

USPSTF Bulletin

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U.S. Preventive Services Task Force Publishes Final Recommendation Statement on Screening for Depression in Children and Adolescents

Task Force recommends screening for major depressive disorder in adolescents ages 12 to 18; not enough evidence to recommend for or against screening in children 11 and younger

WASHINGTON, D.C. – February 9, 2016 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on screening for major depressive disorder (MDD) in children and adolescents.

The Task Force recommended screening adolescents ages 12 to 18 for MDD. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up. This is a **grade B recommendation.**

The Task Force found that there was not enough evidence to assess the balance of benefits and harms of screening for MDD in children 11 years old and younger. This is an **I statement.** The Task Force calls for more research on screening for and treating depression in this age group.

Grades in this recommendation:

B: Recommended.

I: The balance of benefits and harms cannot be determined.

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MDD is a serious form of depression that can affect a young person's performance at school or work and their interactions with family and friends. MDD in youth often goes undiagnosed, and is associated with an increased risk of suicide and depression in adulthood.

The Task Force found that there are screening tools that can be used in the primary care setting to accurately identify MDD in adolescents ages 12 to 18, and that there are effective treatments for this age group.

"Primary care clinicians can play an important role in helping to identify adolescents with major depressive disorder and getting them the care they need. Accordingly, the Task Force recommends that primary care clinicians screen all adolescents between 12 and 18 years old for this condition," says Task Force member Alex Krist, M.D., M.P.H.

"There is not enough evidence for the Task Force to make a recommendation for or against screening for major depressive disorder in children 11 and younger. However, it is important to take any concern about depression seriously, regardless of age, and any parent who has a concern about their child's mood or behavior should talk with their child's primary care clinician," says Task Force member Alex Kemper, M.D., M.P.H., M.S.

The Task Force's recommendation has been published online in the *Annals of Internal Medicine* and *Pediatrics*, as well as on the Task Force Web site at http://www.uspreventiveservicestaskforce.org. A fact sheet that explains the recommendation statement in plain language is also available. A draft version of this recommendation was available for public comment in September 2015.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Krist is an associate professor of family medicine and population health at Virginia Commonwealth University and an active clinician and teacher at the Fairfax Family Practice residency. He is co-director of the Virginia Ambulatory Care Outcomes Research Network and director of community engaged research at the Center for Clinical and Translational Research.

Dr. Kemper is a board-certified pediatrician and professor of pediatrics at Duke University Medical School. He serves as the associate division chief for research in the Division of Children's Primary Care at Duke University. Dr. Kemper is also the deputy editor of *Pediatrics*.

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