

USPSTF urges interventions to prevent tobacco use in children

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trials of smokers and nonsmokers, behavioral interventions were more effective than control interventions for reducing smoking prevalence. Based on these findings, the USPSTF concludes that primary care clinicians should provide interventions, including education or brief counseling, to prevent initiation of tobacco use among children and adolescents (B recommendation). The current evidence is inadequate for assessing the balance of benefits and harms of primary care-feasible interventions for [tobacco use](#) cessation among children and adolescents (I statement).

The draft recommendation statement and evidence review have been posted for public comment. Comments can be submitted from June 25 to July 22, 2019.

(HealthDay)—The U.S. Preventive Services Task Force (USPSTF) recommends that primary care physicians provide interventions to prevent school-aged children and adolescents from initiating tobacco use. This recommendation forms the basis of a draft recommendation statement, published online June 25 by the USPSTF.

Shelley Selph, M.D., M.P.H., from the Oregon Health & Science University in Portland, and colleagues conducted a [systematic review](#) to update the 2013 USPSTF review on primary care-relevant interventions for tobacco use prevention and cessation in children and adolescents. For this review, electronic nicotine delivery systems were included. Twenty-seven trials met the inclusion criteria.

The researchers found that compared with control interventions, behavioral interventions correlated with a reduced likelihood of smoking initiation. In trials restricted to smokers, behavioral interventions did not affect smoking prevalence. In

More information: [Draft Recommendation Statement](#)
[Draft Evidence Review](#)
[Comment on Recommendation](#)

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