

BRIEFING PAPER

Banned but Not Gone

Why Uzbekistan's Nicotine Pouch Prohibition
Is Backfiring

February 2026

Table of Contents

3	Executive Summary
3	Introduction
4	The Toll of Cigarettes and Nasvay on Uzbek Society
4	Nicotine Pouches and the Power of Innovation
5	What Sweden and Other Global Leaders Have Proven
6	Uzbekistan’s Regulatory Reversal and Its Consequences
7	A Smarter Way
7	Protecting the Underage Without Penalizing the Adults
8	Conclusion

Executive Summary

With a smoking prevalence of 10.7% and approximately 3.5 million active smokers, Uzbekistan faces a smoking burden that claims an estimated 30,000 lives every year. Ischemic heart disease, stroke, and lung cancer—conditions deeply intertwined with smoking—dominate the country’s mortality rankings. Yet the tools that could most effectively accelerate Uzbekistan’s transition to smoke-free status are currently banned.

According to the [Path to Smoke-Free](#) platform, if current policies remain unchanged, Uzbekistan will not reach smoke-free status (defined as a smoking prevalence of 5% or less) until 2067. If the country were to adopt the comprehensive approach that has made Sweden the first smoke-free nation in the European Union, that date would move forward to 2041—saving an entire generation from preventable disease and death. Even matching the combined pace of global leaders such as the United Kingdom, New Zealand, and Japan would bring the target to 2046.

The difference between these scenarios is certainly not abstract. Expert estimates [suggest](#) that embracing innovation could save as many as 464,000 lives in Uzbekistan over the coming decades. Nicotine pouches—tobacco-free, combustion-free, and backed by growing scientific and regulatory consensus—represent the single [most promising](#) pathway to closing this gap. Yet since May 2023, they [have been banned](#) under Uzbek law, pushing demand into illicit channels while doing nothing to reduce the country’s reliance on cigarettes and highly toxic traditional smokeless products like nasvay.

Concerns about underage access, often invoked to justify such bans, can be addressed without resorting to prohibition. Greece [demonstrated](#) this in 2025 by deploying digital age-verification tools and national retail registers that enforce strict youth protections while preserving adult access to regulated products—a model that Uzbekistan could readily adapt.

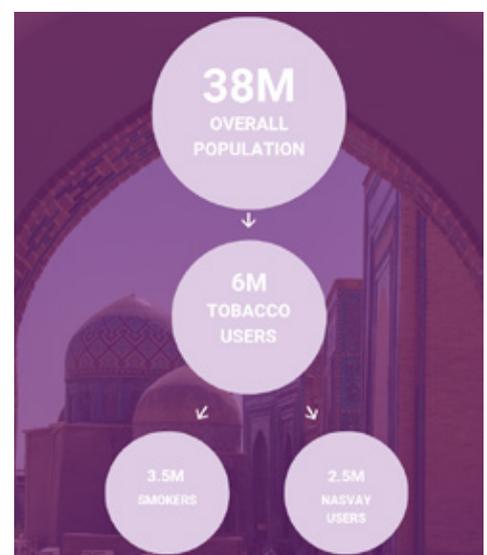
This report examines the scale of Uzbekistan’s tobacco challenge, the scientific case for nicotine pouches, the lessons from Sweden and other pioneering nations, and the regulatory choices now before Uzbek policymakers.

Introduction

Uzbekistan is Central Asia’s most populous nation, home to 38 million people with a [GDP per capita](#) of approximately \$4,000 and a life expectancy hovering around 70 years for men and 75 for women. Over the past decade, the government has pursued a modernization agenda that has included public health reforms, infrastructure investment, and a cautious opening to international markets. Smoking control has featured in this agenda, but progress remains slow and, increasingly, contradictory.

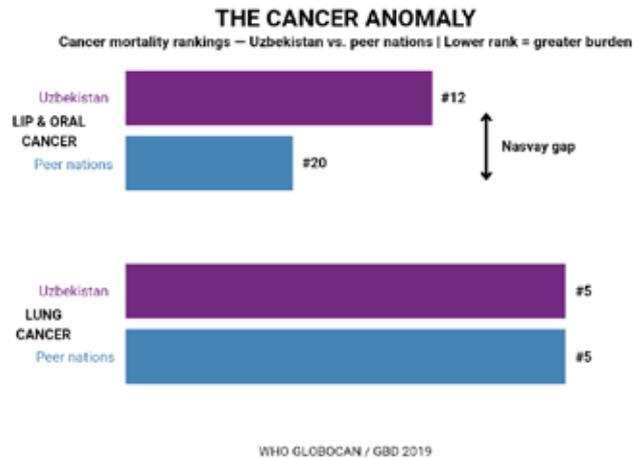
The country’s [smoking landscape](#) is shaped by gender. Some 18.8% of Uzbek men smoke, compared with just 0.5% of women—a pattern rooted in cultural norms that, in principle, offers an opportunity to preserve low female smoking rates while targeting interventions at the male population. Yet Uzbekistan’s tobacco problem extends well beyond cigarettes. Traditional smokeless products—nasvay or noss, a mixture of tobacco, lime, and ash placed under the tongue or in the cheek—are widely consumed, especially in rural areas. In fact, Uzbekistan [is home](#) to an estimated 2.5 million nasvay consumers—a population quietly bearing the health consequences of a traditional tobacco product that has largely escaped regulatory scrutiny.

Far from a benign tradition, nasvay carries health risks that rival those of cigarettes, including a strong association with oral cancers. A [recent study](#) by Kyoto University, which gained widespread attention inside Uzbekistan, confirmed the worst: nasvay samples from the country were found to contain multiple hazardous substances, pesticides among them.



The Toll of Cigarettes and Nasvay on Uzbek Society

Smoking’s impact on Uzbekistan is measured not only in prevalence statistics but in hospital wards and cemeteries. In 2019, an estimated [30,000 Uzbek citizens](#) died from smoking-related causes. Forty-seven percent of lung cancer cases in the country are directly attributable to tobacco use, and ischemic heart disease—the leading cause of death in Uzbekistan—is powerfully driven by smoking, as are stroke, chronic obstructive pulmonary disease, and lower respiratory infections. But the cancer data reveal something distinctive about Uzbekistan. [According](#) to the International Agency for Research on Cancer (IARC) under the WHO, lung cancer ranked 5th among all cancers in Uzbekistan in 2022—a position roughly comparable to neighboring countries. What is not comparable is the position of lip and oral cancer, which ranks 12th in Uzbekistan while hovering around 20th place in peer nations. This gap is a direct consequence of widespread nasvay consumption, and it represents a dimension of the tobacco burden that conventional smoking-focused policies fail to address.

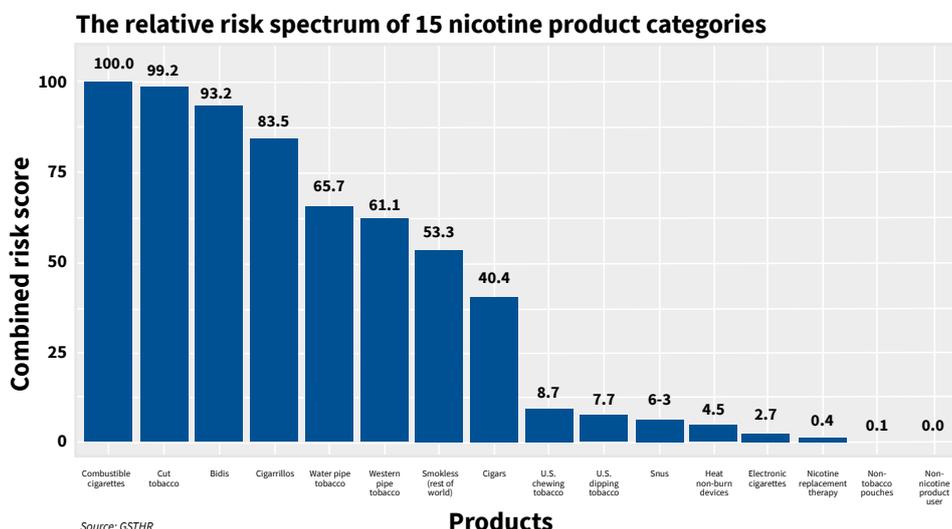


The burden extends beyond mortality. Smoking-related illnesses are chronic conditions that reduce quality of life for years before they prove fatal. They place pressure on an already strained health system operating with limited resources in a lower-middle-income economy. The economic costs—lost productivity, healthcare expenditure, the impoverishment of families who lose breadwinners to preventable disease—compound the human tragedy.

What makes this situation especially frustrating is that the deaths projected for the coming decades will overwhelmingly occur among people who already smoke today. No child who never picks up a cigarette will die of smoking-related disease before the 2060s. The urgency, therefore, lies in reaching current adult smokers—and current users of toxic smokeless products—with alternatives that can reduce harm now.

Nicotine Pouches and the Power of Innovation

Nicotine pouches are small, tobacco-free sachets containing pharmaceutical-grade nicotine (the same as contained in widely approved nicotine replacement therapies such as gum or patches), and food-grade ingredients. Placed between the lip and gum, they deliver nicotine through the oral mucosa without combustion, without tobacco leaf, and without producing smoke, vapor, or odor. They represent the [lowest-risk](#) category on the nicotine product spectrum—rated at 0.1 on a scale where combustible cigarettes score 100.



The scientific consensus on their relative safety has strengthened considerably. In January 2025, the United States Food and Drug Administration authorized the marketing of 20 nicotine pouch products after extensive scientific review. The agency’s determination merits attention:

“These nicotine pouch products have the potential to provide a benefit to adults who smoke cigarettes and/or use other smokeless tobacco products that is sufficient to outweigh the risks of the products, including to youth.”

— [U.S. Food and Drug Administration, January 2025](#)

The FDA further noted that nicotine pouches contain substantially lower amounts of harmful constituents than cigarettes and most smokeless tobacco products, and that youth use of nicotine pouches remains low despite growing sales in recent years.

In Europe, the German Federal Institute for Risk Assessment (BfR)—one of the continent’s most respected toxicology authorities—reached a parallel conclusion:

“Switching from cigarettes to nicotine pouches could represent a reduction in health risks for a person who smokes.”

— [German Federal Institute for Risk Assessment \(BfR\), October 2022](#)

For Uzbekistan, where nasvay use compounds the tobacco burden, nicotine pouches offer a dual advantage. They provide a credible off-ramp not only from cigarettes but also from traditional smokeless tobacco—a category that current policy largely overlooks. The behavioral familiarity of placing a pouch between lip and gum mirrors the oral tobacco rituals already embedded in Uzbek culture, but without the carcinogenic profile of nasvay.

There are further practical considerations. Nicotine pouches require no electricity, no charging infrastructure, no specialized storage. They generate no electronic waste. In a country where a significant share of the population lives in rural areas with limited infrastructure, this matters. Pouches can be distributed through the same retail channels that currently sell cigarettes and nasvay, making them a realistic option for low- and middle-income settings in a way that vaping devices and heated tobacco products often are not.

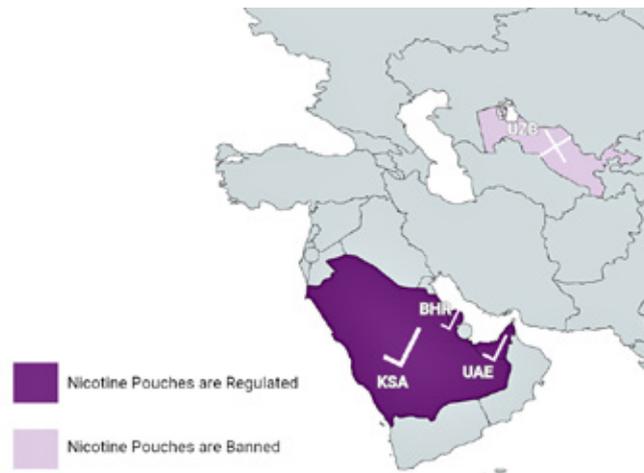
What Sweden and Other Global Leaders Have Proven

Sweden’s transformation from a high-smoking society to the European Union’s first smoke-free member state is perhaps the most instructive public health story of the twenty-first century. With a daily [smoking rate](#) of just 5.3%—against an EU average of 24%—Sweden has achieved what decades of conventional tobacco control alone could not deliver elsewhere.

The Swedish comprehensive approach [combines](#) traditional measures (taxation, advertising restrictions, public information campaigns, and smoke-free laws) with policies ensuring that innovative nicotine products remain accessible, acceptable, and affordable. Sweden began with snus, a pasteurized oral tobacco product, and saw its transition accelerate dramatically after nicotine pouches entered the market in the mid-2010s. Between 2015 and 2021, smoking among Swedish women declined by 46%—nearly three times the rate observed in the preceding period.

Sweden [is far from](#) an isolated case. The United Kingdom has seen its smoking rate fall from 16.4% in 2015 to 10.4% in 2023, driven in part by the integration of vaping into the national cessation strategy. Japan experienced a sharp decline in cigarette sales following the introduction of heated tobacco products. New Zealand combined regulatory ambition with product innovation before reversing course in 2024. In each instance, progress accelerated when governments moved beyond prohibition and embraced the principle that not all nicotine products carry equal risk.

Closer to Uzbekistan’s own cultural and geopolitical context, [the trend](#) is equally telling. The United Arab Emirates has recently brought nicotine pouches under a formal regulatory framework. Bahrain has adopted a similarly open stance, with a supportive regulatory environment that allows adult smokers to consider switching. And in Saudi Arabia, nicotine pouches are available within a broader harm reduction landscape that has helped bring the kingdom’s smoking prevalence down to 13.9%.



Thus, the lesson for Uzbekistan is straightforward. Countries that have complemented traditional so-called tobacco control with access to safer alternatives have outpaced those that have not. The Path to Smoke-Free platform quantifies this precisely: at Sweden’s pace, Uzbekistan would reach smoke-free status by 2041; at the combined pace of global leaders, by 2046. Under current policies, the country will not get there until 2067—if ever.

And for Ministry of Health officials seeking permission to regulate – you need look no further than the WHO’s own [FCTC Article 1\(d\)](#) which describes tobacco control as “a range of supply, demand and harm reductions strategies” – regulating adult access to nicotine pouches is harm reduction in practice and replicates what tobacco control leaders such as Sweden have enacted as comprehensive strategy – [implementing](#) all FCTC ‘mpower’ measures plus harm reduction.

A troubling asymmetry runs through the global conversation around tobacco harm reduction. Wealthy nations in Europe and the Gulf have increasingly chosen to regulate innovative nicotine products and make them available to adult smokers, treating them as legitimate tools for public health. Yet international advocacy often pushes in the opposite direction for low- and middle-income countries—where smoking rates are frequently higher and health systems more fragile. If regulated access to nicotine pouches is sound policy in Stockholm, Miami, and Abu Dhabi, the case for denying it to Tashkent deserves far more scrutiny than it currently receives. Equity in public health should mean that the populations bearing the heaviest smoking burden are not the last to benefit from the tools that could lighten it.

Uzbekistan’s Regulatory Reversal and Its Consequences

Nicotine pouches first [appeared](#) in Uzbekistan in November 2019. In a market dominated by cigarettes and nasvay, nicotine pouches gained traction quickly. Within just a few years of their launch, consumption had grown into the tens of millions of pouches annually and was accelerating year on year—a clear signal that a meaningful segment of Uzbek adults was actively seeking alternatives to cigarettes.

Then the regulatory environment shifted. In May 2023, the Uzbek government [banned](#) nicotine pouches under Law on TCL No. 844, with a twelve-month grace period. The ban took full effect in 2024. In November 2025, President Mirziyoyev [signed](#) legislation banning electronic cigarettes as well, with penalties ranging from fines of up to 206 million Uzbek soum to prison sentences of three to five years. Heated tobacco products remain legal, but the overall direction of Uzbek policy has moved sharply toward prohibition.

The consequences were predictable. Pouch consumption did not vanish—it migrated underground. In 2024, an estimated 43.2 million pouches were still consumed, now entirely through illicit channels. Law enforcement agencies in Tashkent have reported multiple seizures: [6,940 packages](#) of smuggled snus valued at 644 million soum in one raid; [800 packages](#) of foreign-manufactured pouches worth 66 million soum in another. These seizures illustrate what prohibition research consistently confirms—banning a product with established consumer demand does not eliminate demand; it criminalizes it, eliminating quality controls and tax revenue in the process.

Meanwhile, the products most responsible for health harm remain freely available. Cigarettes continue to be sold across the country. Nasvay, despite its association with oral cancers, faces no comparable crackdown. The regulatory framework, in effect, penalizes the safer product category while leaving the most harmful ones largely untouched.

A Smarter Way

The Path to Smoke-Free platform ranks Uzbekistan 78th out of 101 countries assessed. Broken down by dimension, the country scores 79th in Accessibility of innovative nicotine products, 83rd in Acceptability, and 53rd in Affordability. These scores reflect a regulatory environment that has moved in the wrong direction—away from the evidence and away from the approaches that have worked in Sweden, the United Kingdom, and elsewhere.

Reversing this trajectory does not require Uzbekistan to abandon its commitment to public health. On the contrary, it requires a more sophisticated application of that commitment. Risk-proportionate regulation—the principle that products should be regulated according to the harm they cause, not according to whether they contain nicotine—would allow Uzbekistan to maintain strong controls on combustible tobacco while creating a legal, regulated, taxed market for nicotine pouches.

Such a framework would accomplish several things simultaneously. It would bring pouch consumption out of illicit channels and back under regulatory oversight, ensuring product quality and age restrictions. It would generate tax revenue that could be reinvested in public health programs. It would give the country's 3.5 million smokers and 2.5 million nasvay users a credible, accessible pathway away from the products doing the most damage.

And it would align Uzbekistan with a growing international consensus that embraces innovation as a complement to, not a replacement for, traditional tobacco control.

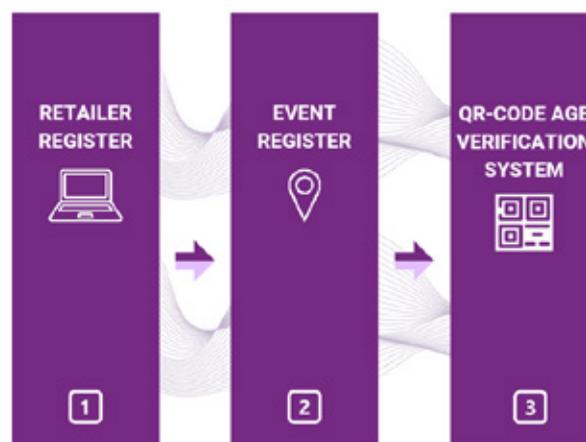
Protecting the Underage Without Penalizing the Adults

A frequent objection to regulated nicotine pouches is the risk of underage uptake. The concern is legitimate—no underage person should use any nicotine product. But the policy response matters as much as the intention behind it. Blanket bans designed to protect young people carry a steep cost when they simultaneously deny millions of adult smokers access to safer alternatives. This is because restrictions driven by generalized anxiety rather than empirical data risk forfeiting the very harm reduction gains that could save the most lives.

More effective approaches are possible, and both Greece and New Zealand offer compelling examples.

In 2025, the Greek government [introduced](#) three digital tools to [enforce](#) its bans on selling tobacco and alcohol to minors. A national register now maps every tobacco and alcohol retailer in the country, enabling targeted inspections. A second register requires businesses hosting events involving minors to declare them in advance. And a secure digital age-verification mechanism—adapted from the country's existing KidsWallet system—allows 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.

HOW IT WORKS IN GREECE



New Zealand [tells](#) a similarly instructive story. The country’s regulatory model 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, now lower than in neighboring Australia, where vaping products are nominally banned. Meanwhile, adult smoking in New Zealand has fallen by over 50%, 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.

Greece and New Zealand demonstrate that governments can enforce rigorous youth protections without resorting to blanket bans. Technology, smart regulation, proportionate enforcement, and meaningful penalties can coexist with a legal market that serves adult consumers. For Uzbekistan, these models offer a practical alternative: protect minors through targeted, enforceable mechanisms while allowing adult smokers and nasvay users access to safer products that could transform the country’s public health trajectory.

Conclusion

Uzbekistan’s smoking challenge is real, but it is not intractable. The country’s relatively moderate smoking prevalence, strong cultural norms discouraging female smoking, and existing familiarity with oral nicotine products create a foundation upon which a transformative harm reduction strategy could be built.

Nicotine pouches are uniquely suited to this context. They are infrastructure-independent, culturally compatible, scientifically validated by leading regulatory agencies including the U.S. FDA and Germany’s BfR, and demonstrably effective in the countries that have embraced them. Sweden’s experience—in which nicotine pouches accelerated an already declining smoking rate to the point of achieving smoke-free status—offers a blueprint that Uzbekistan could adapt to its own circumstances. And for those who rightly insist on protecting the young, Greece has shown that digital age-verification systems and national retail registers can enforce rigorous youth protections without shutting adult smokers out of safer alternatives.

Comparative Forecasts Based on Current and Best Practices

Different policy roads result in varying timelines for becoming smoke-free



The arithmetic is simple. Under current policies, Uzbekistan will reach smoke-free status in approximately 2067. With a comprehensive approach modeled on Sweden’s, that date moves to 2041—a difference of 26 years and, by expert estimates, as many as 464,000 lives. The evidence, from Stockholm to London to Athens to Tokyo, is settled. The question is whether Uzbekistan will act on that evidence, or continue down a path that privileges prohibition over pragmatism—and pays for that choice in preventable deaths.

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/>.

WE ARE INNOVATION

We Are Innovation is a dynamic network of individuals and institutions who deeply believe in innovation's power to drive progress and solve the world's most pressing problems. With 50 think tanks, foundations, and NGOs based worldwide, We Are Innovation represents the diverse voices of a global civil society committed to advancing human creativity, adopting new technologies, and promoting innovative solutions. Through our collaborative approach and cutting-edge expertise, we are driving global transformative change. To learn more about our work, visit us at <https://weareinnovation.global/>.

We Are Innovation
The Future Is Calling. And We Are Ready to Answer

