

PRIORITIES FOR AMERICA'S HEALTH: CAPITALIZING ON LIFE-SAVING, COST-EFFECTIVE PREVENTIVE SERVICES

"Priorities for America's Health: Capitalizing on Life-Saving, Cost-Effective Preventive Services" identifies 25 recommended preventive services based on their health benefits and cost-effectiveness. These rankings are a unique tool to help people make wise choices about which preventive health services to request and offer.

PARTNERSHIP FOR PREVENTION'S RANKINGS OF CLINICAL PREVENTIVE SERVICES

PREVENTIVE SERVICE	HEALTH IMPACT	VALUE/COST EFFECTIVENESS	TOTAL	WHAT YOU SHOULD KNOW
Discussing daily aspirin use with men 40+, wm 50+ and others at increased risk for heart disease for the prevention of CV events	5	5	10	Few adults are using aspirin consistently and need guidance from a physician to start and maintain an aspirin regimen if doctors discussed aspirin use with all adults in this population, this service would save 80,000 lives annually.
Childhood immunizations	5	5	10	The childhood immunization series is highly effective and cost saving. Immunization is the single most important way parents can protect their children against serious diseases.
Screening adults for tobacco use, provide brief counseling to help them quit	5	5	10	20% of adults smoke and 1/3 of smokers will die prematurely as a result. Providing brief counseling, and offering patients therapies (including over-the-counter cessation aids) is one of the most important and cost effective preventive services. If this service were offered to all smokers, it could save \$3 billion in medical care costs annually.
Colorectal cancer screening among adults 50+ (FOBT, sigmoidoscopy or colonoscopy)	4	4	8	If all people 50+ were periodically screened for colorectal cancer, 19,000 deaths could be prevented annually. Currently only about 1/3 of adults 50+ are up to date on screening.
Measuring blood pressure in all adults and treat with anti-hypertensive medication to prevent CVD	5	3	8	30% of Americans age 20+ have hypertension; nearly 50% develop hypertension before age 65. Hypertension and its complications result in more than \$100 billion annually in medical costs. Only 1 in 3 hypertension cases is controlled. The maximum benefit of screening is gained only through long-term use of therapies.
Influenza immunization for adults age 50+	4	4	8	The flu is more than a bad cold; it may also result in hospitalization or death. Offering this service to all adults starting at age 50 could prevent 3 million cases of influenza, 200,000 hospitalizations, and 40,000 premature deaths in this group's lifetime. Influenza vaccination in the 65+ population saves \$17 per person vaccinated.



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Pneumococcal immunization for adults age 65+	3	5	8	This vaccine prevents a bacterial form of pneumonia that causes hospitalization and death. One dose of the pneumococcal immunization is effective for at least 10 years, yet 45% of all adults 65+ have not received it. This vaccine could save \$50 million dollars annually if offered to all adults age 65+.
Screening adults about alcohol use and provide brief counseling with follow-up	4	4	8	Many people are unaware that their drinking habit is excessive and will alter their behavior if their doctor points it out. 15% of adults report alcohol use consistent with binge drinking. If all adults were counseled periodically, 6,000 deaths and 400,000 injuries would be prevented annually.
Vision screening among adults age 65+	3	5	8	About 25% of older people wear inappropriate visual correction. Proper vision screening and correction can reduce hip fractures from falls and improve quality of life.
Cervical cancer screening (Pap smears) among women who have been sexually active	4	3	7	Pap smear screening is highly effective and has been credited with a 30-year decline in cervical cancer mortality. Cervical cancer is preventable and curable if detected early.
Cholesterol screening among men 35+, women 45+ if they have other risk factors for coronary heart disease (CHD) and treat them with lipid-lowering drugs	5	2	7	21% of adults age 35+ have high cholesterol with most of these adults developing high cholesterol before age 55. One out of 4 adults who don't control their high cholesterol will have a cholesterolattributable heart attack. One out of 3 will die of cholesterol-attributable CHD. Long-term use of therapies is necessary to achieve maximum benefits of screening.
Breast cancer screening among women 50+ and discuss screening with women 40-49 to choose an age to initiate screening	4	2	6	Mammography prevents 12,000 deaths from breast cancer annually. About 1 in 4 women over age 40 is not getting screened at recommended intervals.
Chlamydia screening among sexually active women under age 25	2	4	6	Chlamydia is the most common bacterial STD (sexually transmitted disease) in the U.S. with 3 million new cases annually. If all women under 25 were screened periodically, 60,000 cases of pelvic inflammatory disease and 7,500 cases of infertility would be prevented annually.
Counseling adolescent and adult women to use calcium supplements to prevent fractures	3	3	6	Lifelong use of calcium prevents hip fractures. Few women use calcium supplements consistently and need regular physician guidance to encourage lifelong use.



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Vision screening in children less than age 5	2	4	6	About 3% of preschoolers have visual impairments, a portion of which would remain undetected at school age without screening. Screening and treatment are inexpensive and improve quality of life.
Folic acid chemoprophylaxis	2	3	5	If a woman has enough folic acid in her body before she is pregnant, it can help prevent birth defects of her baby's brain and spine. 3,000 pregnancies are affected by neural tube defects in the U.S. annually.
Obesity screening	3	2	5	The prevalence of obesity among adults in the U.S. has increased from 13% to 27% over the last 40 years. Obesity is associated with increased risk of type 2 diabetes, coronary heart disease, stoke, hypertension, sleep apnea, among other conditions.
Depression screening	3	1	4	2-3% of people report depression in the last month. This service is limited to adults in clinical practices that have systems in place to assure accurate diagnosis, treatment and follow-up.
Hearing screening	2	2	4	25% to 30% of older adults have undetected hearing loss. Screening can reduce the prevalence of undetected hearing by 10% (3 percentage points).
Injury prevention counseling	1	3	4	Each year, hundreds of children age 4 and younger die from preventable injuries: about 500 die in motor vehicle crashes, 400 die as a result of accidental drowning, and 200 die as a result of exposure to smoke and fire.
Osteoporosis screening	2	2	4	Two million osteoporotic fractures occur each year among women ages 65 and older. Of these, 325,000 are hip fractures. Two percent of osteoporotic fractures could be prevented by screening.
Cholesterol screening—high risk	1	1	2	One out of 4 adults who do not control their high cholesterol will have a cholesterol-attributable heart attack. One out of 3 will die of cholesterol-attributable coronary heart disease. Long-term use of therapies is necessary to achieve maximum benefits of screening.
Diabetes screening	1	1	2	About 8% of people age 20+ or nearly 17 million people have either diagnosed or undiagnosed diabetes. The scores for this service reflect the marginal benefit of achieving lower blood pressure targets in people with diabetes than the conventional standard for all patients.
Diet counseling	1	1	2	About 7% of the lifetime risk of cardiovascular disease could be reduced by screening for dietary habits and offering intensive intervention with long term maintenance program for those willing to participate.
Tetanus-diphtheria booster	1	1	2	There are many fewer cases of tetanus and diphtheria due to widespread vaccination. Vaccination is the best way to protect against these serious diseases.