Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on screening for glaucoma. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from October 26, 2021 to November 22, 2021. The Task Force welcomes your comments.

Screening for Glaucoma

The Task Force issued a draft recommendation statement on Screening for Glaucoma.

The Task Force determined that there is not enough evidence to recommend for or against screening for glaucoma in adults who have not noticed any problems with their vision.

This draft recommendation statement only applies to screening in the primary care setting. It does not apply to care provided by an eye specialist.

Facts About Glaucoma

Glaucoma is one of the leading causes of vision loss in the United States and the leading cause of blindness in Black, Hispanic, and Latino people. It is a serious and common condition that affects about 2.5 million Americans.

Glaucoma generally progresses slowly and doesn’t cause pain or vision problems until it is more advanced. Risk factors for glaucoma include older age, family history, and certain conditions of the eyes. In addition, Black, Hispanic, and Latino individuals have the highest rates of glaucoma.

Facts About Screening for Glaucoma

Screening for glaucoma consists of a combination of several tests that look at and measure changes in the eye, fluid pressure in the eyes, and problems with vision. The Task Force found that screening tests can detect glaucoma, but these tests are usually not provided in primary care offices because they require specialized equipment and need to be performed by an eye care specialist.

Potential Benefits and Harms of Screening for Glaucoma

The Task Force looked at the evidence on how primary care clinicians can help people who have not reported any concerns with their vision. The goal of screening would be to catch glaucoma early before it progresses. However, there is not enough evidence on screening for glaucoma in primary care to determine the benefits of screening.

The Task Force also reviewed the evidence on potential harms, but again found there is not enough evidence to determine the harms of screening for glaucoma in primary care. A potential harm of screening could include overdiagnosis, which means that a person would be diagnosed with glaucoma when it would have never caused any symptoms or problems.

It is important for anyone who has concerns about their vision to talk to their clinician so that they can get the care they need.
Screening for Glaucoma

The Draft Recommendation on Screening for Glaucoma: What Does It Mean?

Here is the Task Force's draft recommendation on screening for glaucoma. It is based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. It is also 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 the Task Force issues an I Statement, it means the current evidence is insufficient to assess the balance of benefits and harms of the service.

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

The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of screening for primary open-angle glaucoma in adults. (I Statement)

Notes

evidence is insufficient
There is not enough information to make a recommendation for or against screening.

screening
A combination of several tests that look and measure changes in the eye, fluid pressure in the eyes, and problems with vision.

primary open-angle glaucoma
The most common form of glaucoma.

adults
Individuals ages 40 years or older.
Screening for Glaucoma

What is the U.S. Preventive Services Task Force?
The Task Force is an independent, non-federal, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and 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 website.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Definition</th>
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<tbody>
<tr>
<td>A</td>
<td>Recommended.</td>
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<tr>
<td>B</td>
<td>Recommended.</td>
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<tr>
<td>C</td>
<td>Recommendation depends on the patient’s situation.</td>
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<tr>
<td>D</td>
<td>Not recommended.</td>
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<tr>
<td>I statement</td>
<td>There is not enough evidence to make a recommendation.</td>
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USPSTF Recommendation Grades

Click Here to Learn More About Glaucoma

Don’t Let Glaucoma Steal Your Sight!
(Centers for Disease Prevention & Control)

Glaucoma
(MedlinePlus)

Glaucoma
(National Eye Institute)

Types of Glaucoma
(National Eye Institute)

Click Here to Comment on the Draft Recommendation

The Task Force welcomes comments on this draft recommendation.

Comments must be received between October 26, 2021 - November 22, 2021.

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