

Dear <<Insert Name>>:

I wanted to express my concern regarding the screening test you are offering. Specifically, I received a notice that you will be offering Abdominal Aortic Aneurysm screening. This screening test is not recommended for all in the general public, and I am concerned that offering this test to our community will result in unnecessary testing for no real benefit.

I am a family physician and a member of the American Academy of Family Physicians (AAFP) which is the national association of family physicians. I believe that screening for medical conditions is an important and necessary part of preventive care in the United States. However, I believe that the use of screening tests should be based upon scientific evidence. The AAFP has policies related to screening for medical conditions and direct-to-consumer advertising for screening tests. The AAFP asserts that the personal family physician should be the one to advise the patient about the harms and benefits of any screening test. In addition, the AAFP does not support mass screening or direct-to-consumer screening of tests not based on scientific evidence.

The AAFP has developed a list of appropriate screening tests based upon the best available scientific evidence from the United States Preventive Services Task Force (USPSTF). The USPSTF uses a rigorous process to scientifically evaluate screening tests, which they refer to as clinical preventive services, before issuing their recommendations. In their assessment, they consider harms, benefits, and patient preferences for each screening test that is evaluated. The Commission on Health of the Public and Science of the AAFP then examines the evidence as the basis for their screening recommendations for medical conditions. This Summary of Recommendations for Clinical Preventive Services can be found at http://www.aafp.org/dam/AAFP/documents/patient_care/clinical_recommendations/cps-recommendations.pdf.

The AAFP recommends that men aged 65-75 who have *ever* smoked be screened one time for Abdominal Aortic Aneurysm. They recommend “selective” screening in men aged 65-75 who have *never* smoked, based on family history, other relevant risk factors, and shared decision making. The AAFP recommends against screening in women who have *never* smoked and determined that there isn’t sufficient evidence available to make a recommendation for women aged 65-75 who have *ever* smoked. I support the AAFP’s recommendations for screening for this medical condition.

As with all screening tests, on-going research can result in changes in recommended practices. It is important that we consider all evidence that is available about the effectiveness of a screening test. The USPSTF and the AAFP will continue to review the evidence related to a specific screening test on a regular basis. I will continue to support the AAFP's policies related to screening for medical conditions, and I suggest that we not do this type of mass screening again in the future.

Sincerely,
<<Insert Name>>