

Computer-based screening may reduce teen substance abuse

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(HealthDay) -- A computer-facilitated screening and provider brief advice (cSBA) system for primary care can increase adolescent receipt of substance use screening across a variety of practice settings, according to a study published online May 7 in *Pediatrics*.

Sion Kim Harris, Ph.D., from Harvard University in Boston, and colleagues recruited 12- to 18- year-olds arriving for routine care at nine medical offices in New England (2,096 participants; 58 percent female) and 10 offices in Prague, Czech Republic (589 participants; 47 percent female), with each site serving as its own control. [Patients](#) completed measurements only during the initial treatment-as-usual study phase. After provider training, all cSBA participants completed a computerized screen, and then watched [screening](#) results, [scientific information](#), and true-life stories depicting [substance use](#) harms. Providers received screening results and "talking points" designed to prompt two to three

minutes of brief advice.

The researchers found that, compared with patients who received treatment as usual, cSBA patients reported less alcohol use at follow-up in New England; at three months, rates were 15.5 versus 22.9 percent (adjusted relative risk ratio [aRRR], 0.54; 95 percent confidence interval [CI], 0.38 to 0.77), and at 12 months, rates were 29.3 versus 37.5 percent (aRRR, 0.73; 95 percent CI, 0.57 to 0.92). In Prague, cSBA patients reported less cannabis use, with three-month rates of 5.5 versus 9.8 percent (aRRR, 0.37; 95 percent CI, 0.17 to 0.77) and 12-month rates of 17.0 versus 28.7 percent (aRRR, 0.47; 95 percent CI, 0.32 to 0.71).

"Computer-facilitated screening and provider brief advice appears promising for reducing substance use among adolescent primary care patients," the authors write.

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