USPSTF Bulletin

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U.S. Preventive Services Task Force Issues Final Recommendation Statement on Primary Care–Based Prevention of Illicit Drug Use in Children, Adolescents, and Young Adults

More research is needed on how clinicians can help keep young people from starting to use drugs

WASHINGTON, D.C. – May 26, 2020 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on primary care–based prevention of illicit drug use in young people. The Task Force concluded there is not enough evidence to make a recommendation for or against clinicians providing counseling to prevent drug use in this group. More research is needed on how clinicians can best prevent young people from starting to use illicit drugs. **This is an I statement.**

Preventive Services

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Grade in this recommendation:

I: The balance of benefits and harms cannot be determined.

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Illicit drug use includes using drugs such as marijuana, heroin, and cocaine, as well as using prescription drugs or household products in a way that is not recommended. It is a serious problem in the United States. By the time teenagers graduate from high school, about half of them have used an illicit drug. In 2016, over 70 percent of all deaths in young people ages 10 to 24 years resulted from unintentional injuries, suicide, and homicide. The use of illicit drugs significantly contributes to these causes of death.

"Finding effective ways for clinicians to help keep youth from starting to use drugs is critical to the health and well-being of our communities," says Task Force member Michael Silverstein, M.D., M.P.H. "Unfortunately, the Task Force still cannot make a recommendation due to gaps in evidence, so we are renewing our call for more research."

The Task Force looked at various behavioral counseling methods that can be done in a primary care setting or referred to by a clinician. Approaches reviewed included one-on-one counseling, group sessions, print materials, and computer-based tools.

"Using illicit drugs at a young age can lead to many negative social and health outcomes," says Martha Kubik, Ph.D., R.N. "More research on this topic is a priority. In the meantime, clinicians should continue to use their judgment on how best to address this issue with young patients and their families."

This final recommendation focuses on young people who have never used drugs or who only use them rarely. It does not apply to people who use drugs regularly or have been diagnosed with a substance use disorder. If clinicians suspect that their young patients may be using drugs, they should provide or refer them to appropriate care. Parents or caregivers who are concerned that their children may be using drugs should talk to their child's clinician or other health professionals to get help.

The Task Force's final recommendation statement and corresponding evidence summary have been published online in the *Journal of the American Medical Association*, as well as on the Task Force website at http://www.uspreventiveservicestaskforce.org. A draft version of the recommendation statement and evidence review were available for public comment from October 1, 2019, to October 28, 2019.

www.uspreventiveservicestaskforce.org

The Task Force is an independent, volunteer panel of national experts in prevention and evidencebased medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Silverstein is a professor of pediatrics, director of the Division of General Academic Pediatrics, and vice chair of research for the Department of Pediatrics at the Boston University School of Medicine. He is also a staff pediatrician and associate chief medical officer for research and population health at Boston Medical Center.

Dr. Kubik is the director of the Department of Nursing at the Temple University College of Public Health and the David R. Devereaux endowed professor in nursing. From 2015 to 2018, Dr. Kubik was a standing member of the National Institutes of Health's Community-Level Promotion Study Section.

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