WASHINGTON, D.C. – Nov. 5, 2013 – The U.S. Preventive Services Task Force (Task Force) today posted its draft recommendation statement on screening for cognitive impairment. The Task Force is providing an opportunity for public comment on this draft recommendation statement until December 2. All public comments will be considered as the Task Force develops its final recommendation.

The Task Force concludes that there is not enough clear evidence on the benefits and harms of screening for cognitive impairment to make a recommendation for or against routine screening of all older adults. This draft recommendation applies to adults without signs or symptoms of cognitive impairment. Those with symptoms of memory loss or other cognitive problems should talk to their doctor about testing.

“Dementia is a very serious issue that has a significant impact on the lives of older adults and their families,” says Task Force co-vice chair Albert Siu, M.D., M.S.P.H. “Although the benefits and harms of what we can offer patients through routine screening are unclear right now, clinicians should remain alert to early signs or symptoms of cognitive impairment and evaluate their patients as appropriate.”

Dementia, a type of cognitive impairment that affects 2.4 to 5.5 million Americans, causes a person to have trouble remembering, learning new things, concentrating, or making decisions that affect daily life. Mild cognitive impairment is a type of cognitive problem that is not as severe as dementia and does not interfere with independence in daily life; the Task Force also looked at evidence on screening for these more subtle signs of cognitive issues for this new recommendation. The prevalence of mild cognitive impairment is difficult to determine, but as the aging population increases, more people will suffer from memory loss, attention difficulties, and other cognitive problems.

While there is some evidence that screening can accurately detect mild to moderate dementia, the Task Force found no studies on how early detection can help older adults and their families make decisions about health care and plan for the future.

“This is a critical gap in the evidence, and more research is needed so we can better understand the benefits and risks of screening and understand the impact early detection can have on the lives of patients and their families,” says Task Force member Douglas K. Owens, M.D., M.S.

The Task Force’s draft recommendation statement has been posted for public comment on the Task Force Web site at www.uspreventiveservicestaskforce.org. Comments can be submitted from November 5 to December 2 at www.uspreventiveservicestaskforce.org/Page/Name/us-preventive-services-task-force-opportunities-for-public-comment. A summary of the evidence that formed the basis for this draft recommendation was recently published in the Annals of Internal Medicine and is available on the Task Force Web site.

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.

Contact: Ana Fullmer at Newsroom@USPSTF.net / (202) 350-6668