

IN THE UNITED STATES

The Importance of Screening for Lung Cancer

Lung cancer is the #1 cause of cancer deaths. Screening may result in detecting lung cancer earlier¹

The Prevalence of Lung Cancer in the United States

1 in 5 of all cancer deaths are from lung cancer, making it the leading cause of cancer death among men and women in the United States¹.

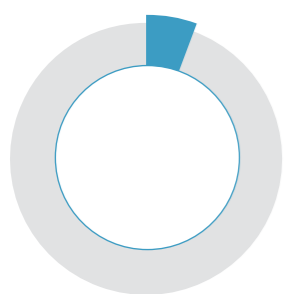
In 2023, the American Cancer Society's estimates for lung cancer in the United States are¹:

- **About 238,340** new cases of lung cancer (117,550 men and 120,790 women)
- **About 127,070** deaths from lung cancer (67,160 men and 59,910 women)

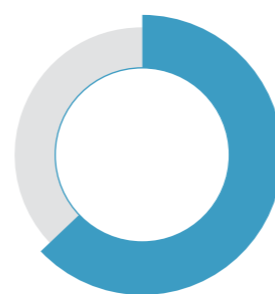
THE IMPORTANCE OF SCREENING FOR LUNG CANCER⁴

Patients who are at a high-risk for lung cancer and are screened with a low-dose computed tomography (LDCT) may be 20% less likely to die from lung cancer when compared with those patients who did not undergo screening.^{2,3,5}

Symptoms of lung cancer usually do not appear until the disease is at an advanced stage.⁶ This makes screening of patients who are at a high risk a valuable tool.⁵




5.8% of eligible patients who are at a high-risk for lung cancer received LDCT screening in 2019⁵



compared with **65%** of average-risk breast cancer patients in 2019⁶


The Unequal Impact of Lung Cancer in the United States

- Black men have a 15% higher mortality rate than White men (2015-2019)⁷
- 5-year relative survival rate is slightly lower for Black people at 20% vs 22% for White men and women
- Even when diagnosed at an early stage, Black people are less likely than White people to receive surgery—the most effective treatment for survival⁷

 Black men are diagnosed with lung cancer at a rate 12% higher than that for White men (2014-2018).⁷

 Hispanic people are slightly less likely to be diagnosed with localized disease⁸:

- 22% in Hispanic patients
- 25% in non-Hispanic White patients

 In 2021, the U.S. Preventive Services Task Force (USPSTF) recommendations were revised, which has expanded the eligibility for screening. Now more women and Black people are eligible.⁹

Determine Eligibility for Screening

PATIENTS AT A HIGH-RISK FOR LUNG CANCER

The U.S. Preventive Services Task Force (USPSTF) recommends annual screening with LDCT for adults who meet all 3 of the following criteria¹⁰:



Are **50 to 80** years of age

AND



Currently smoke or have quit in the past 15 years

AND



Have at least a **20-pack year history** of smoking*

*For example, patients who smoked 1 pack a day for 20 years or 2 packs a day for 10 years.¹⁰

Determine Eligibility for Screening (*continued*)

HOW TO CALCULATE PACK YEARS*†

$$\begin{array}{ccc} \boxed{2} & \times & \boxed{10} = \boxed{20} \\ \text{Average number} & & \text{Number} & & \text{Pack-years} \\ \text{of packs smoked per day} & & \text{of years smoked} & & \end{array}$$

*20 cigarettes = 1 pack.

†Number of packs of cigarettes smoked per day x the number of years the person has smoked.¹⁰

Encourage Your Eligible Patients to Get Screened for Lung Cancer¹⁰

1. DISCUSS IF THIS IS RIGHT FOR YOUR PATIENT

- Talk through your patient's health history to determine eligibility for lung cancer screening with LDCT¹¹
- Encourage eligible patients to get screened for lung cancer with LDCT every year⁹

Earlier detection of lung cancer is vital.¹³ Once symptoms develop, the cancer may have reached a more advanced stage.⁶

2. DISCUSS ALL RELATED ISSUES WITH PATIENT

- Describe the benefits and risks of cancer screening¹¹
- Educate on the importance of quitting smoking^{9,11}
- Remind eligible patients to continue regular health care, including getting an annual LDCT scan^{9,11}

3. AGREE ON NEXT STEPS¹²

- If the patient agrees to the screening, document the discussion and decision in the patient's medical record and provide a written order for the LDCT scan
- If the patient declines, document the discussion and decision in the patient's medical record
- Schedule a follow-up visit if the patient is unsure

Support Shared Decision-Making With Your Patients¹⁴

Be sure to involve and engage your patient in any decisions regarding screening.¹⁴ Consider if the benefits may outweigh the potential risks for screening your patient for lung cancer.¹⁰ Here are a few important points to discuss¹⁴:

BENEFITS OF SCREENING^{11,16}

- Screening may lead to **an earlier diagnosis**

POTENTIAL RISKS OF SCREENING¹⁵

- **False-positive readings**
- **Overdiagnosis**
- **Cumulative radiation exposure**

Shared decision-making may be the best approach when deciding on screening^{14,17}

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