ? [A Tribute to Gian Turci, who has recently passed away] *The Open General & Internal Medicine Journal* 2009; 3:31-3.

<http://dx.doi.org/10.2174/1874076600903010031>

Chaouachi K. Public health intervention for narghile (hookah, shisha) use requires a radical critique of the related "standardised" smoking machine. *Journal of Public Health [Springer Berlin/Heidelberg]* 2009; 17(5): 355-9. Doi : 10.1007/s10389-009-0272-7.

<http://www.springerlink.com/content/58352477706011t0/>

Chaouachi K. An open letter against plagiarism and plagiarists. *Tabaccologia* 2009; 1: 46-7 [English version]

<http://www.harmattan.fr/index.asp?navig=catalogue&obj=article&no=10155>

Chaouachi K. Narghile smoking keeps researchers in Wonderland. *J Bras Pneumol*. 2009 Aug;35(8) :819-20.

<http://www.ncbi.nlm.nih.gov/pubmed/19750337>

Chaouachi K. A Critique of the WHO's TobReg "Advisory Note" entitled: "Waterpipe Tobacco Smoking: Health Effects, Research Needs and Recommended Actions by Regulators. *Journal of Negative Results in Biomedicine* 2006 (17 Nov); 5:17. doi:10.1186/1477-5751-5-17

<http://www.inrbm.com/content/5/1/17>

Chattopadhyay, A. Emperor Akbar as a healer and his eminent physicians. *Bull Indian Inst Hist Med Hyderabad* 2000, 30(2):151-157.

Council of the European Union. Council recommendations on smoke-free environments of 30 November 2009 (2009/C 296/02). *Official Journal of the European Union* 2009 (5 Dec)

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:C:2009:296:0004:0014:EN:PDF>

Daher N, Saleh R, Jaroudi E, Sheheitli H, Badr T, Sepetdjian E, Al-Rashidi M, Saliba N, Shihadeh A. Comparison of carcinogen, carbon monoxide, and ultrafine particle emissions from narghile waterpipe and cigarette smoking: Sidestream smoke measurements and assessment of second-hand smoke emission factors. *Atmospheric Environment* 2010; 44(1): 8-14.

Dautzenberg, Bertrand & Nau, Jean-Yves : «Tout ce que vous ne savez pas sur la chicha». Paris, Margaux-Orange/OFT (Office Français du Tabagisme), 2007.

<http://www.ofta-asso.fr/index.php/component/content/article/49-les-supports-dinformation-et-de-communication/108-article-de-base-muet>

Diethelm, P, McKee, M. Denialism: what is it and how should scientists respond? *Eur J Public Health*. 2009; 19:2-4.

<http://eurpub.oxfordjournals.org/cgi/eletters/19/1/2#114>

Diethelm P. Narguilé : attention, danger ! Dossier 07-003 - 2007-05-29. *OxyGenève* 2007 (May). [OxyGenève - Narguilé : attention, danger! « Pour une Genève où il fait bon respirer » (Dossier 07-003 - 2007-05-29)]

<http://www.oxygeneve.ch/dossier.php?id=67> (accessed 31 Jan 2009)

Eissenberg T, Shihadeh A. Waterpipe tobacco and cigarette smoking direct comparison of toxicant exposure. *Am J Prev Med.* 2009 Dec;37(6):518-23.

FCTC (Framework Convention for Tobacco Control)

<http://www.who.int/fctc/en/>

Fromme H, Dietrich S, Heitmann D, Dressel H, Diemer J, Schulz T, Jörres RA, Berlin K, Völkel W. Indoor air contamination during a waterpipe (narghile) smoking session. *Food Chem Toxicol.* 2009 Jul;47(7):1636-41.

<http://dx.doi.org/10.1016/j.fct.2009.04.017>

Gatrad R, Gatrad A, Sheikh A. Hookah smoking. *BMJ* 2007 Jul 7;335(7609):20.

<http://bmj.com/cgi/eletters/335/7609/20#210647>

Globalink, the world antismoking network of about 6,000 activists around the world, sponsored by the pharmaceutical industry (Pfizer laboratories among others)

<http://www.globalink.org>

Maziak W, Ward K, Eissenberg T. Interventions for waterpipe smoking cessation. *Cochrane*

Maziak W, Rastam S, Ibrahim I, Ward KD, Eissenberg T. Waterpipe-associated particulate matter emissions. *Nicotine Tob Res.* 2008 Mar;10(3):519-23.

Mesbah, Rana. Pfizer sponsors 14th World Conference on Tobacco or Health. *Ameinfo.com* (The ultimate Middle East business resource) 2009 (10 Mar)

<http://www.ameinfo.com/187985.html>

Neander, Johann (Johannem Neandrum): *Tabacologia : hoc est Tabaci, seu nicotianæ descriptio medico-chirurgico-pharmaceutica vel ejus præparatio et usus in omnibus ferme corporis humani incomodis.* Leiden, Elzevier, 1626.

Proctor RN. Angel H Roffo: the forgotten father of experimental tobacco carcinogenesis. *Bull World Health Organ.* 2006 Jun;84(6):494-6.

Schwartz Michael, Holland Joshua, Baker Luke, al-Nazzal Maki, Jamail Dahr. Over One Million Iraqi Deaths Caused by US Occupation. *Voltaire* (Non-Aligned Press Network) 2010 (21Feb)[(News Story selected by Project Censored in 2009)]

<http://www.voltairenet.org/article164179.html>

Snowdon, Chris. Shisha Madness: BBC and Department of Health accused of "gross exaggeration" in shisha story. 25 Aug 2009.

http://www.velvetgloveironfist.com/shisha_bbc_worse_than_cigarettes.php

Van Der Merwe NJ: Cannabis Smoking in 13th-14th Century Ethiopia: Chemical Evidence. In *World Anthropology: Cannabis and Culture.* Edited by Vera Rubin: Mouton Publ. (The Hague); 1975: 77-80.

WCTOH. 14th World Congress on Tobacco or Health (WCTOH), Mumbai, India, 8-12 March 2009. Sponsored by Pfizer.

<http://www.14wctoh.org/sponsors.asp>