

purpose as a cessation tool. Additionally, the number of individuals who haven't smoked but have tried vaping is increasing – however, the extent to which these young people would have tried smoking if vaping had not been available is unclear.<sup>3</sup> Research in the UK indicates young consumers (11–16-year-olds) perceive fruit and candyfloss flavours as less harmful than nicotine- or coffee-flavoured vapes.<sup>4</sup>

One must ask if we should be enquiring about a patient's social history from a younger age? It is not standard practice to ask those below 16 if they use nicotine products; this trend may change that. As healthcare professionals, we have a pivotal role in educating our patients in order to prevent an addiction which may be very difficult to overcome once established.<sup>5</sup>

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## Correction to: Promoting stigma

The original article can be found online at <https://doi.org/10.1038/s41415-021-3735-z>

Journal's correction note:

Letter *Br Dent J* 2021; **231**: 663–664.

When this letter was originally published, one of the authors was incorrectly listed as S. Singh Bajaj. The correct author name is S. S. Bajaj.

The journal apologises for any inconvenience caused.

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