WASHINGTON, D.C. – July 18, 2017 – The U.S. Preventive Services Task Force (Task Force) today posted a draft recommendation statement and draft evidence review on screening for ovarian cancer. Based on its review of the evidence, the Task Force found that the potential harms of screening outweigh the benefits, and women who have no signs or symptoms should not be screened for ovarian cancer. This is a D recommendation.

Ovarian cancer is the eighth most common cancer and the fifth most common cause of cancer death among U.S. women. Unfortunately, the current screening tests for ovarian cancer are not very accurate, and may indicate a woman has ovarian cancer when she does not. These false-positive tests can lead to unnecessary major surgeries to remove one or both ovaries and the fallopian tubes. No other major medical organization recommends screening for ovarian cancer for the general population.

“The Task Force found that screening women without signs or symptoms for ovarian cancer does not decrease the number of deaths from the disease and may lead to unnecessary surgeries,” says Task Force member Maureen Phipps, M.D., M.P.H. “Therefore, the Task Force recommends against screening for ovarian cancer in women who have no signs or symptoms and who are not at high risk for ovarian cancer.”

“The current screening tests do not do a good job identifying whether a woman does or does not have ovarian cancer,” says Task Force chair David Grossman, M.D., M.P.H. “The Task Force hopes that in the future, better screening tests for ovarian cancer will be developed.”

The Task Force’s draft recommendation statement and draft evidence review have been posted for public comment on the Task Force Web site at www.uspreventiveservicestaskforce.org. Comments can be submitted from July 18 through August 14 at www.uspreventiveservicestaskforce.org/tfcomment.htm.

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.

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David Grossman, M.D., M.P.H., is a board-certified pediatrician recognized for his research on clinical preventive services, injury prevention, and Native American health. He is senior investigator at the Kaiser Permanente Washington Health Research Institute, a pediatrician at Kaiser Permanente Washington, and a senior medical director for the Washington Permanente Medical Group. Dr. Grossman is also a professor of health services and adjunct professor of pediatrics at the University of Washington.

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