Screening for Anxiety in Children and Adolescents

The US Preventive Services Task Force (USPSTF) has recently published recommendations on screening for anxiety in children and adolescents.

What Is Anxiety?
Anxiety refers to feelings of worry or fear. All children and adolescents have these feelings at times as a part of normal growth, development, and life. However, sometimes anxiety becomes excessive, causing persistent emotional and physical distress and problems in day-to-day functioning at home, in school, and with peers. This is called an anxiety disorder. Anxiety disorders can include generalized anxiety, separation anxiety, social anxiety, and specific phobias. Anxiety disorders in childhood may persist into adulthood, especially if untreated.

Risk factors for anxiety disorders include genetic, personality, and environmental factors, such as attachment difficulties, conflict between parents, parental overprotection, early parental separation, and child maltreatment. Certain groups are at increased risk of anxiety disorder, including lesbian, gay, bisexual, transgender, and queer (LGBTQ) youth and older children (aged 12-17 years).

Treatment for anxiety in children and adolescents includes psychotherapy (cognitive behavioral therapy) and sometimes medications.

What Tests Are Used to Screen for Anxiety in Children and Adolescents?
Several questionnaires are available as screening tools. Some questionnaires screen for specific types of anxiety disorders, such as social anxiety. Examples of screening questionnaires used in the primary care setting include the Screen for Child Anxiety Related Disorders (SCARED), the Patient Health Questionnaire–Adolescent, and the Social Phobia Inventory.

What Is the Population Under Consideration for Screening for Anxiety in Children and Adolescents?
This recommendation applies to children and adolescents aged 18 years or younger who do not have a diagnosed anxiety disorder and are not showing recognized signs or symptoms of anxiety.

What Are the Potential Benefits and Harms of Screening for Anxiety in Children and Adolescents?
The goal of screening for anxiety is to diagnose and treat anxiety disorders early, to improve symptoms and quality of life. For children aged 8 years or older, there is evidence that screening questionnaires can accurately identify those with anxiety disorder and that treatment of anxiety is associated with improvement or remission. For children aged 7 years or younger, there is not enough evidence about either the accuracy of anxiety screening questionnaires or the association between screening for anxiety and symptom improvement or remission.

Potential harms of screening and treatment for anxiety have not been well studied in children and adolescents but are likely small.

How Strong Is the Recommendation to Screen for Anxiety in Children and Adolescents?
Based on current evidence, the USPSTF concludes with moderate certainty that screening for anxiety in children and adolescents aged 8 to 18 years has a moderate net benefit (benefits outweigh harms). For children aged 7 years or younger, the USPSTF concludes that there is not enough evidence about the accuracy of screening tools and the effects of screening and treatment, so the balance of benefits and harms cannot be determined.

How Does This Differ From Prior USPSTF Recommendations?
The USPSTF has not previously released a recommendation on this topic.

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US Preventive Services Task Force
www.uspreventiveservicestaskforce.org/uspstf/topic_search_results?topic_status=P

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