

# USPSTF recommends anxiety, depression screening for children

April 12 2022

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The U.S. Preventive Services Task Force (USPSTF) recommends

screening for major depressive disorder (MDD) in adolescents aged 12 to 18 years, and recommends anxiety screening for children aged 8 to 18 years. The two draft recommendation statements were published online April 12.

Meera Viswanathan, Ph.D., from the University of North Carolina at Chapel Hill Evidence-based Practice Center in Research Triangle Park, and colleagues reviewed 78 studies to examine the evidence on screening for suicide risk, anxiety, and [depression](#) among children and adolescents. The authors note that some screening instruments are reasonably accurate for anxiety and depression, but the evidence is limited for screening instruments for suicide risk. Benefits are seen for pharmacotherapy and psychotherapy for depression and anxiety; limited evidence is available for interventions for suicide risk.

Based on these findings, the USPSTF developed two recommendation statements. The USPSTF recommends MDD screening in asymptomatic adolescents aged 12 to 18 years (B recommendation). For asymptomatic children aged 11 years or younger, the current evidence is insufficient for assessing the balance of benefits and harms of screening for MDD (I statement). The current evidence is also insufficient for examining the benefits and harms of screening children and [adolescents](#) for suicide risk (I statement). In the second recommendation statement, the USPSTF recommends [anxiety](#) screening for children aged 8 to 18 years (B recommendation), while for children aged 7 years or younger, the current evidence is insufficient for assessing the balance of benefits and harms of screening (I statement).

The draft recommendation statements and draft evidence review are posted for public comment. Comments can be submitted from April 12 through May 9, 2022.

**More information:** [Draft Evidence Review 1](#)

[Draft Evidence Review 2](#)

[Draft Recommendation Statement 1](#)

[Draft Recommendation Statement 2](#)

[Comment on Recommendation Statement 1](#)

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