

Primary Care Interventions To Prevent Tobacco Use In Children And Adolescents

The U.S. Preventive Services Task Force (Task Force) has issued a final recommendation statement on *Primary Care Interventions to Prevent Tobacco Use in Children and Adolescents*.

This final recommendation statement applies to children and teens ages 10 to 17.

The Task Force reviewed recent research on interventions in primary care to prevent tobacco use in children and teens. The final recommendation statement summarizes

what the Task Force found: Evidence shows that primary care interventions, such as education and brief counseling, are effective in preventing young patients from using tobacco. Primary care clinicians should provide these interventions to help keep their young patients smoke-free.

This fact sheet explains the recommendation and what it might mean for you.

What is tobacco use?

Tobacco use includes smoking cigarettes, cigars, and pipes; the use of smokeless tobacco products such as chewing and dipping tobacco; and smoking tobacco through a waterpipe (a hookah). The evidence about preventing youth from using tobacco has focused on smoking cigarettes.

Facts About Tobacco and Tobacco Use

Tobacco use is the main cause of preventable illness and death in the United States. Every year, it causes about 443,000 deaths, including nearly 161,000 deaths from cancer, 128,000 deaths from heart disease, and 103,000 deaths from lung disease. Cigarette smoking is the most common form of tobacco used in the United States.

BeTobaccoFree.hhs.gov has information about other forms of tobacco use in the United States.

Nearly all tobacco use begins during youth and young adulthood. Every day, more than 3,800 teens ages 12 to 17 smoke their first cigarette. And, every day, 1,000 teens younger than 18 become daily smokers.

In 2009, nearly 1 in 4 high school students and nearly 1 in 10 middle school students used tobacco. Tobacco use among youth has declined in the past 10 years, but too many are still starting and using tobacco. The use of other forms of tobacco besides cigarettes, such as cigars and smokeless tobacco, also has greatly increased.

Children and teens are more likely to start smoking if their parents smoke. Other things also can increase the chances that a child or teen may start smoking. These include being able to get cigarettes easily, a belief that all the other kids are smoking, seeing ads and other promotions for cigarettes, and low levels of parental supervision.

Education and Counseling to Prevent Tobacco Use

Education and counseling about the dangers of smoking and the importance of never using tobacco in any form can be done in a variety of ways:

- Conversations with a health care professional in the office or by phone, either individually with a youth or in a family or group session.
- Educational videos, computer apps, and print materials, such as activity guides, newsletters, tip sheets, workbooks, and preprinted prescription forms with anti-tobacco messages.

Potential Benefits and Harms

Being tobacco-free is one of the most important things a child or teen can do to live a long and healthy life. The best way to help children and teens avoid tobacco is to help them never use it in the first place.

The Task Force found that the main potential benefit of education and counseling is that these approaches reduce the chances that children and teens will start smoking. Even minimal actions, such as mailing materials to a youth's home, can help.

The Task Force found no evidence of harms from education and counseling to prevent smoking.

The Final Recommendation Statement on Primary Care Interventions to Prevent Tobacco Use in Children and Teens: What Does It Mean?

Here is the Task Force's final recommendation on interventions to prevent tobacco use. The recommendation has a letter grade. The grade is based on the quality and strength of the evidence about the potential benefits and harms of the interventions. It is also based on the size of the potential benefits and harms. The Task Force evidence grades are explained in the box at the end of this fact sheet.

When the Task Force recommends (Grade B) an intervention, it is because the intervention has more potential benefit than potential harm. The Notes explain key ideas.

Visit the Task Force Web site to read the full [final recommendation statement](#). The statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence report](#) provides more detail about the studies the Task Force reviewed.

1 The Task Force recommends that *primary care clinicians* provide interventions, including education or brief counseling, to prevent *initiation of tobacco use* among *school-aged children and adolescents*. **Grade B**

Notes

- 1** *primary care...*
Health care professionals, including doctors, nurse practitioners, physician assistants, and nurses, who provide general and preventive health care.
- initiation of tobacco...*
Start smoking.
- school-aged children...*
Youth ages 10 to 17.

What is the U.S. Preventive Services Task Force?






The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed. Recommendations only address services offered in the primary care setting or services referred by a primary care clinician.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the **final recommendation statement**. To learn more, visit the [Task Force Web site](#).



USPSTF Recommendation Grades

| Grade | Definition |
|-------------|--|
| A | Recommended. |
| B | Recommended. |
| C | Recommendation depends on the patient's situation. |
| D | Not recommended. |
| I statement | There is not enough evidence to make a recommendation. |

Click Here to Learn More About Preventing Tobacco Use

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What You(th) Should Know About Tobacco
 (Centers for Disease Control and Prevention)
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SmokeFree Teen
 (teen.smokefree.gov)
- 
Don't Start
 (BeTobaccoFree.gov, U.S. Department of Health and Human Services)
- 
Talk with Your Teen
 (Office of Adolescent Health, U.S. Department of Health and Human Services)
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Talk to Your Kids About Tobacco, Alcohol, and Drugs
 (healthfinder.gov)

Additional Resources for Clinicians

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Office on Smoking and Health
 (Centers for Disease Control and Prevention)
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BeTobaccoFree.gov
 (U.S. Department of Health and Human Services)