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Introduction

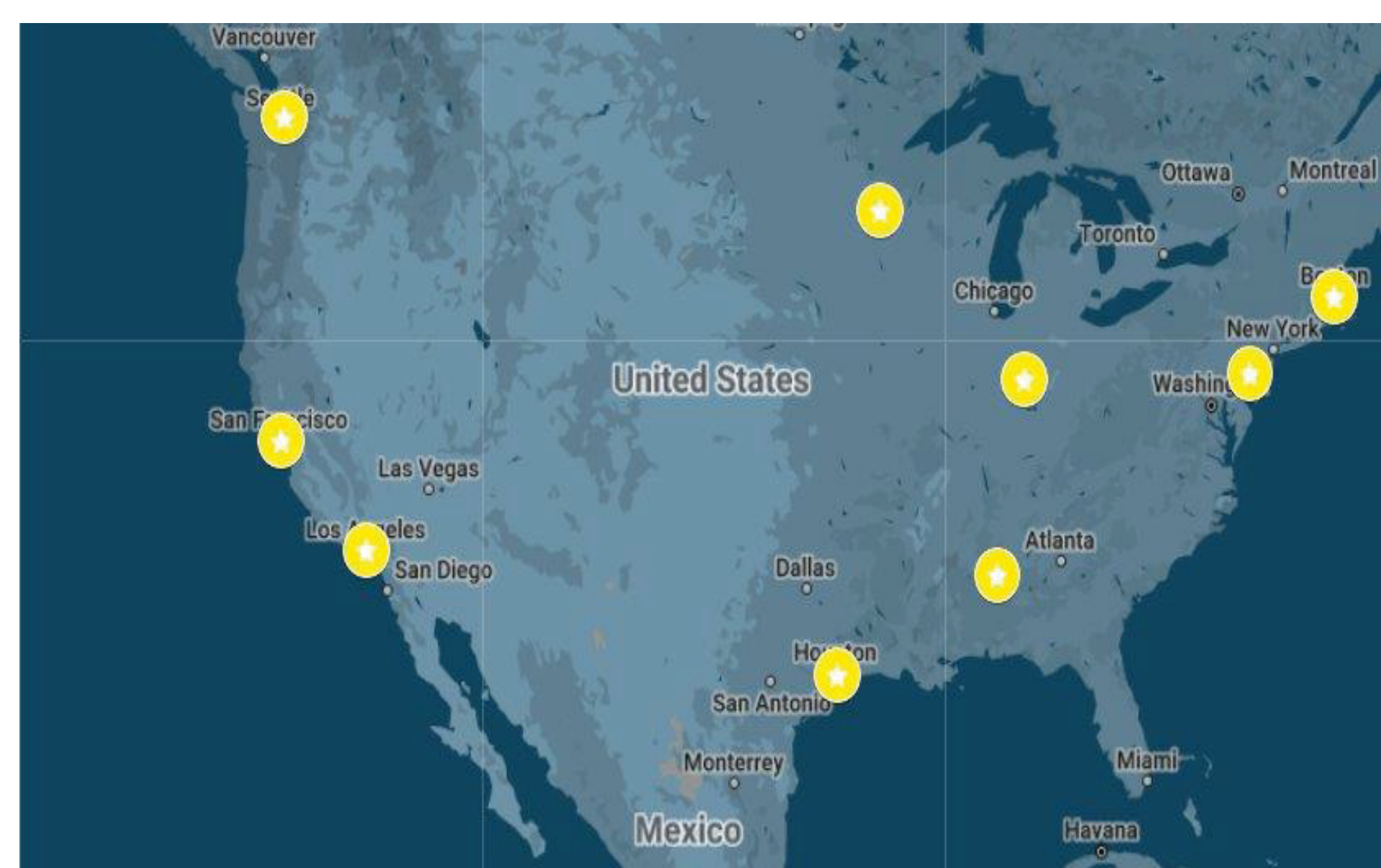
- Substance use disorders (SUDs) often start in adolescence and can impact lifelong morbidity and mortality
- Pediatric hospital visits related to SUD have increased from 2016 to 2021¹
- SUD care for adolescents and young adults (AYAs) in pediatric hospitals has not been well described beyond case report series²

Objective

- To characterize the current state of SUD care for AYAs in pediatric hospitals and identify facilitators and barriers of care

Methods

- Recruitment:** 12 physicians from 9 academic institutions that receive funding through Maternal Child Health Bureau's Leadership Education in Adolescent Health (LEAH) grant
 - Sample included a mix of adolescent medicine, addiction medicine, and child/adolescent psychiatry physicians



- Data Collection and Analysis:**
 - Interviews were audio-recorded, transcribed, and de-identified.
 - Interview guide based on Priest & McCarty, 2019³
 - Thematic saturation at 9 interviews
 - Member checked by 2 non-LEAH AYA addiction experts

Results

THEME	REPRESENTATIVE QUOTE
<u>Education, Training & Experience</u>	
(1) Insufficient Training & Experience	"I think there's probably provider uncertainty about what diagnosis to use. Many providers aren't trained to make DSM 5 diagnosis of that pertain to substance use" -
<u>Clinical Services:</u>	
(2) Clinical Pathways & Algorithms	"We have a clinical standard work pathway that includes [...] the emergency department [...] and then nursing because they're the ones to check on withdrawal symptoms. [...] The pathway automatically includes social work as well, and adolescent medicine is the consult service and then we have our psychiatry consult service [...]"
(3) Medical Problems Prioritized Over SUD	"So the current state is kids are admitted for a medical reason and then the addiction is something that we manage as a correlate to that so that they can reach their treatment goals from the medical problem."
<u>Systemic & Institutional Influences</u>	
(4) Systemic, Legal, Institutional Barriers & Facilitators	<p>"So the policy-level stuff we have an issue with...so adolescents have a legal right in [our state] to consent for substance use disorder treatment once they're over the age of 16."</p> <p>"I think that data collection for substance use related issues is very, very limited because oftentimes those substance use related diagnosis aren't placed in the problem list [...] And I think that the data we have are probably under reporting that."</p>
(5) Lack of Data in Children's Hospitals	
<u>Culture & Stigma</u>	
(6) Attitudes Towards SUD & AYAs	"Some pediatric residents are really into youth, and some are really into babies and not into adolescent issues and don't really don't want to ask [about substance use]"
(7) Increasing Needs & Under-Recognition	"Pediatric hospitals all over the country, they're like 'we have had overdoses, we've had deaths in our community. We need to do this and, like, please tell us where to start.' And so there's a huge interest there."
(8) Champions Promote Positive Change	"I give credit to [individual names] and the team of people that they're leading, how they're leveraging other resources and bit by bit kind of deconstructing some of the preconceived notions that have evolved in this institution over the century plus we've existed."

Discussion

Summary

- Lack of education and experience leads to discomfort in SUD-related care of AYAs
- High variability in medical interventions offered and medical disciplines involved
- Legal concerns of confidentiality and consent are unique to AYA population
- Negative attitudes and stigma towards SUD and AYAs leads to separation of SUD from medical problem, barriers to care, and endangers normative adolescent development

Limitations

- All academic children's hospitals in urban centers
- Overrepresentation of adolescent medicine

Implications

- Educational and clinical pathway interventions are needed
- Expansion of research on medications and management of SUD in AYAs needed
- Data must be collected to reverse course of lack of investment and improvement

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