I'm Due For That!

A Review of Evidence Based Preventative Health Guidelines

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Objectives
Participants will be able to:

• **Analyze** the relationship between preventative health behaviors and health outcomes

• **Evaluate** current evidenced based preventative health guidelines

• **Assess** their own preventative health plan practices

Leading Causes of Death (CDC, 2017)

• Heart disease
• Cancer
• Chronic lower respiratory disease
• Accidents and
• Strokes

Screening Saves Lives

• Routine screening
  ◦ Early detection

• Barriers
  ◦ Schedule
  ◦ Perceptions
  ◦ Lack of knowledge/confusion

Self-Care is a priority and necessity - not a luxury - in the work that we do.
Roles/Responsibilities of NP

- National Organization of Nurse Practitioner Faculties (NONPF, 2017)
  - Competency 3.a
  - “Provides the full spectrum of health care services to include health promotion, disease prevention...”

- AANP (n.d.)
  - “Educating patients on disease prevention and positive health and lifestyle choices”

Is there value to an annual exam?

Mixed reports on annual exam

- Improved delivery of preventative services; less patient worry (Boulware et al., 2007)

- Minimal benefit and potential harms (Mehrotra & Prochazka, 2015)

- No reduction in illness or death rates; increased number of new diagnoses (Krogsboill, Jørgensen, Larsen & Gotzsche, 2012)

First and most important warning...

- Information and recommendations are consistently changing.

Organizational Recommendations

- General body organizations
- Specialty organizations

USPSTF Grade Definitions

A - The USPSTF recommends the service. There is high certainty that the net benefit is substantial.

B - The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial. Offer or provide this service.

C - The USPSTF recommends selectively offering or providing this service to individual patients based on professional judgment and patient preferences.

D - The USPSTF recommends against the service. Discourage the use of this service.

I Statement - The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service.

(USPSTF, 2018a)
Self Check Time

<table>
<thead>
<tr>
<th>Up to Date</th>
<th>Unsure</th>
<th>Need to Schedule</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cervical Cancer Screening</td>
<td>Tobacco Cessation Counseling</td>
<td>Hypertension Screening</td>
<td>Colorectal Cancer Screening</td>
</tr>
<tr>
<td>STI Screening</td>
<td>Unhealthy Alcohol Counseling</td>
<td>Breast Cancer Screening</td>
<td>Osteoporosis Screening</td>
</tr>
<tr>
<td>Intimate Partner Violence Counseling</td>
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</tbody>
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“A” Screening Recommendations

- Cervical Cancer (2018)
- Tobacco Cessation (2015)*
- Hypertension (2015)*
- Colorectal Cancer (2016)*

Cervical Cancer

- Screening guidelines
  - No evidence to support annual Pap smear screening (ACOG, 2017a; USPSTF, 2018b)
- Risk factors
- Screening method
  - Several Grade D (AGAINST) recommendations (USPSTF, 2018b)

HPV Vaccination

- Evolution of options
- Gardasil vs. Gardasil 9 (Merck, 2017)
- FDA approved age change (FDA, 2018)

Pap vs. HPV DNA testing

- HPV and cervical cancer
- Traditional testing benefits
- HPV testing
  - Sensitivity (CMS, 2015; Koliopoulous et al., 2017)
  - Screening option for low income international populations (Ferrera, 2019)
- Cobas HPV test (Cleveland Clinic, 2014; NIH, 2014)
  - Result management (NIH, 2014)

Tobacco Use

- Treat smoking status as a vital
  - Careful questioning
    - 5 As framework
    - “Ask, Advise, Refer”
- Approved Treatment Options
  - Behavioral interventions and/or FDA approved pharmacotherapy for cessation
- I rating
  - Treatment for pregnant women
  - ENDS treatments

(TUSPSTF, 2017)
Hypertension

- USPSTF (2017)
- 18 years or older
- Obtain outside measurements before starting treatment
- National Heart, Lung, and Blood Institute (NHLBI)
- JNC8 (2013)
- American College of Cardiology (ACC) and American Heart Association (2017)

Colorectal Cancer Screening

- Recommendations
- USPSTF vs. ACS Updated Guidelines (ACS, 2018)
- Screening test recommendations
  - Normal risk
    - Stool based
    - Direct Visualization
  - Increased/High Risk
    - No specific recommendation (ACS, 2018)
- (C) Rating
  - 76-85 should be individual decision
  (USPSTF, 2017)

“B” Screening Recommendations

- Chlamydia and Gonorrhea Screening (2014)*
- Unhealthy Alcohol Use (2018)
- Breast Cancer (2016)
- Osteoporosis (2018)
- Intimate Partner Violence (2018)

Chlamydia and Gonorrhea

- Record breaking year (CDC, 2018)
- Risk factors
- Screening recommendations
  - Based upon:
    - Age
    - Risk
- I statement
  - Screening in men
  (USPSTF, 2017)
Additional Screening recommendations for:
• HIV - A recommendation (2013)*  
• Syphilis - A recommendation (2016)  
• Hep B - B recommendation (2014)*  
• Hep C - B recommendation (2013)*

Above recommendations are population and pregnancy status specific. (USPSTF, 2017)

Unhealthy Alcohol Use
• Hazardous quantities
• Screening tools
  ▫ AUDIT-C
  ▫ SASQ
• CAGE questionnaire
(USPSTF, 2017)

CAGE questionnaire
Table 6. CAGE Screen For Alcohol Abuse.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever felt you should Cut down on your drinking?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Have people Annoyed you by criticizing your drinking?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Have you ever felt bad or Guilty about your drinking?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Have you ever had a drink as an Eye-opener first thing in the morning to steady your nerves or help a hangover?</td>
<td>Yes/No</td>
</tr>
</tbody>
</table>

Yes to two or more probable alcohol abuse

Breast Cancer
• Several mixed messages on screening onset and frequency
  ▫ USPSTF (2016)
  ▫ American Cancer Society (2017)
  ▫ ACOG (2017b)

Osteoporosis
• Screening recommendation
  ▫ Age
  ▫ Risk Assessment Tools
• Risk factors
• Recommended screening tool
  ▫ DXA
  ▫ Central and Peripheral
  ▫ QUS
(USPSTF, 2017)
Intimate Partner Violence (IPV)

- Recommends that clinicians screen women of childbearing age for intimate partner violence (IPV), such as domestic violence, and provide or refer women who screen positive to intervention services (USPSTF, 2017)

- Kentucky Law on Reporting IPV (KCADV, n.d.)
  - HB 309

Other recommendations

- “D” recommendations
  - Ovarian Cancer

Ovarian Cancer

- Not recommended routine screening
- Recommendation
  - Genetic counseling for high risk women

(USPSTF, 2017)

You expect me to remember all that?
Self Care Check-in Time

Priorities
1. 
2. 
3.

References


3/2/2019
References


