Current practice for adolescent substance use screening in family medicine clinics

CJ Cole, MS4 ~ Jaslyn Erickson, MS4

Introduction

Substance use during adolescence is a highly prevalent and undertreated issue. Screening for substance use has been shown to be an effective method of identification of adolescents with substance use disorder for treatment. While the AAP recommends adolescent SUD screening, USPSTF concludes that the current evidence is insufficient to recommend screening and brief behavioral counseling interventions for alcohol use in primary care settings in adolescents aged 12 to 17 years. This study intends to characterize the current screening practices in Colorado family medicine clinics.

Hypothesis

Current rate of adolescent substance use screening at UCHealth clinics is below the rate recommended by the AAP.

Study Design

- Retrospective chart review
- All well child visits and acute care visits
- Patients ages 12-17
- UCHealth family medicine clinics in 2019
- Primary outcome of interest: Screen for SUD
- Secondary data on patient demographics
- Analyze data to determine rate of screening compared to recommended rate

Literature Review

Despite the USPSTF stance on adolescent SUD screening, we suggest that universal screening would be beneficial outside of the pediatric clinic setting. There are several validated screening tools available that, when combined with brief intervention, lead to lasting substance use behavior change.

With the results of this study, we hope to inform on the current screening practices in Colorado. Future endeavors will be to determine feasibility of implementation of the CRAFFT tool in Denver family medicine clinics.

Table: Commonly Used Screening Tools for Use in Adolescents

<table>
<thead>
<tr>
<th>Screening Tool</th>
<th>Sensitivity</th>
<th>Specificity</th>
<th>Substance Use Behavior Screened for</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRAFFT</td>
<td>.88 - 1.00</td>
<td>.93 - .95</td>
<td>Alcohol, Drugs</td>
</tr>
<tr>
<td>NIAA 2-Q</td>
<td>.88 - .95</td>
<td>.81 - .91</td>
<td>Alcohol, Drugs</td>
</tr>
<tr>
<td>S2BI</td>
<td>.81 - 1.00</td>
<td>.92 - .93</td>
<td>Tobacco, Alcohol, Drugs</td>
</tr>
<tr>
<td>BSTAD</td>
<td>.80 - .95</td>
<td>.85 - .97</td>
<td>Tobacco, Alcohol, Drugs</td>
</tr>
</tbody>
</table>

Figure 1: Rates of Adolescent Substance Use Screening

Figure 2: Commonly Used Screening Tools for Use in Adolescents

Conclusions/Next Steps

References

COMIRB

This project has been COMIRB approved, protocol #21-2595

Conflicts of Interest

There are no conflicts of interest to disclose.

Acknowledgements

We would like to acknowledge and thank Dr. Susan Hwang, Dr. Mark Deutchman, UCHealth Department of Family Medicine, Health Data Compasse, and UCHealth Department of Pediatrics for their meaningful contributions to this study.