

USPSTF Bulletin

U.S. Preventive Services Task Force Issues Draft Recommendation Statement on Primary Care Behavioral Interventions to Reduce Illicit Drug and Nonmedical Pharmaceutical Use in Children and Adolescents

WASHINGTON, D.C. – October 1, 2013 – The U.S. Preventive Services Task Force (Task Force) today posted its draft recommendation statement and draft evidence report on primary care behavioral interventions to reduce illicit drug and nonmedical pharmaceutical use in children and adolescents. The Task Force is providing an opportunity for public comment on this draft recommendation statement and evidence report until October 28. All public comments will be considered as the Task Force develops its final recommendation statement and evidence report.

More than one in 10 teens ages 12 to 18 years in the United States use illegal drugs or misuse prescription or over-the-counter medicines. This can have serious health, educational, and social consequences. Drug use is a significant contributor to car accidents, homicide, and suicide in teens—the leading causes of death in adolescents. Every year, over 150,000 teens are seen in hospital emergency rooms as a result of illicit drug and nonmedical pharmaceutical use.

"The Task Force clearly recognizes the significance of preventing illicit drug use or misuse of medicines among children and teens," says Task Force member Susan J. Curry, Ph.D. "However, we found that there was not enough evidence to determine what effective measures primary care professionals can take to prevent children and teens who have never used drugs from trying them and reduce use among teens who are already experimenting."

Based on this lack of evidence, the Task Force's draft recommendation is an I statement, concluding that the Task Force cannot make a definitive recommendation for or against behavioral interventions in the primary care setting to prevent or reduce drug use in children and teens under age 18. This recommendation includes illicit drug use, nonmedical use of prescription medications, and misuse of over-the-counter medicines and does not apply to children and teens who have been diagnosed with drug abuse or drug dependence. Young people who are abusing or addicted to drugs need help and require treatment.

"Because of the importance of keeping kids healthy and safe, the Task Force calls on the research community to continue to search for ways to prevent and reduce illicit drug and nonmedical pharmaceutical use in kids and teens," says Task Force member Adelita Gonzales Cantu, Ph.D., R.N.

The Task Force's draft recommendation statement and the evidence report that it is based on have been posted for public comment on the Task Force Web site at <u>www.uspreventiveservicestaskforce.org</u>. Comments can be submitted from October 1 to October 28 at <u>www.uspreventiveservicestaskforce.org/Page/Name/us-preventive-services-task-force-opportunities-for-public-comment</u>.

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.

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