



## U.S. Preventive Services Task Force Highlights High-Priority Evidence Gaps in 2016 Report to Congress

*Calls for more research on recent topics including autism screening and e-cigarettes; identifies priority populations*

WASHINGTON, D.C. – December 16, 2016 – Today, the U.S. Preventive Services Task Force (Task Force) released its sixth annual Report to Congress, highlighting six recent topics for which the current evidence was insufficient for the Task Force to make a recommendation. The report also identified evidence gaps that prevent it from making recommendations for specific populations.

The priority areas of prevention where the Task Force calls for more research are:

- Screening for Autism Spectrum Disorder in Young Children
- Screening for Chlamydia and Gonorrhea in Men
- Tobacco Smoking Cessation With Electronic Nicotine Delivery Systems (i.e., electronic cigarettes) in Adults
- Vitamin Supplementation (Nutrients and Multivitamins) to Prevent Cancer and Cardiovascular Disease
- Aspirin Use to Prevent Cardiovascular Disease and Colorectal Cancer
- Screening for Skin Cancer in Adults

“Every year we review the evidence on a variety of important health topics. In some cases, there is not enough evidence to support recommending for or against a preventive service,” says Task Force chair Kirsten Bibbins-Domingo, Ph.D., M.D., M.A.S. “We hope that by highlighting gaps in evidence, new research will be done to fill those gaps and further inform evidence-based medicine.”

The Task Force also identified three evidence gaps that currently prevent it from making recommendations for specific populations or age groups: screening for breast cancer in African American women; screening for cervical cancer in Hispanic and African American women; and screening for colorectal cancer in African Americans and American Indians/Alaska Natives.

“There are several clinical preventive services that are well studied for the general population but missing evidence for certain populations who are not well represented in health research,” says Task Force vice chair, David C. Grossman, M.D., M.P.H. “Including these populations in future studies will help the Task Force issue recommendations that can be used to improve the quality of preventive care for these groups and eliminate disparities in health care.”

The report also provides an update on the Task Force’s activities over the past year, during which it continued to focus on making its work clear and relevant to health care professionals and patients. Since October 2015, the public has had the opportunity to comment on 11 draft research plans and 12 draft recommendation statements. The Task Force also published multiple final recommendation statements in peer-reviewed journals and on its Web site.

The “Sixth Annual Report to Congress on High-Priority Evidence Gaps for Clinical Preventive Services” can be found on the Task Force Web site at

<http://www.uspreventiveservicestaskforce.org/Page/Name/reports-to-congress>.

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. Bibbins-Domingo is the Lee Goldman, MD, endowed chair in medicine and professor of medicine and of epidemiology and biostatistics at the University of California, San Francisco (UCSF). She is a general internist, attending physician, and the director of the UCSF Center for Vulnerable Populations at Zuckerberg San Francisco General Hospital.

Dr. Grossman is a board-certified pediatrician recognized for his research on clinical preventive services, injury prevention, and Native American health. He is a senior investigator at the Group Health Research Institute in Seattle, where he is also medical director for population health. He is also professor of health services and adjunct professor of pediatrics at the University of Washington.

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