

## USPSTF Recommendations That Were New or Updated in 2014

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The U.S. Preventive Services Task Force (USPSTF) is a panel of experts in screening, prevention, and evidence-based medicine. Most of its members are primary care physicians, and its recommendations are intended to guide the clinical preventive services provided by family physicians and other primary care clinicians in the outpatient setting, or referable from that setting. The USPSTF has 16 volunteer members and meets three times per year. The work of the USPSTF is supported by the Agency for Healthcare Research and Quality and federally funded Evidence-Based Practice Centers. The USPSTF addresses recommendations on more than 70 topics, including screening for disease in asymptomatic persons, behavioral counseling, and primary chemoprevention. Each topic is revisited approximately every five years.

In 2014, the USPSTF created or updated recommendations on a variety of topics, which are summarized in *Table 1* (see page 688). Notable changes include the following:

- Fluoride varnish should be applied periodically to the primary teeth of all children five years and younger, starting at the age of primary tooth eruption.
- Asymptomatic pregnant women should be screened for gestational diabetes mellitus after 24 weeks' gestation.
- Adults who are overweight or obese and who have cardiovascular risk factors should receive intensive behavioral counseling to reduce the risk of cardiovascular disease.
- Screening for hepatitis B virus infection should be performed in persons at increased risk.
- Low-dose aspirin should be used after 12 weeks' gestation in pregnant women who are at high risk of preeclampsia.

Additionally, the USPSTF reiterated recommendations against screening for asymptomatic carotid artery disease; against screening for abdominal aortic aneurysm in women who have never smoked; and against the use of beta carotene and vitamin E supplements as a preventive measure for cardiovascular disease and cancer.

Recommendations for which there is insufficient evidence to assess the benefits and harms were omitted from *Table 1* to improve its clarity. These recommendations include the following:

- Screening for cognitive impairment, suicide risk, or vitamin D deficiency
- Screening for abdominal aortic aneurysm in women who have ever smoked
- Screening for gonorrhea and chlamydia in men
- Providing primary care-based interventions to prevent or reduce illicit drug use in children and adolescents
- Using vitamin supplements to prevent cardiovascular disease or cancer

A more detailed description of all of the recommendations, their rationale, and the methods used by the USPSTF are available at <http://www.uspreventiveservicestaskforce.org>.

Physicians can access the Electronic Preventive Services Selector (ePSS), a free point-of-care tool that can be used on smartphones, tablets, or computers, at <http://eps.ahrq.gov/PDA/index.jsp>, as well as a free eBook with the full recommendation statements at <http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/guide/>.

EDITOR'S NOTE: Dr. Ebell is deputy editor for evidence-based medicine for *AFP*. He is a member of the USPSTF. This article is his own work and does not necessarily represent the views and policies of the USPSTF.

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**Table 1. Summary of U.S. Preventive Services Task Force Recommendations That Were New or Updated in 2014**

<i>Topic</i>	<i>Recommendation (grade)*</i>
<b>Screening for disease</b>	
Abdominal aortic aneurysm	One-time ultrasound screening is recommended for men 65 to 75 years of age who have ever smoked (B), and may be selectively offered to men in the same age group who have never smoked (C). Women who have never smoked should not be screened (D).
Carotid artery stenosis	The general population should not be screened for asymptomatic carotid artery stenosis (D).
Chlamydia and gonorrhea	Sexually active women 24 years and younger, and older women who are at increased risk of infection should be screened for chlamydia and gonorrhea (B).
Dental caries in children from birth through five years of age	Oral fluoride supplementation should be prescribed starting at six months of age in children whose water supply is deficient in fluoride (B). Fluoride varnish should be applied periodically (see <a href="http://www2.aap.org/oralhealth/PracticeTools.html">http://www2.aap.org/oralhealth/PracticeTools.html</a> ) to the primary teeth of all infants and children five years and younger starting at the age of primary tooth eruption (B).
Gestational diabetes mellitus	Asymptomatic pregnant women should be screened for gestational diabetes after 24 weeks' gestation (B).
Hepatitis B virus infection	Persons at high risk should be screened. Key persons at higher risk include those from certain countries of origin, injection drug users, persons with human immunodeficiency virus infection, men who have sex with men, and household or sexual contacts of persons with hepatitis B virus infection (B).
<b>Behavioral counseling interventions</b>	
Healthy diet and physical activity in adults with a high risk of cardiovascular disease	Adults who are overweight or obese and who have additional risk factors for cardiovascular disease should be provided or referred for intensive behavioral counseling interventions that promote a healthy diet and physical activity (B).
Sexually transmitted infections	Sexually active adolescents and adults at increased risk of sexually transmitted infections should be provided or referred for intensive behavioral counseling (B).
<b>Primary chemoprevention</b>	
Low-dose aspirin for preeclampsia	Use of low-dose aspirin (81 mg per day) is recommended after 12 weeks' gestation in women who are at high risk of preeclampsia to prevent morbidity and mortality (B).
Vitamin supplementation for cancer or cardiovascular disease	Beta carotene and vitamin E supplements should not be recommended or prescribed to prevent cancer or cardiovascular disease (D).

\*—*Suggestions for practice are based on the grade of the recommendation. A or B = this service should be offered or provided; C = this service should be offered or provided for selected patients depending on individual circumstances; and D = use of this service should be discouraged.*