

Embargo Lifted on IOM Report on Preventive Health Care Services for Women

The embargo is being lifted on **Clinical Preventive Services for Women: Closing the Gaps**, a new report from the Institute of Medicine. The report is now available for immediate release; it will be discussed at a telephone news conference beginning at 4:30 p.m. EDT today. Reporters can obtain a copy of the report and dial-in information for the telephone news conference by contacting the National Academies' Office of News and Public Information; tel. 202-334-2138 or e-mail [news@nas.edu](mailto:news@nas.edu). The report still will be presented as well at a public briefing starting at 10 a.m. EDT tomorrow, Wednesday, July 20, in the First Amendment Room of the National Press Club, 529 14th St., N.W., Washington, D.C. Those who cannot attend may participate through a live audio webcast at [www.nationalacademies.org](http://www.nationalacademies.org).

Date: July 19, 2011

### **FOR IMMEDIATE RELEASE**

#### **IOM REPORT RECOMMENDS EIGHT ADDITIONAL PREVENTIVE HEALTH SERVICES TO PROMOTE WOMEN'S HEALTH**

WASHINGTON — A new report from the Institute of Medicine (IOM) recommends that eight preventive health services for women be added to the services that health plans will cover at no cost to patients under the Patient Protection and Affordable Care Act of 2010 (ACA). The ACA requires plans to cover the services listed in the U.S. Department of Health and Human Services' (HHS) comprehensive list of preventive services. At the agency's request, an IOM committee identified critical gaps in preventive services for women as well as measures that will further ensure women's health and well-being.

The recommendations are based on a review of existing guidelines and an assessment of the evidence on the effectiveness of different preventive services. The committee identified diseases and conditions that are more common or more serious in women than in men or for which women experience different outcomes or benefit from different interventions. The report suggests the following additional services:

- screening for gestational diabetes
- human papillomavirus (HPV) testing as part of cervical cancer screening for women over 30
- counseling on sexually transmitted infections
- counseling and screening for HIV
- contraceptive methods and counseling to prevent unintended pregnancies
- lactation counseling and equipment to promote breast-feeding
- screening and counseling to detect and prevent interpersonal and domestic violence
- yearly well-woman preventive care visits to obtain recommended preventive services

"This report provides a road map for improving the health and well-being of women," said committee chair Linda Rosenstock, dean, School of Public Health, University of California,

Los Angeles. "The eight services we identified are necessary to support women's optimal health and well-being. Each recommendation stands on a foundation of evidence supporting its effectiveness."

Deaths from cervical cancer could be reduced by adding DNA testing for HPV, the virus that can cause this form of cancer, to the Pap smears that are part of the current guidelines for women's preventive services, the report concludes. Cervical cancer can be prevented through vaccination, screening, and treatment of precancerous lesions and HPV testing increases the chances of identifying women at risk.

Although lactation counseling is already part of the HHS guidelines, the report recommends comprehensive support that includes coverage of breast pump rental fees as well as counseling by trained providers to help women initiate and continue breast-feeding.

Evidence links breast-feeding to lower risk for breast and ovarian cancers; it also reduces children's risk for sudden infant death syndrome, asthma, gastrointestinal infections, respiratory diseases, leukemia, ear infections, obesity, and Type 2 diabetes.

HHS should consider screening for gestational diabetes in pregnant women between 24 and 28 weeks of gestation and at the first prenatal visit for pregnant women identified to be at high risk for diabetes. The United States has the highest rates of gestational diabetes in the world; it complicates as many as 10 percent of U.S. pregnancies each year. Women with gestational diabetes face a 7.5-fold increased risk for the development of Type 2 diabetes after delivery and are more likely to have infants that require delivery by cesarean section and have health problems after birth.

To reduce the rate of unintended pregnancies, which accounted for almost half of pregnancies in the U.S. in 2001, the report urges that HHS consider adding the full range of Food and Drug Administration-approved contraceptive methods as well as patient education and counseling for all women with reproductive capacity. Women with unintended pregnancies are more likely to receive delayed or no prenatal care and to smoke, consume alcohol, be depressed, and experience domestic violence during pregnancy. Unintended pregnancy also increases the risk of babies being born preterm or at a low birth weight, both of which raise their chances of health and developmental problems.

HHS's guidelines on preventive health services for women will need to be updated routinely in light of new science. As part of this process, HHS should establish a commission to recommend which services health plans should cover, the report says. The commission should be separate from the groups that assess evidence of health services' effectiveness, and it should consider cost-effectiveness analyses, evidence reviews, and other information to make coverage recommendations.

The report addresses concerns that the current guidelines on preventive services contain gaps when it comes to women's needs. Women suffer disproportionate rates of chronic disease and disability from some conditions. Because they need to use more preventive

care than men on average due to reproductive and gender-specific conditions, they face higher out-of-pocket costs, the report notes.

The study was sponsored by the U.S. Department of Health and Human Services. Established in 1970 under the charter of the National Academy of Sciences, the Institute of Medicine provides independent, objective, evidence-based advice to policymakers, health professionals, the private sector, and the public. The National Academy of Sciences, National Academy of Engineering, Institute of Medicine, and National Research Council make up the National Academies. For more information, visit <http://national-academies.org> or <http://iom.edu>. A committee roster follows.

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Additional resources:

Report in Brief  
Project Website

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Pre-publication copies of *Clinical Preventive Services for Women: Closing the Gaps* are available from the National Academies Press; tel. 202-334-3313 or 1-800-624-6242 or on the Internet at <http://www.nap.edu>. Reporters may obtain a copy from the Office of News and Public Information (contacts listed above).

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