



U.S. Preventive Services Task Force Issues Final Recommendation Statement on Screening for Thyroid Cancer

Task Force found that clinicians should not screen adults for thyroid cancer

WASHINGTON, D.C. – May 9, 2017 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement and evidence summary on screening for thyroid cancer. Based on its review of the evidence, the Task Force recommends that clinicians do not screen for thyroid cancer in adults who have no signs or symptoms of the disease. **This is a D recommendation.**

Thyroid cancer affects the thyroid gland, a gland in the neck that produces hormones that help control the body's metabolism. There are different types of thyroid cancer, but overall it is rare in the United States. In 2017, an estimated 56,300 new cases of thyroid cancer will develop, representing just 3.8% of all new cancer cases in the United States.

The Task Force reviewed studies on the benefits and harms of screening and treatment for thyroid cancer and found that for people with no signs or symptoms of the disease, the potential harms of screening and treatment outweigh the benefits. Harms of treatment can include permanent surgical harms, such as damage to thyroid function and damage to the nerves that control speaking and breathing.

Grade in this recommendation:

D: Not Recommended.

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“While there is very little evidence of the benefits of screening for thyroid cancer, there is considerable evidence of the serious harms of treatment, such as damage to the nerves that control speaking and breathing,” says Task Force member Karina W. Davison, Ph.D., M.A.Sc. “What limited evidence is available does not suggest that screening enables people to live longer, healthier lives.”

The evidence the Task Force reviewed also suggests that thyroid cancer screening leads to an increase in new diagnoses of thyroid cancer without affecting the number of people who die from thyroid cancer.

“Overdiagnosis occurs because screening for thyroid cancer often identifies small or slow growing tumors that might never affect a person during their lifetime,” says Task Force member Seth Landefeld, M.D. “People who are treated for these small tumors are exposed to serious risks from surgery or radiation, but do not receive any real benefit.”

The Task Force's recommendation has been published online in *JAMA*, as well as on the Task Force Web site at: www.uspreventiveservicestaskforce.org. A draft version of the recommendation was available for public comment from November 22 to December 26, 2016.

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.

Karina W. Davidson, Ph.D., M.A.Sc., is a professor of medicine and psychiatry and the director of the Center for Behavioral Cardiovascular Health at Columbia University Medical Center. She is also a psychologist in the Department of Psychiatry at New York Presbyterian Hospital/Columbia University Medical Center.

Seth Landefeld, M.D., is the chairman of the department of medicine and the Spencer chair in medical science leadership at the University of Alabama at Birmingham (UAB) School of Medicine. Dr. Landefeld also serves on the board of directors of both the UAB Health System and the University of Alabama Health Services Foundation.

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