

## U.S. Preventive Services Task Force Issues Final Recommendation Statement on Screening for COPD

*People without signs or symptoms of COPD should not be screened because it does not improve overall health*

WASHINGTON, D.C. – May 10, 2022 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on screening for chronic obstructive pulmonary disease (COPD). Based on the evidence, the Task Force continues to recommend against screening for COPD in people without signs or symptoms. **This is a D recommendation.**

### Grade in this recommendation:

D: Not recommended.

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This recommendation is not for people who have signs or symptoms of COPD, were previously diagnosed with COPD, or who are at very high risk of COPD such as people with an inherited disorder that can cause COPD or workers exposed to certain toxins at their job.

COPD, the sixth leading cause of death in the United States, limits the airflow to a person's lungs making it difficult to breathe. It has no known cure, but there are treatments available that manage symptoms of COPD.

"COPD is a serious condition that affects the health of many adults in the United States, but research continues to show it is not beneficial to screen people without symptoms for COPD," says Task Force member Katrina Donahue, M.D., M.P.H. "The USPSTF does not recommend screening for COPD in people who do not have signs or symptoms of the disease because it does not improve their overall health."

Current and former smokers are at the highest risk of developing COPD. In addition, people frequently exposed to pollutants like secondhand smoke, traffic pollution, or toxic chemicals are also at risk for developing COPD.

"While screening for COPD in people without symptoms is not recommended, healthcare professionals can still help prevent their patients from getting COPD," says Task Force chair Carol Mangione, M.D., M.S.P.H. "Most cases of COPD are caused by smoking, so it's essential healthcare professionals support their patients, including young people, in not starting to smoke and helping those who do smoke quit."

Patients should share any concerns they have about their breathing with their healthcare professionals. Healthcare professionals should also be alert to patients who have respiratory symptoms and use their clinical judgment to provide appropriate care.

The Task Force's final recommendation statement and evidence summary have been published online in the *Journal of the American Medical Association*, as well as on the Task Force website at: <http://www.uspreventiveservicestaskforce.org>. A draft version of the recommendation statement and evidence review were available for public comment from November 2, 2021, to December 6, 2021.

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

Dr. Donahue is a professor and vice chair of research at the University of North Carolina at Chapel Hill Department of Family Medicine. She is a family physician and senior research fellow at the Cecil G. Sheps Center for Health Services Research and the co-director of the North Carolina Network Consortium, a meta-network of six practice-based research networks and four academic institutions in North Carolina.

Dr. Mangione is the chief of the Division of General Internal Medicine and Health Services Research; holds the Barbara A. Levey, M.D., and Gerald S. Levey, M.D., endowed chair in medicine; and is a distinguished professor of medicine and public health at the University of California, Los Angeles (UCLA) and the executive vice chair for Health Equity and Health Services Research in the UCLA Department of Medicine.

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