recruiting new users. Use of smokeless tobacco products has risen substantially since the 1970's: overall, consumption of moist snuff almost tripled from 1972 through 1991; use by adolescent males aged 18 to 19 increased almost 1,500% between 1970 and 1991.⁵²¹ The success of the graduation strategy in getting users to the point where they want to consume the high-nicotine products is demonstrated by the market share of various products. While the majority of advertising dollars are spent on the low and medium nicotine products like Skoal Long Cuts, the great bulk of the increased sales is in Copenhagen, the high-nicotine product.⁵²² The consistently small market share for the low-nicotine products shows that they serve only as a steppingstone to the high-nicotine products. Consistent with the graduation strategy, a recent study found that older smokeless tobacco users are more likely to purchase the brands that deliver high levels of nicotine than are younger smokeless tobacco users.⁵²³

The evidence of manipulation of nicotine delivery in smokeless tobacco and the deliberate marketing of higher and higher nicotine-containing products shows clearly that smokeless tobacco manufacturers intend consumers to become tolerant to, and dependent on, the

⁵²¹ See:

Centers for Disease Control and Prevention. Office of Smoking and Health. Unpublished data from 1970 and 1991 National Household Interview Surveys. (Rate of snuff use among 18-19 year-old males was 0.5% in 1970 and 7.6% in 1991).

Marcus AC, Crane LA, Shopland DR, Lynn WR. Use of smokeless tobacco in the United States: Recent estimates from the current population survey. In: *Smokeless Tobacco Use in the United States: NCI Monographs.* 1989;8:17-23.

Sullivan LW. Keynote Address. In: Smokeless Tobacco or Health: An International Perspective: Smoking and Tobacco Control Monograph 2. National Cancer Institute. NIH Pub. No. 92-3461. 1992.

⁵²² See Connolly, note 511, supra, at p. 5.

⁵²³ Hatsukami D, Nelson R, Jensen J. Smokeless tobacco: current status and future directions. *Brit. J. of Addiction.* 1991; 86:559-563.