SBIRT in Pediatric Primary Care

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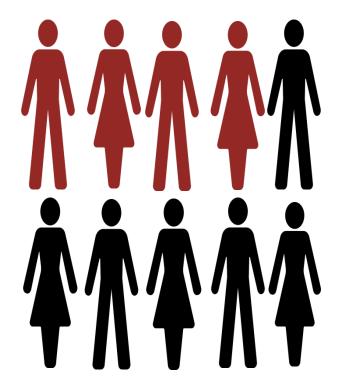
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Disclosures

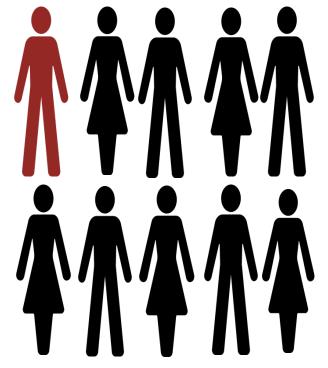
I, Sharon Levy, have no relevant financial or commercial relationships to disclose.



Routine health care is an opportunity to talk about substance use health risks



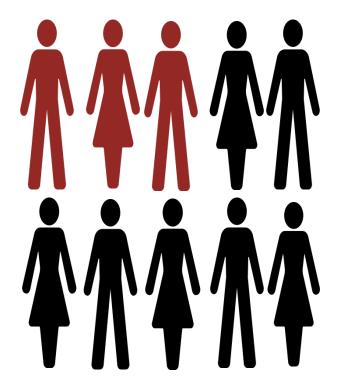
4 in 10 high school aged reported past-year alcohol use



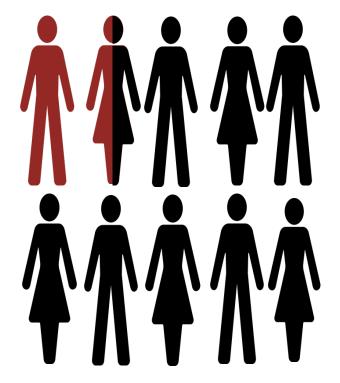
10% reported a binge in the last 3 months



Routine health care is an opportunity to talk about substance use health risks



3 in 10 report past-year marijuana use



About 1.5 in 10 report using marijuana monthly or more



Black outs



- Hallucinations and Delusions
- Hyperemesis syndrome
- Withdrawal symptoms

Formal screening tools are critical

Comparison of Provider Impressions with Diagnostic Interview

	Medical Provider Impressions		
	Sensitivity	Specificity	
Any use	.63 (.58, .69 CI)	.81 (.76, .85 CI)	
Any problem	.14 (.10, .20 CI)	1.0 (.99, 1.0 CI)	
Any disorder	.10 (.04, .17 CI)	1.0 (.99, 1.0 CI)	
Dependence	0.0	1.0	

There are no visible signs of substance use or even early problems.



Practicing physician

"if [patients] are drinking, it's like stupid high school kids who go out and have a couple beers on a weekend here and there...it's not like chronic alcohol problems".



Did I mention that I was suspended because I showed up drunk to a team dinner?

Adults don't use the same code ...











How you ask matters

Official GOP Presidential Job Performance Poll

 How would you rate President Trump's job performance so far?
○ Great
Good
Okay
Other

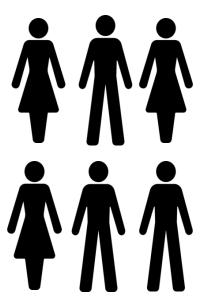
Screen	Question	Answer Choices	Percent reported any use
CIDI-SAM (criterion standard)	Have you had a drink containing alcohol in the past 12 months?	Yes No	42%
S2BI	In the past year, how many times have you used alcohol?	Never Once or twice Monthly Weekly	52%



Screening is associated with counseling

"Alcohol use is not healthy"

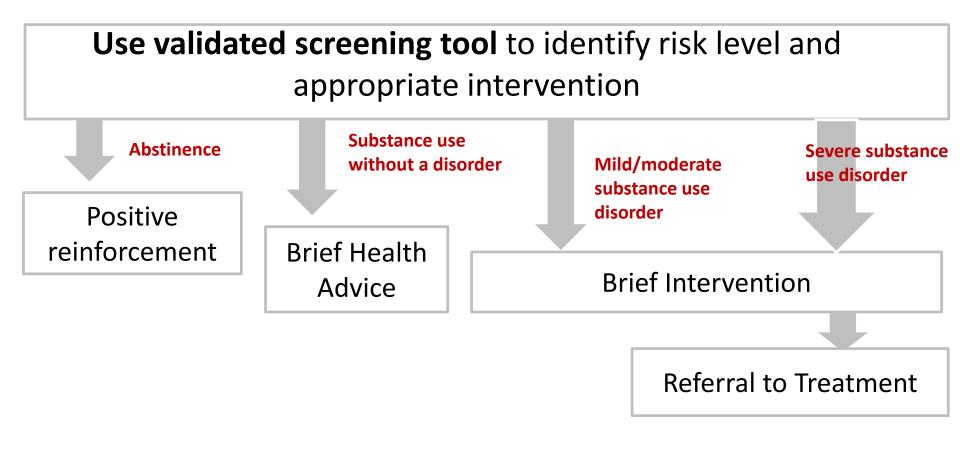
Screened



Not screened



AAP SBIRT Guidelines



The Screen-Machine

Insert Screening Questions Risk level identified!

Figure. Adolescent Screen and Brief Assessment Tool Questions

Screening Questions (Asked of All Participants):	Response Items
In the past year, how many times have you used [X]?	Never
Tobacco products	Once or twice
Alcohol	Monthly
Marijuana	Weekly
Illegal drugs (such as cocaine or Ecstasy)	Daily
Prescription drugs that were not prescribed for you (such as pain medication or Adderall)	Almost daily
Over-the-counter medications (such as cough medicine) for nonmedical reasons	
Inhalants (such as nitrous oxide)	
Herbs or synthetic drugs (such as salvia, K2, or bath salts)	
Brief assessment questions (Asked of participants who answered "yes" to screening questions, contingent on frequency):	Yes/No:

RAFFT (For any past-year alcohol, marijuana, or other drug use)

Do you ever use alcohol or drugs to relax, feel better about yourself, or fit in?

Do you ever use alcohol or drugs while you are by yourself, alone?

Do you ever forget things you did while using alcohol or drugs?

Do your family or friends ever tell you that you should cut down on your drinking or drug use?

Have you ever gotten into trouble while you were using alcohol or drugs?

Alcohol (If once or more):

Have you had X or more drinks on one occasion on 3 or more days?

Had an alcoholic "blackout" (periods that you could not remember due to drinking), "passed out,"

or had an emergency department visit due to substance use?

Had 10 or more drinks on one occasion?

Combined any of the following: alcohol, sedatives such as barbiturates (such as phenobarbital or

pentobarbital), benzodiazepines (such as Klonopin, Ativan, or Xanax), opiates, or a prescription pain medication? If weekly or monthly:

Have you used alcohol 5 or more days per week for 2 or more weeks?

Marijuana (If weekly or monthly):

Have you used marijuana one or more times per day for 2 or more weeks?

Tobacco products (If weekly or monthly):

Have you used tobacco one or more times per day for 2 or more weeks?

Other substances (If once or more):

Have you used [X] in the past 30 days?

Prescription medications (not prescribed for you)

Over-the-counter medications (not for medical purposes)

Inhalants

Herbal supplements

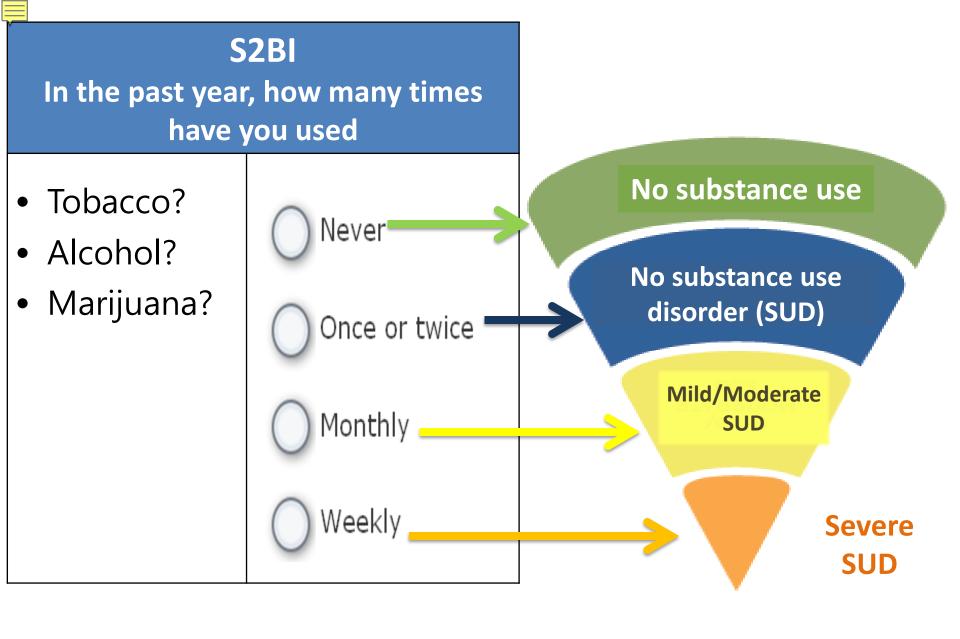
Synthetic drugs

S2BI In the past year, how many times have you used

- Tobacco?
- Alcohol?
- Marijuana?



- Once or twice
- Monthly
- Weekly





Sensitivity/Specificity of S2BI

CIDI-SAM interview vs screen frequency item for detecting a substance use disorder.

Criterion Standard Dx	Screen Frequency	Prevalence N (%)	Sensitivity (95% CI)	Specificity (95% CI)
Any Use	> 1 Past year Use	90 (42.3)	1 [Reference]	84 (76-89)
Mild/Moderate SUD	Monthly use	41 (19.2)	90 (77, 96)	94 (89, 96)
Severe SUD	> Weekly use	19 (8.9)	100 (na)	94 (90, 96)

Levy, S., Weiss, R., Sherritt, L., Ziemnik, R., Spalding, A., Van Hook, S., & Shrier, L. A. (2014). An Electronic Screen for Triaging Adolescent Substance Use by Risk Levels. *JAMA Pediatrics*. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/25070067



The difference between theory ...



Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of all Children

POLICY STATEMENT

Substance Use Screening, Brief Intervention, and Referral to Treatment for Pediatricians



.... And practice ...





...is greater in practice than in theory





...is greater in practice than in theory



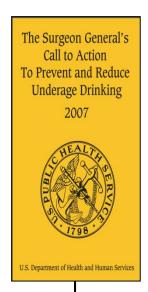


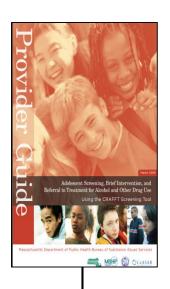
Organizational Principles to Cuide and Define the Child Health Care System and/or Improve the Health of all Children

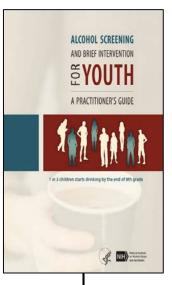
POLICY STATEMENT

Substance Use Screening, Brief Intervention, and Referral to Treatment for Pediatricians

Adolescent SBIRT Guidelines









NIDA Drug Screening Tool
NIDA-Modified ASSIST (NM ASSIST)
Clinician's Screening Tool for Drug Use in General Medical Settings*

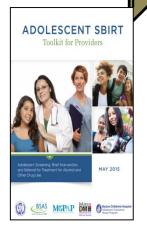
2007 2008 2009 2010 2011 2012 2013 2014 2015

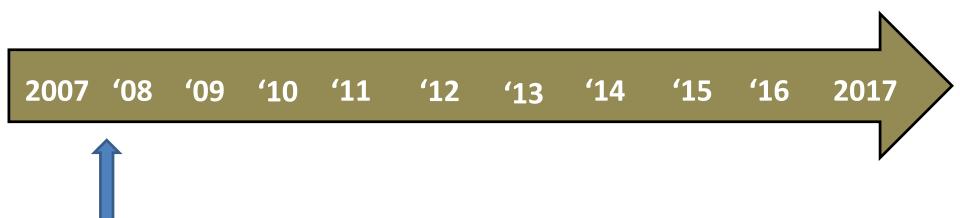
STFM 45th ANNUAL SPRING CONFERENCE

SAMHSA SBIRT Medical Residency Programs

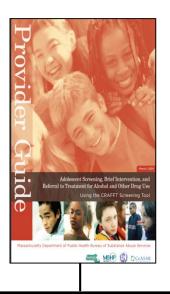






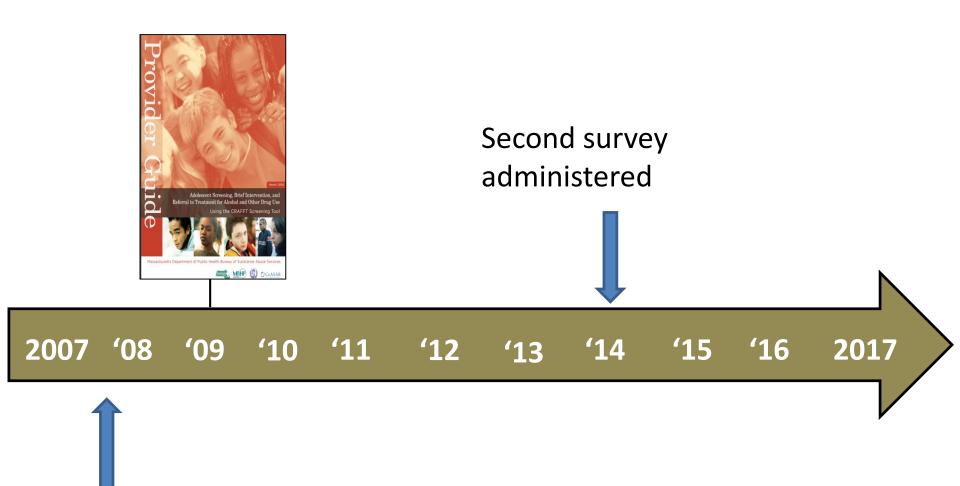


First survey administered

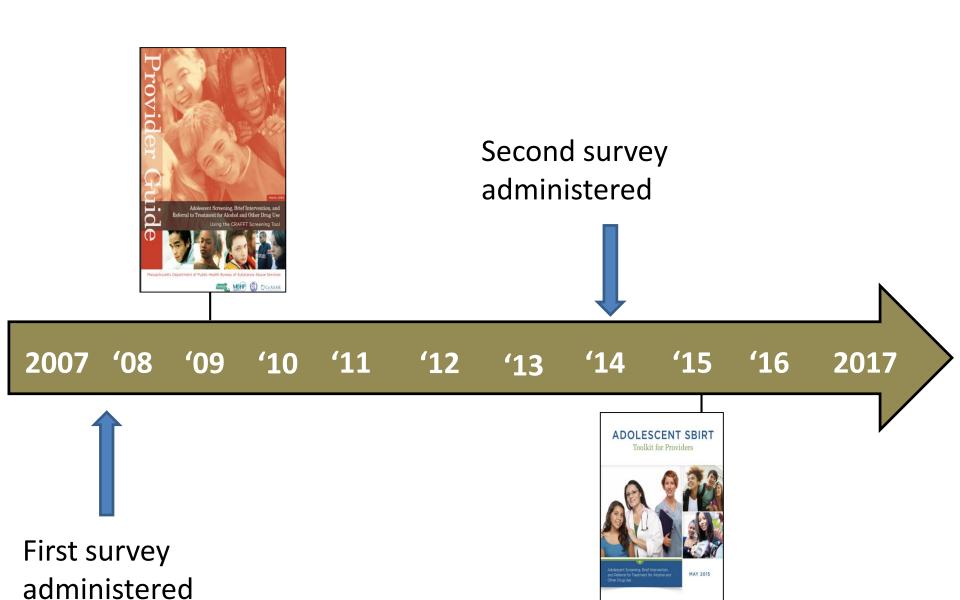




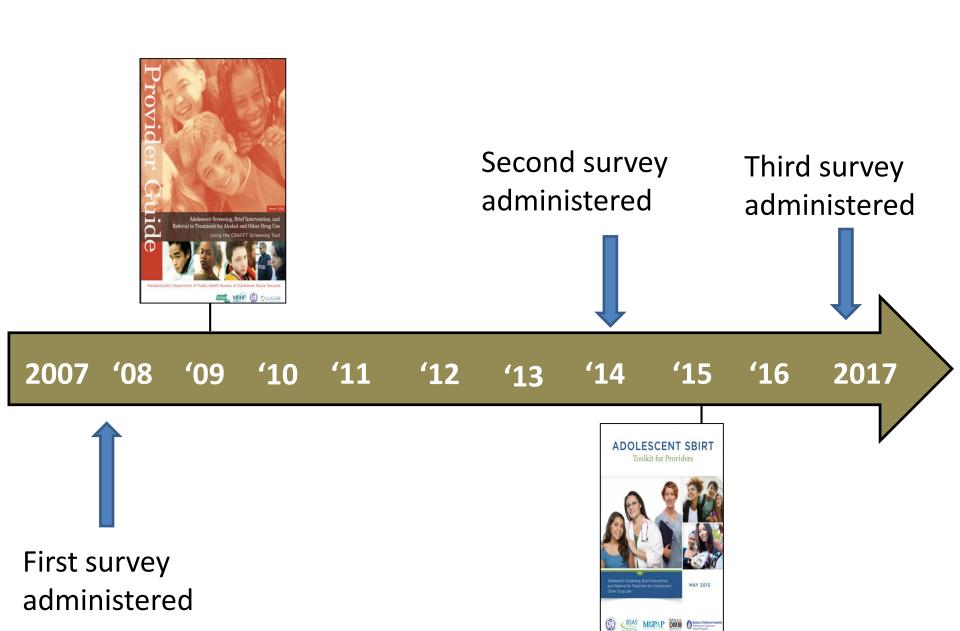
First survey administered



First survey administered

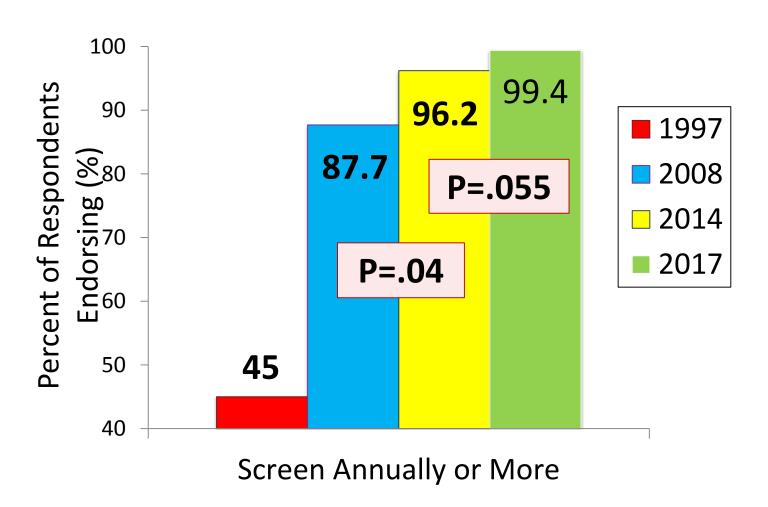


BSAS MCPAP MASS O Boston Children



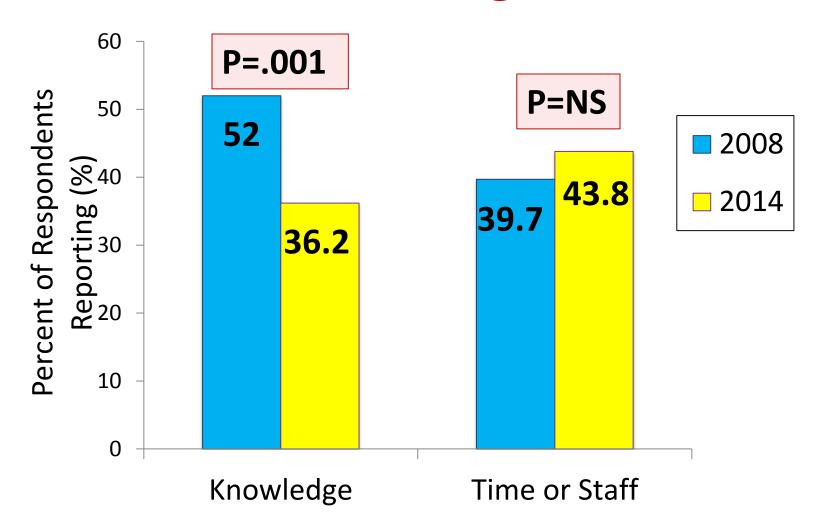
2008	2014	2017
 All registered pediatricians (3519) 25.7% response rate N=469 Practice setting: more solo practitioners 	 Representative sample (613) 30% response rate N=130 Practice setting: more hospitalists 	 Representative sample (613) 40% response rate N=160 Practice setting: no significant differences

Annual screening rates



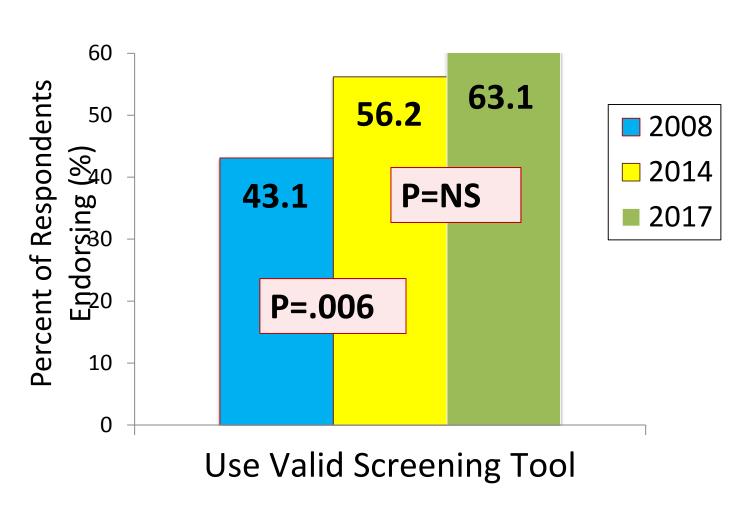
¹⁾ American Academy of Pediatrics. Periodic Survey of Fellows #31: Practices and Attitudes Toward Adolescent Drug Screening. Elk Grove Village, IL: American Academy of Pediatrics, Division of Child Health Research; 1997. 2) Levy et al, 2017. Screening Adolescents for Alcohol or Other Substance use in Massachusetts: Tracking trends in attitudes, practice, and knowledge. Manuscript in preparation.

Barriers to screening



Levy et al, 2017. Screening Adolescents for Alcohol or Other Substance use in Massachusetts: Tracking trends in attitudes, practice, and knowledge. Manuscript in preparation.

Valid Screening Tool Use

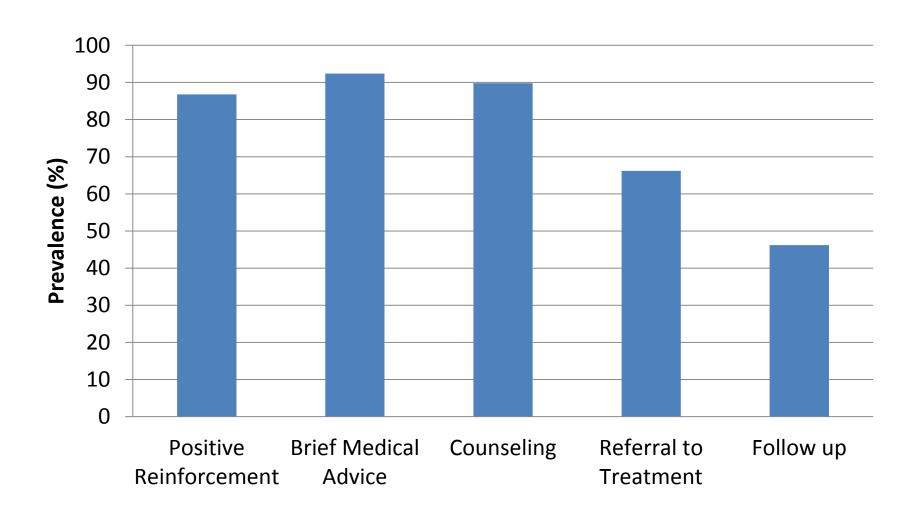


Levy et al, 2017. Screening Adolescents for Alcohol or Other Substance use in Massachusetts: Tracking trends in attitudes, practice, and knowledge. Manuscript in preparation.

45.6% screen with a parent in the room



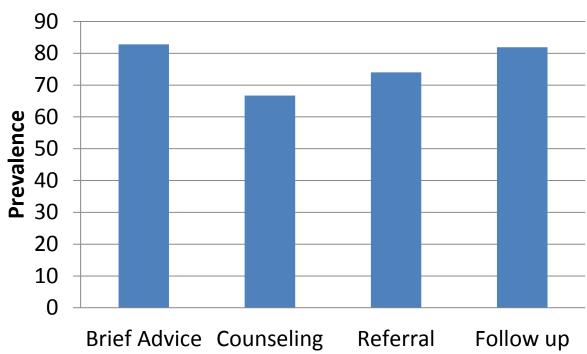
2017 screen responses



Time spent on screen response



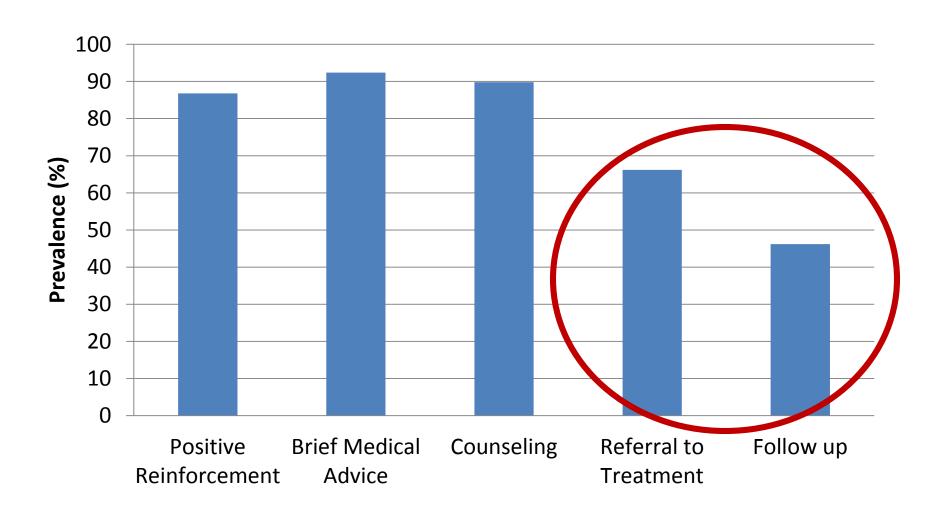
Report taking < 5 min



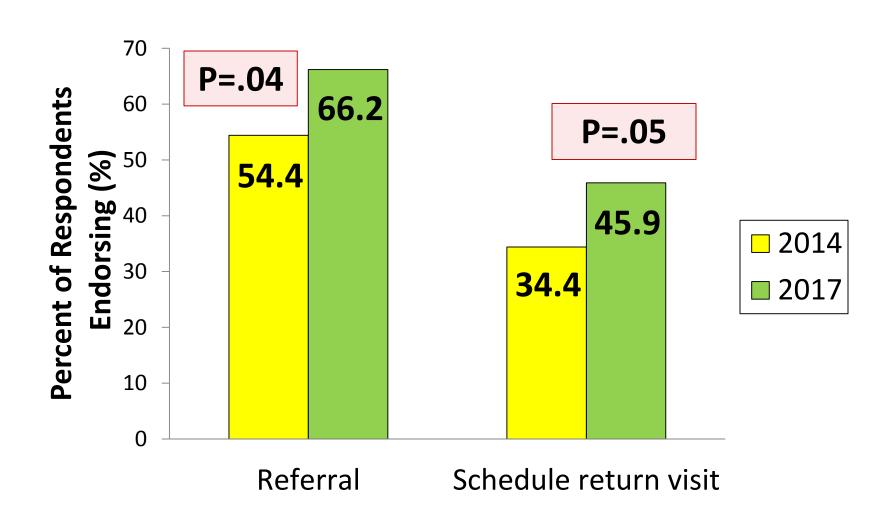
4 out of 10 reported TIME as a barrier to responding to screens



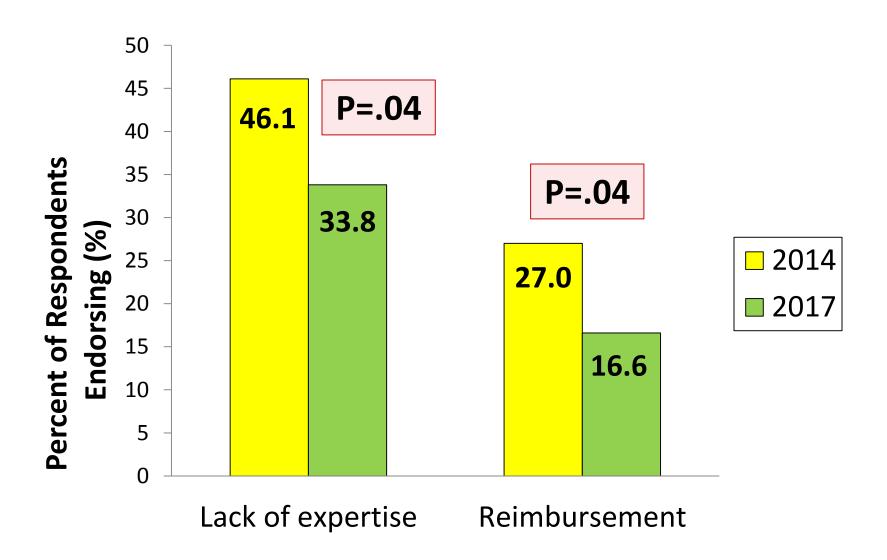
2017 screen responses



Response to Positive Screen

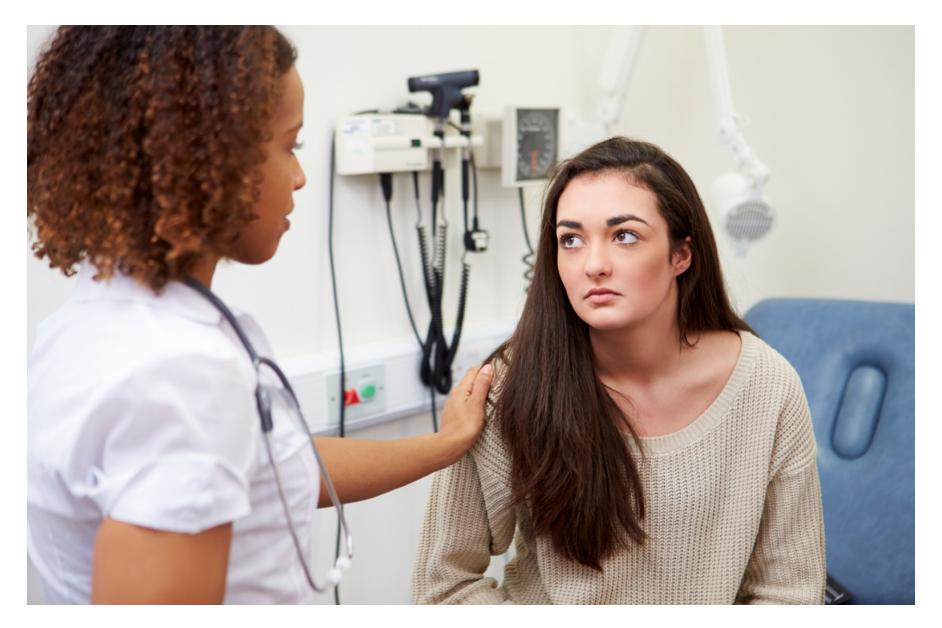


Barriers to follow-up



Barriers to referral: Adolescents don't agree to return





Brief Motivational Counseling

Barriers to referral: Confidentiality





Ask permission to engage parents

Barriers to referral:

Limited Access to/Knowledge of Programs



Where can I send a kid for SUD treatment??

Conclusions

- Self reported SBIRT practices continue to improve.
- Referrals and follow up for adolescents with higher risk use are relatively low but improving
- More training on over coming teen resistance and managing confidentiality could be helpful.