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Adult Preventive Health Care Guidelines

Many of the health problems encountered in clinical practice can be prevented or postponed by immunization, chemoprophylaxis and a healthier lifestyle, or detected early through screening. However, preventive care can appear to be increasingly complex. The yearly physical exam, a "reassuringly simple but relatively ineffective ritual"¹ has been replaced with an array of tests and recommendations specific for each age group. Furthermore, differing sets of preventive services are recommended by government groups, professional organizations, voluntary organizations and expert panels.

Although there are some inconsistencies, authorities agree on most types of preventive care. The Division of Public Health has prepared Adult Preventive Health Care Guidelines in order to provide a concise summary for primary care providers.

The major source for Adult Preventive Health Care Guidelines was the second edition of the *Guide to Clinical Preventive Services*², described below.

Guide to Clinical Preventive Services: Report of the U.S. Preventive Services Task Force

In general, preventive interventions should not be used unless well-designed studies have shown them to be effective. Ineffective preventive care can be costly and can have adverse effects (for example, unnecessary work-ups). The U.S. Preventive Services Task Force developed a rigorous rating system for evaluating the quality of the scientific evidence related to given preventive interventions.

The *Guide to Clinical Preventive Services*² provides recommendations for all age groups, as well as for pregnant women. The Adult Preventive Health Care Guidelines provides recommendations for non-pregnant adults aged 25 years and older.

Other Sources for Recommendations

In order to make the guidelines relevant to Alaska, we also used recommendations from the Alaska Division of Public Health, and draft recommendations developed by a task force at the Alaska Native Medical Center. When recommendations from the various sources differed, we summarized each of the recommendations.

Recommendations are geared towards the healthy population. Adults who have symptoms or known diseases will require a different approach. Recommendations may change over time as more data become available.

Topics included in Adult Preventive Health Care Guidelines:

- **Screening Tests** (Summarized in Table 1)
- **Screening Tests NOT Recommended**
- **Adult Immunizations** (Summarized in Table 1)
- **Counseling**
 - Alcohol and other drugs
 - Advance directives
 - Dental hygiene
 - Depression
 - Estrogen: postmenopausal use
 - Family planning
 - Family violence
 - Healthy diet
 - Physical activity
 - Safety
 - STD/HIV prevention
 - Suicide
 - Tobacco cessation

Table 1: Summary of Screening Tests and Adult Immunizations:
Adult Preventive Health Care Guidelines (Age 25 years and older)

Screening Test	Recommendation
Blood Pressure	Every 2 years.
Cholesterol	Total cholesterol for men ages 35-65 and women ages 45-65; appropriate interval not determined.*
Clinical Breast Exam / Mammography	Clinical Breast Exam Age 20-29: every 1-3 years. Age 30+: every year. Mammography Age 40-49: Every 1-2 years. Age 50-69: Every year. Age 70+: Re-evaluate with regard to other co-morbid conditions.
Colorectal Cancer	Sigmoidoscopy every 3-5 years OR fecal occult blood every year beginning age 50.
Hearing	Screen older adults for hearing impairment by periodically asking them about their hearing; counsel about hearing aids.
Height/weight	Measure height at least once in adulthood; measure weight periodically.
Pap Test	Pap test every 1-3 years beginning age 18 or at onset of sexual activity; some recommend stopping after age 65 if smears have been normal.
Tuberculosis	Place PPD if required or recommended by job or other activity; otherwise, PPD not indicated in absence of symptoms.
Vision/Glaucoma	Adults over age 50 should be seen by an optometrist or ophthalmologist for vision and glaucoma screening every 3 years.
Adult Immunizations	
Td	Every 10 years.
Influenza	Yearly for age 65+ and those with chronic medical problems.**
Measles	College students should have evidence of <u>two doses</u> of MMR or evidence of immunity to measles at time of entry.
Pneumococcal	Every 6 years for age 65+ and for those with chronic medical conditions.**
Hepatitis A	For high risk groups.**
Hepatitis B	For high risk groups.**
* National Cholesterol Education Program and Alaska Native Medical Center have differing recommendations. **See Adult Preventive Health Care Guidelines for details	

For more information

To obtain a copy of the Alaska Division of Public Health publication [Adult Preventive Health Care Guidelines](#) contact Julie Feero in the Section of Epidemiology at 269-8043. Copies of the Guide to Clinical Preventive Services, 2nd edition can be ordered through Williams and Wilkins, 351 West Camden Street, Baltimore, MD 21201-2436, telephone 1-800-638-0672.

References:

1. Put Prevention into Practice: Clinician's Handbook of Preventive Services. Office of Disease Prevention and Health Promotion, PHS, USDHHS. US Government Printing Office, Washington, DC, 1994.
2. Preventive Services Task Force: Guide to Clinical Preventive Services, 2nd ed. Baltimore: Williams and Wilkins, 1996.