

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on primary care–based interventions to prevent illicit drug use in children, adolescents, and young adults. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from October 1, 2019, to October 28, 2019. The Task Force welcomes your comments.

## Primary Care–Based Prevention of Illicit Drug Use in Children, Adolescents, and Young Adults

The Task Force issued a **draft recommendation statement** on *Primary Care–Based Interventions to Prevent Illicit Drug Use in Children, Adolescents, and Young Adults*. Based on its review of the evidence, the Task Force found that there is not enough evidence to make a recommendation for or against doctors counseling young people to prevent them from starting to use illicit drugs. More research is needed on how doctors can best prevent illicit drug use in children and teens.

This draft recommendation is about how doctors can prevent drug use in children, teens, and young adults

before it starts. It applies to young people who have never used drugs or use them rarely. It does not apply to young people who use drugs regularly (at least one time a week) or have been diagnosed with a drug addiction.

If doctors know or suspect that their young patients are using drugs, they should continue to rely on their judgment to determine how best to address this issue. Parents or caregivers who are concerned that their children may be using drugs should talk to their child's doctor to get help.

### What is illicit drug use?

Illicit drug use means using illegal drugs, like heroin or cocaine. It includes using prescription drugs (like painkillers) in ways that are not prescribed by a doctor. It also includes using over-the-counter medications (like cough medicine) or household products (like glues or solvents) to affect one's mood or way of thinking.

## Facts About Illicit Drug Use

Drug use among young people is a serious problem in the United States.

By the time teenagers graduate from high school, about half 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 alcohol and drugs contributes to these causes of death.

Using drugs at a young age can lead to health and social problems, such as more sickness and disease, higher risk of death, higher risk of developing an addiction, and lower academic performance.

## Counseling to Prevent Illicit Drug Use

The Task Force looked at evidence on how doctors can use counseling to help prevent young patients from starting to use drugs in the first place. They looked at many ways that doctors can counsel young people, such as:

- One-on-one conversations
- Group conversations
- Printed educational materials
- Computer-based tools

## Potential Benefits and Harms of Counseling to Prevent Illicit Drug Use

The Task Force reviewed studies to learn about the benefits and harms of doctors counseling young people to prevent drug use. Unfortunately, there was not enough evidence to know if counseling by a doctor is effective at helping prevent drug use among young people. Similarly, there was not enough evidence to know if counseling by a doctor to prevent drug use causes harms.

Overall, there was not enough evidence to make a recommendation for or against counseling as a way for doctors to prevent young people from starting to use illicit drugs. The Task Force is calling for more research in this area.

## The Draft Recommendation on Primary Care–Based Prevention of Illicit Drug Use in Children, Adolescents and Young Adults: What Does It Mean?

Here is the Task Force’s draft recommendation on primary care–based interventions to prevent illicit drug use in children, adolescents, and young adults. It is based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. It is also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When there is not enough evidence to judge benefits and harms, the Task Force does not make a recommendation for or against—it issues an **I Statement**.

Before you send comments to the Task Force, you may want to read the [draft recommendation statement](#). The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the scientific studies the Task Force reviewed.

### Notes

**1** The USPSTF concludes that the [current evidence is insufficient](#) to assess the balance of benefits and harms of primary care–based [behavioral counseling interventions](#) to prevent or reduce [illicit drug use, including nonmedical use of prescription drugs](#), in children, adolescents, and young adults. (**I Statement**)

**1** [current evidence is insufficient](#)  
The Task Force did not find enough information in the studies to determine the overall benefits and harms of counseling in a clinical setting.

#### [behavioral counseling interventions](#)

Ways doctors can provide counseling to help prevent drug use before it starts or help reduce drug use before it becomes a problem, such as one-on-one discussions, group discussions, printed materials, or computer-based tools.

#### [illicit drug use, including nonmedical use of prescription drugs](#)

Using illegal drugs, like heroin or cocaine. It includes using prescription drugs (like painkillers) in ways that are not prescribed by a doctor. It also includes using over-the-counter medications (like cough medicine) or household products (like glues or solvents) to affect one’s mood or way of thinking.




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

The Task Force is an independent, non-federal, volunteer 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, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

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 Website](#).

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 Illicit Drug Use

-  **Drug Use in Adolescence**  
(Department of Health and Human Services)
-  **Drugs of Abuse**  
(National Institute on Drug Abuse)
-  **Drug Use and Addiction**  
(MedlinePlus)
-  **Teen Substance Use & Risks**  
(Centers for Disease Control and Prevention)
-  **Teen Prescription Drug Misuse and Abuse**  
(Substance Abuse and Mental Health Services Administration)

## [Click Here](#) to Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received between October 1, 2019 and October 28, 2019.



All comments will be considered for use in writing final recommendations.