

Validating A Two Question Alcohol Screen: A Predictive Tool Worth Knowing About

February 19, 2019

We are all aware of the role alcohol plays in adolescent and young adult mortality, so having the ability to recognize that a teen is at risk for alcohol misuse or an alcohol use disorder (AUD), defined as recurrent usage due to alcohol dependence with loss of control and/or impaired social functioning, would be helpful to enable us to intervene and refer for treatment.

Lewis First, MD, MS, Editor in Chief, Pediatrics

Content License: FreeView

Article type: [Pediatrics Blog](#)



We are all aware of the role alcohol plays in adolescent and young adult mortality, so having the ability to recognize that a teen is at risk for alcohol misuse or an alcohol use disorder (AUD), defined as recurrent usage due to alcohol dependence with loss of control and/or impaired social functioning, would be helpful to enable us to intervene and refer for treatment. The National Institute of Alcohol Abuse and Alcoholism (NIAAA) has devised a two-question screen to identify if a teen is currently

drinking, but just how predictive is this tool for future drinking problems? To answer that question Linakis et al. ([10.1542/peds.2018-2001](#)) looked at 1300 teens screened in 16 pediatric emergency departments who answered the two-question screen, which asked how many days they recalled using alcohol in the past year and if they were aware their peers were drinking. The authors then surveyed the majority of these same teens one, two, and three years later to see if they were misusing alcohol or demonstrating AUD. The results show surprisingly good validity in that if a teen responded at baseline that over the past year they had experienced even one day of drinking, that threshold was enough to demonstrate their increased risk over at least the next one to two years of demonstrating AUD—although not so at three years up the road. (although rescreening each year would identify those at risk in the near future for AUD and potentially prompt appropriate intervention to prevent AUD from occurring.)

It is one thing to screen, and another to try to intervene or refer an adolescent using alcohol even a little for treatment. How can we best use a tool like this most effectively when brief interventions in the ED or office are limited, not to mention referral for treatment also a scarce commodity in most areas? To answer this question, we asked Drs. Scott Hadland from Boston Medical Center and Drs. John Knight and Sion Harris from Boston Children's Hospital ([10.1542/peds.2018-3654](#)) to share with us their thoughts on the implications of having this two-question predictive tool and next steps in its effective utility. The authors of this important commentary alert us to possible brief interventions that do exist currently that we might want to implement in our own community and suggest ways to strengthen the referral process as well. The glass

is more than half-full of useful information that will encourage you to use this tool if you are not using it already, so check both the study and commentary out and see if it changes your ability to screen and intervene for alcohol use disorder and other complications of drinking.

- [Emergency Department Alcohol Intervention: Effects on Dating Violence and Depression](#)
- [Alcohol Use and Alcohol-Interactive Medications Among Medically Vulnerable Youth](#)
- [The Role of Integrated Care in a Medical Home for Patients With a Fetal Alcohol Spectrum Disorder](#)
- [Facebook](#)
- [Instagram](#)

Copyright © 2019 American Academy of Pediatrics