PATH TO SMOKE-FREE

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BRIEFING PAPER

The Regulation That Could Change Everything

How Azerbaijan treats nicotine pouches now will define its smoking trajectory for decades

May 2026

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Executive Summary

Azerbaijan is making progress against smoking. It is not making nearly enough. According to the Path to Smoke-Free platform, the country will not reach smoke-free status — a smoking prevalence of 5% or below among adults — until 2105 if current trends continue. Adopting the pace of decline achieved by Sweden would bring that endpoint forward to 2054, a gain of 51 years. Following the combined trajectory of global leaders, the UK, New Zealand, and Japan, would reach the same milestone by 2063, a gain of 42 years.

Sweden has achieved a current smoking rate of 5.3%, the lowest in the European Union, not through willpower or stricter bans alone, but through a comprehensive approach that made innovative nicotine products accessible, acceptable, and affordable for adult smokers. Nicotine pouches were central to that success. The question this report asks of Azerbaijan is whether it will learn from that example while it still has the regulatory window to do so.

That window is open right now. A comprehensive set of Technical Regulations covering nicotine and tobacco products, drafted with reference to EU frameworks, has been awaiting entry into force by the Ministry of Health in 2026. Simultaneously, a full ban on vaping products takes effect on 1 April 2026. Together, these two developments create a decisive inflection point. If nicotine pouches are regulated proportionately and made genuinely accessible to adult smokers, real-world experience from Sweden demonstrates an enormous opportunity for Azerbaijan in reducing smoking prevalence and helping its adult cigarette smokers to switch to a much safer alternative. If the regulatory response defaults to restriction without distinction, the horizon of a much slower decline in smoking rates becomes harder to escape.

The urgency is not abstract. In 2024, circulatory system diseases, the leading smoking-attributable category, caused 33,289 deaths in Azerbaijan, at a rate of 326 per 100,000 population. Lung, bronchus, and trachea cancers killed 1,525 people that year, up from 981 in 2010. A 55% rise in lung cancer deaths over fourteen years is what a country on the 2105 trajectory looks like. Policymakers seeking a mandate to act need look no further than the WHO's own FCTC, whose Article 1(d) defines tobacco control as "a range of supply, demand and harm reduction strategies." Regulating adult access to nicotine pouches is harm reduction in practice — and it is precisely what the countries now leading the world on tobacco control have done.

Introduction

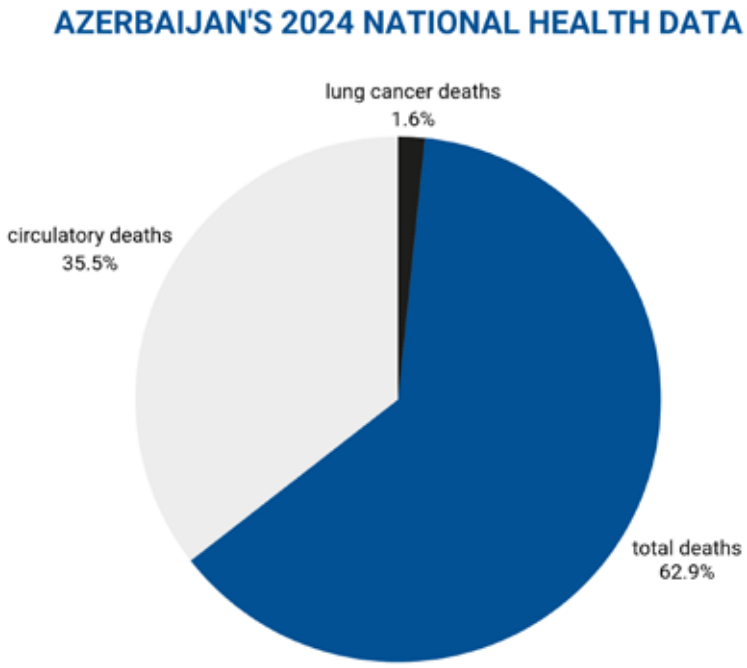
Azerbaijan ratified the WHO Framework Convention on Tobacco Control in 2005 and has since built a tobacco control framework consistent with MPOWER principles: advertising restrictions, public smoking bans, a comprehensive tobacco restriction law enacted in 2017, and a series of excise duties applied progressively to cigarettes and, later, to vaping liquids and heated tobacco products. Pouches are not yet part of the excisable scope.

Azerbaijan's male smoking prevalence remains around 40%. Female prevalence is substantially lower — a demographic pattern characteristic of the South Caucasus and Central Asian region that is worth preserving while the far more dangerous male rate is addressed. The overall trajectory, fed into the Path to Smoke-Free platform's exponential decay model, returns a smoke-free date of 2105. That figure is a description of the ceiling that conventional measures alone tend to reach — a ceiling that Sweden, Czechia, Greece, Japan, and the UK have all demonstrated can be broken when innovative nicotine products are added to the equation.

The regulatory developments of late 2025 and early 2026 mean that Azerbaijan is, for the first time, actively deciding what role nicotine pouches will play in its public health architecture. Getting that decision right matters enormously. This report is an attempt to show why, and what getting it right would look like.

The Burden That Cannot Wait Until 2105

Azerbaijan's 2024 national health data makes the case for urgency with clarity. Of 58,909 total deaths recorded, 33,289 (more than half) were attributable to circulatory system diseases, or indirectly, cigarette smoking. All cancers combined killed 9,681 people. Lung, bronchus, and trachea cancers alone accounted for 1,525 deaths — and the trend line is moving in the wrong direction: 981 deaths in 2010, 1,147 in 2015, 1,225 in 2020, 1,461 in 2023, and 1,525 in 2024. Cancers of the larynx (249 deaths), mouth and pharynx (267), and esophagus (528) extend the smoking-attributable burden further. These are not statistical abstractions. Each data point represents a person, a family, and a death that combustion made far more likely.



As doctors Riccardo Polosa, Karl Fagerström, and Brad Rodu noted in a 2025 paper published after the FDA's authorization of nicotine pouch products in the United States:

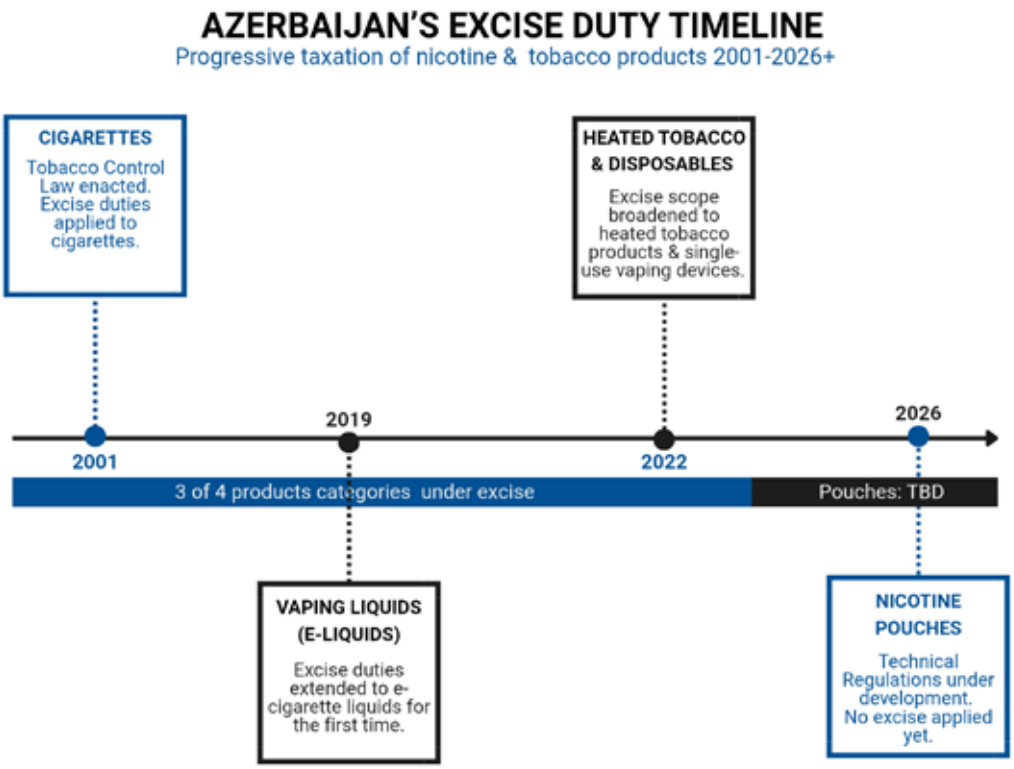
"Nicotine is what keeps people using tobacco products. However, it's the thousands of chemicals contained in tobacco and tobacco smoke that make tobacco use so deadly."

That distinction between nicotine as the agent of dependence and combustion as the agent of disease is the scientific foundation on which tobacco harm reduction rests. Nicotine pouches eliminate combustion entirely. They contain no tobacco leaf. Chemical analyses and biomarker studies consistently place them at the lowest end of the toxicant risk continuum, with harmful substances including tobacco-specific nitrosamines at largely undetectable or negligible levels compared to cigarettes. For a country whose lung cancer death toll has risen by 55% in fourteen years, the clinical relevance of that distinction is not marginal. It is potentially the difference between a 2105 trajectory and a 2054 one.

The Regulatory Moment and What It Contains

Azerbaijan's regulatory evolution on nicotine and tobacco has been gradual and, in its most recent phase, consequential. The 2001 Tobacco Control Law addressed farming and finished cigarette goods. FCTC ratification followed in 2005. A voluntary tobacco standard in 2009 defined product categories including cigars, cigarillos, and snus. Vaping devices appeared in the early 2010s; heated tobacco products arrived unofficially around 2015 before gaining legal recognition. Excise duties were introduced for e-liquids in 2019, for heated tobacco and single-use disposable vaping products in 2022. Voluntary product standards for e-cigarettes and heated tobacco were developed in 2023 and 2024 but were abandoned prior to the enactment and enforcement of the complete ban on the vapour category starting 1 April 2026. Nicotine pouches appeared in vapour shops from around 2022/23.

The Technical Regulations drafted through a working group process beginning in 2024, published for public consultation in September 2025, represented an optimistic, qualitative advance. Critically, nicotine pouches (tobacco-free) were included in the public consultation as a separately defined product category, clearly distinguished from oral tobacco or 'snus', and subject to distinct provisions on nicotine thresholds, ingredients, and packaging. The draft drew on EU directives and Eurasian Economic Union frameworks. A public consultation event was held on 23 October 2025, organized jointly by the Anti-Monopoly and Consumer Market Supervision Agency and the Small and Medium Business Development Agency, with the Ministry of Health presenting the draft's safety requirements and international alignment. The regulations are expected to enter force in 2026, with a six-month grace period.



In the same period, a separate legislative track moved rapidly to ban vaping products entirely. A change to the superior Tobacco Control Law — above the Technical Regulations in the legal hierarchy — defined heated tobacco products and vapour devices, then prohibited the latter. The vape ban took effect from 1 April 2026. This matters for nicotine pouches in a specific and practical way: approximately 300,000 vaping devices were being sold monthly in Azerbaijan. The users of those devices will need an alternative right away that hopefully avoids relapsing to cigarettes. Vapour retailers are already repositioning, advertising themselves as "snus and vapour stores" in anticipation. Whether that displaced demand finds its way to nicotine pouches or back to cigarettes is, in meaningful part, a function of the regulatory framework that governs nicotine pouch accessibility, pricing, and distribution.

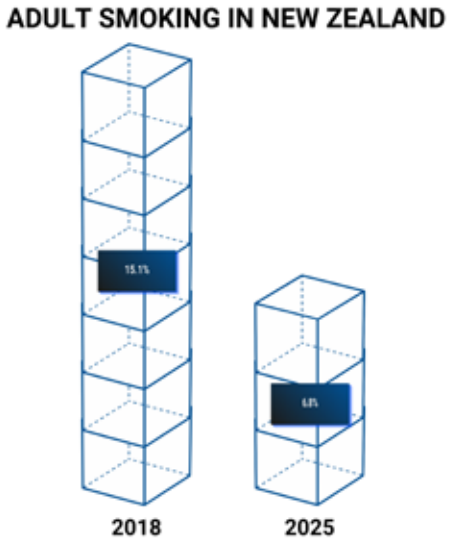
The quality and range of products currently on the Azerbaijani market also deserve attention. Alongside responsible, mainstream products, the unregulated market has allowed the entry of pouches with nicotine levels reaching 75, 150, and even higher milligrams per pouch — concentrations that have no plausible harm reduction rationale and serve no legitimate public health purpose. They are counterproductive in a specific and revealing way: they have generated a media environment in which nicotine pouches are framed in Azerbaijani news coverage as a "hidden epidemic" spreading through schools. In December 2025, eight students were hospitalized in Baku in what was reported as a snus poisoning. An investigation by the Food Safety Agency found the cause was regular watermelon-flavored chewing gum — no contamination was confirmed, no poisoning diagnosis was issued, and all students were treated and released. Unfortunately, such instances of misinformation (there was no link whatsoever to nicotine products despite media reporting) are very common in this space, often generating knee-jerk or prohibitionist reactions, rather than more reasonable, evidence-based pragmatic regulations.

The episode is quite revealing: in the absence of clear product regulation, public education, and honest relative-risk communication, Azerbaijan's information environment has become one in which ordinary gum hospitalizations are attributed to nicotine pouches. The appropriate response to that environment is not to ban the product category but to regulate it. Protecting young people and giving adult smokers access to safer alternatives are not competing goals. They are entirely compatible ones, and other countries have demonstrated how to pursue both at once.

Greece did so in 2025 by introducing three complementary digital tools: a national register mapping every tobacco and alcohol retailer in the country, enabling targeted inspections; a second register requiring businesses hosting events involving minors to declare them in advance; and a secure digital age-verification mechanism, adapted from the country's existing KYC infrastructure, allowing both physical and online retailers to verify a buyer's age instantly via a mobile QR code. Violations carry fines of up to €10,000, license suspensions, and up to three years of imprisonment for the most serious offenses.

New Zealand tells an equally instructive story. Its regulatory framework for vaping products, built around licensed adult-only retail stores and maximum fines of up to $100,000 NZD for breaching sales laws, has seen underage vaping decline year on year to levels now lower than in neighboring Australia, where vaping products are nominally banned.

Meanwhile, adult smoking in New Zealand has fallen from 15.1% in 2018 to 6.8% in 2025. Strict enforcement and legal access, it turns out, protect young people more effectively than prohibition does.

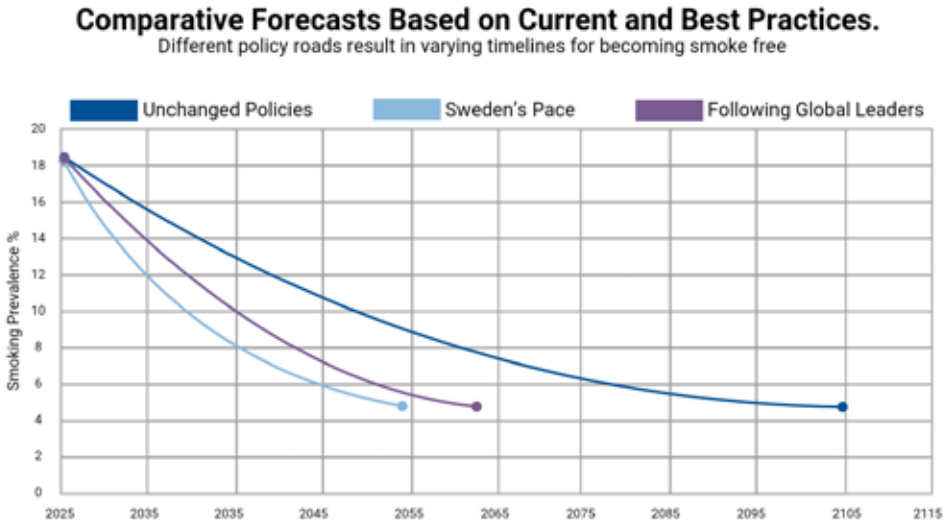


The Czech model, which established a 12 mg per pouch nicotine ceiling alongside youth access controls, adds a further dimension: product standards that remove extreme-nicotine items from the market while preserving the harm reduction potential of the category for adults. Azerbaijan could draw on all three models as it finalizes its own framework.

As of February 2026, nicotine pouches are not subject to excise in Azerbaijan. The Technical Regulations will introduce important product standards, packaging rules, ingredient requirements and accreditation requirements. That is an opportunity, not merely an administrative necessity. Proportionate regulation achieves two goals simultaneously, youth protection plus supporting a reduction in adult smoking prevalence to benefit public health. The next logical step would be similarly proportionate fiscal treatment application – recognising the lower health risk of pouches versus cigarettes by a lower tax rate, through an update to the Tax Code.

What Sweden's Pace Would Mean

Fifty-one years. That is the striking opportunity between Sweden's success, and Azerbaijan's choice of trajectory, according to the Path to Smoke-Free platform. Under current policies, Azerbaijan reaches smoke-free status in 2105. Adopt Sweden's year-on-year pace of decline, and that date moves to 2054. The platform models this difference by applying Sweden's rate of smoking reduction to Azerbaijan's baseline — and the result is not a rounding error or a marginal improvement. It is more than half a century of preventable deaths.



The platform's methodology also offers a third scenario: following the combined pace of global leaders, the UK, New Zealand, and Japan, would bring Azerbaijan to smoke-free status by 2063 — still 42 years ahead of the current trajectory. Sweden's pace is the faster benchmark, and it is the more instructive one, because Sweden did not achieve it through any single policy lever. It was achieved through a comprehensive approach in which accessibility, acceptability, and affordability of innovative nicotine products worked alongside — not instead of — strong conventional measures.

The Swedish government has been explicit about how it interprets its own experience. In April 2025, formally responding to a European Commission notification on a restrictive nicotine pouch decree proposed by another government, Sweden stated:

"Cigarettes and smoking tobacco pose a greater health risk than smokeless tobacco and nicotine products such as snus [...] To the extent that snus replaces cigarette consumption, the Swedish Government considers this to be a positive development from a public health perspective."

Sweden is not an isolated case. Czechia achieved the fastest smoking decline in Europe after building a progressive regulatory framework for nicotine pouches between 2021 and 2023 — a legal definition, product standards, and access controls — and saw smoking prevalence fall by seven percentage points in three years. Greece, plateaued at 42% for a decade, cut prevalence by six points after reversing its prohibition on these products. The pattern is consistent enough to constitute an empirical finding rather than a coincidence: countries that treat nicotine products according to their actual risk profile, rather than applying uniform restrictions regardless of harm, see smoking rates decline at a pace that conventional measures alone cannot generate.

The Accessibility Problem

One structural feature of Azerbaijan's current nicotine pouch market points directly to a policy gap. Nicotine pouches are sold primarily through approximately 400 shops (former vapour shops, but after the ban likely tobacco generalists or tobacco and alcohol stores). Cigarettes and heated tobacco products are available through more than 12,000 retail outlets. That disparity — a ratio of 1 to 30 — means that the product most capable of displacing cigarettes is practically invisible at the points of purchase where most of Azerbaijan's smokers make their daily decisions.

The Technical Regulations, if enacted with provisions permitting nicotine pouch sales through conventional tobacco retail, would transform that picture. There are approximately 400 retail points already selling nicotine pouches in some form, but the full integration of the product into mainstream retail — the 12,000-plus outlets that already reach Azerbaijan's adult smokers — would represent a fundamentally different level of accessibility. This is not a small commercial detail.

The accessibility dimension of Innovative Nicotine Products (INPs) such as Pouches is, in the Swedish experience, one of three necessary conditions for population-level behavior change. Products that are scientifically compelling but practically unavailable cannot drive substitution at the scale that Azerbaijan's mortality data demands.

Taxation matters alongside distribution. The evidence from Sweden, Czechia, and elsewhere is consistent: a meaningful price differential between cigarettes and nicotine pouches creates an economic pathway to switching that reinforces the motivational and behavioral dimensions of harm reduction. Critics claim that a tax architecture that applies lower rates to safer products is some sort of special treatment for industry. They are wrong. It is, in fact, a deliberate use of fiscal policy to direct behavior toward outcomes public health wants to encourage. Azerbaijan currently applies no excise to nicotine pouches. As the Technical Regulations introduce fiscal treatment for the category, the design of that treatment will carry real public health consequences.

Conclusion

Azerbaijan's 2105 smoke-free projection is a description of where the current trajectory leads. Trajectories can change. Sweden's 2054 benchmark demonstrates that change is possible within a single generation, given a policy framework that treats innovative nicotine products as allies in the fight against combustible tobacco rather than threats to be contained.

The regulatory decisions being made in Azerbaijan in 2026 — on the Technical Regulations, on post-vape-ban accessibility for nicotine pouches, on taxation and distribution — are the decisions that will determine which trajectory the country follows. A proportionate regulatory framework for nicotine pouches, one that establishes sensible nicotine limits, genuine age verification, mainstream retail access, and a tax differential that makes switching financially rational, would do more to accelerate Azerbaijan toward smoke-free status than any single conventional measure now available to policymakers.

It is worth noting that the countries now embracing this approach are not a small or culturally uniform group. They include Sweden and Czechia in Europe, the United Kingdom, New Zealand, and, in the region most comparable to Azerbaijan's own context, the United Arab Emirates, Bahrain, and Saudi Arabia — where regulated access to nicotine pouches has been integrated into broader harm reduction frameworks. If proportionate regulation of nicotine pouches is sound policy in Stockholm and Abu Dhabi, the burden of argument falls on those who would deny it to Baku.

The alternative is to let the moral panic around extreme-nicotine products, the absence of underage access controls, and the regulatory inertia of the default position do their work. That means continuing to accumulate 1,525 lung cancer deaths per year and 33,289 circulatory deaths per year. It means a smoke-free horizon that recedes toward the end of the century. Azerbaijan's smoking population can achieve more than that, and so can the next generation that will inherit the public health consequences of the regulatory choices made now.

PATH TO SMOKE-FREE

Path to Smoke-Free is a comprehensive analytical platform developed by We Are Innovation that reveals how countries can harness innovation to defeat smoking and accelerate their journey toward smoke-free status. Drawing from Sweden's remarkable success in dramatically reducing smoking rates far below global averages—we identified three key elements: Accessibility, Acceptability, and Affordability of innovative nicotine products. Our platform combines comprehensive policy data with real insights from Swedish ex-smokers, offering interactive tools to compare how countries are harnessing innovation to defeat smoking. The platform features powerful forecasting charts that project smoking prevalence and when countries will reach smoke-free status under three scenarios: current policy trajectories, outcomes if countries matched Sweden's success rate, or results following the combined pace of leading nations. Policymakers, researchers, and health professionals can explore evidence-based strategies that could help their countries reach smoke-free targets faster, guided by proven success stories.
Discover how your country could accelerate its journey to smoke-free status at https://pathtosmokefree.global/.

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