WASHINGTON, D.C. – August 24, 2021 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on screening for prediabetes and type 2 diabetes. The Task Force recommends screening adults between ages 35 to 70 years old with overweight or obesity for prediabetes and diabetes. Clinicians should offer or refer people with prediabetes to preventive interventions. This is a B grade.

Diabetes is the seventh leading cause of death in the United States and can lead to serious health problems, including heart disease, stroke, and limb amputation. One of the biggest risk factors for prediabetes and diabetes is having overweight or obesity.

Type 2 diabetes, the most common type of diabetes, is when the body doesn’t use insulin well and can’t keep blood sugar at a normal level. Prediabetes is when blood sugar levels are higher than normal, but not high enough yet to be diagnosed as type 2 diabetes.

"Clinicians can prevent serious health complications by screening adults with overweight or obesity for prediabetes and diabetes," says Task Force member Chien-Wen Tseng, M.D., M.P.H., M.S.E.E. "With appropriate screening, diabetes can be detected and treated earlier to improve overall health."

If screening shows that someone has prediabetes, effective preventive interventions may prevent or delay diabetes from developing. Lifestyle changes such as adjustments to diet and physical activity are effective in helping to prevent diabetes and also improve weight, blood pressure, and lipid levels. Metformin, a diabetes medication, is also an effective intervention that may prevent or delay diabetes, but it has fewer overall health benefits than lifestyle changes.

“Fortunately, there are interventions that are effective for preventing prediabetes from progressing to diabetes and in helping people with prediabetes improve their health,” says Task Force vice chair Michael Barry, M.D. “The Task Force encourages clinicians to screen adults over age 35 with overweight or obesity and work with them to determine if an intervention is needed.”

The Task Force’s final recommendation statement and corresponding evidence summary have been published online in the Journal of the American Medical Association, as well as on the Task Force website at: http://www.uspreventiveservicestaskforce.org. A draft version of the recommendation statement and evidence review were available for public comment from March 16, 2021, to April 12, 2021.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Tseng is the Hawaii Medical Service Association endowed chair in health services and quality research, a professor, and the research director in the Department of Family Medicine and Community
Health at the University of Hawaii John A. Burns School of Medicine. She is also a physician investigator with the nonprofit Pacific Health Research and Education Institute.

Dr. Barry is director of the Informed Medical Decisions Program in the Health Decision Sciences Center at Massachusetts General Hospital. He is also a professor of medicine at Harvard Medical School and a clinician at Massachusetts General Hospital.

Contact: USPSTF Media Coordinator at Newsroom@USPSTF.net / (301) 951-9203