# Assessing Adolescent Substance Use & Substance Use Disorders

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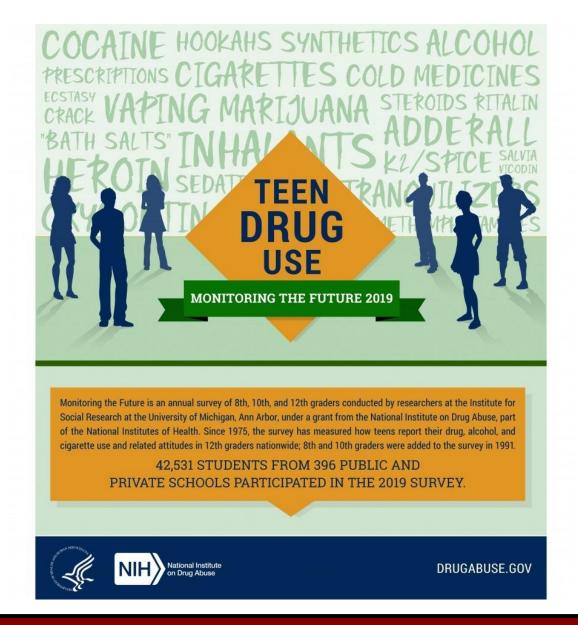


# **Disclosure Statement**

I have no conflicts to disclose.

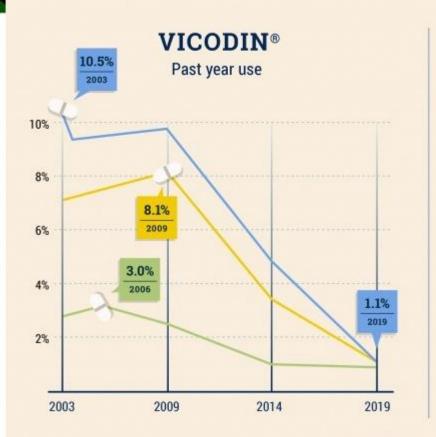
# Impacts of Adolescent Substance Use

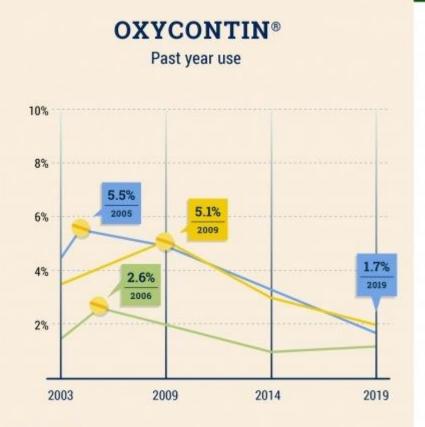
- The adolescent brain is more sensitive to toxicity from drugs and alcohol: cognitive impairments as well as psychiatric symptoms.
- Adolescence is a crucial developmental period with necessary progress through milestones. Substance use derails this progress.
- Drug and alcohol use are associated with leading causes of death in teens (motor vehicle crashes, falls, suicide, overdoses, alcohol poisoning, homicide).
- Strongly linked to several serious health risks (injuries, assault, violence, unprotected sex, teen pregnancy, STIs including HIV/AIDS).





### PRESCRIPTION DRUG MISUSE CONTINUES DECLINE FROM PEAK YEARS











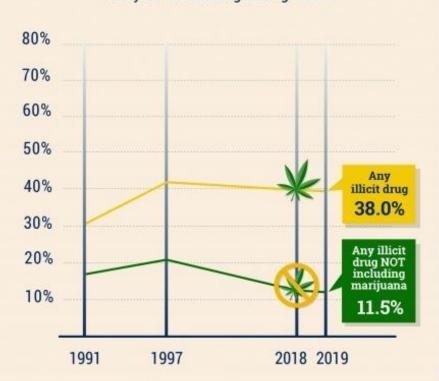




### **ILLICIT DRUG USE**

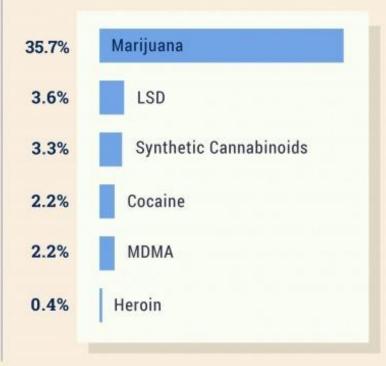
### ILLICIT DRUG USE STEADY

Past year use among 12th graders



### PAST YEAR ILLICIT DRUG USE

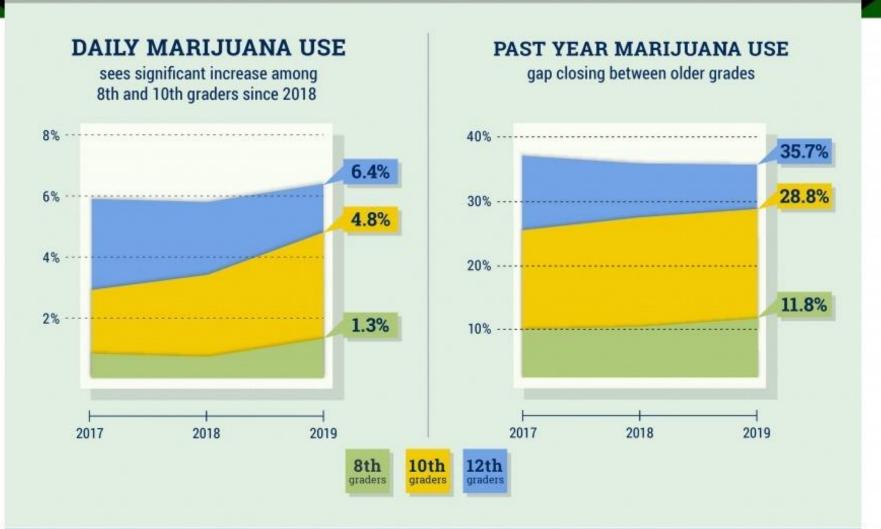
Past year use among 12th graders







### DAILY MARIJUANA USE IN LOWER GRADES INCREASES BUT PAST YEAR MARIJUANA USE STEADY



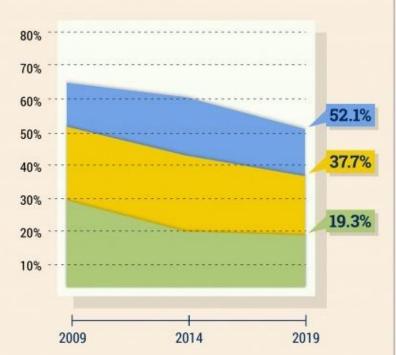




### ALCOHOL USE CONTINUES ITS DECLINE

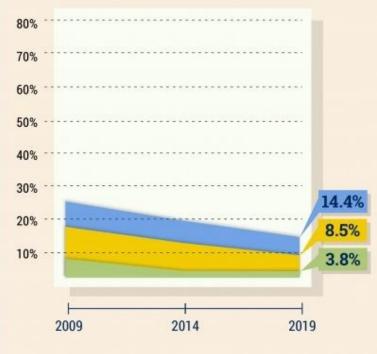
### PAST YEAR ALCOHOL USE

Significant long-term decrease in all grades



### **BINGE DRINKING\***

Significant long-term decrease in all grades









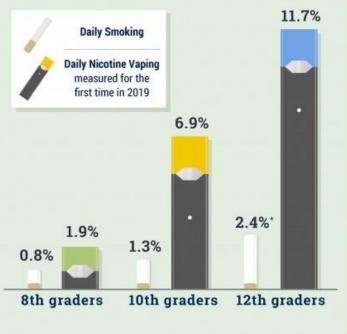
\*5 or more drinks in a row in the past two weeks





### TOBACCO AND NICOTINE: VAPING THREATENS PROGRESS

### **NICOTINE - DAILY USE**



\*Significant decline from 2018 (3.6%)

### CIGARETTE SMOKING (PAST MONTH) **DECLINES OVER PAST TEN YEARS**



\*Significant decline from 2018 (7.6%)

### TO VIEW MORE RESULTS ON VAPING VISIT:

https://www.drugabuse.gov/related-topics/trends-statistics/infographics/monitoring-future-2019-survey-results-vaping





# **Substance Related Disorders (DSM-5)**

- Substance Intoxication
- Substance Withdrawal
- Substance-Induced: Psychotic Disorder, Depressive Disorder, etc.
- Substance Use Disorder:
   Problematic pattern of use leading to
   clinically significant impairment or distress

# **Definitions: Substance Use Disorder**

- 1. Taking in larger amounts or longer than intended
- 2. Wanting to cut down or quit but not able to
- 3. Spending a lot of time obtaining substance
- 4. Craving or strong desire to use
- 5. Repeatedly unable to carry out major obligations due to use
- 6. Continued use despite persistent/recurring social or interpersonal problems
- 7. Stopping / reducing important social, occupational, or recreational activities
- 8. Recurrent use in physically hazardous situations
- 9. Consistent use despite acknowledgement of physical/psychological problems
- 10. Tolerance (need more for same effect)
- 11. Withdrawal/use to avoid withdrawal





# **DSM-5 SUD Specifiers**

## Severity:

- 2-3: "mild"; 4-5: "moderate"; 6+: "severe"

### Remission:

 Early, sustained, partial, full, maintenance therapy, in a controlled environment

# Categories:

Alcohol (ethanol); tobacco (nicotine); cannabis
 (marijuana); stimulant (meth, cocaine); hallucinogen (LSD, psilocybin); opioid (heroin, morphine, etc.); caffeine

# Prevalence of SUDs

	12-17 y.o.	18-25 y.o.	26+ y.o.
Any Substance Use Disorder	3.7	15.0	6.6
Alcohol Use Disorder	1.6	10.1	5.1
Cannabis Use Disorder	2.1	5.9	0.9
Cocaine Use Disorder	<0.1	0.6	0.4
Opioid Use Disorder	0.4	0.9	0.7
Heroin Use Disorder	<0.1	0.3	0.2
Pain Reliever Use Disorder	0.4	0.7	0.6
Methamphetamine Use Disorder	0.1	0.4	0.4

SAMHSA, NSDUH, 2018



# **Prevention of SUDs**

- People who began drinking or using drugs early in life are more likely to develop substance use disorders.
  - Of people who began drinking before age 14, 47%
     became dependent at some point, compared to 9% of people who began drinking at age 21+ (Hingson et al., 2006)
  - Risk for illicit drug use disorder was 6X higher in people who started cannabis use before age 14 compared to those who started after age 18.

# Screening

- Proactive not waiting for problems to develop
- Opportunistic find people where they are
- Universal not just most severe cases
- Evidence-based validated screening tools
- Patient-centered help people develop an understanding of their own health, current level of risk, reasons to change
- Flexibly implemented primary care, emergency departments, schools

# S2BI

### In the past year, how many times have you used:

Tobacco? Alcohol? Marijuana? (Ask separately.)



# Screening

- Interview: ex: KSADS, SCID, HEADSS
- Questionnaires
  - <u>CRAFFT</u>: Car, Relax, Alone, Forget, Friends, Trouble
  - <u>S2BI</u>: Gate questions, follow-up
  - BSTAD: adaptation of NIAAA questions, self and friends' use
  - POSIT: Problem Oriented Screening Instrument for Teachers
  - AUDIT: Alcohol Use Disorders Identification Test
  - <u>CAGE-A</u>: Cut down, Annoyed, Guilty, Eye Opener
  - Bright Futures: Tailored to different ages

Cohen, Reif, Knight, Latimer, 1991; Knight, 1999; Levy et al., 2014; Kelley et al., 2014

# **SUD Assessment**

NIDA:

https://www.drugabuse.gov/nidamed-medical-health-professionals/tool-resources-your practice/additional-screening-resources

- Ongoing use: Urine & Blood tests; Timeline Follow-Back
- SUD: structured interviews (KSADS); Addiction Severity Index (ASI)

# Screening - S2BI

### Screening to Brief Intervention (S2BI) Tool

The following questions will ask about your use, if any, of alcohol, tobacco, and other drugs. Please answer every question by checking the box next to your choice.

### IN THE PAST YEAR, HOW MANY TIMES HAVE YOU USED:

### Tobacco?

- Never
- Once or twice
- Monthly
- Weekly or more

S2BI Tool developed at Boston Children's Hospital with support from the National Institute on Drug Abuse.

It is best used in conjunction with "The Adolescent SBIRT Toolkit for Providers" mass.gov/maclearinghouse (no charge).

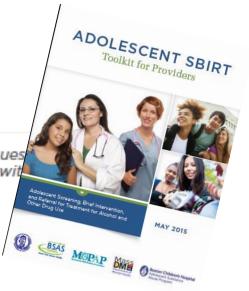
### Alcohol?

- Never
- Once or twice
- Monthly
- Weekly or more

### Marijuana?

- Never
- Once or twice
- Monthly
- Weekly or more

**STOP** if answers to all previous quest are "never." Otherwise, continue wit questions on the back.



# Screening - S2BI

Prescription drugs that were not prescribed for you (such as pain medication or Adderall)?  Never  Once or twice  Monthly  Weekly or more	Inhalants (such as nitrous oxide)?  Never Once or twice Monthly Weekly or more	
Illegal drugs (such as cocaine or Ecstasy)?	ch as cocaine Herbs or synthetic drugs (such as salvia, "K2", or bath salts)?	
O Never	○ Never	
Once or twice	<ul> <li>Once or twice</li> </ul>	
<ul><li>Monthly</li></ul>	<ul> <li>Monthly</li> </ul>	
Weekly or more	Weekly or more	

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SA3542 MAY 2015



### **Screening to Brief Intervention (S2BI)**

This screening tool consists of frequency of use questions to categorize substance use by adolescent patients into different risk categories. The accompanying resources assist clinicians in providing patient feedback and resources for follow-up.

### **Screening Tool Cutoffs and Scoring Thresholds:**



Intended use: This screening tool is meant to be used under a medical provider's supervision and is not intended to guide self-assessment or take the place of a healthcare provider's clinical judgment.

This tool may be administered by either the patient or the clinician. Please indicate the mode of administration:

I AM THE PATIENT

I AM THE CLINICIAN







### **Screening to Brief Intervention (S2BI)**

In the PAST YEAR, how many times have you used tobacco?

Never Once or twice Monthly Weekly or more



14% complete







### **Screening to Brief Intervention (S2BI)**

### **Summary**

### **Overall Risk Level: Higher Risk**

### **Drugs Identified:**

Tobacco, Alcohol, Marijuana, Prescription Drugs, K2 Spice

### More Information About Tobacco

### Implications of the Score and Overall Risk Level

Adolescents reporting substance use in the past twelve months with these frequencies are at higher risk of meeting diagnostic criteria for a substance use disorder (SUD), although not all who report at this level meet criteria. This result, with co-occurring declines in academic, social, or family functioning, may indicate a higher problem severity. In a small validation study, patients reporting weekly use or greater were categorized at a higher risk for SUD and should receive additional assessment and intervention. These patients would benefit from an assessment for a diagnosis of Major Depressive Disorder, ADHD, or other psychiatric disorders, since these disorders frequently co-occur with a SUD.

### **Suggested Clinician Action**

The suggested intervention for this group is further assessment to determine how to best manage care.

### **Additional Suggestions**

Assess further through a clinical interview using questions from the CRAFFT as a guide.
 Consider making a diagnosis using the Diagnostic and Statistical Manual (DSM)-5 SUD

# Screening - S2BI

Table 1. Definition of Substance Use Categories

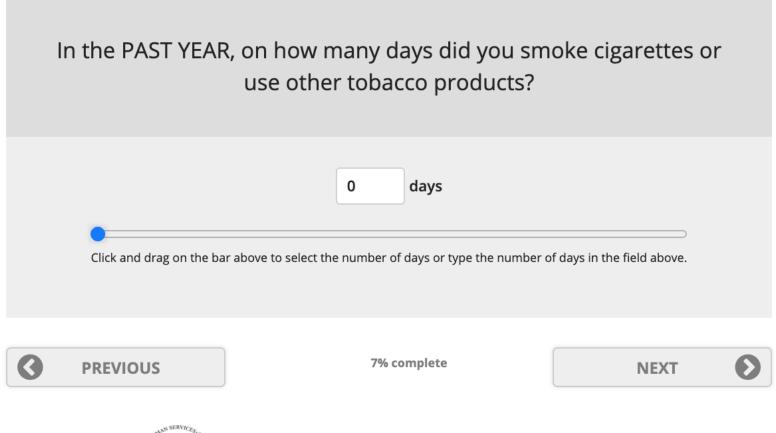
Substance Use Disorder	Full Screen and Brief Assessment Tool	Screen to Brief Intervention
None	Any past-year substance use, RAFFT score = 0, other assessment questions negative	Once or twice use of any substance
Mild-moderate	Any past-year substance use, RAFFT score >1, other assessment questions negative	Monthly use of any substance
Severe	Any past-year substance use, RAFFT score >1, other assessment questions positive	Weekly or greater use of any substance

Abbreviation: RAFFT, relax, alone, forget, friends or family, trouble.

# Screening – BSTAD

FRIENDS' USE		
Do you have friends who		
smoked cigarettes or used other tobacco products in the past year?	□ No	□ Yes
Do you have friends who		
drank beer, wine, or any drink containing alcohol in the past year?	□ No	□ Yes
Do you have friends who in the past year:		
<ul> <li>sniffed or "huffed" anything;</li> <li>took illegal drugs like marijuana (weed, blunts), cocaine, etc;</li> <li>took prescription medications that were not prescribed for them; or</li> <li>took prescription or over-the-counter medications and took more than they were su</li> </ul>	ipposed to □ No	take? □ Yes
PERSONAL USE		
In the past year, have you		
smoked cigarettes or used other tobacco products?	□ No	□Yes
In the past year, have you		
had more than a few sips of beer, wine, or any drink containing alcohol?	□ No	□ Yes
In the past year, have you:		
<ul> <li>sniffed or "huffed" anything;</li> <li>taken illegal drugs like marijuana (weed, blunts), cocaine, etc;</li> <li>taken prescription medications that were not prescribed for you; or</li> <li>taken prescription or over-the-counter medications and took more than you were so</li> </ul>	□ No	$\square$ Yes
[IF DRUGS ARE ENDORSED IN THE PERSONAL USE QUESTION, ASK TH	E FOLL	OWING: J
Which of the following substances have you used in the past year? (check all that ap	pply)	
<ul> <li>□ Marijuana or Hashish</li> <li>□ Cocaine or crack</li> <li>□ Heroin</li> <li>□ Amphetamines or methamphetamine (nonpharmaceutical)</li> </ul>		
<ul> <li>□ Hallucinogens (eg, Mushrooms, LSD)</li> <li>□ Inhalants</li> </ul>		
Which of the following medications have you used in the past year that were not pre which you took more of than you were supposed to take? (check all that apply)	scribed fo	r you or
<ul> <li>□ Prescription pain relievers (eg, morphine, percocet, vicodin, oxycontin, dilaudid, buprenorphine)</li> <li>□ Prescription sedatives (eg, Valium, Xanax, Klonopin, Ativan)</li> <li>□ Prescription stimulants (eg, Adderall, Ritalin)</li> <li>□ Over-the-Counter Medications (eg, Nyquil, Benadryl, cough medicine, sleeping)</li> </ul>		e,
[FOR EACH SUBSTANCE WHERE USE WAS ENDORSED, ASK:]		
In the past 30 days, on how many days have you		
smoked cigarettes or used other tobacco products/used alcohol/used [SUBSTANCE	17	□□ days
In the past 90 days, on how many days have you	<u> </u>	
smoked cigarettes or used other tobacco products/used alcohol/used [SUBSTANCE	]?	□□ days
In the <u>past year</u> , on how many days have you		
smoked cigarettes or used other tobacco products/used alcohol/used [SUBSTANCE	]?	□□ days

### Brief Screener for Tobacco, Alcohol, and other Drugs









### **Brief Screener for Tobacco, Alcohol, and other Drugs**

### Summary

### **Overall Risk Level: Higher Risk**

### **Drugs Identified:**

Tobacco, Alcohol, Marijuana

### More Information About Tobacco

### Implications of the Score and Overall Risk Level

Adolescents reporting substance use in the past twelve months with these frequencies are at higher risk of meeting diagnostic criteria for a substance use disorder (SUD), although not all who report at this level meet criteria. This result, with co-occurring declines in academic, social, or family functioning, may indicate a higher problem severity. In a small validation study, patients reporting weekly use or greater were categorized at a higher risk for SUD and should receive additional assessment and intervention. These patients would benefit from an assessment for a diagnosis of Major Depressive Disorder, ADHD, or other psychiatric disorders, since these disorders frequently co-occur with a SUD.

### **Suggested Clinician Action**

The suggested intervention for this group is further assessment to determine how to best manage care.

### **Additional Suggestions**

• Assess further through a clinical interview using questions from the CRAFFT as a

# Screening: CRAFFT

C	Have you ever ridden in a <b>CAR</b> driven by someone (including yourself) who was "high" or had been using alcohol or drugs?
R	Do you ever use alcohol or drugs to <b>RELAX</b> , feel better about yourself, or fit in?
Α	Do you ever use alcohol or drugs when you are by yourself, <b>ALONE</b> ?
F	Do you ever <b>FORGET</b> things you did while using alcohol or drugs?
F	Do your family or <b>FRIENDS</b> ever tell you that you should cut down on your drinking or drug use?
T	Have you ever gotten into <b>TROUBLE</b> while you were using alcohol or drugs?

Source: Knight 1999





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Screening Tools and Prevention

Screening and Assessment Tools Chart

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Resources to Help Your Patients with SUD During the COVID-19 Pandemic

### Screening Tools and Prevention

### **Validating Screening Tools**

The Screening and Assessment Tools Chart provides a comprehensive guide and links to evidence-based screening and assessment tools you can use with your patients from adolescence to adulthood. It is organized by substance type, patient age, and administration method to help you find the right tool for your practice.

- The Tobacco, Alcohol, Prescription medication, and other Substance Use (TAPS) Tool is validated for use with adults to generate a risk level for each substance class. It can be self-administered or conducted via clinician interview and combines screening and brief assessment of past 90-day problematic use into one tool.
- For validated online screening tools for adolescents, visit NIDAMED's Screening Tools for Adolescent Substance Use. These tools will help you assess substance use disorder risks among adolescents 12-17 years old.

### Screening for Substance Use

Review the latest science on screening for substance use and read about how a variety of clinicians have integrated screening into their practice settings, including which tools they use and useful considerations to get started.



Screening to Brief Intervention (S2BI)

Brief Screener for Tobacco, Alcohol, and other Drugs (BSTAD)

# Contact

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