

## U.S. Preventive Services Task Force Issues Draft Recommendation Statement on Celiac Disease

*Task Force finds evidence insufficient to recommend for or against screening in asymptomatic patients*

WASHINGTON, D.C. – May 3, 2016 – The U.S. Preventive Services Task Force (Task Force) today posted for public comment a draft recommendation statement and draft evidence review on screening for celiac disease. After reviewing the evidence, the Task Force concluded that there is not enough evidence to determine the effectiveness of screening for celiac disease. This is an **I statement**. This recommendation statement applies to people who do not have any symptoms of celiac disease.

In people with celiac disease, eating foods containing gluten, a protein found in wheat, rye, and barley, causes damage to the inner lining of the small intestine and prevents absorption of necessary nutrients. People who have a family history of celiac disease or have Type 1 diabetes are at increased risk for the disease. Symptoms of celiac disease include diarrhea, abdominal pain, and unexplained weight loss.

### Grade in this recommendation:

**I:** The balance of benefits and harms cannot be determined.

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“More evidence on screening for celiac disease is needed before the Task Force can recommend for or against screening people who don’t have any signs or symptoms of the condition,” said Task Force member Alex H. Krist, M.D., M.P.H. “In the face of unclear evidence, doctors should use their clinical judgment when deciding whom to screen.”

This is the first time that the Task Force has reviewed the evidence and made a statement on screening for celiac disease. The Task Force believes there is a need for more research to better understand the benefits and harms of screening for celiac disease in people without symptoms. Specifically, there is a need for more research that looks at:

- targeted screening in people at increased risk for celiac disease;
- the accuracy of screening in people without symptoms, particularly those with risk factors;
- the effect of treatment of celiac disease in people who have no symptoms, but who have positive blood tests for celiac disease; and
- clinical outcomes such as changes in health and quality of life in people who are screened vs. people who are not screened.

“It’s important to note that the Task Force’s draft recommendation does not apply to people who have symptoms of celiac disease,” said Task Force member Ann E. Kurth Ph.D., C.N.M., M.S.N., M.P.H. “Those individuals should talk to their primary care clinician about testing.”

The Task Force’s draft recommendation statement and draft evidence review has been posted for public comment on the Task Force Web site at [www.uspreventiveservicestaskforce.org](http://www.uspreventiveservicestaskforce.org). Comments can be submitted from May 3 to May 30 at [www.uspreventiveservicestaskforce.org/tfcomment.htm](http://www.uspreventiveservicestaskforce.org/tfcomment.htm). A fact sheet that explains the recommendation statement in plain language is also available.

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.

Dr. Krist is an associate professor of family medicine and population health at Virginia Commonwealth University and an active clinician and teacher at the Fairfax Family Practice residency. He is co-director of the Virginia Ambulatory Care Outcomes Research Network and director of community engaged research at the Center for Clinical and Translational Research.

Dr. Kurth is dean of the Yale School of Nursing. She is also an adjunct professor in the New York University College of Nursing and the College of Global Public Health. Dr. Kurth is a fellow of the American Academy of Nursing and the New York Academy of Medicine and an elected member of the National Academy of Medicine (formerly the Institute of Medicine). Dr. Kurth is a clinically-trained epidemiologist who studies approaches to improving HIV and sexually transmitted infection prevention, screening, and care; reproductive health; and global health workforce/system strengthening efforts.

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