

Primary Care–Based Interventions to Prevent Illicit Drug Use in Children, Adolescents, and Young Adults

May 2020



What does the USPSTF recommend?



For children, adolescents, and young adults

The USPSTF found that the evidence is insufficient to assess the balance of benefits and harms of primary care–based behavioral counseling interventions to prevent illicit drug use in children, adolescents, and young adults. More research is needed.



To whom does this recommendation apply?

Children (younger than 11 years), adolescents (aged 12 to 17 years), and young adults (aged 18 to 25 years), including pregnant persons.

It does not apply to persons who have a history of regular or harmful illicit drug use or who have been diagnosed with a substance use disorder.



What's new?

This recommendation is consistent with the 2014 USPSTF statement.



How to implement this recommendation?

There is insufficient evidence to recommend for or against behavioral counseling interventions to prevent illicit drug use. Clinicians should remain alert to the signs and/or symptoms of illicit drug use and treat as appropriate.



What are other relevant USPSTF recommendations?

The USPSTF has issued other recommendation statements about substance use including:

- Screening for illicit drug use in adolescents and adults, including nonmedical use of prescription drugs
- Primary care interventions to prevent tobacco use in children and adolescents
- Screening and behavioral counseling interventions for reducing unhealthy alcohol use in adolescents and adults
- Interventions for tobacco smoking cessation in adults, including pregnant persons



Where to read the full recommendation statement?

Visit the USPSTF website to read the [full recommendation statement](#). This includes more details on the rationale of the recommendation, including benefits and harms; supporting evidence; and recommendations of others.

The USPSTF recognizes that clinical decisions involve more considerations than evidence alone. Clinicians should understand the evidence but individualize decision making to the specific patient or situation.