Summary of USPSTF Draft Recommendation

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

August 2025



What is this draft recommendation about?

This recommendation focuses on screening and counseling for unhealthy alcohol use. **Unhealthy alcohol use** ranges from risky or hazardous drinking (which means drinking too much at one time or overall) to alcohol use disorder (a pattern of regular drinking that leads to distress or harm).

Screening involves healthcare professionals asking patients a few questions about their drinking habits. **Counseling** includes healthcare professionals briefly discussing patients' alcohol use and their readiness to change their drinking habits as well as developing goals, creating an action plan, and determining follow up care.



What does the USPSTF recommend?



The USPSTF recommends screening for unhealthy alcohol use in primary care settings in adults 18 years or older, including those who are pregnant, and providing persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce unhealthy alcohol use.



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

So, what does that mean?

Healthcare professionals can help to reduce unhealthy alcohol use by asking all adults about their drinking habits and providing counseling to those who engage in risky or hazardous drinking.

While adolescent alcohol use is a serious concern, there is not enough evidence to determine whether or not screening and counseling in primary care helps to reduce alcohol use in teens, so healthcare professionals should use their judgment when deciding whether or not to screen.



Who is this draft recommendation for?

This recommendation applies to adults 18 years and older, including pregnant women, and adolescents ages 12 to 17. It does not apply to people who have been previously diagnosed with unhealthy alcohol use, or people who are seeking help for unhealthy alcohol use.



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Why is this draft recommendation and topic important?

- Unhealthy alcohol use is common and a leading cause of preventable death in the United States.
- Screening and brief counseling can help to find and address unhealthy alcohol use in adults before a more serious problem develops, so it is important that all adults be screened.
- There is no level of alcohol consumption known to be safe, and pregnant women and adolescents should not drink any alcohol.
- Drinking alcohol during pregnancy can be harmful to the baby, causing long term physical and developmental problems.
- Adolescent alcohol use is a serious concern with limited evidence on how best to screen and provide support, so more research is critically needed on how best to help teens.



What are the benefits?

Screening and brief counseling can help to find and address unhealthy alcohol use in adults before a more serious problem develops.

There is not enough evidence to determine the benefits of screening and counseling in adolescents.



What are the harms?

The benefits of screening and counseling in adults far outweigh any potential harms. Although unlikely, possible harms could include stigma, discrimination, privacy concerns, negative impacts on the relationship between patients and healthcare professionals, and risk of legal action during pregnancy.

There is not enough evidence to determine the harms of screening and counseling in adolescents.



Where can I learn more?

Alcohol (Medline Plus)

Alcohol (Substance Abuse and Mental Health Services Administration)

Alcohol Use (Centers for Disease Control and Prevention)

Alcohol's Effects on Health (National Institute on Alcohol Abuse and Alcoholism)

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How can I comment?

Visit the USPSTF website to read the full draft recommendation and submit a comment.



The Task Force welcomes comments on this draft recommendation.

Comments must be received between August 5, 2025, and September 2, 2025.

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All comments will be considered as the Task Force finalizes the recommendation.