

# U.S. Preventive Services Task Force recommends folic acid to prevent neural tube defects

February 21 2023, by Elana Gotkine

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The U.S. Preventive Services Task Force (USPSTF) recommends folic acid supplementation for people planning to or who could become pregnant (Grade A recommendation). This recommendation forms the basis of a draft recommendation statement published online Feb. 21.

Meera Viswanathan, Ph.D., from RTI International—University of North Carolina at Chapel Hill Evidence-based Practice Center in Research Triangle Park, and colleagues conducted a limited update of new evidence on the benefits and harms of folic acid supplementation for prevention of neural tube defects (NTDs) in persons capable of becoming pregnant. Twelve [observational studies](#) were eligible for this update, with more than 1,243,072 participants.

Three studies with 990,372 participants reported on the effect of folic acid supplementation on NTDs. The researchers found that one cohort study reported a significantly reduced risk for NTDs associated with folic acid supplementation taken before pregnancy, during pregnancy, and before and during pregnancy (adjusted relative risks, 0.54, 0.62, and 0.49, respectively) for 2006 to 2013, but not 1999 to 2005. No other significant benefits were reported. None of the studies noted significant harms associated with exposure to pregnancy-related folic acid.

Based on these findings, the USPSTF recommends a daily supplement containing 0.4 to 0.8 mg folic acid for all persons planning to or who could become pregnant (A recommendation). Daily [folic acid](#) supplementation should be started at least one month before anticipated conception and should continue through the first two to three months of [pregnancy](#) in order to achieve benefit.

The draft evidence review and draft [recommendation](#) statement are posted for public comment. Comments can be submitted from Feb. 21 through March 20, 2023.

**More information:** [Draft Evidence Review](#)  
[Draft Recommendation Statement](#)  
[Comment on Recommendation Statement](#)

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