

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on screening for asymptomatic carotid artery stenosis in adults. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from August 4, 2020 to August 31, 2020. The Task Force welcomes your comments.

Screening for Asymptomatic Carotid Artery Stenosis

The Task Force issued a **draft recommendation statement** on *Screening for Asymptomatic Carotid Artery Stenosis*.

The Task Force recommends against screening for carotid artery stenosis (CAS) in adults who do not have any signs or symptoms of a blocked artery in the neck.

What is carotid artery stenosis?

Carotid artery stenosis is the narrowing of the arteries that run along the sides of the neck and supply blood to the brain. While uncommon, the condition can lead to stroke.

What is a stroke?

A stroke occurs when blood flow is interrupted to part of the brain. Most of the time, a stroke happens when there is an abrupt, or sudden, blockage of arteries leading to the brain.

Facts About Carotid Artery Stenosis

Carotid artery stenosis is one of the many risk factors for stroke, a leading cause of death and disability in the United States that can be devastating to those affected. Risk factors for CAS include many of the same traditional risk factors for cardiovascular disease, including older age, being male, and smoking. People are also at increased risk if they have high blood pressure, high cholesterol, diabetes, or heart disease.

While CAS is uncommon, risk of getting it increases with age, and it can lead to strokes. CAS often does not have any symptoms. Anyone concerned about their risk for a stroke or with a history of stroke should talk to their doctor.

Facts About Screening for Carotid Artery Stenosis

Screening for CAS involves looking for blockages in the carotid arteries in people without any signs or symptoms of stroke. This can involve an ultrasound as well as other tests. Ultrasound is a noninvasive test that uses sound to take pictures of soft tissues.

The Task Force looked for evidence on the benefits and harms of screening for carotid artery stenosis in adults who don't have any signs or symptoms of stroke. This includes adults without a history of stroke or a transient ischemic attack, also known as a "mini-stroke" or a "warning stroke."

Potential Benefits and Harms

The Task Force found there is no benefit of screening for CAS in people without signs or symptoms of stroke, including those without a known history of stroke.

Screening for CAS often results in false positive results, which means that the test shows that a person has CAS when they do not. These false positive results often lead to unnecessary follow-up testing and surgeries that can cause serious harms, including stroke, heart attack, or death.

Since these harms are so substantial, without any benefit, the Task Force recommends against screening for CAS in adults with no signs or symptoms.

The Task Force wants to help prevent people from having a stroke, but screening for CAS in people without symptoms of a stroke is not an effective way to do so. The best way to prevent a stroke and other cardiovascular diseases is to focus on the things we know work—including controlling high blood pressure and cholesterol, not smoking, maintaining a healthy weight, being physically active, and eating a healthy diet.

The Draft Recommendation on Screening for Carotid Artery Stenosis: What Does It Mean?

Here is the Task Force’s draft recommendation on screening for asymptomatic carotid artery stenosis. 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 a **D Grade**, it recommends against screening because it has more potential harms than potential benefits.

Before you send comments to the Task Force, you may want to read the full [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.

Notes

1 The USPSTF recommends against screening for *asymptomatic carotid artery stenosis* in the general adult population. (**D Grade**)

1 *asymptomatic*
Producing or showing no symptoms.





carotid artery stenosis
The narrowing of the arteries that run along the sides of the neck and supply blood to the brain.

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 all Americans 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](#).

Click Here to Learn More About Carotid Artery Stenosis and Stroke Prevention

-  **Carotid Artery Disease**
(Medline Plus)
-  **Carotid Artery Disease**
(National Heart, Lung, and Blood Institute)
-  **Heart Disease and Stroke**
(Centers for Disease Control and Prevention)
-  **Reduce Your Risk of Stroke**
(Healthfinder.gov)

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 Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received between August 4, 2020, and August 31, 2020.



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