

AMERICAN ASSOCIATION OF CLINICAL ENDOCRINOLOGISTS AMERICAN COLLEGE OF ENDOCRINOLOGY



American Association of Clinical Endocrinologists (AACE) Responds to USPSTF's Statement on Thyroid Dysfunction Screening

JACKSONVILLE, Fla. – (March 25, 2015) – While agreeing with the U.S. Preventive Services Task Force's (USPSTF) assessment that more studies are needed to determine the effectiveness of screening for thyroid disease, the <u>American Association of Clinical Endocrinologists</u> (AACE), the nation's largest collection of clinical endocrinologists, contends that aggressive case finding is an appropriate alternative in patient groups where thyroid risk factors are present.

AACE believes that testing and treating the patients who are at highest risk for developing life-altering overt thyroid disease is indicated:

- Patients over 60, in whom symptoms of hypothyroidism are often minimal, absent or atypical
- Newborns (continued mandatory screening for congenital hypothyroidism recommended)
- Those with autoimmune diseases often associated with thyroid disease, such as type 1 diabetes and pernicious anemia
- Patients with a prior history of thyroid disease or thyroid surgery, an abnormal thyroid exam, or taking drugs known to affect the thyroid
- Patients with a family history of thyroid illness

AACE further stresses that careful consideration should be given for thyroid testing in women who are planning pregnancy or are already pregnant given the clear-cut detrimental effects of thyroid hormone lack on a baby's development in the early phases of pregnancy.

"There is no question that there is a strong rationale for conducting new, controlled studies that could collect data for construction of a more nuanced framework for thyroid case finding," said AACE President R. Mack Harrell, MD, FACP, FACE, ECNU.

"Until robust prospective studies to address lesser degrees of dysfunction are done, we believe that thyroid disease should routinely be considered as a potential cause for many of the non-specific patient complaints that physicians hear daily. This approach will identify many patients with thyroid disease who will benefit from its treatment," adds Jeffrey R. Garber, MD, FACP, FACE, chair of the AACE Thyroid Scientific Committee.

"My fear is that the USPSTF's statement about a 'lack of data' to justify thyroid disease screening will be incorrectly interpreted as a 'lack of clinical need' to find and treat thyroid disease. We've come a long way with diagnosis and treatment of thyroid disease over the past 90 years, and we don't need to return to the bad old days," noted Dr. Harrell.

About the American Association of Clinical Endocrinologists (AACE)

The American Association of Clinical Endocrinologists (AACE) represents more than 6,500 endocrinologists in the United States and abroad. AACE is the largest association of clinical endocrinologists in the world. The majority of AACE members are certified in endocrinology, diabetes and metabolism and concentrate on the treatment of patients with endocrine and metabolic disorders including diabetes, thyroid disorders, osteoporosis, growth hormone deficiency, cholesterol disorders, hypertension and obesity. Visit our website at www.aace.com.

About the American College of Endocrinology (ACE)

The American College of Endocrinology (ACE) is the educational and scientific arm of the American Association of Clinical Endocrinologists (AACE). ACE is the leader in advancing the care and prevention of endocrine and metabolic disorders by providing professional education and reliable public health information; recognizing excellence in education, research and service; promoting clinical research and defining the future of clinical endocrinology. For more information, please visit www.aace.com/college.