WASHINGTON, D.C. – January 26, 2016 – The U.S. Preventive Services Task Force (Task Force) published a final recommendation today on screening for depression in adults. The Task Force recommends screening the general adult population, including pregnant and postpartum women, for depression. 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.

Depression is one of the leading causes of disability in adults and affects millions of Americans. It can affect a person’s quality of life and is associated with an increase in suicide rates, among other health problems. Pregnant women and new mothers are also affected by depression, and both mother and child can experience the effects of the illness.

“Depression is a serious condition that is common among patients seen in primary care. The Task Force recommends that primary care clinicians screen adult patients for depression,” says Task Force member Michael P. Pignone, M.D., M.P.H.

The Task Force found that patients who were identified through depression screening and went on to be treated—with antidepressant medication, psychotherapy, or both—showed improvement in depression symptoms.

The Task Force’s recommendation has been published online in the Journal of the American Medical Association, 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 July 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. Pignone is a professor of medicine at the University of North Carolina Department of Medicine and chief of the Division of General Internal Medicine. He also serves as director of the university's Institute for Healthcare Quality Improvement.

Contact: Nicole Raisch at Newsroom@USPSTF.net / (202) 572-2044

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