



AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



Closing Evidence Gaps in Clinical Prevention: A Perspective from AHRQ

*NAM Consensus Committee Meeting #1
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Agenda



- About AHRQ
- AHRQ's support to USPSTF
- AHRQ Perspective: Project Impetus

Agency for Healthcare Research and Quality's Mission



www.ahrq.gov

To produce evidence to make health care safer, higher quality, more accessible, equitable and affordable

To work with HHS and other partners to make sure that the evidence is understood and used

AHRQ's Support of the Task Force



- AHRQ provides administrative, scientific, technical, and dissemination support to the USPSTF
 - ▶ Since 1998 when authorized by Congress
- The USPSTF is an independent entity
 - ▶ Panel members are volunteers

USPSTF Overview

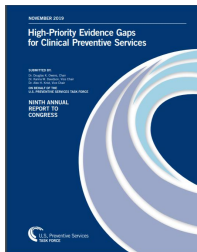


The U.S. Preventive Services Task Force...

- Is an independent panel of non-Federal experts in prevention & evidence-based medicine
- Makes evidence-based recommendations about clinical preventive services, including screening, counseling, and preventive medications
 - ▶ Recommendations address only services offered in the primary care setting or services referred by a primary care clinician
 - ▶ Recommendations apply to adults & children with no signs or symptoms (or unrecognized signs and symptoms)

Communicating Research Gaps

- In its recommendation statements, USPSTF highlights evidence gaps by:
 - ▶ Issuing an “I statement”
 - ▶ Describing in all recommendation statements and evidence reviews, such as the “Research Needs and Gaps” section
- Highlights priority research gaps each year in its Annual Report to Congress

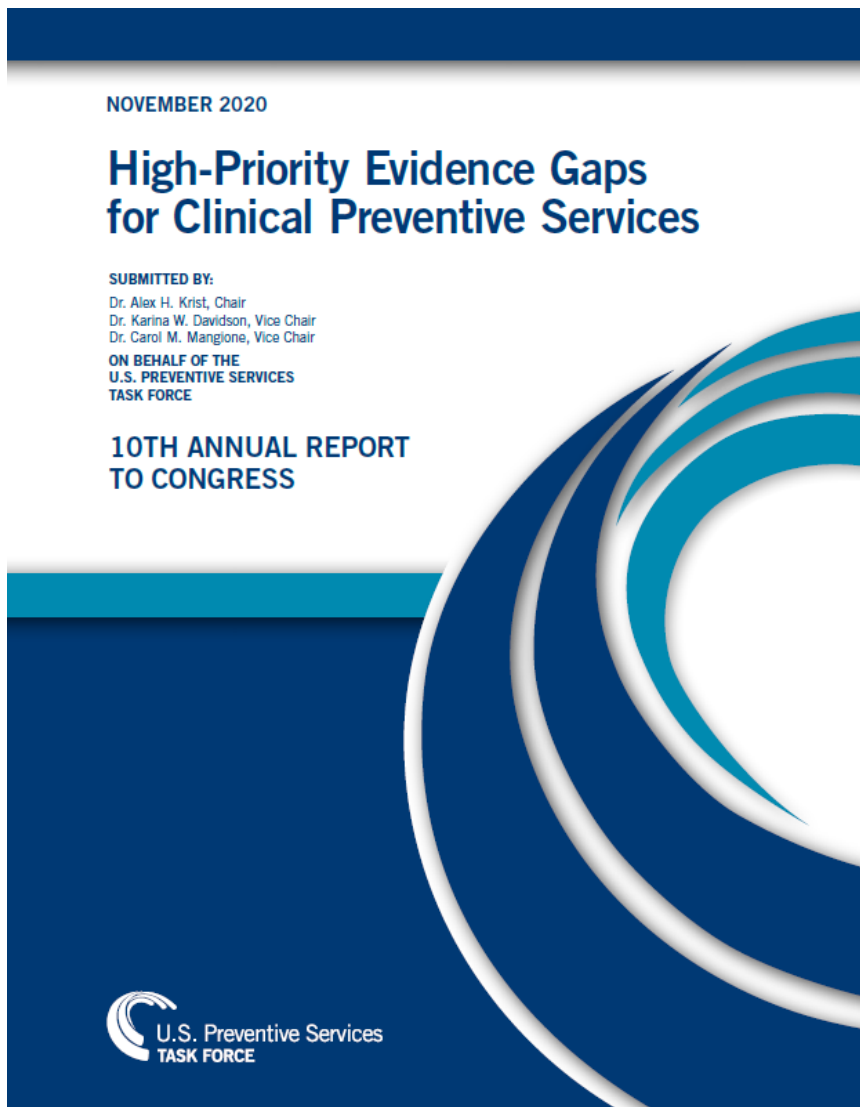


USPSTF in FY20

Of the Task Force's portfolio of 85 topics, the following posted or published this year.

Draft Research Plan	Final Research Plan	Draft Recommendation	Final Recommendation
<input type="checkbox"/> Aspirin Use to Prevent CVD & Colorectal Cancer	<input type="checkbox"/> Aspirin Use to Prevent CVD & Colorectal Cancer	<input type="checkbox"/> Behavioral Counseling Interventions to Prevent STIs	<input type="checkbox"/> Behavioral Counseling Interventions to Prevent STIs
<input type="checkbox"/> Diet & Physical Activity Counseling for CVD Prevention in Adults Without Known Risk	<input type="checkbox"/> Diet & Physical Activity Counseling for CVD Prevention in Adults Without Known Risk	<input type="checkbox"/> Diet & Physical Activity Counseling for CVD Prevention in Adults With Known Risk	<input type="checkbox"/> Primary Care–Based Drug Use Prevention in Young People
<input type="checkbox"/> Screening for Atrial Fibrillation	<input type="checkbox"/> Prevention of Dental Caries in Children	<input type="checkbox"/> Interventions for Tobacco Smoking Cessation in Adults	<input type="checkbox"/> Primary Care Interventions to Prevent & Stop Tobacco Use in Youth
<input type="checkbox"/> Screening for Chronic Obstructive Pulmonary Disease	<input type="checkbox"/> Screening for Atrial Fibrillation	<input type="checkbox"/> Primary Care–Based Drug Use Prevention in Young People	<input type="checkbox"/> Screening for Abdominal Aortic Aneurysm
<input type="checkbox"/> Screening for Depression, Anxiety & Suicide Risk in Adults	<input type="checkbox"/> Screening for Carotid Artery Stenosis	<input type="checkbox"/> Screening for Bacterial Vaginosis in Pregnancy	<input type="checkbox"/> Screening for Bacterial Vaginosis in Pregnancy
<input type="checkbox"/> Screening for Depression, Anxiety & Suicide Risk in Children & Adolescents	<input type="checkbox"/> Screening for Depression, Anxiety & Suicide Risk in Adults	<input type="checkbox"/> Screening for Carotid Artery Stenosis	<input type="checkbox"/> Screening for Cognitive Impairment in Older Adults
<input type="checkbox"/> Screening for Eating Disorders in Adolescents & Adults	<input type="checkbox"/> Screening for Depression, Anxiety & Suicide Risk in Children & Adolescents	<input type="checkbox"/> Screening for Hearing Loss in Older Adults	<input type="checkbox"/> Screening for Hepatitis C in Adolescents & Adults
<input type="checkbox"/> Screening for Impaired Visual Acuity & Glaucoma	<input type="checkbox"/> Screening for Eating Disorders in Adolescents & Adults	<input type="checkbox"/> Screening for Hepatitis B in Adolescents & Adults	<input type="checkbox"/> Screening for Unhealthy Drug Use
<input type="checkbox"/> Screening for Type 2 Diabetes in Children & Adolescents	<input type="checkbox"/> Screening for Impaired Visual Acuity & Glaucoma	<input type="checkbox"/> Screening for Hypertension in Adults	
<input type="checkbox"/> Statin Use for Prevention of CVD		<input type="checkbox"/> Screening for High Blood Pressure in Children & Adolescents	
		<input type="checkbox"/> Screening for Lung Cancer	
		<input type="checkbox"/> Screening for Vitamin D Deficiency	

2020 Annual Report on Evidence Gaps



- Focus on Child and Adolescent Health and Health Inequities



Mental and
Behavioral Health

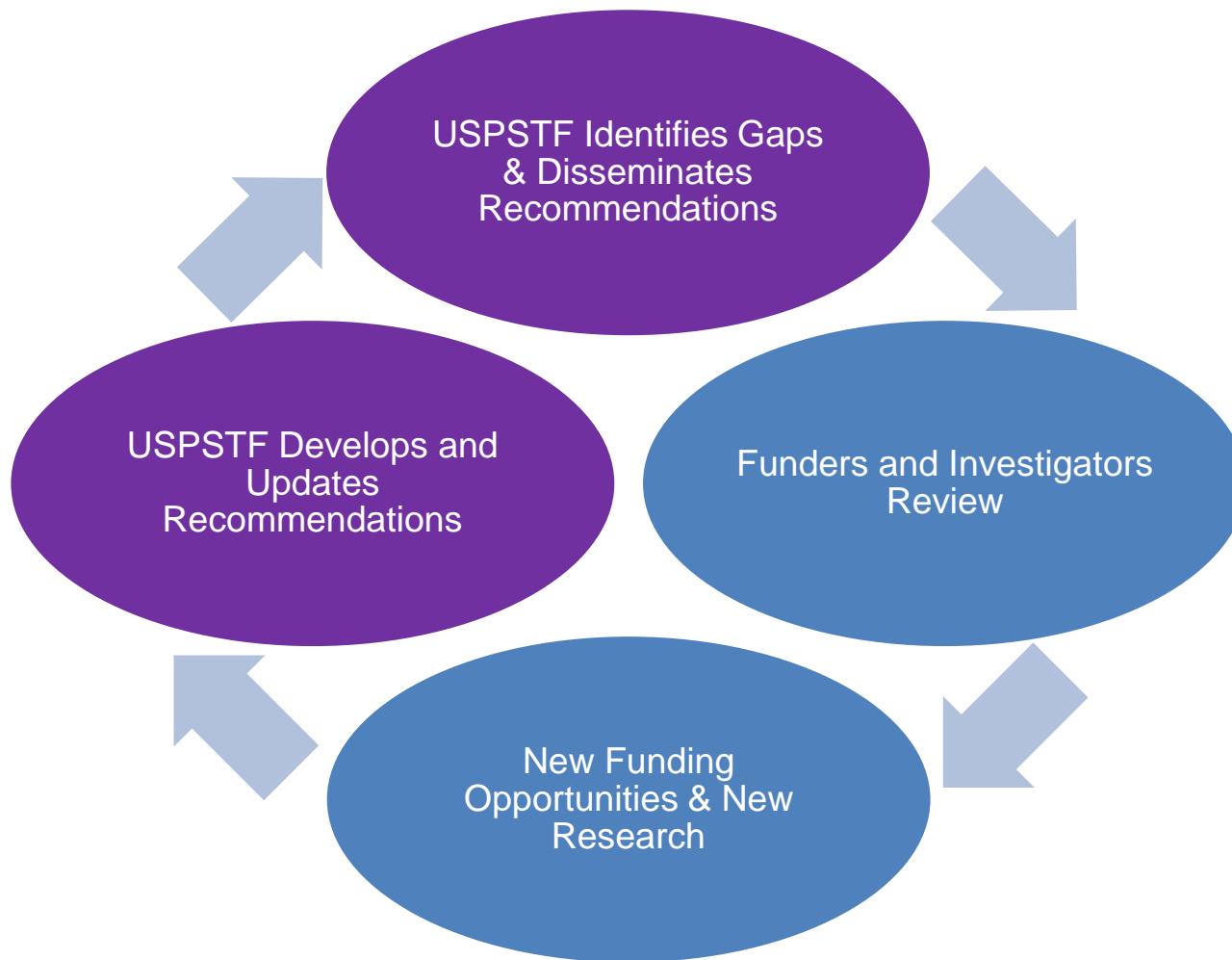


Substance Use

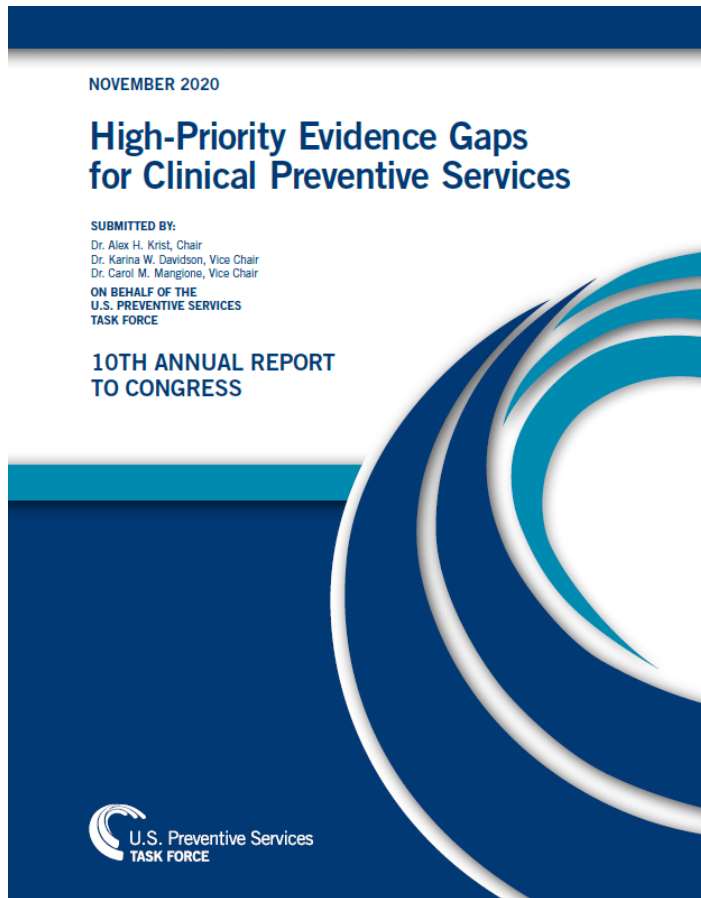


Obesity

Research Gaps Process

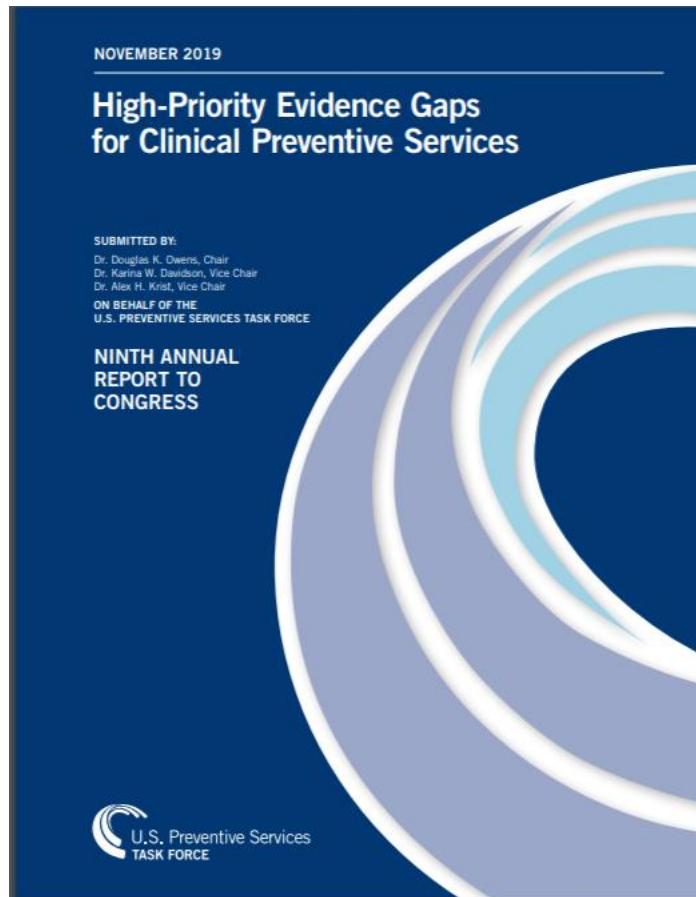


Example: Identifying & Filling Gaps



- In 2005, the USPSTF concluded there was not enough evidence to recommend for or against routine screening in overweight children and adolescents as a means to prevent adverse health outcomes.
 - ▶ Five years later—in 2010—the USPSTF issued a B recommendation advising that clinicians screen children age 6 years or older for obesity and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.
 - ▶ The USPSTF was able to make this recommendation because of new evidence on the topic, including studies funded by the NIH.

Example: Identifying & Filling Gaps



- In 2018, the USPSTF concluded there was not enough evidence on screening for abuse and neglect in older and vulnerable adults.
 - ▶ To address this research gap, NIH is funding several projects to identify elder abuse and the mistreatment of people with physical and mental disabilities.
- In 2003, the USPSTF concluded that the evidence was insufficient to be able to recommend for or against routine screening for tobacco use or interventions to prevent and treat tobacco use and dependence in children or adolescents.
 - ▶ But, in 2013, when the USPSTF reviewed the evidence again on this topic, it identified and considered new studies, including studies funded by NIH.
 - ▶ The new evidence enabled the USPSTF to make a recommendation that clinicians should provide interventions to prevent tobacco use in children and adolescents (change from an I statement to a grade B recommendation).

AHRQ Perspective: Project Impetus



- To support the USPSTF in:
 - ▶ Developing its recommendations, including having new and better evidence to examine when USPSTF updates topics
 - ▶ Communicating its evidence gaps
- Multiple organizations play a role
 - ▶ Organizations developing recommendations (e.g., USPSTF)
 - ▶ Funding agencies
 - ▶ Members of the research community

AHRQ Perspective: Project Impetus



- Need for taxonomy and recommendations to be:
 - ▶ Actionable to recommendation developers, funders, and the research community
 - ▶ Account for the multiple dimensions of evidence gaps
 - ▶ Consider both existing USPSTF methods and innovative new methodologies that could help close the evidence gaps

AHRQ Perspective: Project Impetus



- Hope a taxonomy may help stakeholders:
 - ▶ Better understand and use the evidence gaps
 - ▶ Assess their relative importance
 - ▶ Identify innovative methods to help fill the evidence gaps, and
 - ▶ Accelerate research that addresses evidence gaps

Summary

- AHRQ has an important role in supporting the USPSTF to develop and disseminate its recommendations
- Multiple organizations play a role in helping identify, fill, and close evidence gaps
 - ▶ Recommendation developers e.g., USPSTF, funders, and the research community all play a role
- Need for an actionable taxonomy and recommendations