

## Screening Older Adults for Eyesight Problems: U.S. Preventive Services Task Force Recommendation

*Summaries for Patients* are a service provided by *Annals* to help patients better understand the complicated and often mystifying language of modern medicine.

The full reports are titled “Screening for Impaired Visual Acuity in Older Adults: U.S. Preventive Services Task Force Recommendation Statement” and “Screening Older Adults for Impaired Visual Acuity: A Review of the Evidence for the U.S. Preventive Services Task Force.” They are in the 7 July 2009 issue of *Annals of Internal Medicine* (volume 151, pages 37-43 and pages 44-58). The first report was written by the U.S. Preventive Services Task Force; the second report was written by R. Chou, T. Dana, and C. Bougatsos.

### 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?

Common causes of eyesight problems in persons 65 years of age or older include uncorrected refractive errors, cataracts, and age-related macular degeneration (AMD). Refractive errors are due to changes in the shape of the eye and its lens and can usually be corrected with proper eyeglasses or contact lenses. Cataracts cloud the lens of the eye and lead to loss of vision. Cataract surgery removes the cloudy lens and replaces it with an artificial lens. Age-related macular degeneration is damage to the macula, the area of the eye that is responsible for detailed vision. Some forms of macular degeneration can be treated with lasers or injections; other forms are not treatable. A visual acuity test, such as the Snellen eye chart, identifies refractive errors, but it does not reliably detect cataracts or AMD. To detect cataracts and AMD, doctors use a special instrument to look into the eye (funduscopy examination). In 1996, the USPSTF recommended routine vision screening with the Snellen eye chart test for persons 65 years of age or older. At that time, the USPSTF decided that there was not enough evidence to recommend routine funduscopy examination for older adults who did not report problems with their eyesight.

### How did the USPSTF develop these recommendations?

The authors reviewed studies published since the 1996 recommendation to look for new information about the risks and benefits of screening adults 65 years of age or older for eyesight problems.

### What did the authors find?

About 9 of every 100 adults older than 60 years have vision worse than 20/50, even with corrective lenses. A visual acuity test identifies refractive errors but does not accurately identify AMD. The value of visual acuity testing in diagnosing cataracts is unclear. Although there are treatments to improve some vision problems, little evidence is available on the effect of screening and treatment on quality of life, overall functioning, and vision-related functioning in older adults who do not report problems with their eyesight. At the same time, there is no evidence of serious harms from screening older adults for vision problems.

### What does the USPSTF suggest that doctors and patients do?

The USPSTF concludes that available studies do not provide enough information to recommend for or against screening older adults for vision problems. Patients and their doctors should base the decision to screen on patient preferences and the availability of visual acuity tests and funduscopy examination.

### What are the cautions related to these recommendations?

These recommendations apply only to screening, which means testing for eyesight problems in older adults who do not report trouble seeing. The recommendations may change if new studies become available.

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