

This fact sheet explains the Task Force's draft recommendation statement on screening for thyroid dysfunction. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from October 28 to November 24, 2014. The Task Force welcomes your comments.

## Screening for Thyroid Dysfunction

The U.S. Preventive Services Task Force (Task Force) has issued a **draft recommendation** statement on *Screening for Thyroid Dysfunction*.

This draft recommendation statement applies to adults who are not pregnant and show no signs or symptoms of thyroid dysfunction.

The draft recommendation statement summarizes what the Task Force learned about the potential benefits and harms of screening for thyroid dysfunction: There is not enough evidence to determine the potential benefits and harms of this screening.

### What is thyroid dysfunction?

**Thyroid dysfunction is a range of disorders related to the thyroid gland. (A gland is an organ that secretes chemical substances for use in the body.)**

**The thyroid is a butterfly-shaped gland in the neck that produces two hormones. These hormones control the rate of many activities in the body, such as how fast a person burns calories or how fast the heart beats.**

## Facts about the Thyroid and Thyroid Dysfunction

The thyroid gland works together with another gland in the body, the pituitary gland. This small gland in the brain controls how much of two specific hormones are produced by the thyroid. The pituitary does this by releasing its own hormone, which known as thyroid-stimulating hormone (TSH). When levels of the thyroid hormones in the blood are low, the pituitary makes more TSH. When the thyroid hormone levels are high, the pituitary makes less TSH.

Thyroid **dysfunction** refers to a spectrum of changes in TSH levels, either above or below a pre-set level defined as "normal." These changes include:

- **Subclinical hypothyroidism:** The TSH level is above the "normal" level and thyroid hormone levels are normal.
- **Overt hypothyroidism:** The TSH level is above "normal" and thyroid hormone levels are too low.
- **Subclinical hyperthyroidism:** The TSH level is below "normal" and thyroid hormone levels are normal.
- **Overt hyperthyroidism:** The TSH level is below "normal" and thyroid hormone levels are too high.

People with thyroid dysfunction often do not have obvious symptoms. When symptoms do occur, they can include fatigue, gaining or losing weight, feeling cold, or hyperactivity. However, these symptoms are very general and can occur not only in many kinds of health conditions, but also in response to common situations people face in their daily lives, such as stress. Therefore, thyroid dysfunction is defined by changes in blood levels of TSH and thyroid hormones, not by symptoms.

Thyroid **disease** happens when those with overt hypo- or hyperthyroidism have levels of TSH and thyroid hormones that stay above or below normal for a long time. They also have ongoing symptoms that cannot be explained by any other cause. This draft recommendation applies only to people with thyroid dysfunction, not thyroid disease.

## Screening for Thyroid Dysfunction

Screening is done with a blood test that measures the amount of TSH in the blood. This test is known as a serum TSH test. Depending on the initial test results, a follow-up test may be needed.

The test can accurately identify a person's TSH level, but health care professionals do not always agree about what level is "abnormal," because abnormal levels may be different for different groups (for example, an abnormal level may be different for an older person than for a younger person). Also, abnormal results on a TSH test can be caused by non-thyroid illnesses or medications. Abnormal levels can even return to normal on their own.

## Potential Benefits and Harms of Screening

The goal of screening is to identify people who have an abnormal TSH level so that they can be treated, if necessary.

The Task Force reviewed studies on the potential benefits and harms of screening adults for thyroid dysfunction. They did not find evidence on whether screening for thyroid dysfunction has long-term health benefits.

The Task Force also did not find direct evidence about the potential harms of thyroid screening. However, potential harms may include false-positive test results (a result that says a condition exists when, in fact, it does not) and overtreatment (treating for an abnormal thyroid level that may return to normal on its own or that would never cause health problems).

## The Draft Recommendation on Screening for Thyroid Dysfunction: What Does It Mean?

Here is the Task Force's draft recommendation on screening for thyroid dysfunction. The grade is based on the quality and strength of the evidence about the potential benefits and harms of the screening. It also is based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When there is not enough evidence to judge benefits and harms, the Task Force does not make a recommendation for or against—it issues an **I Statement**. The Notes explain key ideas.

Before you send comments to the Task Force, you may want to read the full **draft recommendation statement**. The draft recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An **evidence document** provides more detail about the studies the Task Force reviewed.

**1** The Task Force concludes that *evidence is insufficient* to recommend for or against screening for *thyroid dysfunction* in non-pregnant adults. | **Statement**

## Notes

**1** *evidence is insufficient*  
The Task Force did not find enough information from studies to determine the potential benefits and harms of screening for this purpose.

*thyroid dysfunction*  
Producing too much or not enough TSH or thyroid hormones.

 **Click Here** to Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received **between October 28 and November 24, 2014.**



All comments will be considered for use in writing final recommendations.

## What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the [Task Force Web site](#).

### USPSTF Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

## Click Here to Learn More About Hyperthyroidism



Medline Plus



National Endocrine and Metabolic Disease Information Services, NIH

## Click Here to Learn More About Hypothyroidism



Medline Plus



National Endocrine and Metabolic Disease Information Services, NIH