

#### Overview

The UMass Worcester Prevention Research Center, located at UMass Medical School in Worcester, MA, is a member of the CDC's Prevention Research Center (PRC) network. Our work promotes healthy lifestyles through increased opportunities for physical activity, healthy eating and healthy weight. For more information, visit: [www.umassmed.edu/prc](http://www.umassmed.edu/prc)

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More than 3.6 million US youth currently smoke and 90% of adult smokers start smoking before they are 18 years old. Youth tobacco use can cause early disease development, disability and death. Pediatricians have an important role in providing consultation on tobacco use and dependence to the youth they care for and their parents who use tobacco in order to address this major pediatric health concern.

#### Main Questions

- How many pediatricians currently advise, counsel, or assist youth and parents to stop smoking?
- What are the reasons why pediatricians do not counsel young patients about quitting?
- What intervention services have been found to be most effective in reducing youth tobacco use during the past 10 years?
- What are the best ways for pediatric providers to help youth quit?

#### Paper

This paper reports on the number of young adult tobacco users in the US and how pediatricians are communicating with their young patients about this health issue. It reviews current clinical practice as assessed by surveys of American Academy of Pediatric (AAP) members and scientific research on the effectiveness of interventions on youth smokers. The authors provide pediatricians with strategies on how to integrate tobacco prevention and treatment into their clinical practice.

#### The Bottom Line

Youth identify physicians as their primary source for information on smoking and how to quit. Most pediatricians (81%) advise their young patients who smoke to quit, but only a third (32%) discuss strategies on how to quit. Pediatricians said limited time and lack of training in how to assist their patients contributed to their not providing counseling on tobacco use. Pediatricians are in a prime position to deliver the recommended 5As model of care (Ask, Advise, Assess, Assist, Arrange follow-up) suggested by the Public Health Service Clinical Practice Guideline and modified for youth.

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#### Source

Lori Pbert, Harold Farber, Kimberly Horn, Harry A. Lando, Myra Muramoto, Jennifer O'Loughlin, Susanne Tanski, Robert J. Wellman, Jonathan P. Winickoff, and Jonathan D. Klein , on behalf of the American Academy of Pediatrics, Julius B. Richmond Center of Excellence Tobacco Consortium. State-of-the-Art Office-Based Interventions to Eliminate Youth Tobacco Use: The Past Decade. *Pediatrics* 2015; 135:4 734-747; published ahead of print March 16, 2015, doi:10.1542/peds.2014-2037.

Research Brief Prepared by Julie Goldman

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#### Spotlight on Results

- Most pediatricians (81%) advised their young patients who smoke to quit.
- Approximately half (48%) of pediatricians helped youth assess their reasons for and against continuing to smoke.
- The Public Health Service Clinical Practice Guideline states counseling is effective in treating adolescent smokers and recommends pediatricians counsel their patients using the 5As model of care.
- Parents should be routinely screened for tobacco use and parents using tobacco should be offered assistance in quitting.

#### Call for Action

Pediatricians should talk with patients and parents about tobacco smoking, and offer quitting strategies and materials. Pediatricians can play a vital role in reducing and preventing youth nicotine use and addiction.