

# Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statements on screening for anxiety, depression, and suicide risk in adults. It also tells you how you can send comments about the draft recommendations to the Task Force. Comments may be submitted from September 20, 2022, to October 17, 2022. The Task Force welcomes your comments.

## Screening for Anxiety, Depression, and Suicide Risk in Adults

The Task Force issued **draft recommendation statements** on *Screening for Anxiety in Adults* and *Screening for Depression and Suicide Risk in Adults*.

The Task Force recommends screening all adults, including those who are pregnant and postpartum, for depression and adults ages 64 and younger for anxiety. There is not enough evidence to recommend for or against screening for anxiety in adults 65 and older and screening for suicide risk in all adults.

These recommendations apply to adults, including pregnant and postpartum people, who are not showing signs or symptoms of depression, anxiety, or suicide risk.

### Facts About Anxiety, Depression, and Suicide Risk in Adults

Anxiety, depression, and suicidal thoughts or behaviors are mental health conditions that affect the lives of many adults in the United States.

**Anxiety** is a common mental health condition in the United States. While anyone can have anxiety, some are at an increased risk for anxiety, including females, Black adults, adults who are widowed or divorced, those struggling to meet basic needs, individuals who have experienced stressful life events, adults who smoke and use alcohol, and people who have another mental health condition or a family history of mental health disorders. There are several types of anxiety disorders, including generalized anxiety disorder, social anxiety, panic disorder, and separation anxiety.

**Depression** is a serious condition that can impact people's quality of life. The factors that increase the risk for depression include having a family history of depression or trauma, prior episodes of depression, other mental health conditions such as substance abuse, or having a physical illness like cardiovascular disease. Depression can also occur during pregnancy or up to one year after childbirth; this is known as perinatal depression. Risk factors for perinatal depression include stressful life events, not having friends or family you can count on, a history of depression, not being satisfied with your partner, and a history of abuse.

**Suicide** is the 10th leading cause of death among adults. Adults at increased risk include those who have made previous suicide attempts, people with mental health disorders, a family history of suicide or mental health disorders, stressful life events, family violence or abuse, legal problems, certain medical conditions, chronic pain, or being a military veteran. The rates of suicide are higher among males, White adults, and American Indian and Alaska Native adults.



#### What is anxiety?

Anxiety is a feeling of excessive fear or worry that interferes with normal activities.

#### What is depression?

Depression is a condition where a person feels sad or unhappy for longer periods of time or lacks interest in doing normal activities.

#### What is suicide?

Suicide is when people harm themselves with the intention to end their lives.

# Screening for Anxiety, Depression, and Suicide Risk in Adults

## Screening for Anxiety, Depression, and Suicide Risk in Adults

Screening for anxiety, depression, and suicide risk typically includes questionnaires related to the specific condition to identify common symptoms. Importantly, a screening test alone is not enough to diagnose the condition. If a screening test is positive, a healthcare professional will do a follow-up assessment to confirm the diagnosis. After diagnosis, adults should decide together with their healthcare professionals what treatment is right for them.

## Potential Benefits and Harms of Screening for Anxiety, Depression, and Suicide Risk in Adults

The Task Force found that screening and follow-up care can help reduce symptoms of anxiety and depression. Potential harms of screening questionnaires include screening results that show depression or anxiety even though the condition is not there (false-positive), leading to unnecessary referrals to treatment, increased anxiety, and stigma. Counseling for these conditions is likely to have minimal harm. Medications to treat anxiety and depression can cause some harm, so people prescribed medications should be monitored to ensure ongoing well-being.

There is not enough evidence to determine the benefits or harms of screening for anxiety in adults 65 and older. The Task Force is calling for more research in this area.

The goal of screening for suicide risk is to identify the risk of suicide early, so the person can be connected to care. However, there is limited evidence of the benefits of screening for suicide risk in adults without recognized signs or symptoms, so the Task Force is also calling for more research in this critical area.

These recommendations are not for adults showing signs or symptoms of these conditions. Anyone who has concerns about depression, anxiety, or suicide should talk to their healthcare professional so that they can receive appropriate care.

## The Draft Recommendations on Screening for Anxiety, Depression, and Suicide Risk in Adults: What Does It Mean?

Here are the Task Force's draft recommendations on screening for anxiety in adults and screening for depression and suicide risk in adults. They are based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. They are 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 **B Grade**, it recommends screening because it has more potential benefits than potential harms. When the Task Force issues an **I Statement**, it means that there is not enough evidence to recommend for or against screening.

Before you send comments to the Task Force, you may want to read the draft recommendation statements on **anxiety** and on **depression and suicide risk**. The recommendation statements explain 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.

# Screening for Anxiety, Depression, and Suicide Risk in Adults

- 1** The USPSTF recommends screening for **anxiety** in adults, including pregnant and **postpartum** persons. **B Grade**
- 2** The USPSTF concludes that the **current evidence is insufficient** to assess the balance of benefits and harms of screening for anxiety in older adults. **I Statement**
- 3** The USPSTF recommends screening for **depression** in the adult population, including pregnant and postpartum persons as well as older adults. **B Grade**
- 4** The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of screening for **suicide risk** in the adult population, including pregnant and postpartum persons as well as older adults. **I Statement**

## Notes

- 1 anxiety**  
A feeling of excessive fear or worry.
- postpartum**  
The period following childbirth.
- 2 current evidence is insufficient**  
The Task Force did not find enough information to make a recommendation for or against screening.
- 3 depression**  
Heightened periods of sad mood and loss of interest or pleasure in everyday life that lasts longer than two weeks.
- 4 suicide risk**  
When people have thoughts or behaviors of harming themselves with the intention to end their lives.

# Screening for Anxiety, Depression, and Suicide Risk in Adults

## 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 draft recommendation statements on **anxiety** and on **depression and suicide risk**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the **Task Force website**.

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 Learn More About Anxiety, Depression, and Suicide Risk in Adults](#)

-  **Anxiety Disorders**  
(National Institute of Mental Health)
-  **Depression**  
(National Institute of Mental Health)
-  **Depression**  
(MedlinePlus)
-  **Suicide Prevention**  
(Centers for Disease Control and Prevention)

## [Click Here to Comment on the Draft Recommendation](#)



The Task Force welcomes comments on this draft recommendation.



Comments must be received between September 20, 2022, and October 17, 2022.



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