

## U.S. Preventive Services Task Force Focuses on Evidence Gaps Related to Care for Older Adults in 2013 Report to Congress

WASHINGTON, D.C. – November 7, 2013 – Today, the U.S. Preventive Services Task Force (Task Force) released its annual Report to Congress, which highlights five high-priority evidence gaps in the research on preventive care for older adults. The Task Force also highlights an expansion of its commitment to transparency and public engagement.

Recognizing the importance of prevention as people age, the Task Force calls for more research in targeted areas for older adults, including screening for cognitive impairment, screening for mental and physical well-being, preventing falls, screening for vision and hearing problems, and avoiding the unintended harms of medical procedures and testing. Additional research in the areas highlighted in the Task Force's "Third Annual Report to Congress on High-Priority Evidence Gaps for Clinical Preventive Services" would likely result in important new recommendations that can help improve the health of all Americans, especially older adults.

By 2040, one in five Americans will be older than age 65 and one in 13 will be older than age 85. The Task Force has long recognized the growth of the older adult population in the United States and has changed its processes to better inform effective and safe preventive care for older Americans. Unfortunately, there are a limited number of research studies that include older adults and a limited understanding of how to use evidence from research in younger adults to tailor preventive services for older individuals.

"Prevention serves an especially important role as people age. Since 2008, the Task Force has issued more than 30 recommendations that consider issues relevant to older adults, but we have also identified critical evidence gaps that have prevented us from providing specific guidance to clinicians and patients," says Task Force co-chair Albert Siu, M.D., M.S.P.H. "We hope that highlighting evidence gaps related to the care of older adults will help public and private researchers and research funders target their efforts so that together we will be able to improve preventive health and health care for all."

The report also provides an update on the Task Force's activities during the previous year, notably including additional efforts to ensure transparency by providing a third opportunity for the public to offer feedback during the recommendation development process. During 2013, the public had the new opportunity to comment on three draft evidence reports, in addition to providing feedback on 14 draft research plans and 13 draft recommendations. The Task Force published 10 final recommendation statements in peer-reviewed journals and on its Web site this year.

"The Task Force is proud of the work it accomplished in 2013. In addition to issuing a number of new recommendations that can help primary care clinicians and patients decide together which preventive services are right for each patient's needs, we introduced a new process to expand the opportunity for public comment," says Task Force chair Virginia Moyer, M.D., M.P.H. "By posting draft evidence reports online, we are now providing opportunities throughout the recommendation development process for the public to provide feedback."

In the coming year, the Task Force will continue to evaluate the evidence on clinical preventive services

in order to empower health care professionals, health care systems, and the American people to make informed decisions. The Task Force will continue its work on more than 30 topics that are in progress and begin work on four new topics, including topics nominated for consideration by the public.

The “Third 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/congressrep.htm>.

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.

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