

### Addiction is a Developmental Disorder of Pediatric Onset

- Approximately 8.7% of American adolescents had a substance use disorder (SUD) in 2022.
- Adolescents most commonly use alcohol, cannabis, and tobacco/nicotine.
- Within 4 years of first use, more than 20% of adolescents develop a cannabis use disorder.
- Mental health and substance use issues can often co-occur among adolescents.
- More than 90% of all adults who have a SUD developed problems earlier than age 18.

### Prevalence, Harms and Risk Factors

**Substance use has decreased among youth in the past 20 years.**

*Over 60% of 12<sup>th</sup> graders in the United States have **not** used alcohol, cannabis, and tobacco/nicotine in the past month, while over 70% of 10<sup>th</sup> graders have never used drugs or alcohol.*

**The opioid overdose crisis is reaching youth.**

*Nearly four out of five adolescent drug overdose deaths involved opioids in 2022, and the largest increases were seen among Hispanic and Black adolescents.*

**Risk factors for high-risk substance use are numerous.**

*These include having a family history of SUD, mental health issues, childhood sexual abuse and exposure to peers who use substances.*

### Adolescent Substance Use “Best Practice” Considerations

1. Care should be implemented in developmentally relevant ways (e.g., taking age, maturation, cognitive processing, decision-making skills and special needs of the individual adolescents into consideration).
2. Providers should let parents know that a firm standard of “**Not in my house**” for substance use is an important boundary to keep, as delaying all substance use until after age 18 can be useful in staving off eventual SUD.
3. Psychosocial treatments such as family-based therapy, motivational enhancement, cognitive behavioral therapy and multicomponent approaches remain the most effective.
4. For adolescents who develop opioid use disorder, the best treatment includes medications, primarily buprenorphine or extended-release naltrexone.