Screening for Glaucoma: U.S. Preventive Services Task Force Recommendation Statement

Who developed these guidelines?
The U.S. Preventive Services Task Force (USPSTF) is a group of health experts that reviews published research and makes recommendations about preventive health care.

What is the problem and what is known about it so far?
Glaucoma is an eye condition. Fluid normally moves in and out of different parts of the eye. In people with glaucoma, this fluid often does not flow correctly and pressure builds in the eye. The increased pressure may damage the main nerve in the eye. The 2 common types of glaucoma are acute and chronic glaucoma. Acute glaucoma happens suddenly and causes severe eye pain and rapid loss of vision. It is a medical emergency that requires immediate treatment. Chronic glaucoma, sometimes called primary open-angle glaucoma (POAG), develops slowly and painlessly over many years. Some people with POAG never develop noticeable vision problems, whereas others do. Glaucoma is diagnosed through a combination of tests, which often includes measuring the pressure in the eye by using an instrument called a tonometer. Treatment includes eye drop medications or surgery. The USPSTF wanted to determine whether doctors should screen patients for POAG. Screening means looking for a condition in people who have no signs or symptoms of it.

How did the USPSTF develop these recommendations?
The USPSTF reviewed published research to evaluate the benefits and harms of screening for glaucoma.

What did the authors find?
The USPSTF found no direct evidence of the benefits or harms of glaucoma screening. Studies show that the treatment of early glaucoma decreases the number of people who develop small visual field defects that are present on eye testing but that patients do not notice. However, there is inadequate evidence that screening for and treatment of POAG decreases the number of people who will develop visual problems that affect their daily lives. Potential harms of screening include overdiagnosis and overtreatment of people who would never develop noticeable vision problems. The medications and surgeries used to treat glaucoma have adverse effects that include eye irritation, surgical complications, and cataracts.

What does the USPSTF suggest that patients and doctors do?
The USPSTF decided that there is not enough evidence to know whether the benefits of testing for POAG in patients who have no symptoms outweigh the potential harms. The USPSTF therefore does not make a recommendation for or against screening. Factors that doctors and patients should consider when making screening decisions include patient age, ethnicity, and life expectancy. Older people and African Americans are at increased risk for glaucoma, and people with a short life expectancy probably have little to gain from glaucoma screening.

What are the cautions related to these recommendations?
These recommendations do not apply to people with vision problems or symptoms of glaucoma who should be tested for this condition.

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