

## U.S. Preventive Services Task Force Issues Draft Recommendation Statement on Screening for Carotid Artery Stenosis

*Task Force continues to recommend against screening in adults*

WASHINGTON, D.C. – August 4, 2020 – The U.S. Preventive Services Task Force (USPSTF or Task Force) today posted a draft recommendation statement and draft evidence review on screening for carotid artery stenosis (CAS) in people without history of or signs or symptoms of a blocked artery in the neck. Based on the evidence, the USPSTF continues to recommend against screening for CAS. **This is a D recommendation.**

**Grade in this recommendation:**

**D: Not recommended.**

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This draft recommendation statement applies to adults without a history of a stroke; a transient ischemic attack, also known as a mini-stroke or a warning stroke; or other signs or symptoms of stroke.

Stroke is a leading cause of death and disability in the United States and can be devastating to those affected. One of the many risk factors for stroke is carotid artery stenosis—the narrowing of the arteries that run along the sides of the neck and supply blood to the brain. While CAS is uncommon, risk of getting it increases with age, and it can lead to strokes.

“The Task Force wants to help prevent people from having a stroke,” says USPSTF member Michael J. Barry, M.D. “But screening for CAS in those without symptoms of a blocked artery is not an effective way to do so. The evidence shows there are no benefits, and there are serious harms, so we recommend against screening.”

There is little evidence that screening for CAS in people without signs or symptoms prevents stroke or reduces mortality. Existing screening methods, especially in the general population, often have false-positive results, which means the tests show that a person has CAS when they do not. Therefore, screening for CAS often leads to unnecessary follow-up testing and surgeries that can cause serious harms, including stroke, heart attack, or death.

“The best way to prevent stroke is to focus on things we know work,” says USPSTF member Aaron B. Caughey, M.D., M.P.P., M.P.H., Ph.D. “This includes controlling high blood pressure and cholesterol, not smoking, maintaining a healthy weight, being physically active, and eating a healthy diet.”

The Task Force has several evidence-based recommendations that can help clinicians and patients prevent stroke through preventive medications, behavioral counseling, and other interventions.

The USPSTF’s draft recommendation statement and draft evidence review have been posted for public comment on the USPSTF website at [www.uspreventiveservicestaskforce.org](http://www.uspreventiveservicestaskforce.org). Comments can be submitted from August 4, 2020, to August 31, 2020, at [www.uspreventiveservicestaskforce.org/tfcomment.htm](http://www.uspreventiveservicestaskforce.org/tfcomment.htm).

The USPSTF 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. 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.

Dr. Caughey is a professor in and chair of the Department of Obstetrics and Gynecology and the associate dean for Women's Health Research and Policy at Oregon Health & Science University. He is the founder and chair of the Oregon Perinatal Collaborative, funded by the Centers for Disease Control and Prevention, which aims to improve outcomes for women and infants through guidelines and policies, working with all the health systems in the state.

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