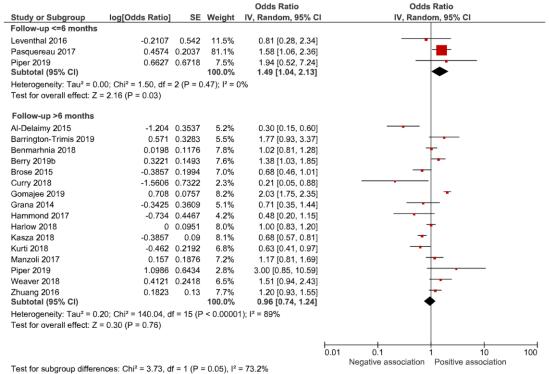
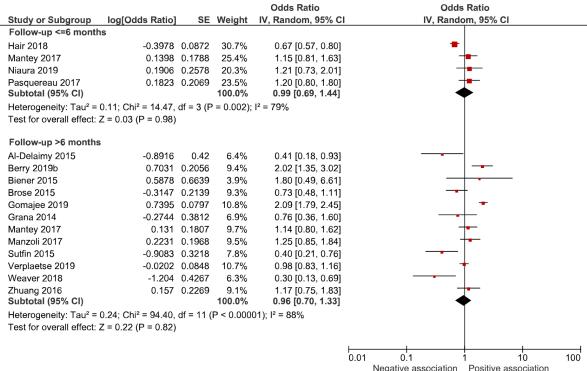
Supplementary figures & tables

Figure S1. E-cigarette use and subsequent smoking cessation in cohort studies with a short (≤6 months) or a long (>6 months) follow up time. Meta-analysis of a) unadjusted and b) adjusted odds of smoking cessation among e-cigarette users compared with non-e-cigarette users.

a)



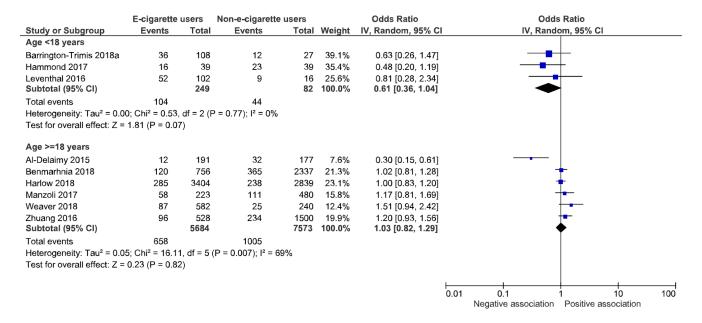
b)



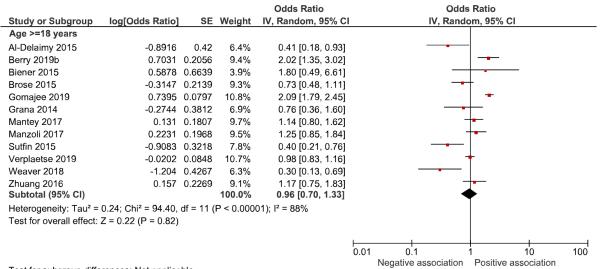
Test for subgroup differences: Chi² = 0.02, df = 1 (P = 0.90), $I^2 = 0\%$

Figure S2. E-cigarette use and subsequent smoking cessation in cohort studies among adolescents (<18 years old) or adults (≥18 years old). Meta-analysis of a) unadjusted and b) adjusted odds of smoking cessation among e-cigarette users compared with non-e-cigarette users.

a)



b)



Test for subgroup differences: Not applicable

Figure S3. E-cigarette use and subsequent smoking cessation in cohort studies among women and men. Meta-analysis of adjusted odds of smoking cessation among e-cigarette users compared with non-e-cigarette users.

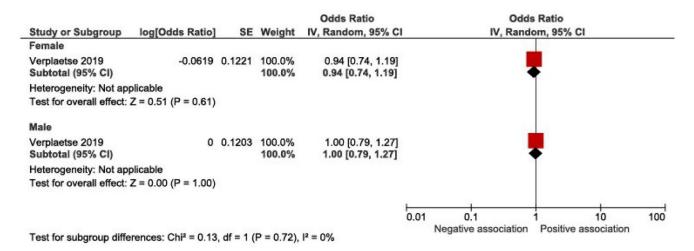


Figure S4. E-cigarette use and subsequent smoking cessation in RCTs with a short (≤6 months) or a long (>6 months) follow up time. Meta-analysis of odds of smoking cessation among e-cigarette users compared with non-e-cigarette users.

	E-cigarette	users	Non-e-cigarett	e users		Odds Ratio		Odds	Ratio	
Study or Subgroup	Events	Total	Events	Total	Weight	IV, Random, 95% CI	I	IV, Rando	om, 95% CI	
Follow-up<=6 month	าร									
Bullen 2013	24	362	17	295	12.6%	1.16 [0.61, 2.20]		_	-	
Carpenter 2017	3	46	1	22	1.0%	1.47 [0.14, 14.95]		-	•	
Hajek 2019	158	438	115	446	62.2%	1.62 [1.22, 2.17]			-	
Holliday 2019	6	40	2	40	1.9%	3.35 [0.63, 17.74]		_	-	
Lee 2018	5	20	1	10	1.0%	3.00 [0.30, 29.94]				
Masiero 2019	28	140	6	70	5.9%	2.67 [1.05, 6.78]			-	
Walker 2019	202	999	14	125	15.5%	2.01 [1.13, 3.58]				
Subtotal (95% CI)		2045		1008	100.0%	1.69 [1.35, 2.12]			◆	
Total events	426		156							
Heterogeneity: Tau2 =	= 0.00; Chi ² = 3	3.55, df =	6 (P = 0.74); I ² =	0%						
Test for overall effect:	: Z = 4.52 (P <	0.00001)							
Follow-up >6 month	IS									
Hajek 2019	146	438	98	446	100.0%	1.78 [1.32, 2.40]				
Subtotal (95% CI)		438		446	100.0%	1.78 [1.32, 2.40]			◆	
Total events	146		98							
Heterogeneity: Not ap	oplicable									
Test for overall effect:	: Z = 3.76 (P =	0.0002)								
							0.01	0.1	1 10	100
							N	legative association	Positive association	

Figure S5. E-cigarette use and subsequent smoking cessation in RCTs among adults (≥18 years). Meta-analysis of odds of smoking cessation among e-cigarette users compared with non-e-cigarette users.

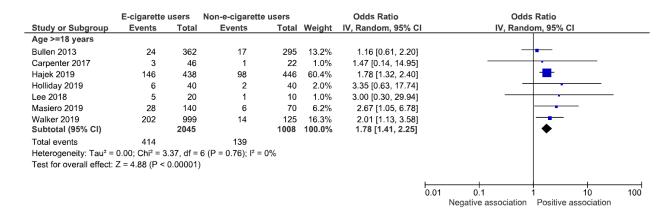


Figure S6. E-cigarette use and subsequent smoking cessation for at least 30 days in cohort studies with short (≤6 months) or a long (>6 months) follow-up time. Meta-analysis of a) unadjusted and b) adjusted odds of smoking cessation for at least 30 days among e-cigarette users compared with non-e-cigarette users.

a)

	E-cigarette	users	Non-e-cigarette	users		Odds Ratio	Odds Ratio
Study or Subgroup	Events	Total	Events	Total	Weight	IV, Random, 95% CI	IV, Random, 95% CI
Follow-up <=6 months							
Leventhal 2016	52	102	9	16	100.0%	0.81 [0.28, 2.34]	-
Subtotal (95% CI)		102		16	100.0%	0.81 [0.28, 2.34]	
Total events	52		9				
Heterogeneity: Not applica	able						
Test for overall effect: Z =	0.39 (P = 0.7	0)					
Follow-up > 6 months							
Al-Delaimy 2015	12	191	32	177	7.1%	0.30 [0.15, 0.61]	
Barrington-Trimis 2018a	36	108	12	27	5.3%	0.63 [0.26, 1.47]	
Benmarhnia 2018	120	756	365	2337	18.9%	1.02 [0.81, 1.28]	+
Hammond 2017	16	39	23	39	4.9%	0.48 [0.20, 1.19]	
Harlow 2018	285	3404	238	2839	20.3%	1.00 [0.83, 1.20]	†
Manzoli 2017	58	223	111	480	14.4%	1.17 [0.81, 1.69]	 -
Weaver 2018	87	582	25	240	11.4%	1.51 [0.94, 2.42]	-
Zhuang 2016	96	528	234	1500		1.20 [0.93, 1.56]]-
Subtotal (95% CI)		5831		7639	100.0%	0.96 [0.77, 1.20]	•
Total events	710		1040				
Heterogeneity: Tau ² = 0.0	6; Chi ² = 20.1	7, df = 7	$(P = 0.005); I^2 = 6$	5%			
Test for overall effect: Z =	0.34 (P = 0.7	3)					
						H	
						(0.01 0.1 1 10 100
							Negative association Positive association

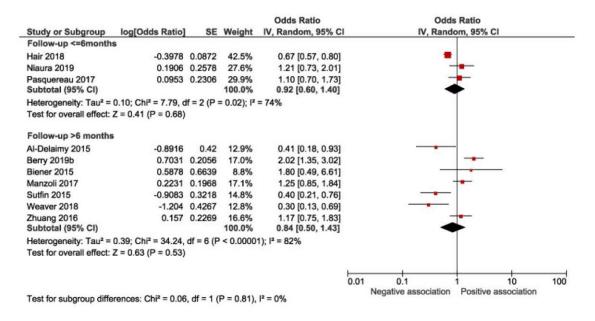


Figure S7. E-cigarette use and subsequent smoking cessation for at least 30 days in cohort studies among adolescents (<18 years old) or adults (≥18 years). Meta-analysis of a) unadjusted and b) adjusted odds of smoking cessation for at least 30 days among e-cigarette users compared with non-e-cigarette users. For the adjusted analyses (b), only studies of adults were available.

a)

	E-cigarette	us er s	Non-e-cigarette	e users		Risk Difference	Risk Difference
Study or Subgroup	Events	Total	Events	Total	Weight	IV, Random, 95% C	I IV, Random, 95% CI
Age <18 years							
Barrington-Trimis 2018a	36	108	12	27	39.5%	-0.11 [-0.32, 0.10]	
Hammond 2017	16	39	23	39	35.7%	-0.18 [-0.40, 0.04]	
Leventhal 2016	52	102	9	16	24.8%	-0.05 [-0.31, 0.21]	
Subtotal (95% CI)		249		82	100.0%	-0.12 [-0.25, 0.01]	•
Total events	104		44				
Heterogeneity: Tau ² = 0.0	0; Chi ² = 0.55,	df = 2 (F	$P = 0.76$); $I^2 = 0\%$				
Test for overall effect: Z =	1.82 (P = 0.0	7)					
Age >=18 years							
Al-Delaimy 2015	12	191	32	177	10.9%	-0.12 [-0.18, -0.05]	
Benmarhnia 2018	120	756	365	2337	20.5%	0.00 [-0.03, 0.03]	†
Harlow 2018	285	3404	238	2839	25.0%	-0.00 [-0.01, 0.01]	•
Manzoli 2017	58	223	111	480	10.4%	0.03 [-0.04, 0.10]	 -
Weaver 2018	87	582	25	240	15.1%	0.05 [-0.00, 0.09]	-
Zhuang 2016	96	528	234	1500	18.1%	0.03 [-0.01, 0.06]	<u>†</u>
Subtotal (95% CI)		5684		7573	100.0%	0.00 [-0.03, 0.03]	♦
Total events	658		1005				
Heterogeneity: Tau ² = 0.0	0; Chi² = 17.86	6, df = 5	$(P = 0.003); I^2 = 7$	72%			
Test for overall effect: Z =	0.15 (P = 0.8	B)					
							-1 -0.5 0 0.5
							Negative association Positive association

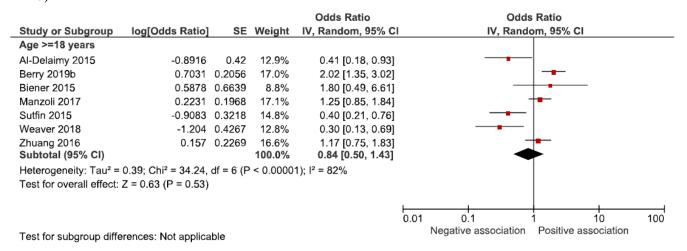


Figure S8. E-cigarette use and subsequent smoking cessation for at least 30 days in RCTs with short (≤6 months) or a long (>6 months) follow-up time. Meta-analysis of odds of smoking cessation for at least 30 days among e-cigarette users compared with non-ecigarette users.

	E-cigarette	users	Non-e-cigarette	users		Odds Ratio	Odds Ratio
Study or Subgroup	Events	Total	Events	Total	Weight	IV, Random, 95% Cl	IV, Random, 95% CI
Follow-up <=6 mont	hs						
Masiero 2019	28	140	6	70	10.6%	2.67 [1.05, 6.78]	-
Walker 2019	142	999	10	125	20.6%	1.91 [0.97, 3.72]	
Subtotal (95% CI)		1139		195	31.2%	2.14 [1.24, 3.68]	•
Total events	170		16				
Heterogeneity: Tau ² =	0.00; Chi ² = 0	.33, df =	1 (P = 0.57); I ² =	0%			
Test for overall effect:	Z = 2.73 (P =	0.006)					
Follow-up >6 months	s						
Hajek 2019	93	438	53	446	68.8%	2.00 [1.38, 2.89]	-
Subtotal (95% CI)		438		446	68.8%	2.00 [1.38, 2.89]	•
Total events	93		53				
Heterogeneity: Not ap	plicable						
Test for overall effect:	Z = 3.70 (P =	0.0002)					
Total (95% CI)		1577		641	100.0%	2.04 [1.51, 2.77]	•
Total events	263		69				
Heterogeneity: Tau ² =	0.00; Chi ² = 0	.37, df =	2 (P = 0.83); I ² =	0%			0.01 0.1 1 10 100
Test for overall effect:	Z = 4.59 (P <	0.00001)				0.01 0.1 1 10 100 Negative association Positive association
Test for subgroup diffe	erences: Chi² =	= 0.04, di	f = 1 (P = 0.84), I ²	2 = 0%			regative association Fositive association

Figure S9. E-cigarette use and subsequent smoking cessation for at least 30 days in RCTs among adults (≥18 years). Meta-analysis of odds of smoking cessation for at least 30 days among e-cigarette users compared with non-e-cigarette users.

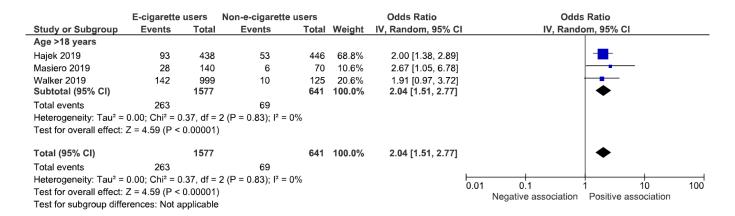


Figure S10A: Publication bias. Funnel plot displaying cohort studies describing unadjusted data for e-cigarette use and subsequent smoking cessation.

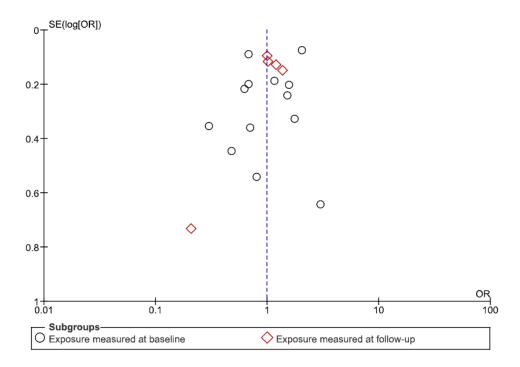


Figure S10B: Publication bias. Funnel plot displaying cohort studies describing adjusted data for e-cigarette use and subsequent smoking cessation.

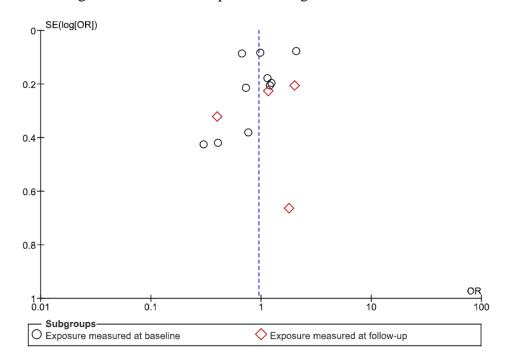


Figure S10C: Publication bias. Funnel plot displaying RCTs describing adjusted data for ecigarette use and subsequent smoking cessation.

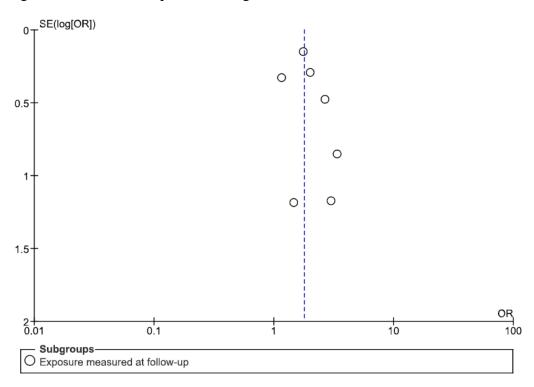


Table S1. Data search

PsycINFO via EBSCO 11 November 2019

Search ter	ms 	Items found					
Electronic	Electronic cigarettes						
1.	DE "Electronic Cigarettes"	1,198					
2.	TX(E-Cig* OR "electronic cig*" OR "e-cig" OR "electronic nicotine" OR "electronic vapour" OR "electronic vapor" OR e-vapour OR e-vapor OR "vaporized nicotine" OR "vaporised nicotine" OR vape OR vaping OR vaper OR ((vapor OR vapour OR vaporizer OR vaporiser) AND (nicotine OR electronic)))	2,543					
3.	1 OR 2	2,543					
Smoking							
4.	DE "Tobacco Smoking" OR DE "Nicotine Withdrawal" OR DE "Smoking Cessation"	35,448					
5.	TX(cigarillo OR cigarillos OR cigarr OR cigars OR ((Combust* OR conventional OR traditional) W3 (cigarette*)) OR dokha* OR "dual use*" OR hookah OR pipe OR smoke OR smoker OR smoking OR "tobacco cigarette" OR "tobacco cigarettes" OR tobacco OR "traditional cigarette" OR "traditional cigarettes" OR "water pipe")	67,845					
6.	4 OR 5	67,918					
Combined	sets & limits						
7.	3 AND 6	1,748					

Cochrane Library via Wiley 11 November 2019 (CDSR)

Search ter	rms	Items found
Electroni	c cigarettes	
1.	[mh "Electronic Nicotine Delivery Systems"] OR [mh "Vaping"]	88
2.	("E-Cigarette" OR "E-Cigarettes" OR "electronic cigarette" OR "electronic cigarettes" OR "e-cig" OR "electronic nicotine delivery" OR "electronic nicotine device" OR "electronic nicotine devices" OR "electronic vapour product" OR e-vapour OR "vaporized nicotine" OR vape OR vaping OR vaper OR vapor):ti,ab	1139
3.	1 OR 2	1146
Smoking		
4.	[mh smoking] OR [mh "pipe smoking"] OR [mh "water pipe smoking"] OR [mh "smoking reduction"] OR [mh "tobacco smoking"] OR [mh "tobacco use disorder"] OR [mh "smoking cessation"] OR [mh "smoking prevention"]	5559
5.	(Cigarillo OR Cigarillos OR Cigarr OR Cigars OR "combustible tobacco" OR "combustible cigarette" OR "combustible cigarettes" OR "conventional cigarettes" OR "conventional cigarettes" OR Dokha* OR "dual user*" OR hookah OR pipe OR smoke OR smoker OR smoking OR "tobacco cigarette" OR "tobacco cigarettes" OR tobacco OR "traditional cigarette" OR "traditional cigarettes" OR "water pipe"):ti,ab	29691
6.	4 OR 5	30001
Combined	l sets	
7.	3 AND 6	21

Embase via Elsevier 11 November 2019

Search ter	rms	Items found
Electronic	cigarettes	
1.	'electronic cigarette'/de OR 'vaping'/de	4,531
2.	("E-Cig*" OR "electr* cigar*" OR "electronic nicotine" OR "electronic vapour product" OR "electronic vapour product" OR (ENDS NEAR/3 nicotine) OR ecigg or ecigarette* OR e-vapour OR e-vapor OR "vaporized nicotine" OR "vaporised nicotine" OR vape OR vaping OR vaper OR vapers):ti,ab OR ((vapor:ti,ab OR vapour:ti,ab OR vaporizer:ti,ab OR vaporiser:ti,ab) AND nicotine:ti,ab)	4,438
3.	1 OR 2	5,062
Smoking		
4.	'smoking'/de OR 'adolescent smoking'/exp OR 'cigar smoking'/exp OR 'cigarette smoking'/exp OR 'pipe smoking'/de OR 'parental smoking'/exp OR 'smoking habit'/exp OR 'smoking cessation'/de OR 'smoking reduction'/de OR 'tobacco'/de OR 'tobacco dependence'/de OR 'tobacco smoke'/de OR 'water pipe'/de	373,309
5.	(cigarillo OR cigarillos OR cigarr OR cigars OR ((Combustible OR conventional) NEAR/3 (cigarette*)) OR dokha* OR "dual user*" OR hookah OR smoke OR smoker OR smoking OR tobacco OR "traditional cigarette" OR "traditional cigarettes" OR "water pipe"):ti,ab	333,456
6.	4 OR5	447,034
Combined	l sets	
7.	3 AND 6	4,383

Medline via OvidSP 11 November 2019

Search ter	rms	Items found
Electronic	cigarettes	
1.	"Electronic Nicotine Delivery Systems"/ OR "Vaping"/	2876
2.	("E-Cigarette" OR "E-Cigarettes" OR "electr* cigar*" OR "e-cig*" OR "electronic nicotine" OR "electronic vapour product" OR (ENDS adj3 nicotine) OR ecigg* or ecigarette* OR e-vapour OR e-vapor OR "vaporized nicotine" OR "vaporised nicotine" OR vape OR vaping OR vaper OR vapers).ti,ab	4857
3.	(vapor OR vapour OR vaporizer OR vaporiser).ti,ab	44656
4.	limit 3 to "pubmed not medline"	19299
5.	1 OR 2 OR 4	24367
Tobacco s	moking	
6.	smoking/ or pipe smoking/ or water pipe smoking/ or smoking reduction/ or exp "tobacco smoking"/ OR "tobacco use disorder"/ OR "smoking Cessation"/ OR "smoking Prevention"/ OR tobacco products/ OR Tobacco, Waterpipe/	162064
7.	(Cigarillo OR Cigarillos OR Cigarr OR Cigars OR ((Combustible OR conventional OR traditional) ADJ3 (cigarette*)) OR Dokha* OR "dual user*" OR hookah OR pipe OR smoke OR smoker OR smoking OR "tobacco cigarette" OR "tobacco cigarettes" OR tobacco OR "water pipe").ti,ab	298349
8.	6 OR 7	340609
Combined	sets and limits	
9.	5 AND 8	4188

Scopus via Elsevier 11 November 2019

Search ter	rms	Items found
Electroni	c cigarettes	
1.	TITLE-ABS-KEY ("E-Cigarette" OR "E-Cigarettes" OR "electronic cigarette" OR "electronic cigarettes" OR "e-cig" OR "electronic nicotine delivery" OR "electronic nicotine device" OR "electronic nicotine devices" OR (electronic PRE/1 vapo*) OR e-vapour OR e-vapor OR "vaporized nicotine" OR "vaporised nicotine" OR vape OR vaping OR vaper)	6,183
Smoking		
2.	TITLE-ABS-KEY (cigarillo OR cigarillos OR cigarr OR cigars OR "combustible tobacco" OR "combusted tobacco" OR "combustible cigarette" OR "conventional cigarettes" OR "conventional cigarettes" OR "conventional cigarette" OR dokha* OR "dual user" OR "dual users" OR hookah OR pipe OR smoke OR smoker OR smoking OR "tobacco cigarette" OR "tobacco cigarettes" OR tobacco OR "traditional cigarette" OR "traditional cigarettes" OR "water pipe")	779,157
Combined	l sets & limits	
3	1 AND 2	5,224

Table S2. Conflict of interest.		
Reference	Conflict of interest/financial disclosures	Declaration of funding ¹
Al-Delaimy WK, Myers MG, Leas EC, Strong DR, Hofstetter CR. Ecigarette use in the past and quitting behavior in the future: a population based study. Am J Public Health 2015;105:1213-9.	NA	NA
Barrington-Trimis J. L., Bello M. S., Liu F., Leventhal A. M., Kong G., Mayer M., et al. Ethnic Differences in Patterns of Cigarette and E-Cigarette Use Over Time Among Adolescents. Journal of Adolescent Health 2019;65:359–65.	The authors have no conflicts of interest to disclose.	Research reported in this publication was supported by grant number [Grant number] ([Author], [Author], [Author], [Author], [Author]) from the National Cancer Institute at the National Institutes of Health (NIH) and the Food and Drug Administration (FDA) Center for Tobacco Products (CTP), and grant numbers [Grant number] ([Author]), [Grant number] ([Author], [Author], [Grant number] ([Author]), [Grant number] ([Author]) from the National Institute on Drug Abuse at NIH, and [Grant number] ([Author]) from

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¹ Information provided in the conflict-of-interest and funding section of the publication. Names of persons have been replaced with [Author] or [Name]. Specific information on funding has been replaced with [Grant number]/ [Award number] or [Project number]. NA: no information available.

		the National Calaria
		the National Science Foundation Graduate
		Research Fellowship
		Program. The funder had
		no role in the design and
		conduct of the study;
		collection, management,
		analysis, or interpretation
		of the data; or
		preparation, review, or
		approval of the article.
Barrington-Trimis J. L., Kong G.,	The authors have no conflicts of	Funding Source:
Leventhal A. M., Liu F., Mayer M.,	interest relevant to this article to	Research reported in this
Cruz T. B., et al. E-cigarette Use and	disclose.	publication was supported
Subsequent Smoking Frequency Among	The authors have no financial	by grant number [Grant
Adolescents. Pediatrics 2018;142.	relationships relevant to this	number] ([Author],
	article to disclose.	[Author], [Author],
		[Author], [Author]) from
		the National Cancer
		Institute at the National
		Institutes of Health (NIH)
		and the Food and Drug
		Administration (FDA)
		Center for Tobacco
		Products (CTP), and grant
		numbers [Grant number]
		([Author]), [Grant
		number] ([Author],
		[Author], [Author]), and
		[Grant number]
		([Author]) from the
		National Institute for
		Drug Abuse at NIH. The
		funder had no role in the
		design and conduct of the
		study; collection,
		management, analysis, or
		interpretation of the data;
		or preparation, review, or
		approval of the manuscript.
Ranmarhnia T. Diorgo ID I ago E. White	None declared	•
Benmarhnia T, Pierce JP, Leas E, White MM, Strong DR, Noble ML, et al. Can	Notic declared	This work was supported by funds from the
E-Cigarettes and Pharmaceutical Aids		Tobacco Related Disease
Increase Smoking Cessation and Reduce		Research Program
Cigarette Consumption? Findings From		([Grant number]) and the
a Nationally Representative Cohort of		National Heart,
American Smokers. American Journal of		Lung and Blood Institute
Epidemiology 2018;187:2397-2404.		(Grant [Grant number]).
Berry K. M., Reynolds L. M., Collins J.	None declared.	Research reported in this
M., Siegel M. B., Fetterman J. L.,		publication was supported
Hamburg N. M., et al. E-cigarette		by the National Heart,
initiation and associated changes in		Lung, and Blood Institute
smoking cessation and reduction: the		of the National Institutes
Population Assessment of Tobacco and		of Health and the Center
Health Study, 2013-2015. Tobacco		for Tobacco Products
Control 2019;28:42-49.		under Award Number
·	1	

Biener L., Hargraves J. L. A longitudinal study of electronic cigarette use among a population-based sample of adult smokers: association with smoking cessation and motivation to quit. Nicotine & Tobacco Research 2015;17:127-33.	None declared	[Award number]. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health or the Food and Drug Administration. This work was supported by a grant from the US National Cancer Institute, grant [Grant number].
Brose L. S., Hitchman S. C., Brown J., West R., McNeill A. Is the use of electronic cigarettes while smoking associated with smoking cessation attempts, cessation and reduced cigarette consumption? A survey with a 1-year follow-up. Addiction 2015;110:1160-8.	[Author] has received an unrestricted grant from Pfizer, [Author]. undertakes research and consultancy and receives fees for speaking from companies that develop and manufacture smoking cessation aids (Pfizer, J&J, McNeil, GSK, Nabi, Novartis and Sanofi-Aventis). [Author], [Author] and [Author] have no relationships with companies that might have an interest in the submitted work. There are no other financial relationships with any organizations that might have an interest in the submitted work, particularly electronic cigarette companies, and there are no other relationships or activities that could appear to have influenced the submitted work.	All authors are part of the UK Centre for Tobacco and Alcohol Studies, a UK Clinical Research Collaboration Public Health Research: Centre of Excellence. Funding from the Medical Research Council, British Heart Foundation, Cancer Research UK, Economic and Social Research Council and the National Institute for Health Research under the auspices of the UK Clinical Research Collaboration is gratefully acknowledged ([Grant number]). The funders played no role in the study design, collection, analysis and interpretation of the data, in the writing of the manuscript and in the decision to submit this manuscript for publication. We are grateful to the International Tobacco Control Policy Evaluation Project for the use of some of their questions on e-cigarettes and to Ipsos MORI for their support.
Bullen C., Howe C., Laugesen M., McRobbie	We declare that we have received no support from any companies for the submitted work and have no	The e-cigarettes and cartridges were Elusion brand products provided by PGM International,

H., Parag V., Williman J., et al.	non-financial interests that might	New Zealand. PGM
Electronic cigarettes for smoking	be	International
cessation: a	relevant to the submitted work.	had no role in the study
cessation: a randomised controlled trial. Lancet 2013;382:1629-37.	relevant to the submitted work. [Author], via his company Health New Zealand, previously did research funded by Ruyan (an ecigarette manufacturer). [Author] and [Author] have done research on Ruyan e-cig arettes funded by Health New Zealand, independently of Ruyan. [Author] has received honoraria for speaking at research symposia, has received benefits in kind and travel support from, and has provided consultancy to, the manufacturers of smoking cessation drugs. [Author] has provided consultancy to the manufacturers of smoking cessation drugs, received honoraria for speaking at a research meeting and received benefits in kind and travel support from a manufacturer of smoking cessation drugs. [Author] has provided consultancy to the manufacturers of smoking	had no role in the study design, data collection, data analysis, data interpretation, or writing of this report.
Carpenter M. J., Heckman B. W., Wahlquist A. E., Wagener T. L., Goniewicz M. L., Gray K. M., et al. A Naturalistic, Randomized Pilot Trial of E-Cigarettes: Uptake, Exposure, and Behavioral Effects. Cancer Epidemiology, Biomarkers & Prevention 2017;26:1795- 1803.	cessation medications. [Author] is a consultant/advisory board member for Johnson & Johnson. [Author] reports receiving a commercial research grant from and is a consultant/advisory board member for Pfizer Inc., and has provided expert witness testimony for various plaintiffs in lawsuits involving cigarette manufacturers. No potential conflicts of interest were disclosed by the other authors.	Support was provided by NIH [Grant number] (to [Author]), [Grant number] (to [Author], [Author], and [Author], [Grant number], and [Grant number]. [Author]'s laboratory is supported via [Grant number]. [Author] is supported via [Grant number] and [Grant number]. [Author]'s effort is partially supported by the Oklahoma Tobacco Research Center, which is funded by the Oklahoma Tobacco Settlement Endowment Trust.
Chen J. C. Flavored E-cigarette Use and Cigarette Smoking Reduction and Cessation- A Large National Study among Young Adult Smokers. Substance Use & Misuse 2018;53:2017-2031.	The author report no conflicts of interest. The author alone is responsible for the content and writing of the article.	NA

Curry E., Nemeth J. M., Wermert A., Conroy S., Shoben A., Ferketich A. K., et al. A descriptive report of electronic cigarette use after participation in a community-based tobacco cessation trial. Nicotine & Tobacco Research 2018;20:135-9.	None declared.	This study was supported by NIH grants [Grant number] and [Grant number].
Flacco M. E., Ferrante M., Fiore M., Marzuillo C., La Vecchia C., Gualano M. R., et al. Cohort study of electronic cigarette use: Safety and effectiveness after 4 years of follow-up. European Review for Medical and Pharmacological Sciences 2019;23:402-12.	None of the authors declare any potential conflict of interests.	The first two years of the study were unfunded. The last two years of follow-up were funded by a research grant from the University of Catania and through crowdfunding (Kickstarter project titled "E-cigarette long-term efficacy and safety: a study to complete"). Besides 7 authors ([Author], [Author], [Author], [Author], [Author], [Author], [Author], and 7 anonymous contributors, who donated a total of €565 and €80, respectively, all other contributors are private citizens who had no role in any phase of the study. We are indebted with all of them: [Name], [Na
Gomajee R., El-Khoury F., Goldberg M., Zins M., Lemogne C., Wiernik E., et al. Association between Electronic Cigarette Use and Smoking Reduction in France. JAMA Internal Medicine 2019;179:1193-1200.	[Author] reported receiving personal fees from Janssen-Qlag, personal fees and nonfinancial support from Lundbeck. and nonfinancial support from Otsuka Pharmaceutical outside the submitted work. [Author], [Author], [Author], and [Author] reported receiving grants from INCA during the conduct of the study. No other disclosures were reported.	The CONSTANCES (Consultants des Centres d'Examens de Sante) Cohort Study was supported and funded by the Caisse nationals d'assu ranee maladie des travailleurs salaries. The CONSTANCES Cohort Study is an "Infrastructure nationale en Biologie et Sante" Is funded by grant [Grant

		number] from Agence Nationale de la Recherche. CONSTANCES is also partly funded by MSD, AstraZeneca, and Lundbeck. The present analyses were supported by grant [Grant number] from Institut National du Cancer. The funding sources had no role in the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication.
Grana R. A., Popova L., Ling P. M. A longitudinal analysis of electronic cigarette use and smoking cessation. JAMA Internal Medicine 2014;174:812-3.	None reported.	Data originate from a study funded by the National Cancer Institute: [Grant number] (to [Author]. and [Author]). [Author] is supported by Tobacco-Related Disease Research Program (TRDRP) grant [Grant number]. The funders had no role in the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication.
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Hajek P., Phillips-Waller A., Przulj D., Pesola F., Myers Smith K., Bisal N., et al. A Randomized Trial of E-Cigarettes versus Nicotine-Replacement Therapy. New England Journal of Medicine 2019;380:629-37.	[Author] reports personal fees from Johnson & Johnson, outside the submitted work. [Author] reports personal fees from Johnson and Johnson, outside the submitted work. [Author] reports grants and personal fees from Pfizer, outside	Supported by the National Institute for Health Research (NIHR) Health Technology Assessment Programme (project number, [Project number]) and by a grant

the submitted work. [Author] reports grants from NCCHTA, during the conduct of the study.	[Grant number] from the Cancer Research UK Prevention Trials Unit.
[Author] reports grants from NIHR HTA programme, during the conduct of the study; personal	
fees from Pfizer, personal fees from Johnson & Johnson, outside the submitted work. [Author] reports grants from Pfizer, outside the submitted work.	
None declared.	The COMPASS study was supported by a bridge grant from the Canadian Institutes of Health Research (CIHR) Institute of Nutrition, Metabolism and Diabetes through the Obesity — Interventions to Prevent or Treat priority funding awards ([Award number], awarded to [Author]) and an operating grant from the CIHR Institute of Population and Public Health ([Grant number], awarded to [Author]). Additional support for this paper was provided by an Ontario Ministry of Health and Long-Term Care Health Systems Research Fund grant ([Grant number], awarded to [Author]), a CIHR New Investigator Award (awarded to [Author]), a CIHR Doctoral Research Award — Frederick Banting and Charles Best Canada Graduate Scholarship (awarded to [Author]) and CIHR Public Health Agency of Canada Chairs in Applied Public Health (awarded to [Author] and [Author]). The researchers are independent from all sources of funding; the study sponsors had no role in study design; the collection, analysis or interpretation of data; the

		the decision to submit it for publication.
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Holliday R., Preshaw P. M., Ryan V., Sniehotta F. F., McDonald S., Bauld L., et al. A feasibility study with embedded pilot randomised controlled trial and process evaluation of electronic cigarettes for smoking cessation in patients with periodontitis. Pilot & Feasibility Studies 2019;5:74.	The authors declare that they have no competing interests.	[Author] is funded by a National Institute for Health Research Doctoral Research Fellowship ([Grant umbner]). This paper presents independent research funded by the National Institute for Health Research (NIHR). The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health and Social Care
Kasza K. A., Borek N., Conway K. P., Goniewicz M. L., Stanton C. A., Sharma E., et al. Transitions in Tobacco Product Use by U.S. Adults between 2013-2014 and 2014-2015: Findings from the PATH Study Wave 1 and Wave 2. International Journal of Environmental Research & Public Health 2018;15:09.	[Author] reports long-term stock holdings in General Electric, the 3M Companies, and Pfizer Incorporated, unrelated to this manuscript; [Author] has received grant funding from Pfizer, Inc., to study the impact of a hospital-based tobacco cessation intervention. [Author] also receives funding as an expert witness in litigation filed against the tobacco industry; [Author] receives fees for serving on an advisory board from Johnson & Johnson and grant support from Pfizer outside of the submitted work; [Author] reports having been a witness for plaintiffs vs. tobacco companies, receiving speaker fees, receiving honoraria, sitting on advisory boards, being a site PI, and consulting for pharmaceutical company testing and marketing smoking cessation aids, but not in the last six years.	This manuscript is supported with Federal funds from the National Institute on Drug Abuse, National Institutes of Health, and the Center for Tobacco Products, Food and Drug Administration, Department of Health and Human Services, under a contract to Westat [Contract number].

	[Author] has a Senior Investigator Award from the Ontario Institute for Cancer Research and Prevention Scientist Award from the Canadian Cancer Society Research Institute. [Author] reports preparing this article while employed at the NIH/National Institute on Drug Abuse. No other potential conflict of interest relevant to this manuscript was reported.	
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Lee S. H., Ahn S. H., Cheong Y. S. Effect of Electronic Cigarettes on Smoking Reduction and Cessation in Korean Male Smokers: A Randomized Controlled Study. Journal of the American Board of Family	None declared	by the Center for the Evaluation and Coordination of Training and Research for Tobacco Regulatory Science ([Grant number]). None
Medicine: JABFM 2019;32:567-74. Lee S. M., Tenney R., Wallace A. W., Arjomandi M. E-cigarettes versus nicotine patches for perioperative smoking cessation: a pilot randomized trial. PeerJ 2018;6:e5609.	The authors declare there are no competing interests.	This work was funded by internal UCSF Department of Anesthesia and Perioperative Care funds (San Francisco, California, United States of America) and the UCSF Resource Allocation Program grant, administered by the Helen Diller Family Comprehensive Cancer Center developmental funds from the National Cancer Institute Cancer Center Support Grant ([Grant number]). Ecigarettes were purchased from NJOY using these funds. NJOY had no involvement in the design, execution, or analysis of the study. The funders had no role in study design, data collection and analysis, decision to publish, or preparation of the manuscript.
Leventhal A. M., Stone M. D., Andrabi N., Barrington-Trimis J., Strong D. R., Sussman S., et al. Association of e-Cigarette Vaping and Progression to Heavier Patterns of Cigarette Smoking. JAMA 2016;316:1918–20.	The authors have completed and submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest and none were reported.	This research was supported by grants [Grant number] and [Grant number] from the National Institutes of Health. The National Institutes of Health had no role in the design and conduct of the study; collection, management, analysis,

		and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication.
Leventhal A. M., Strong D. R., Kirkpatrick M. G., Unger J. B., Sussman S., Riggs N. R., et al. Association of Electronic Cigarette Use With Initiation of Combustible Tobacco Product Smoking in Early Adolescence. JAMA 2015;314:700–7.	The authors have completed and submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest and none were reported.	This research was supported by grants [Grant number] and [Grant number] from the National Institutes of Health. The National Institutes of Health had no role in the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication.
Mantey D. S., Cooper M. R., Loukas A., Perry C. L. E-cigarette Use and Cigarette Smoking Cessation among Texas College Students. American Journal of Health Behavior 2017;41:750-59.	No conflicts of interest to declare.	Research reported in this presentation was supported by grant number [Grant number] from the National Cancer Institute and the FDA Center for Tobacco Products (CTP). The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH or the Food and Drug Administration.
Manzoli L., Flacco M. E., Ferrante M., La Vecchia C., Siliquini R., Ricciardi W., et al. Cohort study of electronic cigarette use: effectiveness and safety at 24 months. Tobacco Control 2017;26:284-92.	None declared	The first 2 years of the study were unfunded. The next 3 years of follow-up are going to be funded through crowdfunding (Kickstarter project titled 'E-cigarette longterm efficacy & safety: a study to complete'). Besides seven authors ([Author], [Author], [Author], [Author], [Author], [Author], and seven anonymous contributors, who donated a total of €515 and €80, respectively, all other contributors are private

		citizens. The authors are indebted to all of them: [Name], [Name] and Name].
Masiero M., Lucchiari C., Mazzocco K., Veronesi G., Maisonneuve P., Jemos C., et al. E-cigarettes May Support Smokers With High Smoking-Related Risk Awareness to Stop Smoking in the Short Run: Preliminary Results by Randomized Controlled Trial. Nicotine & Tobacco Research 2019;21:119-26.	The authors declare no conflicts of interest.	This study was supported by a grant from Fondazione Umberto Veronesi (FUV).
Niaura R., Rich I., Johnson A. L., Villanti A. C., Romberg A. R., Hair E. C., et al. Young Adult Tobacco and E- cigarette Use Transitions: Examining Stability using Multi-State Modeling. Nicotine & Tobacco Research 2019;01:01.	[Author] receives funding from the Food and Drug Administration Center for Tobacco Products via contractual mechanisms with Westat and the National Institutes of Health. Within the past 3 years, he has served as a paid consultant to the Government of Canada via a contract with Industrial Economics Inc and has received an honorarium for a virtual meeting from Pfizer Inc. The other authors have no conflicts of interest to disclose.	This study was funded by Truth Initiative, but the views in this article do not necessarily represent those of Truth Initiative.
O'Brien B., Knight-West O., Walker N., Parag V., Bullen C. E-cigarettes versus NRT for smoking reduction or cessation in people with mental illness: secondary analysis of data from the ASCEND trial. Tobacco Induced Diseases 2015;13:5.	We declare that we have received no support from any companies for the submitted work and have no non-financial interests that might be relevant to the submitted work. [Author] has undertaken research on Ruyan e-cigarettes funded by Health NZ, independently of Ruyan. [Author] has provided consultancy to the manufacturers of smoking cessation drugs, received honoraria for speaking at a research meeting and received benefits in kind and travel support from a manufacturer of smoking cessation drugs.	Funding for this study was provided by the Health Research Council of NZ Grant ([Grant number]); the Health Research Council had no further role in study design; in the collection, analysis and interpretation of data; in the writing of the report; or in the decision to submit the paper for publication.

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Walker N., Parag V., Verbiest M., Laking G., Laugesen M., Bullen C. Nicotine patches used in combination with e- cigarettes (with and without nicotine) for smoking cessation: a pragmatic, randomized trial. The Lancet Respiratory Medicine 2020;8:54-64.	[Author], [Author], [Author], [Author], [Author], [Author], and [Author] report grants from the Health Research Council of New Zealand, during the conduct of the study. [Author], [Author], [Author], and [Author] report grants from Pfizer, outside of the submitted work. [Author] chairs the organisation End Smoking New Zealand, which advocates for harm reduction approaches to tobacco control. Ecigarettes were purchased from a New Zealand e-cigarette online retailer (NZVAPOR, https://www.nzvapor.com/), eliquid	Health Research Council of New Zealand. The sponsor of the study had no role in the study design, data collection, data analysis, data interpretation, or writing of the report.

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	was purchased from Nicopharm, Australia (https://www.nicopharm.com.au/), and nicotine patches were supplied by the New Zealand Government via their contract with Novartis (Sydney, Australia). NZVAPOR also provided, at no cost to participants, on-line and phone support regarding use of the ecigarettes. Neither NZVAPOR nor Nicopharm have links with the tobacco industry. None of the above parties had any role in the design, conduct, analysis, or interpretation of the trial findings, or writing of this publication.	
Weaver S. R., Huang J., Pechacek T. F., Heath J. W., Ashley D. L., Eriksen M. P. Are electronic nicotine delivery systems helping cigarette smokers quit? Evidence from a prospective cohort study of U.S. adult smokers, 2015-2016. PLoS ONE 2018;13:e0198047.	[Author] has received funding in the form of grant funding from Pfizer and the National Institutes of Health (NIH). [Author] has served as a paid consultant to the Centers for Disease Control and Prevention (CDC), Office on Smoking and Health and has received funding in the form of grant funding from NIH. [Author] has received funding in the form of grant funding from NIH. Before his retirement in June 2017, [Author] was employed as Director of the Food and Drug Administration, Center for Tobacco Products, Office of Science. Before his retirement in 2014, [Author] was employed as Deputy Director of the Translation of the CDC, Office on Smoking and Health. This does not alter our adherence to PLOS ONE policies on sharing data and materials.	This study was supported by grant number [Grant number] (to [Author]) from the National Institutes of Health, National Institute of Drug Abuse (NIH/NIDA) and Food and Drug Administration, Center for Tobacco Products (FDA CTP). The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH or the Food and Drug Administration. The funder had no role in study design, data collection and analysis, decision to publish, or preparation of the manuscript.

Verplaetse T. L., Moore K. E., Pittman B. P., Roberts W., Oberleitner L. M., Peltier M. K. R., et al. Intersection of E-Cigarette Use and Gender on Transitions in Cigarette Smoking Status: Findings Across Waves 1 and 2 of the Population Assessment of Tobacco and Health Study. Nicotine and Tobacco Research 2019;21:1423-28.	None declared.	This work was supported by National Institutes of Health (NIH) grant [Grant number] ([Author]).
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Table S3. Full length articles excluded on relevance	
Reference	Reason for exclusion ²
Adriaens K., Van Gucht D., Declerck P., Baeyens F. Effectiveness of the electronic cigarette: An eight-week Flemish study with six-month follow-up on smoking reduction, craving and experienced benefits and complaints. International Journal of Environmental Research & Public Health 2014;11:11220-48.	Study duration
Akinboro O., Nwabudike S., Elias R., Balasire O., Ola O., Ostroff J. S. Electronic Cigarette Use among Survivors of Smoking-Related Cancers in the United States. Cancer Epidemiology, Biomarkers & Prevention 2019;09:09.	Study design
Al-Delaimy W. K., Myers M. G., Leas E. C., Strong D. R., Hofstetter C. R. 'E-cigarette use in the past and quitting behavior in the future: A population-based study': Erratum. American Journal of Public Health 2015;105:e7 □ e7.	Publication type

² Only one reason for exclusion is listed per study, but several may be present.

Aleyan S., Gohari M. R., Cole A. G., Leatherdale S. T. Exploring the Bi-Directional Association between Tobacco and E-Cigarette Use among Youth in Canada. International Journal of Environmental Research & Public Health [Electronic Resource] 2019;16:01.	Outcome
Anic G. M., Holder-Hayes E., Ambrose B. K., Rostron B. L., Coleman B., Jamal A., et al. E-cigarette and Smokeless Tobacco Use and Switching Among Smokers: Findings From the National Adult Tobacco Survey. American Journal of Preventive Medicine 2018;54:539–51.	Study design
Anic G. M., Sawdey M. D., Jamal A., Trivers K. F. Frequency of Use Among Middle and High School Student Tobacco Product Users – United States, 2015–2017. MMWR – Morbidity & Mortality Weekly Report 2018;67:1353–57.	Study design
Arrazola R. A., Singh T., Corey C. G., Husten C. G., Neff L. J., Apelberg B. J., et al. Tobacco use among middle and high school students – United States, 2011–2014. MMWR – Morbidity & Mortality Weekly Report 2015;64:381–5.	Study design
Audrain-McGovern J., Stone M. D., Barrington-Trimis J., Unger J. B., Leventhal A. M. Adolescent E-Cigarette, Hookah, and Conventional Cigarette Use and Subsequent Marijuana Use. Pediatrics 2018;142.	Outcome
Auf R., Trepka M. J., Selim M., Ben Taleb Z., De La Rosa M., Bastida E., et al. E-cigarette use is associated with other tobacco use among US adolescents. International Journal of Public Health 2019;64:125–34.	Study design
Azagba S., Baskerville N. B., Foley K. Susceptibility to cigarette smoking among middle and high school e-cigarette users in Canada. Preventive Medicine 2017;103:14–19.	Study design
Azagba S., Latham K., Shan L. Waterpipe tobacco smoking trends among middle and high school students in the United States from 2011 to 2017. Drug and Alcohol Dependence 2019;200:19–25.	Study design
Backinger C. L., Fagan P., O'Connell M. E., Grana R., Lawrence D., Bishop J. A., et al. Use of other tobacco products among U.S. adult cigarette smokers: prevalence, trends and correlates. Addictive Behaviors 2008;33:472–89.	Study design
Baldassarri S. R., Bernstein S. L., Chupp G. L., Slade M. D., Fucito L. M., Toll B. A. Electronic cigarettes for adults with tobacco dependence enrolled in a tobacco treatment program: A pilot study. Addictive Behaviors 2018;80:1–5.	Study design
Bandara N. A., Seneviratne M. Adolescents' Electronic Cigarette Use. Pediatrics 2019;143:01.	Publication type
Barrington-Trimis J. L., Liu F., Unger J. B., Alonzo T., Cruz T. B., Urman R., et al. Evaluating the predictive value of measures of susceptibility to tobacco and alternative tobacco products. Addictive Behaviors 2019;96:50–55.	Exposure
Barrington-Trimis J. L., Urman R., Leventhal A. M., Gauderman W. J., Cruz T. B., Gilreath T. D., et al. E-cigarettes, Cigarettes, and the Prevalence of Adolescent Tobacco Use. Pediatrics 2016;138:08.	Study design

Beard E., Brown J., McNeill A., Michie S., West R. Has growth in electronic cigarette use by smokers been responsible for the decline in use of licensed nicotine products? Findings from repeated cross-sectional surveys. Thorax 2015;70:974 - 8. Beard E., Brown J., Michie S., West R. Is prevalence of e-cigarette and nicotine replacement therapy use among smokers associated with average cigarette consumption in England? A time-series analysis. BMJ Open 2018;8:e016046. Beard E., West R., Michie S., Brown J. Association between electronic cigarette use and changes in quit attempts, success of quit attempts, use of smoking cessation pharmacotherapy, and use of stop smoking services in England: time series analysis of population trends. BMJ 2016;354:i4645. Beard E., West R., Michie S., Brown J. Association of prevalence of electronic cigarette use with smoking cessation and cigarette consumption in England: a time series analysis between 2006 and 2017. Addiction 2019;16:16. Benowitz N. L. E-cigarettes and dual nicotine replacement therapy for smoking cessation. The Lancet Respiratory Medicine 2019;09:09. Bianco C. L., Pratt S. I., Ferron J. C., Brunette M. F. Electronic Cigarette Use During a Randomized Trial of Interventions for Smoking Cessation Among Medicaid Beneficiaries with Mental Illness. Journal of Dual Diagnosis 2019;15:184—191. Biglan A., Duncan T. E., Ary D. V., Smolkowski K. Peer and parental influences on adolescent tobacco use. Journal of Behavioral Medicine 1995;18:315—330. Blank M. L., Hock J., George M., Gendall P., Conner T. S., Thrul J., et al. An Exploration of Smoking-to-Vaping Transition Attempts Using a "Smart" Electronic Nicotine Delivery System. Nicotine & Tobacco Research 2018;06:06. Bold K. W., Kong G., Cavallo D. A., Camenga D. R., Krishnan-Sarin S. Reasons for Trying E-cigarettes and Risk of Continued Use. Pediatrics 2016;138:09. Bordend S. P., Li Y., Burkhalter J. E., Sheffer C. E., Ostroff J. S. Electronic cigarette users and their smoking cessation outcomes. Cameer 2014;120:33		
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Browne M., Todd D. G. Then and now: Consumption and dependence in ecigarette users who formerly smoked cigarettes. Addictive Behaviors 2018;76:113–21.	Outcome
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Camenga D. R., Delmerico J., Kong G., Cavallo D., Hyland A., Cummings K. M., et al. Trends in use of electronic nicotine delivery systems by adolescents. Addictive Behaviors 2014;39:338–40.	Study design
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Carey F. R., Wilkinson A. V., Harrell M. B., Cohn E. A., Perry C. L. Measurement and predictive value of susceptibility to cigarettes, e-cigarettes, cigars, and hookah among Texas adolescents. Addictive Behaviors Reports 2018;8:95–101.	Outcome
Carroll D. M., Wagener T. L., Thompson D. M., Stephens L. D., Peck J. D., Campbell J. E., et al. Electronic nicotine delivery system use behaviour and	Population

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Cha S., Ganz O., Cohn A. M., Ehlke S. J., Graham A. L. Feasibility of biochemical verification in a web-based smoking cessation study. Addictive Behaviors 2017;73:204–8.	Outcome
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Chanchlani N. E-cigarettes: friend or foe? BMJ 2019;364:j5150.	Study design
Chen J. C., Green K. M., Arria A. M., Borzekowski D. L. G. Prospective predictors of flavored e-cigarette use: A one-year longitudinal study of young adults in the U.S. Drug & Alcohol Dependence 2018;191:279–85.	Outcome
Chen P. C., Chang L. C., Hsu C., Lee Y. C. Dual Use of E-Cigarettes and Traditional Cigarettes Among Adolescents in Taiwan, 2014–16. Nicotine & Tobacco Research 2018;02:02.	Study design
Chen P. C., Chang L. C., Hsu C., Lee Y. C. Electronic Cigarette Use and Attempts to Quit Smoking Cigarettes Among Adolescents in Taiwan. Journal of Adolescent Health 2018;04:04.	Study design
Cho J., Goldenson N. I., Stone M. D., McConnell R., Barrington-Trimis J. L., Chou C. P., et al. Characterizing Polytobacco Use Trajectories and Their Associations With Substance Use and Mental Health Across Mid-Adolescence. Nicotine & Tobacco Research 2018;20:S31–S38.	Comparison
Choi K., Forster J. L. Beliefs and experimentation with electronic cigarettes: a prospective analysis among young adults. American Journal of Preventive Medicine 2014;46:175–8.	Outcome
Chou S. P., Saha T. D., Zhang H., Ruan W. J., Huang B., Grant B. F., et al. Prevalence, correlates, comorbidity and treatment of electronic nicotine delivery system use in the United States. Drug & Alcohol Dependence 2017;178:296–301.	Study design
Clendennen S. L., Loukas A., Creamer M. R., Pasch K. E., Perry C. L. Longitudinal Patterns of Multiple Tobacco and Nicotine Product Use Among Texas College Students: a Latent Transition Analysis. Prevention Science 2019;20:1031–42.	Exposure
Cole A. G., Chaurasia A., Kennedy R. D., Leatherdale S. T. Identifying behavioural characteristics of tobacco product and e-cigarette use clusters: A repeat cross-sectional analysis. Addictive Behaviors 2018;90:77–84.	Study design
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Cooper M., Loukas A., Case K. R., Marti C. N., Perry C. L. A longitudinal study of risk perceptions and e-cigarette initiation among college students: Interactions with smoking status. Drug & Alcohol Dependence 2018;186:257–63.	Outcome
Creamer M. R., Delk J., Case K., Perry C. L., Harrell M. B. Positive Outcome Expectations and Tobacco Product Use Behaviors in Youth. Substance Use & Misuse 2018;53:1399–1402.	Outcome
Creamer M., Case K., Loukas A., Cooper M., Perry C. L. Patterns of sustained e-cigarette use in a sample of young adults. Addictive Behaviors 2019;92:28–31.	Outcome
Dai H. Changes in Flavored Tobacco Product Use among Current Youth Tobacco Users in the United States, 2014–2017. JAMA Pediatrics 2019;173:282–4.	Outcome
Dai H., Leventhal A. M. Association of electronic cigarette vaping and subsequent smoking relapse among former smokers. Drug and Alcohol Dependence 2019;199:10–17.	Outcome
Das M. E-cigarettes and smoking cessation. Lancet Oncology 2019;20:e136.	Publication type
Delnevo C. D., Villanti A. C., Wackowski O. A., Gundersen D. A., Giovenco D. P. The influence of menthol, e-cigarettes and other tobacco products on young adults' self-reported changes in past year smoking. Tobacco Control 2016;25:571–4.	Study design
Doran N., Tully L. Impulsivity and tobacco product use over time. Addictive Behaviors 2018;85:153–7.	Exposure
Du P., Fan T., Yingst J., Veldheer S., Hrabovsky S., Chen C., et al. Changes in E-Cigarette Use Behaviors and Dependence in Long-term E-Cigarette Users. American Journal of Preventive Medicine 2019;57:374–83.	Population
Dunbar M. S., Davis J. P., Rodriguez A., Tucker J. S., Seelam R., D'Amico E. J. Disentangling Within- and Between-Person Effects of Shared Risk Factors on E-cigarette and Cigarette Use Trajectories from Late Adolescence to Young Adulthood. Nicotine and Tobacco Research 2019;21:1414–22.	Study design

Dutra L. M., Glantz S. A. E-cigarettes and National Adolescent Cigarette Use: 2004–2014. Pediatrics 2017;139.	Study design
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Eastwood B., Dockrell M. J., Arnott D., Britton J., Cheeseman H., Jarvis M. J., et al. Electronic cigarette use in young people in Great Britain 2013–2014. Public Health 2015;129:1150–6.	Study design
Eastwood B., East K., Brose L. S., Dockrell M. J., Arnott D., Cheeseman H., et al. Electronic cigarette use in young people in Great Britain 2015–2016. Public Health 2017;149:45–48.	Study design
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Elin Smith K. Prevalence and Correlates of Electronic Cigarette Use Among a Clinical Sample of Polysubstance Users in Kentucky: Long Live the Cigarette? Substance Use & Misuse 2018:1–11.	Population
El-Khoury F., Bolze C., Gomajee R., White V., Melchior M. Lower smoking rates and increased perceived harm of cigarettes among French adults one year after comprehensive tobacco control measures. Drug and Alcohol Dependence 2019;201:65–70.	Outcome
El-Shahawy O., Park S. H., Duncan D. T., Lee L., Tamura K., Shearston J. A., et al. Evaluating State-Level Differences in E-cigarette and Cigarette Use Among Adults in the United States Between 2012 and 2014: Findings From the National Adult Tobacco Survey. Nicotine & Tobacco Research 2018;27:27.	Exposure
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Etter J. F. Electronic Cigarette: A Longitudinal Study of Regular Vapers. Nicotine & Tobacco Research 2018;20:912–2.	Study design
Etter J. F., Bullen C. A longitudinal study of electronic cigarette users. Addictive Behaviors 2014;39:491–4.	Study design
Etter JF. A longitudinal study of cotinine in long-term daily users of ecigarettes. Drug and Alcohol Dependence 2016;160:218–21.	Outcome
Evans-Polce R. J., Veliz P., Boyd C. J., McCabe S. E. Initiation Patterns and Trends of E-Cigarette and Cigarette Use Among U.S. Adolescents. Journal of Adolescent Health 2019.	Study design

Farsalinos K., Niaura R. E-cigarettes and smoking cessation in the United States according to frequency of e-cigarette use and quitting duration: analysis of the 2016 and 2017 National Health Interview Surveys. Nicotine & Tobacco Research 2019;15:15.	Study design
Felicione N. J., Enlow P., Elswick D., Long D., Rolly Sullivan C., Blank M. D. A pilot investigation of the effect of electronic cigarettes on smoking behavior among opioid-dependent smokers. Addictive Behaviors 2018.	Population
Filippidis F. T., Laverty A. A., Gerovasili V., Vardavas C. I. Two-year trends and predictors of e-cigarette use in 27 European Union member states. Tobacco Control 2017;26:98–104.	Study design
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Furberg H., Lichtenstein P., Pedersen N. L., Thornton L., Bulik C. M., Lerman C., et al. The STAGE cohort: a prospective study of tobacco use among Swedish twins. Nicotine & Tobacco Research 2008;10:1727–35.	Study design
Giovenco D. P., Delnevo C. D. Prevalence of population smoking cessation by electronic cigarette use status in a national sample of recent smokers. Addictive Behaviors 2018;76:129–34.	Study design
Goldenson N. I., Leventhal A. M., Stone M. D., McConnell R. S., Barrington-Trimis J. L. Associations of Electronic Cigarette Nicotine Concentration With Subsequent Cigarette Smoking and Vaping Levels in Adolescents. JAMA Pediatrics 2017;171:1192–99.	Study design
Goniewicz M. L., Gawron M., Nadolska J., Balwicki L., Sobczak A. Rise in electronic cigarette use among adolescents in Poland. Journal of Adolescent Health 2014;55:713–5.	Study design
Gottlieb M. A. E-Cigarettes versus Nicotine-Replacement Therapy for Smoking Cessation. New England Journal of Medicine 2019;380:1974.	Publication type
Grace R. C., Kivell B. M., Laugesen M. Gender differences in satisfaction ratings for nicotine electronic cigarettes by first-time users. Addictive Behaviors 2015;50:140–3.	Exposure
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Hansen W. B., McNeal R. B., Jr. Self-initiated cessation from substance use: A longitudinal study of the relationship between postulated mediators and quitting. Journal of Drug Issues 2001;31:957–75.	Exposure
Hatsukami D. K., Jensen J., Anderson A., Broadbent B., Allen S., Zhang Y., et al. Oral tobacco products: preference and effects among smokers. Drug & Alcohol Dependence 2011;118:230–6.	Study duration
Hawkins S. S., Ghiani M., Baum C. F. Associations Between State Tobacco Control Policies and Adolescent ENDS Use. Journal of Public Health Management & Practice 2018;31:31.	Outcome
Hendricks P. S., Thorne C. B., Lappan S. N., Sweat N. W., Cheong J., Ramachandran R., et al. The Relationships of Expectancies With E-cigarette Use Among Hospitalized Smokers: A Prospective Longitudinal Study. Nicotine & Tobacco Research 2018;20:224–30.	Population
Henry A. D., Gettens J., Savageau J. A., Cullen D., Landau A. Massachusetts Medicaid members that smoked in 2008: Characteristics associated with smoking status in 2014. PLoS ONE [Electronic Resource] 2017;12:e0186144.	Study design
Herbec A. A., Chang Y., Tindle H. A., Rigotti N. A. Smokers' use of electronic cigarettes before, during, and in the month after hospitalization. Findings from the Helping HAND 2 Study. Addictive Behaviors 2018;29:29.	Study design
Hickling L. M., Perez-Iglesias R., McNeill A., Dawkins L., Moxham J., Ruffell T., et al. A pre-post pilot study of electronic cigarettes to reduce smoking in people with severe mental illness. Psychological Medicine 2018:1–8.	Population
Hinton A., Nagaraja H. N., Cooper S., Wewers M. E. Tobacco product transition patterns in rural and urban cohorts: Where do dual users go? Preventive Medicine Reports 2018;12:241–4.	Exposure
Hsu G., Gamst A. C., Zhuang Y. L., Wolfson T., Zhu S. H. A comparison of E-cigarette use patterns and smoking cessation behavior among vapers by primary place of purchase. International Journal of Environmental Research and Public Health 2019;16.	Outcome
Huang L. L., Kowitt S. D., Sutfin E. L., Patel T., Ranney L. M., Goldstein A. O. Electronic Cigarette Use Among High School Students and Its Association With Cigarette Use And Smoking Cessation, North Carolina Youth Tobacco Surveys, 2011 and 2013. Preventing Chronic Disease 2016;13:E103.	Study design

Huh J., Leventhal A. M. Intraindividual covariation between e-cigarette and combustible cigarette use in Korean American emerging adults. Psychology of Addictive Behaviors 2016;30:246–51.	Study design
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Jackson S. E., Beard E., Michie S., Shahab L., Raupach T., West R., et al. Are smokers who are regularly exposed to e-cigarette use by others more or less motivated to stop or to make a quit attempt? A cross-sectional and longitudinal survey. BMC Medicine 2018;16:206.	Outcome
Jackson S. E., Hill E., Shahab L., Beard E., Michie S., Brown J. Prevalence and correlates of long-term e-cigarette and nicotine replacement therapy use: a prospective study in England. BMJ Open 2019;9:e029252.	Outcome
Jackson S. E., Kotz D., West R., Brown J. Moderators of real-world effectiveness of smoking cessation aids: a population study. Addiction 2019;114:1627–38.	Study design
Jha P. Smoking cessation and e-cigarettes in China and India. The BMJ 2019;367.	Publication type
Jo C. L., Golden S. D., Noar S. M., Rini C., Ribisl K. M. Effects of Ecigarette Advertising Messages and Cues on Cessation Outcomes. Tobacco Regulatory Science 2018;4:562–72.	Outcome
Johnson L., Ma Y., Fisher S. L., Ramsey A. T., Chen L. S., Hartz S. M., et al. E-cigarette Usage Is Associated with Increased Past-12-Month Quit Attempts and Successful Smoking Cessation in Two US Population-Based Surveys. Nicotine and Tobacco Research 2019;21:1331–38.	Study design
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Kasza K. A., Bansal-Travers M., O'Connor R J., Compton W. M., Kettermann A., Borek N., et al. Cigarette smokers' use of unconventional tobacco products and associations with quitting activity: Findings from the ITC-4 U.S. cohort. Nicotine and Tobacco Research 2014;16:672–81.	Exposure

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Kim S., Selya A. S. The Relationship Between Electronic Cigarette Use and Conventional Cigarette Smoking Is Largely Attributable to Shared Risk Factors. Nicotine & Tobacco Research 2019;04:04.	Study design
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King A. C., Smith L. J., McNamara P. J., Matthews A. K., Fridberg D. J. Passive exposure to electronic cigarette (e-cigarette) use increases desire for combustible and e-cigarettes in young adult smokers. Tobacco Control 2015;24:501–4.	Study design
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Klesges R. C., DeBon M., Vander Weg M. W., Haddock C. K., Lando H. A., Relyea G. E., et al. Efficacy of a tailored tobacco control program on long-term use in a population of US Military troops. Journal of Consulting and Clinical Psychology 2006;74:295–306.	Population
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Kock L., Shahab L., West R., Brown J. E-cigarette use in England 2014–17 as a function of socio-economic profile. Addiction 2019;114:294–303.	Study design
Kotz D., Bockmann M., Kastaun S. The Use of Tobacco, E-Cigarettes, and Methods to Quit Smoking in Germany. Deutsches Arzteblatt International 2018;115:235–42.	Study design
Kotz D., Böckmann M., Kastaun S. The use of tobacco, e-cigarettes, and methods to quit smoking in Germany - A representative study using 6 waves of data over 12 months (the DEBRA study). Deutsches Arzteblatt International 2018;115:235–42.	Study design
Kousta S. E-cigarettes for smoking cessation. Nature Human Behaviour 2019;3:322.	Publication type
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Kulak J. A., Manderski M. B. T., Travers M. J., Delnevo C. D., Hrywna M., Bansal-Travers M., et al. Patterns and Trends of Hookah Use among New Jersey Youth: New Jersey Youth Tobacco Survey 2008–2014. American Journal of Health Behavior 2018;42:21–35.	Study design
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Lechner W. V., Janssen T., Kahler C. W., Audrain-McGovern J., Leventhal A. M. Bi-directional associations of electronic and combustible cigarette use onset patterns with depressive symptoms in adolescents. Preventive Medicine 2017;96:73–78.	Outcome
Lechner W. V., Murphy C. M., Colby S. M., Janssen T., Rogers M. L., Jackson K. M. Cognitive risk factors of electronic and combustible cigarette use in adolescents. Addictive Behaviors 2018;82:182–188.	Exposure
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Li J., Hajek P., Pesola F., Wu Q., Phillips-Waller A., Przulj D., et al. Costeffectiveness of e-cigarettes compared with nicotine replacement therapy in stop smoking services in England (TEC study): a randomised controlled trial. Addiction 2019;09:09.	Outcome
Li J., Newcombe R., Walton D. The prevalence, correlates and reasons for using electronic cigarettes among New Zealand adults. Addictive Behaviors 2015;45:245–51.	Study design
Lindstrom M., Isacsson S. O., Malmo Shoulder-Neck Study G. Long term and transitional intermittent smokers: a longitudinal study. Tobacco Control 2002;11:61–7.	Population
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Litt M. D., Duffy V., Oncken C. Cigarette smoking and electronic cigarette vaping patterns as a function of e-cigarette flavourings. Tobacco Control: An International Journal 2016;25:67–72.	Exposure
Liu X., Lugo A., Davoli E., Gorini G., Pacifici R., Fernandez E., et al. Electronic cigarettes in Italy: a tool for harm reduction or a gateway to smoking tobacco? Tobacco Control 2019;18:18.	Study design
Lopez A. A., Cobb C. O., Yingst J. M., Veldheer S., Hrabovsky S., Yen M. S., et al. A transdisciplinary model to inform randomized clinical trial methods for electronic cigarette evaluation. BMC Public Health 2016;16:217.	Publication type
Loukas A., Batanova M., Fernandez A., Agarwal D. Changes in use of cigarettes and non-cigarette alternative products among college students. Addictive Behaviors 2015;49:46–51.	Outcome
Loukas A., Marti C. N., Perry C. L. Trajectories of Tobacco and Nicotine Use Across Young Adulthood, Texas, 2014–2017. American Journal of Public Health 2019;109:465–71.	Outcome
Mamudu H. M., Wang L., Owusu D., Robertson C., Collins C., Littleton M. A. Prospective study of dual use of e-cigarettes and other tobacco products among school-going youth in rural Appalachian Tennessee. Annals of Thoracic Medicine 2019;14:127–33.	Study design
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McClelland E., Valentine N., McMillen R. Tobacco Use Trends among Mississippi Youth following the 1997 Settlement of Mississippi's Medicaid Lawsuit and Subsequent Tobacco Prevention Initiatives. Journal of the Mississippi State Medical Association 2015;56:328–33.	Study design
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Merianos A. L., Mancuso T. F., Gordon J. S., Wood K. J., Cimperman K. A., Mahabee-Gittens E. M. Dual- and Polytobacco/Nicotine Product Use Trends in a National Sample of High School Students. American Journal of Health Promotion 2018;32:1280–90.	Study design
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Nolan M., Leischow S., Croghan I., Kadimpati S., Hanson A., Schroeder D., et al. Feasibility of Electronic Nicotine Delivery Systems in Surgical Patients. Nicotine & Tobacco Research 2016;18:1757–62.	Study design
Olfson M., Wall M. M., Liu S. M., Sultan R. S., Blanco C. E-cigarette Use Among Young Adults in the U.S. American Journal of Preventive Medicine 2019;56:655–63.	Study design
Osman A., Kowitt S. D., Ranney L. M., Heck C., Goldstein A. O. Trends and Racial Disparities in Mono, Dual, and Poly Use of Tobacco Products Among Youth. Nicotine & Tobacco Research 2018;20:S22–S30.	Exposure
Pacifici R., Pichini S., Graziano S., Pellegrini M., Massaro G., Beatrice F. Successful Nicotine Intake in Medical Assisted Use of E-Cigarettes: A Pilot Study. International Journal of Environmental Research & Public Health [Electronic Resource] 2015;12:7638–46.	Study design
Pamplona P., Ravara S., Boléo-Tomé J. P., Rosa P., Morais A. Breathe, breathe in the air, don't be afraid to care. Pulmonology 2019;25:131–33.	Publication type
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Parker M. A., Villanti A. C., Quisenberry A. J., Stanton C. A., Doogan N. J., Redner R., et al. Tobacco Product Harm Perceptions and New Use. Pediatrics 2018;142.	Exposure
Patja K., Hakala S. M., Bostrom G., Nordgren P., Haglund M. Trends of tobacco use in Sweden and Finland: do differences in tobacco policy relate to tobacco use? Scandinavian Journal of Public Health 2009;37:153–60.	Study design
Peltier M. R., Waters A. F., Roys M. R., Stewart S. A., Waldo K. M., Copeland A. L. Dual users of e-cigarettes and cigarettes have greater positive smoking expectancies than regular smokers: a study of smoking expectancies among college students. Journal of American College Health 2019:1–6.	Outcome

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Rodu B., Jansson J. H., Eliasson M. The low prevalence of smoking in the Northern Sweden MONICA study, 2009. Scandinavian Journal of Public Health 2013;41:808–11.	Outcome
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Rohsenow D. J., Tidey J. W., Martin R. A., Colby S. M., Eissenberg T. Effects of six weeks of electronic cigarette use on smoking rate, CO, cigarette dependence, and motivation to quit smoking: A pilot study. Addictive Behaviors 2018;80:65–70.	Study duration
Sanford N. N., Sher D. J., Xu X., Aizer A. A., Mahal B. A. Trends in Smoking and e-Cigarette Use among US Patients with Cancer, 2014–2017. JAMA Oncology 2019;5:426–8.	Study design
Sathish T., Kannan S., Sarma P. S., Thankappan K. R. Incidence of tobacco use among adults (15–64 years) in rural Kerala. Asia-Pacific Journal of Public Health 2015;27:NP626–9.	Exposure
Saunders C., Geletko K. Adolescent cigarette smokers' and non-cigarette smokers' use of alternative tobacco products. Nicotine & Tobacco Research 2012;14:977–85.	Study design
Sawdey M. D., Day H. R., Coleman B., Gardner L. D., Johnson S. E., Limpert J., et al. Associations of risk factors of e-cigarette and cigarette use and susceptibility to use among baseline PATH study youth participants (2013–2014). Addictive Behaviors 2019;91:51–60.	Study design
Schauer G. L., Malarcher A. M., Babb S. D. Prevalence and correlates of switching to another tobacco product to quit smoking cigarettes. Nicotine & Tobacco Research 2015;17:622–7.	Outcome
Schinke S. P., Tepavac L., Cole K. C. Preventing substance use among Native American youth: Three-year results. Addictive Behaviors 2000;25:387–97.	Exposure
Seto J. C., Davis J. W., Taira D. A. E-cigarette Use Related to Demographic Factors in Hawai'i. Hawai'i Journal of Medicine & Public Health: A Journal of Asia Pacific Medicine & Public Health 2016;75:295–302.	Study design
Sharapova S., Reyes-Guzman C., Singh T., Phillips E., Marynak K. L., Agaku I. Age of tobacco use initiation and association with current use and nicotine dependence among US middle and high school students, 2014–2016. Tobacco Control 2018;29:29.	Study design
Siegel M. B., Tanwar K. L., Wood K. S. Electronic cigarettes as a smoking-cessation: tool results from an online survey. American Journal of Preventive Medicine 2011;40:472–5.	Study design
Silveira M. L., Conway K. P., Green V. R., Kasza K. A., Sargent J. D., Borek N., et al. Longitudinal associations between youth tobacco and substance use	Study design

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Slomski A. e-Cigarettes for Smoking Cessation. JAMA 2019;321:1149.	Publication type
Smith D. M., Gawron M., Balwicki L., Sobczak A., Matynia M., Goniewicz M. L. Exclusive versus dual use of tobacco and electronic cigarettes among adolescents in Poland, 2010–2016. Addictive Behaviors 2019;90:341–8.	Study design
Smith T. T., Wahlquist A. E., Heckman B. W., Cummings K. M., Carpenter M. J. Impact of e-cigarette sampling on cigarette dependence and reinforcement value. Nicotine & Tobacco Research 2018;30:30.	Outcome
Snow E., Johnson T., Ossip D. J., Williams G. C., Ververs D., Rahman I., et al. Does E-cigarette Use at Baseline Influence Smoking Cessation Rates among 2-Year College Students? Journal Of Smoking Cessation 2018;13:110–20.	Study duration
Soneji S., Yang J., Knutzen K. E., Moran M. B., Tan A. S. L., Sargent J., et al. Online tobacco marketing and subsequent tobacco use. Pediatrics 2018;141:1–11.	Outcome
Stein M. D., Caviness C., Grimone K., Audet D., Anderson B. J., Bailey G. L. An Open Trial of Electronic Cigarettes for Smoking Cessation Among Methadone-Maintained Smokers. Nicotine & Tobacco Research 2016;18:1157–62.	Population
Stower H. E-cigarettes to help smoking cessation. Nature Medicine 2019.	Publication type
Strong D. R., Myers M., Linke S., Leas E., Hofstetter R., Edland S., et al. Gender differences influence overweight smokers' experimentation with electronic nicotine delivery systems. Addictive Behaviors 2015;49:20–5.	Outcome
Sung B. E-cigarette Use and Smoking Cessation Among South Korean Adult Smokers: A Propensity Score–Matching Approach. Asia-Pacific Journal of Public Health 2018;30:332–41.	Study design
Tabuchi T., Shinozaki T., Kunugita N., Nakamura M., Tsuji I. Study Profile: The Japan "Society and New Tobacco" Internet Survey (JASTIS): A longitudinal internet cohort study of heat-not-burn tobacco products, electronic cigarettes and conventional tobacco products in Japan. Journal of Epidemiology 2018;13:13.	Study design
Temple J. R., Shorey R. C., Lu Y., Torres E., Stuart G. L., Le V. D. Ecigarette use of young adults motivations and associations with combustible cigarette alcohol, marijuana, and other illicit drugs. American Journal on Addictions 2017;26:343–8.	Study duration

Tonstad S., Job J. S., Batech M., Yel D., Kheam T., Singh P. N. Adult tobacco cessation in Cambodia: I. Determinants of quitting tobacco use. Asia-Pacific Journal of Public Health 2013;25:10S–9S.	Study design
Truman P., Glover M., Fraser T. An Online Survey of New Zealand Vapers. International Journal of Environmental Research & Public Health [Electronic Resource] 2018;15:29.	Study duration
Tucker M. R., Laugesen M., Bullen C., Grace R. C. Predicting Short-Term Uptake of Electronic Cigarettes: Effects of Nicotine, Subjective Effects, and Simulated Demand. Nicotine & Tobacco Research 2018;20:1265–71.	Study duration
Wang Y., Sung HY., Yao T., Lightwood J., Max W. Infrequent and frequent nondaily smokers and daily smokers: Their characteristics and other tobacco use patterns. Nicotine & Tobacco Research 2018;20:741–8.	Exposure
Wang-Schweig M., Jason L. A., Stevens E., Chaparro J. Tobacco Use among Recovery Home Residents: Vapers Less Confident to Quit. American Journal of Health Behavior 2019;43:1064–74.	Study design
Veliz P., Eisman A., McCabe S. E., Evans-Polce R., McCabe V. V., Boyd C. J. E-Cigarette Use, Polytobacco Use, and Longitudinal Changes in Tobacco and Substance Use Disorder Symptoms Among U.S. Adolescents. Journal of Adolescent Health 2019;05:05.	Outcome
West R., Shahab L., Brown J. Estimating the population impact of e-cigarettes on smoking cessation in England. Addiction 2016;111:1118–19.	Study design
Westling E., Rusby J. C., Crowley R., Light J. M. Electronic Cigarette Use by Youth: Prevalence, Correlates, and Use Trajectories From Middle to High School. Journal of Adolescent Health 2017;60:660–6.	Outcome
Vogel E. A., Prochaska J. J., Ramo D. E., Andres J., Rubinstein M. L. Adolescents' E-Cigarette Use: Increases in Frequency, Dependence, and Nicotine Exposure Over 12 Months. Journal of Adolescent Health 2019;64:770–5.	Study design
Wu S. Y., Wang M. P., Li W. H., Kwong A. C., Lai V. W., Lam T. H. Does Electronic Cigarette Use Predict Abstinence from Conventional Cigarettes among Smokers in Hong Kong? International Journal of Environmental Research & Public Health [Electronic Resource] 2018;15:26.	Study design
Yeh J. S., Bullen C., Glantz S. A. E-cigarettes and smoking cessation. New England Journal of Medicine 2016;374:2172–74.	Study design
Yingst J., Foulds J., Veldheer S., Du P. Device characteristics of long term electronic cigarette users: A follow-up study. Addictive Behaviors 2019;91:238–43.	Outcome
Yong H. H., Hitchman S. C., Cummings K. M., Borland R., Gravely S. M. L., McNeill A., et al. Does the Regulatory Environment for E-Cigarettes Influence the Effectiveness of E-Cigarettes for Smoking Cessation?: Longitudinal Findings From the ITC Four Country Survey. Nicotine & Tobacco Research 2017;19:1268–76.	Publication type

Zhu S. H., Zhuang Y. L., Wong S., Cummins S. E., Tedeschi G. J. E-cigarette use and associated changes in population smoking cessation: evidence from US current population surveys. BMJ 2017;358:j3262.	Study design
Zuckermann A. M. E., Williams G., Battista K., de Groh M., Jiang Y., Leatherdale S. T. Trends of poly-substance use among Canadian youth. Addictive Behaviors Reports 2019;10.	Study design

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Brady B. R., Crane T. E., O'Connor P. A., Nair U. S., Yuan N. P. Electronic cigarette use and tobacco cessation in a state-based quitline. J Smok Cessat 2019.	Drop-out rate	
Cadet M. Are E-cigarettes more effective in supporting smoking cessation than nicotine-replacement therapy? Evid Based Nurs 2019;19:19.	Overall assessment	
Caponnetto P., DiPiazza J., Cappello G. C., Demma S., Maglia M., Polosa R. Multimodal Smoking Cessation in a Real-Life Setting: Combining Motivational Interviewing With Official Therapy and Reduced Risk Products. Tob Use Insights 2019;12:1179173X19878435.	Judgement, reporting	
Gmel G., Baggio S., Mohler-Kuo M., Daeppen J. B., Studer J. Ecigarette use in young Swiss men: is vaping an effective way of reducing or quitting smoking? Swiss Med Wkly 2016;146:w14271.	Selection, exposure, judgement	
Halpern S. D., Harhay M. O., Saulsgive K., Brophy C., Troxel A. B., Volp K. G. A pragmatic trial of e-cigarettes, incentives, and drugs for smoking cessation. N Engl J Med 2018;378:2302-10.	Drop-out rate, reporting, overall assessment	
Hitchman S. C., Brose L. S., Brown J., Robson D., McNeill A. Associations Between E-Cigarette Type, Frequency of Use, and Quitting Smoking: Findings From a Longitudinal Online Panel Survey in Great Britain. Nicotine Tob Res 2015;17:1187-94.	Drop-out rate	
Joffer J., Burell G., Bergstrom E., Stenlund H., Sjors L., Jerden L. Predictors of smoking among Swedish adolescents. BMC Public Health 2014;14:1296.	Judgement, drop-out rate	
Kasza K. A., Coleman B., Sharma E., Conway K. P., Cummings K. M., Goniewicz M. L., et al. Correlates of transitions in tobacco product use by U.S. adult tobacco users between 2013–2014 and 2014–2015:	Exposure	

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Pearson J. L., Stanton C. A., Cha S., Niaura R. S., Luta G., Graham A. L. E-Cigarettes and Smoking Cessation: Insights and Cautions From a Secondary Analysis of Data From a Study of Online Treatment-Seeking Smokers. Nicotine Tob Res 2015;17:1219-27.	Overall assessment
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et al. Association of E-Cigarette Use With Smoking Cessation Among Smokers	
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M., et al. Lack of Substantial Post-Cessation Weight Increase in Electronic	
Cigarettes Users. Int J Environ Res Public Health [Electronic Resource] 2018;15:23.	
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Vickerman K. A., Schauer G. L., Malarcher A. M., Zhang L., Mowery P., Nash	Selection, drop-out rate
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Zawertailo L., Pavlov D., Ivanova A., Ng G., Baliunas D., Selby P. Concurrent E-Cigarette Use During Tobacco Dependence Treatment in Primary Care Settings: Association With Smoking Cessation at Three and Six Months. Nicotine Tob Res 2017;19:183-9.	Exposure, drop-out rate

Table S5. Characteristics of included cohort studies with low and moderate risk of bias

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
Al-Delaimy	Design	Population	Definition of smokers	Adjusted model: adjusted	Moderate
2015	Prospective	Current smokers at baseline, who	Smoker: Persons who have smoked at	for age, gender,	
[39]	cohort –	provided information in both	least 100 cigarettes during their	education, ethnicity,	
USA	California	baseline and follow-up surveys.	lifetime.	smoking status, intention	
	Smokers Cohort			to quit, and time to first	
	(CSC)	N= 1000	Current smokers: Smoked at least 100	cigarette.	
		Age (years):	cigarettes during lifetime and smoked		
	Time to follow-	18—44: 30.2%	at least some days at the time of the	Smokers at T0	
	up	45—59: 69.8%	survey	Outcome: Abstinence	
	1 year	~	_	from cigarette use	
	5	Sex:	Exposure	(at least one month) at	
	Description of	F: 52.2%, M: 47.8%	Ever use of e-cigarettes: Respondents	T1:	
	cohort		who reported "have used e-cigarettes"	Never e-cigarette users:	
	Current and	Ethnicity:	at T0 and T1, respondents who	32/177 (18.1%)	
	former smokers	Non- Hispanic white: 72.6%	changed status between T0 and T1	Ever e-cigarette users:	
	in California, 18–59 years old.	Hispanic: 9.9%, Other: 17.5%	were excluded.	12/191 (6.3%)	
	Telephone	Education, (years):	Never use of e-cigarettes: Respondents	Adjusted model (AOR,	
	interview.	≤12: 34.8%, 13–15: 44.9%	who reported "will never use e-	95% CI)	
		≥16: 20.3%	cigarettes" at T0 and T1.	Never e-cigarette users:	
	N=4,350,			OR:1.0	
	response rate	Smoking status:	Respondents who changed status	Ever e-cigarette users: 0.41	
	baseline survey	Daily smoker: 83.7%	between T0 and T1 were excluded	(0.18; 0.93)	
	23.4%	Non-daily smoker: 16.6%	form analysis.		
		Motivation to quit:			
	Study period 2011–2013	intended to quit smoking in the next 6 months	Outcome		

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
		Yes: 43.4%, No:56.6% Drop-out rate 632/1000 (63.2%) of respondents were excluded from analyses since it was not possible to classify them as either ever or never e-cigarette users.	Respondent was considered abstinent if abstinent from cigarette use, for 1 month or longer.		
Barrington- Trimis 2019 [21] US	Design Prospective cohort study. Pooled data from three cohorts: Children's Health Study (CHS), Yale Adolescent Survey Study (YASS) and Happiness and Health (HH).	Population American adolescents and young adults. N=6147 CHS N=1553 HH N=3190 YASS N=1404 Age NR grades 9 to 12	Definition of smokers "Participants who had "never tried" a cigarette (not "even one or two puffs") were classified as "never users." Those reporting age at first use of cigarettes were classified as "ever users" of cigarettes. Exposure Past 30 days e-cigarette use	Adjusted model: na Ever users of cigarettes Outcome: use of cigarettes in the past 30 days E-cigarette never users: 27/152 (17.8%) E-cigarette ever users: 187/524 (35.7%)	Moderate
	Time to follow-up 1 year Description of cohort CHS included participants in	Sex, % F: 3291, 53.5 CHS: 801, 51.6 HH: 1723, 54.0 YASS: 767, 54.6 M: 2856, 46,5 100–53.5= 46.5%	Outcome Participants who reported use of ecigarettes, but not cigarettes, in the past 30 days were classified as "exclusive e-cigarette users," participants who reported use of cigarettes, but not e-cigarettes, in the past 30 days were classified as "exclusive cigarette users," and	Ever users of cigarettes Outcome: stop using cigarettes (the past 30 days) E-cigarette never users: 12/152 (7.9%) E-cigarette ever users: 69/524 (13.2%)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	grades 11 or 12 at baseline HH included participants in grade 9 at baseline YASS included participants in grades 9 to 12 at baseline Study period T0 2013 to 2014 T1 2014 to 2015	Ethnicity, % Hispanic white: 2329, 37.9 CHS: 758, 48.8 HH: 1505, 47.2 YASS: 66, 4.7 Non-Hispanic white: 2302, 37.4 CHS: 592, 38.1 HH: 512, 16.0 YASS: 1198, 85.3 Other 1516, 24.7 CHS: 203, 13.1 HH: 1173, 36.8 YASS: 140, 10.0 Intention to stop smoking (% yes) NA Cigarettes per day: NA Response rate CHS 94.6% HH 93,7% YASS 92%	participants who reported use of both products in the past 30 days were considered "dual product users."		

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
Barrington- Trimis 2018 [22] USA	Design Prospective cohort study. Pooled data from three cohorts: Children's Health Study (CHS), Yale Adolescent Survey Study (YASS) and Happiness and Health (H&H). Time to follow- up 1 year (CHS, H&H). 6 months	Population 9 th to 12 th grade youth from schools in California and Connecticut (USA) who completed baseline and follow-up surveys. Students that completed the follow-up: N (CHS)=1,553 N (H&H)=3,190 N (YASS)=1,404 Age Around 18 years at T1 Sex F (CHS)= 51.6% F (H&H)= 54.0% F (YASS)= 54.6%	Baseline categories Never users: respondents who had never tried a product, not even 1 puff or 2. *Ever users: having used Exposure E-cigarette user: Never users: never used not even 1 or 2 puffs at T0. Experimenters: ever users but not in the past 30 days. Infrequent users: use 1—2 days in the past 30 days Frequent users: used 3—5 or more times in the past 30 days. Exclusive e-cigarette user: respondents	Adjusted model: All models were adjusted for gender, race/ethnicity, grade, and cohort. Smokers at T0 Outcome: Non-smokers (past 30 days) at T1; n(%): Non-e-cigarette users at T0: 12/27 (44.4%) E-cigarette ever users at T0: 36/108 (33.3%)	
	(YASS). Description of cohorts CHS: schools in 12 communities in California. N= 1 553, response rate 74.0%.	Ethnicity: CHS: White: 38.1% Hispanic: 48.8% Other: 13.1%. H&H: White: 16.0% Hispanic: 47.2%	using e-cigarettes, but not cigarettes, in the past 30 days. Outcome Cigarette Smoking in the past 30 days *Experimentation (initiation between baseline and follow-up but no use in the past 30 days).		

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	H&H: 10 schools in the greater Los Angeles area (California). N= 3,190, response rate 93.9%. YASS: 3 high schools in Connecticut. N=1,404, match rate T0–T1 60.0%. Questionnaire completed under study staff supervision in school classrooms. Follow-up conducted through online questionnaire in the CHS cohort. Study period T0: 2013–2014 T1: 2014–2016	Other: 36.8%. YASS: White: 85.3% Hispanic: 4.7% Other: 10.0%. Education: Na Drop-out rate CHS= 544/2097 (25.9%) H&H= 207/3397 (6.1%) YASS=936/2,340 (40.0%)	*Infrequent (use of 1–2 in the past 30 days). *Frequent (use of 3–5 or more in the past 30 days).		
Benmarhnia	Design	Population	Definition of smokers	Adjusted model: NA	Low

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
2018 [40] USA	Cohort study – US Population Assessment of Tobacco and Health (PATH), wave 1 and 2. [1] Time to follow-up Follow-up: 1 year. Description of cohort Non-institutionalised US population 12 years of age and older. 45 971 participants from across the USA in wave 1, of which (32 320 were adults and 13 651 were youths aged 12–17). Weighted response rate TO 74%.	Participants who were 18 years or older, current cigarette smokers and who reported having tried to quit smoking within the last year at the time of follow-up (T1). T0: N=10,851 current smokers T1: N=3,093 current smokers who answered both waves, having tried to quit smoking between T0–T1 and provided complete details. Age All adults, age 18 or older. 49.1% were younger than 35 years. Sex F: 51.2% M: 48.8% Ethnicity: White: 64.5% Non-white: 35.5% Education 88.7% did not have a college degree Drop-out rate NA.	Current smokers: regularly smoking cigarettes every day or some days Exposure Any use of e-cigarettes during quit attempt (compared to use of other products i.e. NRT/Varenicline/Buproprion/nothing). Outcome Persistent abstinence: ≥30 days abstinence from smoking cigarettes and all tobacco at T1.	Current smokers (T0): Outcome (T1): Quit smoking cigarettes, n(%): E-cigarette user during follow up: 133/769 (17.3%) E-cigarette non-user during follow-up: 49/2601 (1.9%) Current smokers (T0) Outcome (T1): Quit smoking cigarettes (≥30 days) E-cigarette user at T0: 120/756 (15.9%) E-cigarette non-user at T0: 365/2337 (15.6%)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Data collection by in-household audio-computer assisted self-interviews in English and Spanish. Address-based area probability sample design. Study period T0: 2013–2014 T1: 2014–2015	1990/10851 (18.3%) lost to follow-up at T1 (not necessarily eligible for analysis as information on quit attempt was collected at T1). 56/3149 (1.8%) excluded due to incomplete details on quit attempt, leaving a sample of 3093 for this analysis.			
Berry 2019 [32] USA	Design Prospective cohort – US Population Assessment of Tobacco and Health (PATH), wave 1 and 2. [1] Time to follow- up	Population Current cigarette smokers at T0 aged ≥25 years who were not current e- cigarette users at T0. N=5832 (T0) N= 5124 (T1) Motivation to quit: 45.0 % of sample reported attempting to quit smoking in the year prior to T0.	Definition of smokers Current smokers: Smoking more than 100 cigarettes in their lifetime and currently smoked every day or on some days Former smokers: Current smokers at T0, who reported not smoking every day or some days at T1 and had not smoked any cigarettes in the 30 days prior to T1.	Adjusted model Logistic regression adjusted for sex, age, race/ethnicity, region, household income, education, living in a smoking household as a child, currently living with a cigarette smoker, frequency and intensity of cigarette use, time to first cigarette in the morning,	Low
	Time to follow- up 1–2 years	attempting to quit smoking in the year prior to T0.	in the 30 days prior to T1.	,	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Non-institutionalised US population 12 years of age and older. 45 971 participants from across the USA in wave 1, of which (32 320 were adults and 13 651 were youths aged 12–17). The weighted retention rate between wave 1 and 2 was approximately 83 % for the cohort. Study period T0: 2013–2014 T1: 2014–2015	Age: Adults age 25 or older. approximately 75% of the sample younger than 55 years Sex: F: 45% M: 55%) Ethnicity: Hispanic: 10.1% Non-Hispanic black: 14.8% Non-Hispanic white: 69.8% Non-Hispanic other: 5.4% Education: Less than high school: 16.3% High school: 39.7% Some college: 32.3% Bachelor's/advanced degree: 11.7% Drop-out rate NA For sample 708 individuals excluded for missing observations: 708/5832=12.1 %	Smokers who did not smoke every day or some days but smoked ≥1 cigarette over the past 30 days (n=133) were reclassified as current smokers at T1 and were not considered to have quit smoking cigarettes. Exposure E-cigarette use between T0 and T1. Current e-cigarette users: currently using e-cigarettes experimentally (no 'regular' e-cigarette use), on some days or every day Outcome ≥30-day abstinence from cigarette smoking.	Current users of cigarettes Outcome: stop use of cigarettes; n=5124 E-cigarette never users: 294/4461 E-cigarette experimental users: 13/358 E-cigarette some-day users: 6/178 E-cigarette everyday users: 40/127 E-cigarette ever_users: 59/663 (8.9%) Adjusted model: Current smokers (T0) Outcome: 30-Day cigarette cessation at T1, (n=5,124), AOR (95% CI): Non-e-cigarette user: 1.00 Experimental e-cigarette user: 0.51 (0.26; 1.00) Some-day e-cigarette user: 0.51 (0.17; 1.47) Everyday e-cigarette user: 7.88 (4.45; 13.95)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
				E-cigarette user (Pooled): 2.02 (1.35, 3.03)	
Biener 2015 [31] USA	Design Prospective cohort Time to follow- up 2 years Description of cohort A population- based survey of adults residing in the Dallas/Fort Worth metropolitan area, Texas, and Indianapolis, Indiana metropolitan areas. The study was carried out in 2011/2012, was designed to	Population Adult cigarette smokers who agreed to be contacted for follow-up. Cigarette smoking adults in two US metropolitan areas, Dallas/Fort Worth, Texas and Indianapolis, Indiana metropolitan. Subset of respondents in a population-based study. Motivation to quit: For 52.6% of e-cigarette users the most important reason for starting to use E-cigarettes was the hope that e-cigarettes would help them quit smoking. N= 1374 (Baseline) N=695 Age: 18-65 years Sex: Men: 57.3%; Women: (42.7%)	Definition of smokers: All respondents reported being cigarette smokers at baseline Exposure Reported e-cigarette use at T0, grouped into three categories: Intensive user: daily use for at least 1 month Intermittent user: used more than once or twice but not daily for a month or more. Non-user/tirer: non-use or at most once or twice. Outcome Smoking cessation defined as abstinence from cigarettes for at least 1 month	Adjusted model: adjusted for gender, age, ethnicity, education, heavy smokers and electronic cigarette use All data are from adjusted models Current smokers (T0) Outcome: Quit smoking cigarettes (>=30 days) (T1), OR (95% CI), (n=695) Non-e-cigarette use/trial: 1.00 Intermittent e-cigarette use: 0.31 (0.04; 2.80) Intensive e-cigarette use: 6.07 (1.11; 33.18) E-cigarette user (Pooled): 1.80 (0.49; 6.67)	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	assess receptivity to snus. A dual-frame, address-based sample with data collected via telephone interviews and a small supplementary mail survey. N=5,155, of which 1,675 were smokers interviewed by telephone. Of these N=1,374 gave permission to be recontacted. Study period T0: 2011/2012 T1: 2014	Ethnicity: White/non-Hispanic: 82.6% Minority: 17.5% Education: <4 years of college:76.2% ≥4 years of college or bachelor's degree: 23.8% Drop-out rate N=679/1,374 (49.4%) between T0 and T1			
Brose 2015	Design	Population	Definition of smokers Current cigarette smoker at T0	Adjusted model: Adjusted for age, gender, education.	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
[44] United Kingdom	Prospective cohort Time to follow-up 1 year Description of cohort Web-based longitudinal survey of a national general population sample in the UK. 23 785 participants screened for smoking status. 6165 of which had smoked in the past year. Survey completed by 4064 smokers. Follow-up completed by	Adult smokers, who had smoked in the past year. N=1,656 population in the cessation analysis N=1,042 (smokers initiating ecigarette use after T0 primary reduction analysis Mean age (SD): 45.7 (15.3) years Sex: Men: 56.5%; Women: 43.5% Ethnicity: Not reported Education: No higher education: 64.9% Some higher education: 35.1% Drop-out rate Non-responders between T1 and T2: 2305/4064= 56.7% Excluded from cessation analysis: 245/1,759 = 13.9% Excluded from primary reduction analysis: 859/1,759=48.8%	Exposure Daily or non-daily e-cigarette use The primary reduction analysis included smokers using e-cigarettes at T1 but not T0. Outcome Smoking cessation: change from being a smoker at baseline to be an ex- smoker at follow-up.	baseline variables, dependence (strength of urges to smoke) and noncigarette nicotine intake (at baseline for cessation and at time of follow-up for reduction). Current smokers (T0) (n=1656) Outcome: Smoking cessation at T1, OR (95% CI) Numbers in each category, n (%): E-cigarette non-use (T1): 168/1307 (12.9%) E-cigarette non-daily use: 25/263 (9.5%) E-cigarette daily use: 7/86 (8.1%) Unadjusted model: E-cigarette non-daily use: 0.71 (0.46; 1.11), p= 0.13 E-cigarette daily use: 0.60 (0.27; 1.32) p=0.21	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	1759, response- rate 43.3%. Study period T0: 2012 T1:2013			Adjusted model: E-cigarette non-use: 1.00 E-cigarette non-daily use: 0.77 (0.49;1.21), p= 0.25 E-cigarette daily use: 0.62 (0.28;1.37) p=0.24 E-cigarette any use: 0.73 (0.48;1.09) p=0.13	
Chen 2018 [34] USA	Design Prospective cohort – US Population Assessment of Tobacco and Health (PATH), wave 1 and 2. [1] Time to follow- up 1 year Description of cohort Non- institutionalised	Population Young adult (aged 18–34) cigarette smokers at T0 and current ecigarette users at T1 N=4,645 (T0) Cigarette smoking frequency*, % (95% CI): Some days: 29.2 (27.3, 31.1) Every day: 70.8 (69.0, 72.7) Quit attempt in the past year*, % (95% CI): Yes: 25.4 (23.8, 27.1) No: 74.6 (72.9, 76.2= Age*, % (95% CI):	Definition of smokers Smoking at least "some days" and having smoked at least 100 cigarettes in their lifetime at T0 Quitter: respondents who indicated smoking cigarettes at T0 but not T1 Reducer: those classified as "everyday smokers" at T0 but "some-day" smokers at T1. Exposure E-cigarette use (defined as using e-cigarettes "some days" or "everyday") at T1	Adjusted model; adjusted for: age group, gender, past year quit attempts and cigarette dependence Smokers at T0 (n=4,645) Outcome: Reducer/Quitter at T1, OR (95% CI): Unadjusted model: Non-E-cigarette Use: 1.00 E-cigarette Use with TM Flavors: 0.8 (0.6; 1.2) E-cigarette Use with One NTM Flavors: 1.9 (1.4; 2.7)	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	US population 12 years of age and older. 45 971 participants from across the USA in wave 1, of which (32 320 were adults and 13 651 were youths aged 12–17). [1] Survey, structured questionnaire, audio computer-assisted self-interviews Study period T0: 2013–2014 T1: 2014–2015	18–24 years: 39.1% (37.0, 40.4) 25–34 years: 60.9% (59.6, 63.0) Sex*, % (95% CI): F: 42.9 (41.1; 44.7) M: 57.1 (55.4; 58.9) Ethnicity* % (95% CI): Non-Hispanic Whites: 62.4 (60.7; 64.2) Non-Hispanic Blacks: 13.7 (12.5; 15.0) Hispanics: 16.8 (15.5; 18.1) Non-Hispanics Others: 7.1 (6.0; 8.3) Education*, % (95% CI): Below high school: 25.4 (24.0; 26.9) High school: 27.8 (26.2; 29.5) Above high school:46.8 (45.1; 48.5) *weighted values Drop-out rate The young adult retention rate of PATH between T0 and T1 was 80.5%	E-cigarette flavors used at T1: Tobacco/Menthol (TM) Non-Tobacco/non-Menthol (NTM) Outcome Quitters: smoking at least some days at T0 but not smoking at T1 Reducers: smoking every day at T0 but some days at T1. Consistent smokers: did not change smoking status or increased smoking frequency.	E-cigarette Use with Multiple NTM Flavors: 2.0 (1.6; 2.5) E-cigarette user (Pooled): 1.53 (1.31, 1.78) Adjusted model: Non-E-cigarette Use: 1.00 E-cigarette Use with TM Flavors: 1.2 (0.8; 1.8) E-cigarette Use with One NTM Flavors: 2.5 (1.6; 3.8) E-cigarette Use with Multiple NTM Flavors: 3.0 (2.1; 4.3) E-cigarette user (Pooled): 2.13 (1.69, 2.68)	
Curry 2017 [35]	Design Longitudinal observational	Population Participants were ≥ 18 years old, self-reported daily use of	Data collection Survey	Adjusted model: NA Smokers at T1, n=217	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
USA	study (secondary analysis of an RCT) Time to follow-up 3, 6, and 12 months (T1) Description of cohort: Ohio Appalachian adults who wanted to quit smoking and were enrolled in a community wide treatment trial. Six counties each were randomly assigned to one of two treatment conditions: face-to-face counseling or referral to the Ohio Tobacco	combustible tobacco, resident of a participating county, no contraindication to NRT, if female, non-pregnant, willing to participate in study protocol; and provision of written informed consent. Only participants who provided complete answers on tobacco use at T0 were included. N= 217 Age 18-24: 3.3 % 25-54: 60.0 % Age ≥55: N36.9 % Sex: Female: 70.0%; Male: 30.0% Ethnicity: White: 94.9 %; Other: 5.1 % Education: Less than high school: 10.2% More than high school: 55.0% Drop-out rate Na	Definition of smokers Any kind of tobacco in the past 7 days. Exposure E-cigarette use post-treatment: Self-reported past 7-day e-cigarette use (every day or some days) Outcome Tobacco abstinence: self-report of no tobacco use, in the past 7 days as confirmed by a saliva cotinine concentration of <15 ng/mL, or by expired air carbon monoxide level of < 8 parts per million if participant was using NRT or e-cigarettes.	Outcome: Tobacco abstinence at 12 months follow-up, % (SE): No e-cigarette post-treatment use, 33/174: 19% (3.0) E-cigarette post-treatment use, n=2/43: 4.7% (3.2) Outcome: Tobacco abstinence at 12 months follow-up, OR (95% CI): No e-cigarette post-treatment use: 1.00 E-cigarette post-treatment use: 0.208 (0.048; 0.906) Stratified by baseline e-cig use Smokers at T1, n=217. Outcome: Tobacco abstinence at 12 months follow-up, % (SE): No baseline use, No e-cigarette post-treatment use, n=150: 19.3% (3.2) Baseline use, No e-cigarette post-treatment use, n=24: 16.7% (7.6)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Quitline. Both treatment conditions included standardised cognitive-behavioral counseling and free NRT (daily 21 mg patch for 8 weeks). As there was no statistically significant difference in 12-month abstinence by treatment condition (p = .29) and use of ecigarettes was similar between treatment conditions (p = .49), data were combined for this secondary analysis. Data			No baseline use, E-cigarette post-treatment use, n=28: 3.6% (3.5) Baseline use, E-cigarette post-treatment use, n=15: 6.7% (6.4) Outcome: Tobacco abstinence at 12 months follow-up, OR (95% CI): No baseline use, No e-cigarette post-treatment use: 1.00 Baseline use, No e-cigarette post-treatment use: 0.834 (0.265; 2.629) No baseline use, E-cigarette post-treatment use: 0.155 (0.020; 1.184) Baseline use, E-cigarette post-treatment use: 0.298 (0.038; 2.359)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
Flacco 2019 [45] Italy	collection by survey. Study period 2010–2013, the secondary analysis includes a subset of participants enrolled 2012–2013 Design Observational study, 4 year follow up, contact via phone or internet Time to follow-up 4 years Description of cohort Participants were recruited via general	Population Adults between the ages of 30 and 75 who have smoked tobacco (only), e-cig (only), or both (dual users) for at least 6 months. N = 915 at 4-year-followup 471 tobacco smokers 228 e-cig smokers 216 dual users Age Mean (SD)= 48.4 (na) Sex, % F: 43.7%; M: 56.3%	Definition of smokers Tobacco smokers smoke ≥1 cigarette/day E-cig users inhale ≥50 puffs weekly from any type of e-cig Dual users use both tobacco and e-cig as defined above. Smoking abstinence is defined as complete abstinence from tobacco smoking (not even a puff) for the 30 days period prior to the visit. Exposure E-cig users inhale ≥50 puffs weekly from any type of e-cig	Adjusted model: Multivariate random-effect logistic/linear regression, with geographical region as the cluster unit, adjusted for baseline age, gender, BMI, marital status, educational level, occupation, alcohol use, hypertension, hypercholesterolemia, diabetes, self-rated health, smoking/vaping amount, and years of tobacco smoking.	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	practitioners, e-cigarette shops, internet advertisements, and social networks Study period TO 2013	Drop-out rate Total enrolled 1355 N=959 at 12-month follow-up (provided some data) 70.8%	A1 Provided data at 12-month follow-up, exposure defined by baseline use status, regardless of product use switching A2 Provided data at 48-month follow-up, exposure defined by baseline use status, regardless of product use switching A3 Provided data at 48-month follow-up, exposure defined by baseline use status, never switched product use Outcomes Rate of cessation of all products (>30 days): Quit all products, Quit tobacco Rate of abstinence/cessation from tobacco smoking at 48 months	Current users of combustible tobacco Outcome: Stop use of combustible tobacco product (4-year follow-up) E-cigarette never users: 126/471 E-cigarette ever users: 73/216 Association between e-cigarette use and continuous tobacco abstinence from baseline or cessation from tobacco during follow-up. Adjusted OR (95%CI) = 1.41 (0.98 to 2.02); p= 0.066	
Gomajee 2019 [46] France	Design Prospective cohort (subgroup analysis), (CONSTANCES)	Population Daily smokers N=5400 n=4578 e-cig non-users n=822 e-cigarette users	Definition of smokers An active smoker reported currently smoking at least 1 cigarette per day	Adjusted for: age, sex, educational level, income, financial difficulties,	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Time to follow- up 2 years Description of cohort The CONSTANCES cohort was designed as a randomly selected sample of 200 000 adults drawn from France's compulsory health insurance scheme. Sampling adjusted to get more representation from normally underrepresented groups. Study period	Age (smokers) E-cigarette-non-users: mean (SD)=44.7 (12.5) E-cigarette-users: mean (SD)=45.9 (11.6) Sex, % F: 53.8% E-cig-non-users: 54.8% E-cig-users: 48.5% M: 46.2% E-cig-non-users: 45.2% E-cig-users: 51.5% Ethnicity, % Non-French: 1.7% Education: No tertiary education: 45.0% E-cigarette-non-users: 46,8% E-cigarette-users: 45.9% Cigarettes per day (IQR): E-cigarette-non-users: 10.0 (5 to 15) E-cigarette-users:	A pack-year is defined as 20 cigarettes smoked every day for 1 year Exposure Participants reported current regular (daily) e-cig use (yes or no) at T0. Outcome The number of cigarettes smoked per day Smoking cessation among smokers (i.e. 0 cigarettes per day in any year of follow-up)	marital status, number of cigarettes smoked at baseline, number of pack-years of smoking, duration of previous quit attempts, history of depression and depression at baseline and respiratory problems. Current users of combustible tobacco Outcome: Longitudinal changes in smoking cessation - unadjusted RR (95%CI): E-cigarette never users, n=4578: reference E-cigarette ever users, n=822: 1.59 (1.45 to 1.76) Group difference (95% CI) = p< 0.001	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	T0 Jan 2012 to 2015 T1 Feb 2017 to Oct 2018	Selection of data / missing data N=40 311 participants with at least 1 completed follow up report Excluded participants with no data collected on e-cig use (1023 daily smokers and 21 former smokers) E-cig users at baseline = 194 Overall, less than 2% of data were missing, except for data on number of pack-years of smoking, which were unavailable for 718 of 7425 participants (9.7%).		Outcome: Longitudinal changes in smoking cessation - adjusted RR (95%CI): E-cigarette never users, n=4578: reference E-cigarette ever users, n=822: 1.67 (1.51 to 1.84) Group difference (95% CI) = p< 0.001	
Grana 2014 [42] USA	Design Longitudinal cohort – Knowledge networks (now GfK) Time to follow- up 1 year Description of cohort	Population completed both the baseline and the follow-up surveys and were current cigarette smokers. Current smokers who completed the baseline and follow-up survey. N= 1189 Age (years): 18−29: 9.4% 30−44: 20.5% 45−59: 46.4% ≥60: 23.7%	Definition of smokers Current cigarette smokers: smoking cigarettes in the past 30 days Exposure at time T0 E-cigarette use: use of e-cigarettes at least once in the last 30 days. Outcome at time T1 Smoking status: quit smoking (not defined).	Adjusted model: Adjusted for intent to quit, consumption of cigarettes and dependence. Regression analyses including demographic variable s (age, sex, education, ethnicity) found that none of these variables were significant, so they were omitted from the final models. Smokers at T0	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Probability-based web-enabled panel of a national sample of current US smokers Study period 2011–2012	Sex: F: 52.4%: M: 47.6% Ethnicity: White, non-Hispanic: 75.3% Black, non-Hispanic: 10.4% Hispanic: 8.3% Other, non-Hispanic: 5.9% Education (%): Less than high school: 9.2% High school: 39.6% Some college: 32.6% College and higher: 18.7% Intention to quit: Never expect to quit: 12.4% Will quit, but not in the next 6 m: 57.0% Will quit in the next 6 m: 23.8% Will quit within next month: 6.8% Drop-out rate Response rate 81.9 %. Respondents who provided nonsensical data were excluded, yielding a final sample of N=949 (79.8%)		Outcome: Cigarette non- users at T1: Non e-cigarette users: 119/861 (13.8%) E-cigarette users: 9/88 (10.2%) Unadjusted model: Non e-cigarette users: OR:1.0 E-cigarette ever users: OR: 0.71 (0.35-1.46), p=0.35 Adjusted model: Non e-cigarette users: OR:1.0 E-cigarette past 30-day users: OR: 0.76 (0.36- 1.60)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
Hair 2019 [33] USA	Prospective cohort – Sample drawn from the Truth Longitudinal Cohort and subsamples from the GfK's Knowledge Panel and recruited through random digit dialling. Time to follow-up Follow up period: 6 months, in total 6 waves Setting A large, probability-based, nationally representative sample of youth and young adults (drawn from the Truth	Population Youth and young adults, 15–21 years old, who completed two or more follow up surveys across six waves. N=15,275 (Completed at least two waves, i.e. 6 months follow-up) Age: Mean: 18.61 yrs. SD: 2.11 Sex: F: 48.7%; M: 51.3% Ethnicity: White: 66.6%; Other: 33.1%; No info: 0.03% Parent education: More than High school: 84.0% High school or less: 14.6% No information: 1.4% Drop-out rate Retention rates across all waves ranged from 61% to 71%.	Definition of smokers Combustible tobacco: Includes cigarettes hookah and all types of cigars Exposure ENDS use: includes e-cigarettes and e- hookah. ENDS use defined as never, non- current (not in the past 30 days), ENDS-only use, Dual use and combustible only use (i.e. no ENDS). Outcome Transitions between never use, noncurrent use, and past 30-day use of combustible tobacco, e-cigarettes (ENDS), and dual use of both kinds of products. Current use: Use of combustible tobacco in the past 30 days. Smoking cessation: No use of combustible tobacco in past 30 days.	Adjusted model adjusted for age, gender, ethnicity, parental education All data is calculated from the adjusted model: Smokers at T0 Outcome (T1): Stopped smoking 30 d; n(%) Combustible only: 547/1359 (40.2%) Dual use:252/932 (27.0%)	Low

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Longitudinal Cohort (TLC)). Subsamples recruited through random digit dialling and from GfK's Knowledge Panel. Study period T0: 2014–2017. T0: time of first observation, T1: 6 months later.				
Hammond 2017 [43] Canada	Design Cohort study (COMPASS) Time to follow- up 1 year Setting Students in 9 th – 12 th grades in 86 selected Canadian	Population Canadian secondary school students. N= 57 229 (enrolled T0) N=44 163 (analysed T0)) N=41 262 (analysed T1) N=19 310 (longitudinal; answered both waves) Age (years at T0) ≤14: 32.4 15: 33.7% 16: 27.1%	Definition of smokers Current daily smokers: Smoked ≥100 cigarettes in a lifetime and smoked every day the past 30 days Current occasional smokers: Smoked ≥100 cigarettes in a lifetime and smoked ≥1 day but less than 30 in the past 30 days Experimental smokers: smoked ≥1 cigarette but less than 100 in a lifetime.	Adjusted model for both outcomes, the models were adjusted for age, sex, race/ethnicity, spending money, smoking status, and past 30-day e-cigarette use as fixed effects, and a random effect of school (to account for student clustering within schools). Current cigarette smokers at T0, n=455,	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	secondary schools. Data collected using paper-based surveys administered by teachers, under the supervision of study research assistants. Study period T0: 2013/14 T1: 2014/15	17: 6.2% ≥18: 102/19310=0.5% Sex (%) F: 53.4%; M: 46.6% Ethnicity: White: 77.7%; Black: 3.1% Asian: 5.1%; Aboriginal: 2.5% Hispanic/Latino:1.6%; Other/Mixed ethnicity: 10.0%. Parental education: NA Drop-out rate Participants with missing data were excluded	Puffers: Have tired smoking but less than a whole cigarette in a lifetime. Exposure Past 30-day use of e-cigarettes at T0 Outcome Daily smoking initiation: not ever smoked every day for at least 7 days in a row at T0 but at T1.	Outcome: Stopped smoking (T1) (n=39): E-cigarette non-users: 23/39 (59.0%) E-cigarette users: 16/39 (41.0%)	
Harlow 2019 [41] USA	Design Prospective cohort – US Population Assessment of Tobacco and Health (PATH), wave 1 and 2. [1]	Population PATH participants who were 18 years or older at T0, and established cigarette smokers but not current e- cigarette users T1: N=8,852 T2: N=7,219 (answered both waves) Final sample: N=6,592 Age	Definition of smokers Dual users (began using e-cigarettes between T0 and T1 and continued smoking cigarettes) Exclusive e-cigarette users (began using e-cigarettes and quit smoking between T0 and T1). Former smokers (did not begin using e-cigarettes and quit smoking). No transition (did not begin using e-cigarettes and continued smoking cigarettes).	Adjusted model: Adjusted for age, sex, ethnicity, geographic region and socio-economy, where income and education were considered two separate proxies for socioeconomic differences. Current smokers (T0):	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Time to follow-up 1 year Description of cohort More than 49 000 participants from across the US. Recruitment using a stratified address-based, area-probability sampling design Study period T0: 2013–2014 T1: 2014–2015	About 75% were between 18 and 54 years. 25% were older than 54 years. Sex F: 44.39% M: 55.61% Ethnicity: White: 68.79% Black: 14.45% Hispanic:10.98% Other: 5.78%. Education: Less than high school: 16.2% High school or GED: 39.2% Some or more college: 44.65% Drop-out rate, n (%) 2260/8,852 = 25.5% Non-responders at T1: 1,633. Excluded due to non-response and missing data: 627	Exposure Uptake of e-cigarettes between T0 and T1. E-cigarette defined as currently using e-cigarettes every day, some days, or experimentally. E-cigarette use at T0 defined as using e-cigarettes experimentally, some days or every day. Outcome Quit smoking: not currently smoking cigarettes, and not having smoked any cigarettes in the past 30 days. Established cigarette users: smoking at least 100 cigarettes in their lifetime, and currently smoke every day or some days.	Outcome (T1): Quit smoking cigarettes, n(%): E-cigarette ever user (T1): 285/3404 (8.4%) E-cigarette never-user (T1): 238/2839 (8.4%)	
Kasza 2018 [36] USA	Design Prospective cohort – US Population Assessment of	Population Adult (≥18 years) tobacco users and non-users in the USA, followed for one year.	Definition of smokers: Current cigarette users: reported smoking at least 100 cigarettes in their lifetime, and currently smoking every day or some days.	Adjusted model: NA Current smokers at T0 Outcome: Non-smoking at T1:	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Tobacco and Health (PATH), wave 1 and 2. [1] Time to follow-up 1 year Description of cohort Nationally representative longitudinal study of tobacco use, and health among non-institutionalized civilian adults and youths in the U.S. Stratified address-based, area-probability sampling design. Data collected using audio. computer assisted	Participants who answered both waves: Young (18-24 years): N=7,324 Older (25 and older): N=19,115 Age (at T0) 18-24 years: N= 28.2% 25 or older: N= 71.8% Sex: Na Ethnicity: Na Education: Na Drop-out rate between T0 and T1: 18-24 years: N=1,785/9,109 (19.6%) 25 and older: N=4,079/23,194 (17.6%)	Current hookah users: currently smoking every day, some days, usually weekly or usually monthly. Current user of other tobacco products: smoking/using every day or some days. Exposure Use of e- cigarettes at baseline, defined as now smoking/using every day or some days Outcome Transition from smoking combustible tobacco to no tobacco use or no combustible use in the past 30 days.	Young adults (18-24 years at T0): 2527 participants E-cigarette never users: 486/1977 (24.6%) E-cigarette ever users: 77/549 (14.1%) Older adults (25 years and older at T0): 8315 participants E-cigarette non-users: 499/3575 (14%) E-cigarette current users: 88/745 (11.8%)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	self-interviews administered in English or Spanish. Weighted response rate for the adult interview was 74.0% at T0 and 83.2% at T1. Study period T0: 2013–2014 T1: 2014–2015				
Kurti 2018 [23] USA	Design Prospective cohort – US Population Assessment of Tobacco and Health (PATH), wave 1 and 2. [1] Time to follow- up 1 year	Population All women in reproductive age (18–44 years) who completed the first two waves of the PATH-study. Women not pregnant in either wave: N = 7,480 Women not pregnant at T0 and pregnant at T1: N = 332 Women pregnant at T0 and not pregnant at T1: N = 325. Total: N = 8,137 Age	*Non-users: Did not meet the criteria for using cigarettes or other tobacco products. *Current users: Smoking ≥100 lifetime cigarettes and smoking every day or some days (current established smokers) or did not report smoking ≥100 lifetime cigarettes but were smoking every day or some days (current experimental smokers).	Adjusted model: NA Among women not pregnant in either wave Current cigarette smokers at T0 Outcome: no tobacco-use at T1: E-cigarette non-current users: 125/1062 (11.8%) E-cigarette current users: 27/232 (11.6%)	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Description of cohort Nationally representative longitudinal study of tobacco use, and health among noninstitutionalized civilian adults and youths in the U.S. Stratified area probability sample design, with data collection by computer-assisted personal interviewing or audio computer assisted self-interviewing administered in English or Spanish. The overall weighted	18-24 years: 28.0% 25-34 years: 37.4% 35-44 years: 34.7% Sex F: 100%; M: 0% Ethnicity: White: 57.4%, Black:12.1%; Hispanic: 21.1%, Other: 8.8% Education Level <high 20.0%="" 36.4%="" advanced="" and="" associate="" bachelor's="" both="" college="" degree:="" degree:30.5%="" drop-out="" excluded.<="" ged:13.2%="" graduate:="" high="" in="" pregnant="" rate="" school="" seventeen="" some="" td="" waves="" were="" women=""><td>Users of other products (e-cigarettes): Having ever used the product fairly, regularly and using some days or every day now (current established users), or reported using the product before but not fairly, regularly and using some days or every day now (current experimental users) Exposure Current established or current experimental e-cigarette use at T0. Outcome Transition from smoking cigarettes to non-use of cigarettes</td><td>Among women not pregnant in either wave Current combustible tobacco users at T0 Outcome: no tobacco-use at T1: E-cigarette non-users: 220/1272 (17.3%) E-cigarette current users: 27/232 (11.6%)</td><td></td></high>	Users of other products (e-cigarettes): Having ever used the product fairly, regularly and using some days or every day now (current established users), or reported using the product before but not fairly, regularly and using some days or every day now (current experimental users) Exposure Current established or current experimental e-cigarette use at T0. Outcome Transition from smoking cigarettes to non-use of cigarettes	Among women not pregnant in either wave Current combustible tobacco users at T0 Outcome: no tobacco-use at T1: E-cigarette non-users: 220/1272 (17.3%) E-cigarette current users: 27/232 (11.6%)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	response rate was 74.0% at T0, weighted retention rate 88.4% at T1. Study period T0: 2013–2014				
	T1: 2014–2015				
Leventhal 2016 [30] USA	Prospective cohort study Time to follow-up 6 months Description of cohort High school students, in 10 public high schools in Los Angeles County, USA. Among 4100 eligible students 82.8% provided	Population Students in 10 public high schools T0: N= 3396 T1: N= 3251 Complete smoking and vaping data: N=3084 Age: Mean at T0: 15.5 yrs. Sex: F: 54.3%, M: 45.7% Ethnicity: Hispanic: 47.3%, Other: 52.7% Parental education: NA Drop-out rate	Definition of smokers Cigarettes Non-smoker: Never used, or not used in the last 30 days Current user: Used in the last 30 days E-cigarettes: Never user Prior use: Ever used, but not used in the past 30 days Current user: Used in the last 30 days Current user: Used in the last 30 days Ever used: Prior and current use Exposure Use of e-cigarettes at T0 Outcome Current use of cigarettes: smoking in past 30 days	Adjusted model adjusted for age, sex, ethnicity, highest parental education, whether the student lived with both parents, ever use of alcohol or drugs, ever use of any combustible tobacco product, family history of smoking, depressive symptoms (Cronbach α =.94), UPPS Impulsive Behavior Scale lack of premeditation (α = .94) and sensation seeking (α =.91) subscales, delinquent behavior (α =.81), peer smoking, smoking susceptibility (α	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	assent and parental consent. Response ratel 96.6% at T0. Surveys administered during school semesters Study period T0: 2014 (fall) T1:2015 (spring)	312/3396 (9.2%)	Smoking frequency: N.o days of smoking in the last 30 days.	=.87), and smoking expectancies (α = .46). Current smokers at T0 (n=118) Outcome: Non-smokers at T1: Never e-cigarette users: 9/16 Prior e-cigarette users: 17/28 Current e-cigarette users: 17/28 Current e-cigarette users: 35/74 (Pooled) Ever e-cigarette user: 52/102	
Mantey 2017 [24] USA	Design Prospective cohort study, the Marketing and Promotions across Colleges in Texas project (Project M- PACT) Time to follow- up	Population 18–29-year-old college students reporting a history of cigarette smoking at T0, defined as having smoked 100 cigarettes in their lifetimes, were eligible. (N = 1018). Analytical sample: N= 627 Age M (SD) = 22.2 (3.1)	Definition of smokers Definition of smoker: participants reporting a history of cigarette smoking at T0, defined as having smoked 100 cigarettes in their lifetime. Current smoker: On the question "reporting smoking cigarettes "everyday" or "someday".	Adjusted model: Multilevel analyses were conducted for all models to account for the nesting of participants within their Wave 1 college or university and adjusted for: Cigarettes Smoked Per Day at wave 1, Quit Attempt in Past 12-months at wave 1, age, sex,	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Description of cohort Project M-PACT is a rapid response surveillance study, collecting data every six month from a cohort of students in 24 colleges in Texas, USA. Students were recruited via email to participate in the online survey regarding tobacco use. 13,714 students eligible to participate in survey, 5,428 provided consent	Sex F= 57.3% M= 42.7% Ethnicity non-Hispanic white: 50.4% Hispanic/Latino: 28.6% African American: 3.2% Asian-American: 9.1% "other": 8.8% Education: Four-year college/university: 549/627 (87.6%) Smoking behaviour at TO (% of people): Quit attempts in the past 12-months: 62.0% Reported use of e-cigarette in the past 30-days for reasons other than cigarette smoking cessation 19.1%, for cigarette smoking cessation 18.5%. Drop-out rate Among eligible participants, 391/1018=38.4% missing data.	Non-cigarette smokers – abstainers/ former smokers: On the question "Do you now smoke cigarettes?" reporting "not at all". Exposure Self-reported use of e-cigarettes (i.e., an e-cigarette, vape pen, or e-hookah) in the past 30-days at T0, even one or 2 puffs, as intended (i.e. with nicotine cartridges and/or e-liquid/e-juice)?" Stratified by "Use for smoking cessation" and "Not use for smoking cessation". Outcome Self-reported use of cigarettes "everyday" or "someday"	race/ethnicity, 2 or 4-year college. Ever cigarette smokers at T0 Outcome: Cigarette smoking cessation at 6 months follow-up, OR (95%CI): Adjusted model: B2) Ever cigarette smokers E-cigarette non-users: 1.00 E-cigarette users (not for smoking cessation): 0.72 (0.44; 1.19) E-cigarette users (for smoking cessation): 1.95 (1.16; 3.28) E-cigarette user (Pooled): 1.15 (0.81, 1.65) Ever cigarette smokers at T0 Outcome: Cigarette smokers at T0 Outcome: Cigarette smoking cessation 12 months follow-up, OR (95%CI): Adjusted model: E-cigarette non-users: 1.00	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	and completed survey. Study period T0: November 2014 - February 2015 T1: May-June 2015 - T32: October- November 2015 Retention rates ranging from 79% for T1 and T2 to 79% for T3.			E-cigarette users (not for smoking cessation): 0.81 (0.50 to 1.30) E-cigarette users (for smoking cessation): 1.66 (1.00 to 2.74) E-cigarette user (Pooled): 1.14 (0.80, 1.62)	
Manzoli 2017 [47] Italy	Design Prospective cohort study Time to follow- up 1-2 years Description of cohort	Population Adult residents in Italy, 30 to 75- year old smokers of e-cigarettes (inhaling at least 50 puffs/week) or cigarettes (at least 1 cigarette/day), or both, for a minimum of 6 months. Enrolled: N=1,598 Complete baseline data and eligible for inclusion: N= 1,355 Analytical sample (T1): N= 932	Definition of smokers Tobacco smokers: smoked ≥1 tobacco cigarette/day for ≥6 months E-cigarette users: inhaled ≥50 puffs/week of any type of e-cigarette for ≥6 months Dual users: smoked tobacco cigarettes and used e-cigarettes for ≥6 months. Exposure Use of e-cigarettes	Adjusted model: multivariate analyses. Random-effect logistic regression with region as the cluster level, adjusting for the following baseline characteristics: age, gender, BMI, marital status, educational level, occupation, alcohol use, hypertension,	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Participants recruited through newspaper and internet advertisements, and via tobacco outlets, social networks and general practitioners. Data collected by structured questionnaire administered through phone interview and/or by internet. Overall response rate 68.8 %. Study period Not reported which year the study was conducted, but enrollment planned for June- December 2013.	Age: Mean (SD): 44.4y (11.6) Sex: F: 43.8%, M: 56.2% Ethnicity: Na Education: Elementary/Middle school: 21.6% High school: 46.6% Bachelor or higher: 31.9% Drop-out rate T1: 423/1,355= 31.2% 1 year: 330 (20.7 %) 2 year: 27 (22.3 %)	Outcome Sustained abstinence from smoking for at least 30 days, at 24 months follow-up. Carbon monoxide levels were tested in 50% of those declaring tobacco smoking abstinence.	hypercholesterolemia, diabetes, self-reported health, years of tobacco smoking, number of tobacco cigarettes smoked per day. A total of 682 participants were included in the final model due to 21 missing items in the self-reported health item at baseline Current users of conventional cigarettes, at T0 Outcome: Smoking abstinence of at least 30 days at T1, n (%) E-cigarette non-users at T1: 111/480 (23.1%) E-cigarette users at T1: 58/223 (26.0%) Unadjusted OR (95 % CI): E-cigarette non-users at T0: 1.00 E-cigarette users at T0: 1.17 (0.81; 1.69)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	T0: baseline T1: 24-month follow-up			Adjusted OR (95 % CI): E-cigarette non-users at T1: 1.00 E-cigarette users at T1: 1.25 (0.85; 1.84)	
Niaura 2019 [38] USA	Design Prospective cohort (analysis of a subset of participants)	Population A national sample of US young adult tobacco product users and nonusers between the ages of 18 and 34 years at baseline.	Definition of smokers Categories based on self-reported tobacco product use over the last 30-days: - never use	Adjusted model: Transition probabilities between the specified states of interest were estimated in 6-month	Moderate
	Time to follow- up 6-month intervals over 3 years	T0 N=8060 Never use: 3700, 45.9% Non-current use: 2221, 27.5% Dual use: 182, 2.3% Combustible use: 1890; 23.3%	- non-current use (respondents who replied they had used a product but not in the last 30 days) - current use - dual use	increments using multistate, continuous time, first-order Markov models. Participant age (in years) at baseline was included as a covariate in	
	Description of cohort This study used seven	E-cig use: 67, 0.8% Age Mean (SD) = 25.97 (4.87) years	Combustible tobacco: cigarettes, cigars, pipe tobacco, little cigars/cigarillos, or hookah	the analytic model. All data from adjusted model	
	consecutive, bi- annual waves of data from the Truth Initiative Young Adult Cohort Study.	Sex, % F: 58%, M: 42% Ethnicity, % White: 60.2%	Exposure past 30-day use of e-cigarettes Outcome Past 30-day use	B2) current users of combustible tobacco; Outcome: use of combustible tobacco product;	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	The sample was recruited via address-based sampling methods to provide a statistically valid representation of the US population. After Wave 1, subsequent waves included a refreshed sample to retain the initial sample size. Study period T0: December 2011 (wave 2) T6: July 2015 (wave 8)	Black: 9.3% Hispanic: 22.8% Other: 7.6% Education <high 13.5%="" 14.9%="" 21.8%="" 29.1%="" 39.7%="" 4.4%="" 46.2%="" 6.6%="" 64.2%="" 65.7%="" 68.4%="" 8060="" 9.5%="" 9271="" a="" across="" all="" analysis.<="" available="" bachelor="" by="" college:="" completion="" cumulative="" degree:="" demographic="" drop-out="" eligible="" for="" from="" graduate="" high="" households="" information="" initial="" key="" of="" or="" provided="" ranged="" rate="" recruitment="" respondents="" response="" sampled,="" school:="" some="" td="" the="" this="" to="" total="" unique="" waves="" were="" which=""><td>Smoking cessation</td><td>(transition prob. for combustible and dual use * n t0) 6-month follow-up E-cigarette never users: 1724/1890 E-cigarette ever users: 164/182) B2) current users of combustible tobacco; Outcome: Stop using combustible tobacco product; (transition prob. for only e-cigarette or non-use * n t0) 6-month follow-up E-cigarette never users: 166/1890) E-cigarette ever users: 19/182</td><td></td></high>	Smoking cessation	(transition prob. for combustible and dual use * n t0) 6-month follow-up E-cigarette never users: 1724/1890 E-cigarette ever users: 164/182) B2) current users of combustible tobacco; Outcome: Stop using combustible tobacco product; (transition prob. for only e-cigarette or non-use * n t0) 6-month follow-up E-cigarette never users: 166/1890) E-cigarette ever users: 19/182	
Pasquereau 2017 [48] France	Design Prospective cohort study	Population Smokers aged 15–85 years. N at T0= 3,000 (2661 tobacco smokers and 229 dual users)	Definition of smokers Smokers who defined themselves as current smokers, even if occasionally.	Adjusted model: Adjusted for sex, age, occupational status, level of education, level of income per CU, socio-	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Time to follow- up 6 months Description of cohort Participants recruited through an Access panel for two internet- based survey waves. Recruitment before and after the launch of the French National Smoking reduction Program (described as a highly emotional media campaign with negative health effect messages). Quaotas based on sex, age, occupational status and socio-	N at T1= 2,057 (1805 tobacco smokers and 252 dual users) Age: 15-24: 18.1% 25-34: 23.8% 35-49: 34.8% 50-85: 23.4% Sex: F: 45.9%, M: 54.1% Ethnicity: NA Education: Less than secondary: 26.4% Secondary: 27.5% Post-secondary: 46.1% Intention to quit in the next 6 months at T0: No: 56.2%, Yes: 43.8% Number of cigarettes smoked per day: 0-10: 61.8% 11-20: 31.3% >20: 6.9% Drop-out rate Tobacco smokers: 856/2661= 32.2%	Dual use was defined as current use of both e-cigarettes (regularly) and conventional cigarettes (even occasionally). Exposure Regular use of e-cigarettes in the last 30 days at T0 Outcome Smoking cessation: Smoking abstinence for at least 7 days or at least 30 days.	professional category, size of urban unit, heaviness of smoking index, intention to stop smoking in the next 6 months and quit attempts in the previous 30 days, reported at T0. Tobacco smokers at T0 Outcome: smoking cessation (≥7 days) at T1; n (%) E-cigarette non-user: 165/2661 (6.2%) E-cigarette user: 32/339 (9.4%) Adjusted model: E-cigarette non-users at T0: 1.00 E-cigarette users at T0: 1.2 (0.8; 1.9) Tobacco smokers at T0 Outcome: Quit smoking for at least 30 days (n=2,057), AOR (95 % CI)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	professional category size of 'urban unit', and region. Study period T0: 2014 T1: 2015	Dual smokers: 87/229= 38.0%		E-cigarette non-users at T0: 1.00 E-cigarette users at T0: 1.1 (0.7; 1.8)	
Piper 2019 [28] USA	Design longitudinal, observational study	Population Adult, daily smokers who were not interested in quitting smoking in the next 30 days	Definition of smokers Smoking only: smoked ≥5 cigarettes per day for the past 6 months and had not used e-cigarettes within the last 3 months	Adjusted model: Na Current users of cigarettes	Moderate
	Time to follow-up 4-month intervals for 1 year. Description of	Overall N= 322 Exclusive smokers n=117 Dual users n=205	Dual users: used nicotine-containing e- cigarettes at least once a week for the past 3 months and smoked daily for the last 3 months, with no plans to quit using e-cigarettes	Outcome: use of cigarettes at 4 month (t1) E-cigarette never users: 135/138 E-cigarette ever users: 209/218	
	cohort Recruited via television and social media advertisements Study period T0 T1 (4 months)	Age mean (SD) = 42.28 (14.05) Sex, % F: 51.2%, M: 48.8% Ethnicity, % White: 63%, Black: 23%, Other: 14%	Exposure ≥5 cigarettes per day for the past 6 months (smoking only) or smoked daily for the last 6 months (dual use) Outcome Smoking cessation	Outcome: Smoking cessation at 4 month (t1) E-cigarette never users: 3/138 E-cigarette ever users: 9/218	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	T2 (8 months) T3 (12 months)	(Hispanic: 5.3%) Education Less than high school: 9% High school / GED: 29% More than high school: 62% Intention to stop smoking (% yes) 0% Cigarettes per day: Overall Mean (SD): 13.68 (8.59) Smokers Mean (SD): 15.73 (10.02) Dual users Mean (SD): 12.52 (7.43) Vaping events per day: Dual users Mean (SD): 10.0 (14.2) Drop-out rate 422 enrolled 322 (76.3%) completed the year 1 assessment Total 100 (24%) lost to follow-up T1: 66 lost T2: 18 lost		Current users of cigarettes Outcome: use of cigarettes at 1 year E-cigarette never users: 114/117 E-cigarette ever users: 190/205 Outcome: Smoking cessation at 1 year E-cigarette never users: 3/117 E-cigarette ever users: 15/205	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
		T3: 16 lost			
Sutfin 2015 [25] USA	Design Prospective cohort study – the Smokeless Tobacco Use in College Students study. Time to follow- up 3 years (6 waves), Wave 6 = T5 Description of cohort First-semester college students at 7 colleges in North Carolina and 4 in Virginia, USA. Nine of the	Population First-semester college students, cigarette smokers but not e-cigarette users at T0. N=669 (cigarette smokers with no history of e-cigarette use at T0) N=581 (after exclusion of those who were not current smokers when trying e-cigarettes) N= 271 (analytical sample, after exclusion due to missing data)) Age M (SD) = na Sex F= 51.7%, M= 48.3% Race White: 89.7%, Non-White: 10.3%	Definition of current smokers: Current smokers: Respondents who have smoked a whole cigarette in the past 30 days. Exposure Self-reported trial or use of ecigarettes. Trying e-cigarettes was defined as use of e-cigarettes in the past 6 months between T1 and T4, and still being a current cigarette smoker. Users having tried e-cigarettes at T0 and first users at T5 were excluded. Outcome Current cigarette smoking at T5 Smoking frequency: number of days smoked in the past month (1–2; 3–14; 15–30)	Model adjusted for: demographics, membership in fraternities or sororities, lifetime other tobacco use, family members' and friends' smoking, sensation seeking, and trying e- cigarettes during waves 2 to 5 Trial or use of e- cigarettes between T0 and T4 among baseline smokers. Outcome (adjusted model): Current cigarette use at T5 (OR (95% CI): Never e-cigarette users: OR:1.0 E-cigarette ever users: OR:	Low
	colleges were public and 2 privates.	Ethnicity Hispanic: 5.9%, Non-Hispanic: 94.1% Maternal education:		2.48 (1.32 to 4.66) Trial or use of ecigarettes between T0	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	4902 students invited at T0, 3146 completed baseline survey (response rate 64.2%). Data collected through an online survey. Study period T0: 2010 (fall) T1: 2011 (spring) T2: 2011 (fall) T3: 2012 (spring) T4: 2012 (fall) T5: 2013 (fall)	College degree or higher: 59.4% Smoking frequency at T0 (days per month): 12: 39.1% 3–15: 39.5% >15: 21.4% Drop-out rate 310/581 (53.4%)		and T4 among baseline smokers. Outcome (adjusted model): Non-use of cigarettes at T5 (OR (95% CI): Never e-cigarette users: OR:1.0 E-cigarette ever users: OR: 0.40 (0.21 to 0.76)	
Verplaetse 2019 [26] USA	Design Cohort study – US Population Assessment of Tobacco and Health (PATH), wave 1 and 2. [1] Time to follow- up	Population Adults (≥18 years), who smoked conventional cigarettes at baseline, and completed follow-up. N at T0 = 32,320 N at T1 = 28,362 Age at baseline Men: 18–29: 38.6%	Definition of smokers Current smoker: having smoked at least 100 cigarettes in their life and currently smoke every day or some days. Former smoker: having smoked at least 100 cigarettes in their life but currently do not smoke at all.	Adjusted model Age, race, and education were evaluated as potential covariates and were removed from the final models if there was no impact on the pattern of results. All data from adjusted models:	Moderate

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Follow-up: 1 year	30–44: 24.5% >45: 36.9%	Quit: current smoker at wave 1, but not at wave 2.	Smokers at T0	
	Description of			Outcome: Stopped	
	cohort	Women:	Exposure	smoking at T1:	
	Non-	18–29: 38.0%	Daily e-cigarette users: current use	Never e-cigarette users:	
	institutionalised	30–44: 25.0%	every day at T0.	OR:1.0	
	US population 12	>45: 36.9%	N. I.I.	Nondaily e-cigarette users:	
	years of age and older., including	Sex	Nondaily e-cigarette users: current use some days at T0.	OR 0.83 (0.68; 1.02) Daily e-cigarette users: OR	
	45 971	No information	some days at 10.	1.56 (1.12; 2.18)	
	participants from	140 information	Never e-cigarette users: Never having	E-cigarette user (Pooled):	
	across the USA	Ethnicity:	used an e-cigarette in the past 12	0.98 (0.83, 1.16)	
	in wave 1, of	Men:	months at T0.	,	
	which (32 320	Caucasian: 61.4%		Female smokers at T0	
	were adults aged	African American: 13.3%	Outcome	Outcome: Stopped	
	18 and older and	Hispanic: 17.4%	Use of cigarettes at follow-up	smoking at T1:	
	13651 were	Other: 7.9%		Never e-cigarette users:	
	youths aged 12–	Women:		OR:1.0	
	17). Weighted	Caucasian: 60.1% African American: 15.0%		Nondaily e-cigarette users:	
	response rate T0 74%.	Hispanic: 17.5%		OR 0.81 (0.61–1.07) Daily e-cigarette users: OR	
	7470.	Other: 7.4%		1.41 (0.89–2.22)	
	Data collection	- Caron 7.170		1. 4 1 (0.07-2.22)	
	by in-household	Educational level:		Male smokers at T0	
	audio-computer	Men:		Outcome: Stopped	
	assisted	Less than high school or general		smoking at T1:	
	self-interviews in	educational development: 22.0		Never e-cigarette users:	
	English and	Completed high school or some		OR:1.0	
	Spanish.	college: 57.3%			

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Address-based area probability sample design. Study period T0: 2013–2014 T1: 2014–2015 Time to follow-up 1 year Setting A nationally representative sample of adults (≥18 years), who smoked conventional cigarettes at baseline, and completed wave 2 follow-up of PATH Study period Wave 1: 2013–2014	Bachelor's degree or higher: 20.8% Women: Less than high school or general educational development: 18.1% Completed high school or some college: 60.2% Bachelor's degree or higher: 21.6% Drop-out rate NA		Nondaily e-cigarette users: OR 0.85 (0.65–1.12) Daily e-cigarette users: OR 1.73 (1.05–2.84) E-cigarette user (Pooled): 1.84 (1.27, 2.68)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	Wave 2: 2014– 2015				
Weaver 2018 [27] USA	Design Prospective cohort study - GfK's Knowledge Panel) Time to follow- up 1 year Description of cohort Participants were recruited from GfK's Knowledge Panel, a probability-based web-panel designed to be representative of non- institutionalised	Population A random probability sample of current adult smokers N= 1284 invited at T0 N=1018 invited for follow -up at T1 N=858 (analytical sample) Current smokers: All baseline smokers (n=822) Current daily smokers: Baseline daily smokers (n=613) Mean age (SD): Any ENDS Use During Study 41.5 (39.1; 44.0) years No ENDS Use 45.1 (43.1; 47.2) years Sex Women: 409 (47.9%), Men: 445 (52.1%) Race/ethnicity:	Definition of smoking Current smokers: smoked at least 100 cigarettes in lifetime and reported smoking cigarettes every day or some days. Current daily smokers: smoked at least 100 cigarettes in lifetime and reported smoking cigarettes everyday Smoking abstinence (quitter): Not smoking in the past 30 days, not even one or two puffs. Exposure Use of e-cigarettes defined as currently using ENDS, "everyday", "some days", or "rarely". ENDS use assessed at T0 Users were categorized as daily e- cigarette users if they reported daily use of ENDS or using ≥25 days during the past 30 days at either	Model adjusted for: baseline perceptions of addiction, cravings to smoke, cigarettes smoked per day, number of years having smoked, past year quit attempts, use of nicotine replacement theory, poly-use of other combusted tobacco, smoker regret, socio- demographics (age, gender, race/ethnicity, education, household income, MSA status, marital status, sexual orientation, US Census region, children in household), perceived physical health, presence of asthma, chronic bronchitis or COPD, receiving psychological therapy, alcohol	Low
	U.S. adults. A sample of 1,284	White, Non-Hispanic N= 656, Black, Non-Hispanic N= 69,	baseline or follow-up otherwise non-daily user.	consumption, and past year participation in other	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	current established smokers was identified among respondents to the Tobacco Products and Risk Perception Survey for a 12- month follow-up survey. Study period 2015-2016	Other, Non-Hispanic N=22, Hispanic, Any Race N= 82, 2+ Races, Non-Hispanic N= 25 Educational level (highest education received on 14-level scale, higher score = higher educated): Any ENDS use during study: 9.1 (8.7; 9.6) No ENDS use: 9.4 (9.2; 9.7) Any ENDS use during study: 3.97 (3.7, 4.2) No ENDS use: 4.2 (4.0, 4.4) Average cigarettes smoked per day at T0, mean (95% CI): Any ENDS use during study: 11.4(10.0; 12.7) No ENDS use: 10.5 (9.4; 11.6) Drop-out rate N= 426/1284 (33,2 %) Response rate for follow-up survey 84%	Outcome Smoking abstinence for at least 30 days at follow-up.	tobacco studies through GfK. Unadjusted model Current smokers at T0 Outcome: stopped smoking (≥30 days) at T1 E-cigarette users at T0: 87/582 (14.9%) Not e-cigarette user at T0: 25/240 (10.4%) Daily smokers at T0 Outcome: stopped smoking (≥30 days) at T1 E-cigarette users at T0: 39/440 (8.9%) Not e-cigarette user at T0: 13/173 (7.5%) Current smokers at T0, e-cigarette use during T0-T1 Outcome: stopped smoking (≥30 days) at T1 No e-cigarette use: 83/486 (17.7%)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
Country				Non-daily e-cigarette use: 19/283 (6.7%) Daily e-cigarette use: 10/53 (18.9%) Daily smokers T0, e-cigarette use during T0-T1 Outcome: stopped smoking (≥30 days) at T1 No e-cigarette use: 36/365 Non-daily e-cigarette use: 7/213	
				Daily e-cigarette use: 9/35 Adjusted model Current smokers at T0 Outcome: Stopped smoking (≥30 days) at T1; AOR (95 % CI): Never e-cigarette users: OR:1.0 Ever e-cigarette users: OR 0.30 (0.13; 0.72) Daily smokers at T0	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
				Outcome: Stopped smoking (≥30 days) at T1; AOR (95 % CI): Never e-cigarette users: OR:1.0 Ever e-cigarette users: OR 0.37 (0.13; 1.05)	
Zhuang 2016 [29] USA	Design Longitudinal cohort study - Population drawn from GfK's Knowledge Panel	Population Adult smokers in the US $N=2,028$ $Age, %$	Definition of smokers Smokers were defined as those who had smoked at least 100 cigarettes in their lifetime and smoked every day or some days at the time of the survey	Adjusted model: Logistic regressions adjusted for baseline social demographics (age, gender, education (≤12y/>12y), ethnicity,	
	Time to follow- up 2 years	18–24 years: Long-term users: 26.5 Short-term users: 15.3 Non-users: 9.6 25–44 years:	Exposure Used e-cigarettes on at least 10 days in the last 30 days before T0. Long-term e-cigarette users: E-	cigarettes per day (CPD) and intention to quit smoking. Ever users of	
	Description of cohort A representative sample of 2028 US adult smokers (probability sample recruited through random	Long-term users: 16.8 Short-term users:40.0 Non-users:40.5 45–64 years: Long-term users: 51.0 Short-term users:38.8 Non-users: 40.2 65+ years	cigarette use at both T0 and T1 Short-term e-cigarette users: E-cigarette use only at T0 or only at T1. Outcome Smokers at follow-up who had quit smoking for at least 3 months	combustible tobacco at T1 Outcome: Quit smoking for at least 3 months since baseline E-cigarette never users: 234/1500 (15.6%)	

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
	dialling and address-based sampling.) of the US population. Study period T0: 2012 T1:2014	Long-term users: 5.8 Short-term users: 5.9 Non-users: 9.7 Sex, % Long-term users: F: 51.5, M: 48.5 Short-term users: F: 47.0, M: 53.0 Non-users: F: 48.2, M: 51.8 Ethnicity, % Non-Hispanic white: Long-term users: 77.3 Short-term users: 72.3 Non-users: 64.5 Non-Hispanic black: Long-term users: 4.6 Short-term users: 12.3 Non-users: 15.2 Hispanic: Long-term users: - Short-term users: 7.3 Non-users: 13.6		E-cigarette short term user: 65/456 (14.2%) E-cigarette long term user: 31/72 (42.4%) Unadjusted model; OR (95%CI): E-cigarette never users: 1.00 E-cigarette short term user: 0.90 (0.56; 1.43) E-cigarette long term user: 3.98 (1.52; 10.42) Adjusted model; OR (95%CI): E-cigarette never users: 1.00 E-cigarette short term user: 0.87 (0.53; 1.43) E-cigarette long term user: 4.14 (1.50; 11.42) E-cigarette user (Pooled): 1.17 (0.75, 1.83)	
		Other:			

First author Publication year Reference Country	Design Time to follow- up Setting Study period	Population Drop-out rate	Definition of smokers Exposure Outcome	Results	Risk of bias
		Long-term users: 18.1 Short-term users: 8.1 Non-users: 6.6 Education, more than 12 years (%): Long-term users: 36.7 Short-term users: 43.5 Non-users: 41.1 Intention to stop smoking (% yes) Long-term users: 49.7 Short-term users: 33.4 Non-users: 27.7 Cigarettes per day (%): <15 cigarettes Long-term users: 57.1 Short-term users: 56.7 Non-users: 63.4 Drop-out rate 2097 out of 3111 participants who were identified as current smokers at the 2012 baseline completed a follow-up survey (67.4%). Another 69 respondents excluded due to missing or inconsistent data.			

CI= confidence interval; F=female; M=male; MD= mean difference; Na= Information not available; T1=first measurement (baseline); T2= second measurement; T3=third measurement; OR= Odds ratio; RD= Risk Difference; RR= Relative risk; IRR = Incidence Rate Ratio

Table S6. Characteristics of included randomized controlled trials with low and moderate risk of bias

author Tir Publication foll Year Set	esign me to llow-up etting udy period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
2013 [54] New Zealand Tin foll 1, 3 mo Set Ad rec sm. wis qui	me to llow-up 3 and 6 onths etting dvertisement cruited adult nokers ashing to ait smoking udy period	Population Adult smokers, ≥18 years, that smoked ≥10 cigarettes per day for the past year and wanted to stop smoking. Exclusion criteria were among others current use of any cessation drug or being in an existing cessation program. N=657 (randomised) Nicotine e-cigarettes (N=289) Mean age (SD): 43.6 (12.7) Sex N=178 women (62 %) N= 111 men (38 %) Ethnicity: New Zealand Māori: 95 (33%), Non-Māori: 194 (67%) Lost to follow-up was 22%: 17% (48 of 289) in the nicotine e-cigarettes group Patches (N=295) Mean age (SD):	Participants were supplied with vouchers to cover dispensing costs. E-cigarette groups were couriered an e-cigarette, spare batterie and charger and cartridges.	Intervention E-cigarettes: the liquid was free of diethylene glycol (a toxin detected in fluid in one brands of e-cigarettes); nicotine cartridges (labelled 16 mg) contained 10–16 mg nicotine per ml. 300 puffs from one nicotine e-cigarette cartridge delivered 3–6 mg nicotine, equivalent to smoking between one and five tobacco cigarettes. Comparison Nicotine patches: Daily use, from 1 week before until 12 weeks after their chosen quit day, consistent with	Analysis model Continuous abstinence, RR (95 % CI); RD (95 % CI). All analyses are intention to treat, ITT (assumes all participants with missing smoking status were smoking). Results Users of combustible tobacco at T0 Outcome: Smoking abstinence 3 months Placebo e-cig: 5/73 (6.8%) Nicotine patches: 27/295 (9.2%)	Moderate

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		40.4 (13.0) Sex N=182 women (62 %) N= 113 men (38 %) Ethnicity: New Zealand Māori: 95 (32%), Non-Māori: 200 (68%) Lost to follow-up was 27% (80 of 295) in the patches group Placebo e-cigarettes (N=73) Mean age (SD): 43.2 (12.4) Sex N= 45 women (62 %) N= 28 men (38 %) Ethnicity: New Zealand Māori: 23 (32 %), Non-Māori:50 (68%) Lost to follow-up was 22% (16 of 73) in placebo e-cigarettes group. Drop-out rate Lost to follow-up is reported above.		smoking cessation guidelines. Placebo e- cigarettes: The placebo cartridges contained no nicotine. Outcome Continuous smoking abstinence (self-reported over the whole follow-up period, allowing ≤5 cigarettes in total). At last follow-up, 6 months after quit day, abstinence was verified at that point in time by exhaled breath carbon monoxide measurement (<10 ppm).	Nicotine e- cigarettes: 38/289 (13.1%) 6 months Placebo e-cig: 3/73 (4.1%) Nicotine patches: 17/295 (5.8%) Nicotine e- cigarettes: 21/289 (7.3%) All e-cigarettes: 24/362 (6.6%)	
Carpenter 2017	Design RCT	Population	Data collection	Intervention	Analysis model	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
[49] USA	Time to follow-up 4 months Setting Advertisement recruited adult smokers not seeking treatment to quit smoking Study period 2014–2016	Non-treatment seeking adult smokers from urban area, age >18, current smoker of ≥5 cigarettes per day (CPD) for ≥1 year, having at least some concern for health effects of smoking, and never purchased an ENDS product. Exclusion criteria were among others having used any ENDS product in the past 6 months. N=68 (Baseline) Control (N=22) Mean age (SD): 42.3 (14.2) Sex Women: (64 %), Men: (36 %) Ethnicity: White 59%, Black or African American, 41% Completed study: n=16 BluCig ENDS (16 mg) (N=25) Mean age (SD): 43.3 (14.4) Sex Women: (72 %), Men: (28 %)	Recruited from the local community using various media outlets. Randomization to group was stratified by motivation to quit in the next 30 days (0–6 vs. 7–10 on a VAS scale) but proportioned2:1 (ENDS:control) to increase precision estimates for ecigarette uptake and usage. Participants were compensated up to \$346	A: BluCig ENDS (16 mg) (N=25) B: BluCig ENDS (24 mg) (N=21) Both ENDS group participants were offered free ENDS with the choice of either traditional tobacco or menthol flavour. Comparison Control group not offered any free ENDS. Thus, trial outcomes are reported across three groups: control versus 16 mg versus 24 mg ENDS. Outcome Primary outcomes, assessed via daily diaries during sampling period and	Assessment of cessation-related behaviours (quit attempts, abstinence) followed an intent-to-treat approach (ITT), in which all missing cases were assumed as having no quit attempts/abstinence. Smokers at TO Outcome: Smoking abstinence Average during the whole study period: Control group: 1.01/22 (4.6%) ENDS 16 mg group: 2.0/25 (8.0%) ENDS 24 mg group: 5.00/21 (23.8%)	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		Ethnicity: White 56%, Black or African American, 40% Completed study: n=19 BluCig ENDS (24 mg) (N=21) Mean age (SD): 40.9 (12.3) Sex Women: (43 %) Men: (57 %) Ethnicity: White 48%, Black or African American, 52% Completed study: n=15 Drop-out rate N=18 (18/68= 26 %)		in-person laboratory visits over 4 months, included uptake and usage of ENDS, changes in smoking and cessation-related outcomes, and exposure to smoke constituents (i.e., cotinine, carbon monoxide, and NNAL).	4 months (follow-up): Control group: 1.01/22 (4.6%) ENDS 16 mg group: 1.0/25 (4.0%) ENDS 24 mg group: 2.00/21 (9.5%)	
Hajek 2019 [51] United Kingdom	Design RCT (pragmatic, multicentre, individually randomized, controlled trial)	Population Adult smokers attending U.K. National Health Service stop- smoking Services, who were not pregnant or breast-feeding and had no strong preference to use or not to use nicotine replacement or e- cigarettes and were currently not using either type of product.	Definitions Sustained abstinence Self-report of smoking no more than five cigarettes from 2 weeks after the target quit date, validated biochemically by an expired carbon monoxide level of less than 8 ppm at follow-up and not contradicted by any	Intervention Treatment included weekly behavioural support for at least 4 weeks. E-cigarettes: One Kit starter pack with 30-ml bottle of flavoured e-liquid (18mg/ml nicotine).	Analysis model: The primary and secondary abstinence outcomes were analysed by regression of smoking status at each time point onto trial group.	Low

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
	Time to	N 004 1 1 1	previous self-report or	2.1-ohm atinuzer	Primary analyses	
	follow-up	N= 886 randomised	validation result (Russel	abd 650-mAh	were adjusted for	
	4 weeks		Standard)	battery or 1.5-ohm	trial center to	
	52 weeks	Intention to stop smoking	Participants who were lost to	atomizer and 1000-	account for the	
	Ca44in a	100%, only those who had quit	follow-up or did not provide biochemical validation were	mAH battery (the	stratification factor.	
	Setting Three U.K.	smoking by the target quit date were randomized	considered to not be abstinent	latter used by 42 participants). Those	Smokers at T0	
	National	were randomized	No validation by expired	unable to obtain	(N=866)	
	Health	Nicotine e-cigarettes	carbon monoxide levels for	their own supply of	Outcome:	
	Service free	N=438	abstinence reported between	e-liquid were	Sustained smoking	
	stop-smoking	Mean age (IQR)	week 2 to 26.	supplied with one	abstinence	
	service sites:	41 (33-53) years		further 10-ml bottle.	(cigarettes)	
	Tower	Sex, %	7-day abstinence		12 months	
	Hamlets	F: 48.2 %, M: 51.8%	Self-reported abstinence rates	Comparison	Nicotine-	
	(London		at each time point (probably	Nicotine-	replacement	
	borough), City	Ethnicity:	for the last 7 days, but details	replacement	products: 44/446	
	of London,	NR	are not explicitly provided)	products:	(9.9%)	
	and Leicester /			participants could	E-cigarettes:	
	East Sussex	Education, %		choose between	79/438 (18.0%)	
		Primary school: 4.3%		patch, gum,		
	Study period	Secondary school: 32.2%		lozenge, nasal	6–12 months	
	May 2015 to	Further education / diploma:		spray, inhalator,	Nicotine-	
	February 2018	26.7%		mouth spray, moth	replacement	
		Higher education 36.7%		strip, and microtabs.	products: 53/446	
		Cigarettas non den modia: (IOD)		Participants could	(11.9%)	
		Cigarettes per day, median (IQR)		change and	E-cigarettes: 93/438	
		15 (10-20) cigarettes		combined products.	(21.2%)	
		Loss to follow up		Supplies provided for up to 3 months.	6 months	
		Loss to follow-up		for up to 5 months.	o monins	

Publication following Year Sett		Population Prop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
	4. see lo 4. 6. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	E-cigarettes 32/439 attended at least 1 ession after quit date, overall oss to follow-up: 7week: 63month: 87 2-month: 83 Nicotine replacement: 1=446 Mean age (IQR) -1 (33-51) years Sex, % Ethnicity: NR Education, % Primary school: 4.9% Secondary school: 29.2% Further education / diploma: 18.5% Higher education 37.5% Cigarettes per day, median (IQR) 5 (10-20) cigarettes		Outcomes Primary outcome: Sustained abstinence (1-year) Secondary outcomes: Sustained abstinence (6- month, from week 26 to week 52; at 4 weeks, at 26 weeks) 7-day abstinence (at 4 weeks, 26 weeks, and 52 weeks)	Nicotine-replacement products: 112/446 (25.1%) E-cigarettes: 155/438 (35.4%) Smokers at T0 (N=866) Outcome: 7-day abstinence from smoking 6 months Nicotine-replacement products: 115/446 (25.7%) E-cigarettes: 158/438 (36.0%) 6 months, unadjusted relative risk (95% CI) Nicotine-replacement products: 1.0 E-cigarettes: 1.39 (1.14 to 1.70)	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		Loss to follow-up 438/447 attended at least 1 session after quit date, overall loss to follow-up: 9 4-week: 91 6-month: 110 12-month: 105			12 months Nicotine- replacement products: 98/446 (21.9%) E-cigarettes: 146/438 (33.3%) 12 months, unadjusted relative risk (95% CI) Nicotine- replacement products: 1.0 E-cigarettes: 1.52 (1.23 to 1.90)	
Holliday 2019 [52] UK	Design RCT (pilot) Time to follow-up 6 months	Population Adult (18+) tobacco smoker, having periodontitis and a minimum of 16 natural teeth, and not currently using an e-cigarette (more than 2 days in last 30 days)	Definitions Smoker of burnt tobacco (≥10 factory-made cigarettes/day or 7g loose tobacco/day or 14 hand- rolled cigarettes/day)	Intervention - standard non- surgical periodontal therapies - brief smoking cessation advice	Analysis model ITT Users of combustible tobacco at T0 Outcome: quitter	Moderate
	Setting Dental care clinics	N=80 E-cigarettes (N=40)	Smoking cessation calculated using Russel Standard 6-month quitter method	- E-cigarette starter kit (included Vype eTank clearomizer	6 months Nicotine e- cigarettes: 6/40	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
	(hospital and private practices) Study period Recruitment from 20 September 2016 to 7 December 2017) Data collection ended 7 June 2018	Age, mean (SD) 44.0 (11.8) years Sex (%) N=22 women (55%) N=18 men (45%) Ethnicity: White N=39 (97.5%) Asian or Asian British N=1 (2.5%) Cigarettes per day (any), mean (SD) 17.4 (6.4) Education NA Lost to follow-up Control (N=40) Age, mean (SD) 44.6 (9.5) years Sex (%) N=20 women (50%) N=20 men (50%)	Participants with missing smoking outcome data (e.g. those not attending for review) were considered as continuing smokers or to have resumed smoking	and 2x 10 ml vaping liquid in choice of flavour and nicotine strength) Participants were asked to use only the recommended brand of e-liquid during the trial. Comparison - standard non-surgical periodontal therapies - brief smoking cessation advice - asked not to use e-cigarettes during the first 4 weeks Outcome Carbon monoxide-verified continuous abstinence	(15%, 95% CI 7 to 29%) No e-cig: 2/40 (5%, 95% CI 1 to 17%)	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		Ethnicity: White N=36 (90%) Asian or Asian British N=4 (10%) Cigarettes per day (any), mean (SD) 17.5 (6.9) Education NA Loss to follow-up Loss to follow-up was balanced between groups: four participants withdrew from the study, and 18 were lost to follow-up at 6 months. 30% of participants achieved ≥ 80% completion of weekly smoking questionnaire				
Lee SH 2019 [57] Republic of Korea	Design RCT single-centre, prospective, open-label,	Population Participants must have smoked at least 10 cigarettes per day in the preceding year, smoked for at least 3 years, and were motivated	Data collection Continuous abstinence was determined using self-reported questionnaires, verified with measurements	Intervention E-cigarettes: - Fifty-minute education sessions on smoking	Analysis model Continuous variables were analysed with independent t test.	Moderate

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
	randomized controlled, clinical pilot trial Time to follow-up 12 weeks 24 weeks Setting Adult Korean men employed at a motor	to stop smoking or reduce their cigarette consumption N=150 Nicotine e-cigarettes (N=75) Mean age (SD): 44.0 (7.8) years Sex N= 0 women (0 %) N= 150 men (100 %) Ethnicity: NA (Korean) Education, N (%)	of urine cotinine and end- expiratory carbon monoxide (<10ppm) levels	cessation and the use of smoking-cessation aids - provided with a 12-week supply for using e-cigarette (eGO-C Ovale, nicotine 0.01 mg/mL; Janty-Korea Co.) Comparison Nicotine gum: - Fifty-minute education sessions	Categorical variables were analyzed using the Chi2 test or Fisher- Freeman-Halton extension of Fisher's probability Test, as appropriate. Multivariable logistic regression analyses were performed controlling for possible confounders in both	
	company in Cheonan, Republic of Korea. Study period January to September 2012	High school or below: 51 (68.0) College or above: 24 (32.0) Cigarettes per day smoked, pack (SD) 1.05 (0.37) Lost to follow-up 4 participants withdrew before treatment began Nicotine gum (N=75) Mean age (SD): 40.7 (8.4) years		on smoking cessation and the use of smoking- cessation aids - provided with a 12-week supply of nicotine gum (Nicoman, nicotine 2 mg/tablet; Daewoong Pharmaceuticals) Outcome Primary	groups. Users of combustible tobacco at T0 Outcome: Continuous Abstinence Rate 9 to 12 weeks Nicotine e- cigarettes: 45.3% Nicotine gum: 46.7%	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		Sex N=0 women (0%) N=75 men (100%) Ethnicity: NA (Korean) Education, N (%) High school or below: 40 (53.3) College or above: 35 (46.7) Cigarettes per day smoked, pack (SD) 0.96 (0.36) Lost to follow-up 14 participants withdrew before treatment began		9 to 12-week and 9 to 24-week continuous abstinence rates Secondary 7-day point prevalence of abstinence at 12 and 24 weeks	9 to 24 weeks Nicotine e- cigarettes: 21.3% Nicotine gum: 28.0% Users of combustible tobacco at T0 Outcome: 7-Day Point Prevalence of Abstinence 12 weeks Nicotine e- cigarettes: 65.3% Nicotine gum: 66.7% 24 weeks Nicotine e- cigarettes: 22.7% Nicotine gum: 29.3%	
Lee, SM 2018 [50]	Design RCT	Population Participants were eligible if they presented to the anaesthesia	Data collection Healthcare providers were blinded throughout the	Intervention	Analysis model: ITT (those lost to follow up were	Moderate

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
USA	Time to follow-up 6 months follow-up 8 weeks preoperative patients at the San Francisco Veteran's Affairs Medical Center Study period Recruitment between August 2015 and February 2016. 6-month follow-up calls were completed in August 2016	preoperative (APO) clinic for elective surgery 3 or more days before surgery, were current cigarette smokers of more than two cigarettes per day, having smoked at least once in the last 7 days, and could provide consent. ENDS: N=20 NRT: N=10 Age (mean years (SD)) ENDS: 54 (12.7) NRT: 53 (10.6) Male sex (N (%)) ENDS: 18 (90%) NRT: 9 (90%) Ethnicity (N (%)) White: ENDS: 11 (55%) NRT: 5 (50%) Latino: ENDS: 2 (10%) NRT: 0 (0%) Education (N (%)) College degree or higher:	perioperative period. Outcome adjudicators were blinded wherever possible Definition of quitters/abstinence At six months follow-up, self-reported seven-day point prevalence smoking status and use of e-cigarettes was assessed	Electronic Nicotine Devices (ENDS) (n=20): Patients randomized to the ENDS group received a 6-week supply of NJOY e- cigarettes (Scottsdale, AZ, USA). The supply for the last week were without nicotine. The number of e- cigarettes issued corresponded to the reported baseline cigarettes smoked per day, calculated assuming one NJOY e-cigarette was equivalent to 10 cigarettes. Comparison Nicotine patches (NRT) (n=): Nicotine Replacement	assumed to have continued smoking). Results: Current smokers at T1 Outcome: Nonsmokers at 6 months follow-up NRT users: 1/10 (10%); RR: 1.0 END users: 5/20 (25%); RR: 2.5 (0.34-18.6) (No statistically significant difference between the groups; p=0.63)	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		UC: 183 (22.6) Free aids: 443 (27.9) e-cig: 305 (25.5) Desire to quit: No plan to quit: UC: 74 (9.1) Free aids: 147 (9.3) e-cig: 109 (9.1) Want to quit, need help: UC: 238 (29.3) Free aids: 425 (26.8) e-cig: 315 (26.3) Drop-out rate ENDS: 1/20 (5%) NRT: 1/10 (10%)		Therapy (NRT) (n=10): Patients randomized to the NRT group received a 5-week supply of NicodermCQ patches and 1-week supply of placebo patches (the last week). Nicotine concentration in the patches for the first five weeks varied depending on if baseline cigarette consumption was ten or more per day, or less than ten per day. Outcome Smoking cessation (7-day point-prevalence abstinence)		
Masiero 2019	Design RCT	Population	Data collection	Intervention	Analysis model Na	Moderate

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
[53] Italy	(COSMOS II) Time to follow-up 3 months Setting Italian adult smokers with a very high motivation to stop smoking. Study period September 2015-January 2016	Participants were smokers that had smoked ≥10 cigarettes a day for the past 10 years and were highly motivated to stop smoking. Exclusion criteria were among others, use of NRT or ecigarettes or enrolled in other smoking cessation programs. Participants were randomized into three arms N=210 Mean age, years (SD): 62.8 (4.59) Sex Women:78, Men: 132 Ethnicity: Not reported Ethnicity: Na Education: Na Drop-out rate E-cigarette and support: 12/70 (17.1%)	Enrolled at the IEO within the COSMOS II (Continuous Observation of Smoking Subjects) screening program. All COSMOS II participants are ≥55 years and have a long smoking history and a high risk of developing a smoking-related cancer Definition of e-cigarette users Ever regular use of e-cigarettes for more than 1 week, alone or in combination with tobacco cigarettes.	E-cigarette and support (n=70): Each participant received an e-cigarette kit (VP5) and 12 10-mL liquid car-tridges (8 mg/mL nicotine) free of charge. Comparison Placebo and support (n=70): Each participant received an e-cigarette kit and 12 10-mL liquid that did not contain nicotine (placebo condition) free of charge. Support only (n=70): Participants in this group did not use e-cigarettes	Current smokers at T0 Outcome: Smoking abstinence (past 30 days), N (%) at 3 months Support only group: 6/58 (10.34%) Placebo e-cig group: 13/55 (23.6%) Nicotine e-cig group: 15/57 (26.3%) Current smokers at T0 Outcome: stopped smoking n (%) at 3 months (calc. as ITT from numbers provided in article) Support only group: 6/70 (8.57%)	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		Placebo and support (n=70): 15/70 (21.4%) Support only (n=70): 13/70 (18.6%)		Participants in all arms also received a low-intensity telephone counselling that included interviews at weeks 1, 4, 8, and 12. All e-cigarette using participants had the same flavour of the e-liquid (Tobacco 7 Foglie). Outcome The number of smoked cigarettes, self-reported by participants.	Placebo e-cig group: 13/70 (18.57%) Nicotine e-cig group: 15/70 (21.43%)	
O'Brien 2015	Design RCT	Population Adult smokers, ≥18 years, that	Data collection Recruited via community	Intervention E-cigarettes: the	Analysis model Continuous	Low
[55]	(ASCEND	smoked ≥10 cigarettes per day	newspapers. Telephone	liquid was free of	abstinence, RR (95	
New	trial)	for the past year and wanted to	interview at baseline, quit	diethylene glycol (a	% CI); RD (95 %	
Zealand		stop smoking and could provide	date (one-week post-	toxin detected in	CI).	
	ASCEND trial	consent.	baseline), and 1, 3 and 6	fluid in one brands	All analyses are	
	protocol and	N= 571	months post quit-date	of e-cigarettes); nicotine cartridges	intention to treat, ITT (assumes all	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
	main findings have been described in detail elsewhere Time to follow-up 1, 3 and 6 months Setting Advertisement recruited adult smokers wishing to quit smoking Only data for participants without mental illness reported here. Study period 2011–2013	N= 260 (21 mg nicotine patch) N = 250 (16 mg ecigarette) N = 61 (0 mg e-cigarette) Data on patients with mental illness is also available in the article Age: ≥18 years old Sex: Na Ethnicity: Na Education: Na Drop-out rate: Na		(labelled 16 mg) contained 10–16 mg nicotine per mL. 300 puffs from one nicotine e-cigarette cartridge delivered 3–6 mg nicotine, equivalent to smoking between one and five tobacco cigarettes. Comparison Nicotine patches: Daily use, from 1 week before until 12 weeks after their chosen quit day, consistent with smoking cessation guidelines. Placebo e- cigarettes: The placebo cartridges contained no nicotine. Outcome	participants with missing smoking status were smoking). Users of combustible tobacco at TO Outcome: Biochemically verified continuous abstinence at 6 months, % (n) 0 mg e-cigarette: 5 % (3/61) 21 mg nicotine patch: 5 % (12/260) 16 mg e-cigarette: 7 % (19/250)	

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
				Continuous smoking abstinence (self-reported over the whole follow-up period, allowing ≤5 cigarettes in total). At last follow-up, 6 months after quit day, abstinence was verified at that point in time by exhaled breath carbon monoxide measurement (<10 ppm).		
Walker 2019 [56]	Design RCT	Population Adult (≥18-year-old) tobacco smokers, motivated to quit in the	Data collection Sustained abstinence: self- reported smoking of ≤5	Intervention E-cigarettes in combination with	Analysis model: ITT	Moderate
New	Time to	next 2 weeks	cigarettes since quit date,	nicotine patches.	Cigarette users at	
Zealand	follow-up		verified by exhaled carbon	E-cigarette: 2 nd -	T0	
	6 moths	Excluding, people who had used an e-cigarette for smoking	monoxide measurements (≤9 ppm)	generation e- cigarette starter kit,	Outcome: Smoking sustained	
	Setting	cessation for more than 1 week	7-day point prevalence	containing five 2.2	abstinence, 6	
	General	anytime in the past year, people	abstinence: self-reported	mL, 1.8 Ohm	months	
	population	currently using smoking	abstinence defined as no	atomisers.	Nicotine patches:	
	recruited using media	cessation medication, people enrolled in another cessation	cigarettes, not a single puff, in the previous 7 days	Participants could choose one of two	10/125 (8%)	
	advertising	programme or study.	in the previous / days	tobacco e-liquid		

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		N. 1104		flavours (18 mg/mL	Placebo e-cigarette	
	Study period	N=1124		nicotine). 4x20 ml	+nicotine patches:	
	Mars 2016-	Ni - 4i		provided per	53/499 (11%)	
	November 2017	Nicotine e-cigarettes (plus nicotine patches) (N=500)		participant.	Nicotine e-cigarette +nicotine patches:	
	2017	Mean age (SD):		Comparison	+mcotine patches: 89/500 (18%)	
		41.4 (12.3) years		Nicotine patches:	e-cigarette (all)+	
		41.4 (12.3) years		Participants were	nicotine patches:	
		Sex		provided with 14-	142/999(14.2%)	
		N=329 women (66%)		week supply of 21	112////	
		N=170 men (34%)		mg, 24h nicotine	Cigarette users at	
		N=1 diverse (<1%)		patches.	T0	
		, ,		•	Outcome: 7-day	
		Ethnicity, N (%)		Placebo e-	point prevalence	
		New Zealand Maori: 202 (40%)		cigarettes:	abstinence, 6-	
		Non-Maori: 295 (59%)		E-cigarettes in	month	
		Missing: 3 (1%)		combination with	Nicotine patches:	
				nicotine patches.	14/125 (11%)	
		Education		E-cigarette: 2 nd -	Nicotine e-cigarette	
		Below year 12 or no		generation e-	+nicotine patches:	
		qualification: N=179 (36%)		cigarette starter kit,	119/500 (40%)	
		C: " 1 / 1 · 1		containing five 2.2	Placebo e-cigarette	
		Cigarettes per day (daily		mL, 1.8 Ohm	+nicotine patches:	
		smokers only)		atomisers.	83/499 (17%)	
		N=17.3 (SD 8.1)		Participants could choose one of two	e-cigarette (all)+	
		Motivation to quit ³		tobacco e-liquid	nicotine patches: 202/999 (20.2%)	
		мончанов во дин		tobacco e-iiquid	ZUZ/999 (ZU.Z%)	

³ Motivation to quit was measured on a five-point Likert scale, where 1=very low motivation and 5=very high motivation.

3.9 (SD 0.9) Lost to follow-up/withdrawals Quit date: 64/4 One-month: 172/8 Three-month: 175/8 Six-month: 152/9 Patches only (N=125) Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%) Non-Maori: 75 (60%)	flavours (0 mg/mL nicotine). 4x20 ml provided per participant. All participants were advised to start using one patch per day, 2 weeks before their quit date. E-cigarette users were advised to use the device as and when
Quit date: 64/4 One-month: 172/8 Three-month: 175/8 Six-month: 152/9 Patches only (N=125) Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	provided per participant. All participants were advised to start using one patch per day, 2 weeks before their quit date. E-cigarette users were advised to use the
Quit date: 64/4 One-month: 172/8 Three-month: 175/8 Six-month: 152/9 Patches only (N=125) Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	participant. All participants were advised to start using one patch per day, 2 weeks before their quit date. E- cigarette users were advised to use the
One-month: 172/8 Three-month: 175/8 Six-month: 152/9 Patches only (N=125) Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	All participants were advised to start using one patch per day, 2 weeks before their quit date. E- cigarette users were advised to use the
Three-month: 175/8 Six-month: 152/9 Patches only (N=125) Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	were advised to start using one patch per day, 2 weeks before their quit date. E- cigarette users were advised to use the
Six-month: 152/9 Patches only (N=125) Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	were advised to start using one patch per day, 2 weeks before their quit date. E- cigarette users were advised to use the
Patches only (N=125) Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	using one patch per day, 2 weeks before their quit date. E-cigarette users were advised to use the
Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	day, 2 weeks before their quit date. E-cigarette users were advised to use the
Mean age (SD): 42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	their quit date. E- cigarette users were advised to use the
42.3 (13.1) Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	cigarette users were advised to use the
Sex N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	advised to use the
N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	
N=89 women (71%) N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	device as and when
N=36 men (29%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	
N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 50 (40%)	necessary or
Ethnicity, N (%) New Zealand Maori: 50 (40%)	desired. Participants
New Zealand Maori: 50 (40%)	were instructed to
New Zealand Maori: 50 (40%)	continue with their
	allocated treatment
Non-Maori: /5 (60%)	for 12 weeks.
Missing: -	Outcome
Educardon.	Primary Systemed amolting
Education Relevy year 12 or no	- Sustained smoking
Below year 12 or no	cessation (6-month)
qualification, N=43 (36%)	Secondary Systemad smalling
Circumstan non day (daile	- Sustained smoking cessation (1-, 3-, 12-
Cigarettes per day (daily	Cessanon (1- 3- 17-
smokers only) N= 17.3 (SD 8.0)	month)

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		Motivation to quit ¹ 3.8 (SD 0.9) Lost to follow-up/withdrawals Quit date: 23/14 One-month: 54/18 Three-month: 51/20 Six-month: 42/20 Placebo e-cigarettes (plus patches) (N=499) Mean age (SD): 41.2 (12.6) years Sex N=350 women (70%)N=149 men (30%) N=0 diverse (0%) Ethnicity, N (%) New Zealand Maori: 199 (40%) Non-Maori: 294 (59%) Missing: 6 (1%) Education Below year 12 or no qualification: N=177 (36%) Cigarettes per day		- 7-day point prevalence abstinence		

First author Publication Year Reference Country	Design Time to follow-up Setting Study period	Population Drop-out rate	Data collection Definition of smokers/quitters/abstinence	Intervention Comparison Outcome	Analysis model Results	Risk of bias
		(daily smokers only) N= 17.2 (SD 8.7) Motivation to quit ¹ 3.9 (SD0.8) Lost to follow-up/withdrawals Quit date: 65/2 One-month: 190/4 Three-month: 204/5 Six-month: 155/7				

CI = confidence interval; **F**=female; IRR = Incidence Rate Ratio; MD= mean difference; **Na** = Information not available; **M** = male; **T1** = first measurement (baseline); **T2** = second measurement; **T3** = third measurement; **OR** = Odds ratio; **RD** = Risk Difference; **RR** = Relative risk

Table S7. E-cigarette use and subsequent smoking cessation for at least 30 days

Association with smoking initiation for at least 30 days	Participants	Number of studies (adjusted)	Risk difference, RD (95% CI)*	Odds ratio, OR (95% CI)	Certainty of evidence	Down rating
	Cohort studie		.	·	,	
Full material	13 588	9 (9)	0.00 (- 0.03-0.02)	Unadjusted Odds ratio: 0.96 (0.77-1.19). Adjusted odds ratio: 0.86 (0.59- 1.25)	Very low (⊕)	-1 risk of bias ^a -1 inconsistency ^{b,c} -1 imprecision ^{d,e}
Short follow up (≤6 months)	118	1 (3)	-0.05 (- 0.31-0.21)	Unadjusted Odds ratio: 0.81 (0.28-2.34). Adjusted odds ratio: 0.92 (0.60- 1.40)	Very low (⊕)	-1 risk of bias ^a -1 imprecision ^{d,e} -1 material with several limitations ^{b,f}
Long follow up (>6 months)	13 470	8 (7)	0.00 (-0.03-0.03)	Unadjusted Odds ratio: 0.96 (0.77-1.20). Adjusted odds ratio: 0.84 (0.50- 1.43)	Very low (⊕)	-1 risk of bias ^a -1 imprecision ^{d,e} -1 material with several limitations ^{b, c}
< 18 years	331	6 (7)	-0.12 (- 0.25-0.01)	Unadjusted Odds ratio: 0.61 (0.36-1.04). Adjusted odds ratio: not available	Very low (⊕)	-2 risk of bias ^{a,g} -1 material with several limitations ^{d,f,h}
≥ 18 years	13 257	6 (7)	-0.00 (0.03-0.03)	Unadjusted Odds ratio: 1.03 (0.82-1.29). Adjusted odds ratio: 0.84 (0.50- 1.43)	Very low (⊕)	-1 risk of bias ^a -1 imprecision ^{d,e} -1 limited material with several limitations ^{b,c}
Women	Not available					
Men	Not available RCTs					
Full material	2368	4**	0.08 (0.05- 0.12)	2.04 (1.51-2.77)	Low (⊕⊕)	-1 risk of bias ^a -1 limited material with several limitations ^{b,f,h}
Short follow up (≤6 months)	1 484	3**	0.07 (0.03- 0.12)	2.14 (1.24-3.68)	Low (⊕⊕)	-1 risk of bias ^a -1 limited material with several limitations ^{b,f,h}

Long follow up (>6 months)	884	1	0.09 (0.04- 0.14)	2.00 (1.38-2.89)	Low (⊕⊕)	-1 risk of bias ^a -1 limited material with several limitations ^{f,h}
< 18 years	Not available					
≥ 18 years	2 368	4**	0.08 (0.05- 0.12)	2.04 (1.51-2.77)	Low (⊕⊕)	-1 risk of bias ^a -1 limited material with several limitations ^{b,f,h}
Women	Not available					
Men	150	1**	Not available	Narrative	Low (⊕⊕)	-1 risk of bias ^a -1 limited material with several limitations ^{b,f,h}

^{*} Calculated from unadjusted values

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^{**} One study was included narratively

^a Material with several deficits and limitations

^b The confidence intervals of individual studies includes 1.0, indicating no statistically significant association

^c The odds ratios of individual studies show associations in different directions

^d The pooled estimate for the unadjusted results includes 1.0, indicating no statistically significant association

^e The pooled estimate for the adjusted results includes 1.0, indicating no statistically significant association

^f The analysis is based on a limited number of studies

^g Adjusted analyses are not available

h The analysis is based on few participants