Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force’s (Task Force) draft recommendation statement on screening and behavioral counseling interventions in primary care to reduce unhealthy alcohol use in adolescents and adults. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from June 5, 2018 to July 2, 2018. The Task Force welcomes your comments.

Screening and Behavioral Counseling Interventions in Primary Care to Reduce Unhealthy Alcohol Use in Adolescents and Adults

The Task Force has issued a draft recommendation statement on Screening and Behavioral Counseling Interventions in Primary Care to Reduce Unhealthy Alcohol Use in Adolescents and Adults.

The Task Force found that screening adults and providing brief counseling in the primary care setting can help detect and reduce unhealthy alcohol use. The Task Force recommends that primary care professionals ask all adults 18 years of age and older, including pregnant women, about their drinking patterns and offer brief counseling to those who drink more than they should.

The Task Force did not find enough evidence about what works to reduce alcohol use among adolescents (12 to 17 years of age) to make a recommendation for or against screening and behavioral counseling for this population. The Task Force is calling for more research for adolescents.

What is unhealthy alcohol use?

Unhealthy alcohol use refers to drinking more alcohol than the recommended limits. This can lead to illness, injury, and even death.

Facts about Unhealthy Alcohol Use

Unhealthy alcohol use is drinking more alcohol than the recommended limits. The National Institute on Alcohol Abuse and Alcoholism at the National Institutes of Health recommends that:

- men drink no more than 4 drinks per day and no more than 14 drinks per week
- women drink no more than 3 drinks per day and no more than 7 drinks per week.

Drinking too much alcohol can lead to illness, injury, and death. About 88,000 people die each year from alcohol use—deaths that could have been prevented. Many of these deaths are from long-term health conditions related to alcohol use, like liver disease. Others are from sudden events such as car accidents.

Alcohol use during pregnancy can cause birth defects and serious developmental issues in children. Any alcohol use during pregnancy is considered unhealthy.

While adolescents should not drink any alcohol, nearly one out of ten drinks alcohol. Drinking and driving is particularly dangerous among adolescents. One in five teen drivers involved in fatal car accidents had alcohol in their system.

Facts about Screening and Behavioral Counseling for Unhealthy Alcohol Use

Screening for unhealthy alcohol use consists of clinicians asking patients questions about how much and how often they drink – and comparing the answers to the recommended limits.

Counseling adults who engage in unhealthy alcohol use typically includes brief discussions of how a patient’s drinking patterns compare to the recommended limits and how they can reduce drinking. This can be done in the primary care setting.

Adults who are found to have more serious drinking problems should be referred to a specialist for more intensive treatment.
Potential Benefits and Harms of Screening and Behavioral Counseling Interventions in Primary Care to Reduce Unhealthy Alcohol use in Adolescents and Adults

The Task Force looked at evidence in different screening and behavioral counseling approaches in primary care to reduce unhealthy alcohol use in adolescents and adults. The evidence focused on people who drink above the recommended limits but have not yet developed serious drinking problems.

On average, people who received counseling reduced their drinking by 1.6 drinks per week. Counseling also reduced how many adults drank more than the recommended limits. Among pregnant women, counseling helped some stop drinking. These effects generally lasted six to 12 months after the behavioral counseling took place.

While there is evidence that screening and counseling work to reduce alcohol use for adults and pregnant women, there is not enough evidence about what works well for adolescents. More research is needed.

The Task Force found no harms of screening or counseling for unhealthy alcohol use in adults and could not determine the harms in adolescents.

The Draft Recommendation on Screening and Behavioral Counseling Interventions in Primary Care to Reduce Unhealthy Alcohol Use in Adolescents and Adults: What Does It Mean?

Here is the Task Force’s draft recommendation on screening and behavioral counseling interventions in primary care to reduce unhealthy alcohol use in adolescents and adults. It is based on the quality and strength of the evidence about the potential benefits and harms of interventions 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 the Task Force issues a (Grade B), it recommends screening because it has more potential benefits than harms. When there is not enough evidence to judge benefits and harms, the Task Force does not make a recommendation for or against screening and instead 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.
The USPSTF recommends that clinicians in primary care settings **screen** adults aged 18 years or older and pregnant women for **unhealthy alcohol use** and provide persons engaged in **risky or hazardous drinking** with **brief behavioral counseling interventions** to reduce unhealthy alcohol use. **(B Recommendation)**

The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of screening and brief counseling interventions for alcohol use in primary care settings in adolescents aged 12 to 17 years. **(I Statement)**

**Notes**

**screen**
Primary care clinicians ask adults questions about their drinking patterns.

**unhealthy alcohol use**
Drinking more alcohol than the recommended limits. Men should have no more than 4 drinks per day and no more than 14 drinks per week. Women should have no more than 3 drinks per day and no more than 7 drinks per week. Any alcohol use during pregnancy is considered unhealthy. Adolescents should not drink any alcohol.

**risky drinking**
A person drinks more than the recommended limits but has not yet developed a severe drinking problem.

**hazardous drinking**
A person’s drinking puts them at higher risk of illness, injury, or death, but these consequences have not yet happened.

**brief behavioral counseling interventions**
Discussions about how a patient’s drinking patterns compare to the recommended limits and how to reduce drinking.
What is the U.S. Preventive Services Task Force?

The Task Force is an independent, 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 Web site.

### USPSTF Recommendation Grades

<table>
<thead>
<tr>
<th>Grade</th>
<th>Definition</th>
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<tbody>
<tr>
<td>A</td>
<td>Recommended.</td>
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<tr>
<td>B</td>
<td>Recommended.</td>
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<tr>
<td>C</td>
<td>Recommendation depends on the patient’s situation.</td>
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<tr>
<td>D</td>
<td>Not recommended.</td>
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<tr>
<td>I statement</td>
<td>There is not enough evidence to make a recommendation.</td>
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**Click Here to Learn More about Unhealthy Alcohol Use**

- Alcohol Use and Your Health-Fact Sheets (Centers for Disease Control and Prevention)
- Overview of Alcohol Consumption (National Institute on Alcohol Abuse and Alcoholism)
- Alcohol Screening and Counseling (Centers for Disease Control and Prevention)
- Rethinking Drinking: Alcohol and Your Health (National Institute on Alcohol Abuse and Alcoholism)
- Alcohol (MedlinePlus)

**Click Here to Comment on the Draft Recommendation**

The Task Force welcomes comments on this draft recommendation. Comments must be received between June 5, 2018 and July 2, 2018. All comments will be considered for use in writing final recommendations.