WASHINGTON, D.C. – May 20, 2014 – The U.S. Preventive Services Task Force (Task Force) published today a final recommendation statement on screening for suicide risk in primary care. This recommendation applies to adolescents, adults, and older adults without a diagnosed mental health disorder or symptoms of mental illness. The Task Force concluded that, at this time, there is not enough evidence to determine the effectiveness of screening for suicide risk, and therefore has issued an I statement.

“Primary care clinicians should remain alert to patients who are suicidal or who have existing mental health disorders and ensure that they get immediate help. The Task Force looked to see if primary care clinicians could identify people at risk of suicide who do not have signs or symptoms of mental health concerns,” says Task Force co-vice chair Al Siu, M.D., M.S.P.H. “While there has been some promising early research, there is currently not enough evidence to determine the effectiveness of screening tools for suicide risk.”

Suicide is a very serious public health issue in America that affects adolescents, adults, and older adults. In 2010, suicide was the 10th leading cause of death in the United States, with approximately 37,000 individuals dying by suicide each year.

The greatest risk factor for suicide is having a diagnosed mental health disorder. A lifetime history of depression more than doubles the risk of suicide among adults. Depression is not always diagnosed, and in youths who attempt suicide, 50 to 70% experience depression. The Task Force recommends that primary care clinicians screen both adolescents and adults for depression. If a primary care clinician has a patient who is depressed and potentially at risk for suicide, support and referrals should be shared immediately.

“The lives of too many people, both young and old, including those who have served our country in the military, have been lost to suicide,” says Task Force member Linda Baumann, Ph.D., R.N. “It is critical to find the best ways to identify those at risk and support them with effective treatment. More research is needed to better understand current screening tests, to develop new ones that can better identify people without symptoms who are at risk for suicide, and to create effective treatment programs for those who are identified as high risk.”

The Task Force’s recommendation has been published online in *Annals of Internal Medicine*, as well as on the Task Force Web site at 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 from April 23 through May 21, 2013.

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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