Screening Adolescents for E-cigarette Use in Clinical Practice
Learning Objectives

At the end of this session, participants will be able to:

• Describe the importance of screening for tobacco and e-cigarettes
• Name sample screening questions for tobacco and e-cigarette use
• Understand the concept of “Asking the Right Questions”
• Understand the 5As model for addressing tobacco use
• Describe the importance of confidentiality in preventive service discussions
Why Screen for E-Cigarette Use?
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- E-cigarettes are the most common tobacco product used by youth\(^1\)
- The US Surgeon General has declared that youth use of tobacco in any form, including e-cigarettes, is unsafe\(^1\)
- Guidelines for pediatric care recommend that pediatricians discuss tobacco use, including e-cigarettes, with youth\(^2-4\)
WHY SCREEN FOR E-CIGARETTE USE?

• The pediatric visit provides an important opportunity to speak confidentially with youth about issues that impact their health, including e-cigarette use⁵

• Most youth report that it is important to talk with their pediatrician about tobacco use, however, youth are not always given the opportunity to do so⁵
Asking the Right Questions
AShING THE RIGHT QUESTIONS

• E-cigarettes go by many names, including e-cigs, vape pens, vapes, mods, and JUUL\(^1\)

• E-cigarette use behavior has many names, including vaping, JUULing, and e-cig use\(^1\)

• In order to accurately screen youth for e-cigarette use, pediatricians should use the correct terminology
ASKING THE RIGHT QUESTIONS

• Pediatricians should ask youth about e-cigarette use in the context of routine screening
  • *AAP Bright Futures* recommends risk assessment begin at 11 years old
• When screening, pediatricians should screen for both traditional tobacco products and e-cigarettes, using language that youth will understand
Sample Screening Questions

- Sample screening questions include:
  - “Do you use any tobacco products, like cigarettes, hookah, or chewing tobacco? Have you used them in the last year?”
  - “Do you use any vaping products, like e-cigarettes or JUUL? Have you used them in the last year?”
  - “Do your friends use tobacco or vaping products?”
The 5As Model for Tobacco Screening and Counseling
ADDRESSING ADOLESCENT E-CIGARETTE USE USING THE 5As

• The Public Health Service “5As” model provides a model for screening and counseling adolescents for e-cigarette use during clinical practice.

• The 5As has demonstrated effectiveness in addressing tobacco with adults, and has been adapted for use with teens.
THE 5As MODEL

• Ask
• Advise
• Assess
• Assist
• Arrange Follow up

Please note: this module covers the principle of “Ask.” The remaining elements of the 5As model are addressed later in this curriculum.
ASK: THE CONCEPT

• Ask about tobacco use, including e-cigarette use, *at every visit*

• Make asking routine, consistent, and systematic

• Document as a “vital sign”
  – Use standardized documentation
Ensuring Privacy and Confidentiality for Adolescent Patients
ENSURE PRIVACY AND CONFIDENTIALITY

• One-on-one time refers to time during a clinical visit where youth patients speak alone with their pediatrician or other clinician about health concerns.

• Confidentiality refers to the idea that discussions between a youth patient and their pediatrician or other clinician are kept private, and not shared with the patient’s parents or other third parties without the permission of the patient.
**Youth Experience with Confidential Care**

- **Adolescents (n=1209) 13-18yrs**
  - Ever discussed confidentiality: 39%
  - Ever had a private, one-on-one visit: 32%

- **Young Adults (n=709) 19-26yrs**
  - Ever discussed confidentiality: 53%
  - Ever had a private, one-on-one visit: 63%
ENSURE PRIVACY AND CONFIDENTIALITY

• Private, confidential conversations with a pediatrician support youth by:8,9
  – Fosters health by providing an opportunity to discuss health behaviors
  – Allowing a confidential opportunity to discuss sensitive topics
  – Building autonomy and health care responsibility
  – Building a trusting relationship with pediatric health providers
KEY POINTS

• It is important for pediatricians to screen for adolescent tobacco and e-cigarette use as part of routine care
• When screening, pediatricians should use language that youth will understand, including appropriate terminology
• The 5As model can be used to structure clinical conversations around tobacco and e-cigarette use
• Private, one-on-one time and confidentiality can help facilitate clinical discussions around e-cigarette use
REFERENCES


