



## **Council on Aspirin for Health and Prevention**

### **Comments on the U.S. Preventive Services Task Force 2016 Aspirin Recommendation**

The updated recommendations differ from those produced previously in terms of methodology and conclusions. Inclusion of cancer prevention benefits is new and substantiates that this benefit is important when starting aspirin. By necessity the guidelines emphasize initiation of aspirin because of the significant lag time (10 years) for cancer prevention benefits after aspirin is started. The 2015 recommendations include new clinical trial evidence where aspirin was observed to have limited benefits for cardiovascular disease prevention. They also incorporate several favorable, long-term follow-up studies for prevention of colorectal cancer. While past studies also suggest that aspirin prevents other forms of cancer, this evidence was judged to be less definitive than needed to merit inclusion of these outcomes.

The conclusions based on these changes in methodology are controversial, particularly the limited fraction of the population where aspirin should be considered and the large population where no specific guidance is provided. The previous recommendation targeted men ages 45-79 years and women 55-79 years with higher risk of cardiovascular disease. The updated focus on ages 50-69 narrows the recommendations considerably for men and shifts towards younger ages for a smaller population of women. The narrow age range covered will no doubt leave clinicians and consumers disappointed by the limited practical utility of the new recommendations. In addition, the new recommendations use a uniform threshold of 10% for the 10 year risk of cardiovascular disease events. The previous guidance suggested lower thresholds for women and at younger ages. The new guidance concerns only aspirin initiation, not continuation. Unfortunately, this limitation is not emphasized and may create confusion among consumers and providers.

#### **Practical Advice from the Council on Aspirin for Health and Prevention:**

- Initiate aspirin in men and women 50-69 who are at higher risk of cardiovascular disease and low risk for excessive bleeding.
- Consider starting aspirin for those younger than 50 years who have very high risk of cardiovascular disease.
- Starting aspirin may be reasonable in some 70-79 year-olds who prefer this option and have high cardiovascular disease risk.
- The new recommendations support continuing aspirin past the age of 70 years if it was started at a younger age.
- Start or continue aspirin at a daily dose of 81 mg.