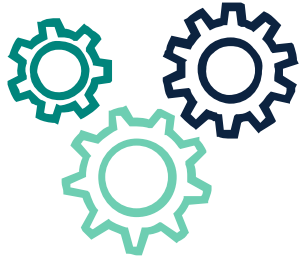




Lung Cancer Care: Essentials for Screenings in High-Risk Patients

Objectives



Understand the benefits of annual lung cancer screenings for high-risk patients^{1,2}



Emphasize the importance of aligning to the updated US Preventive Services Task Force recommendations for lung cancer screening eligibility³



Identify resources that you can provide to your organization to educate them on the importance of annual screening for lung cancer in high-risk patients^{1,2}

1. American Lung Association. Last revised October 21, 2022. Accessed November 15, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/resource-library/lung-cancer-fact-sheet> 2. National Cancer Institute. Cancer Stat Facts: Lung and Bronchus Cancer. Accessed January 18, 2023. <https://seer.cancer.gov/statfacts/html/lungb.html> 3. US Preventive Services Task Force issues final recommendation statement on screening for lung cancer. US Preventive Services Task Force Bulletin. Published March 9, 2021. Accessed January 12, 2023. https://www.uspreventiveservicestaskforce.org/uspstf/sites/default/files/file/supporting_documents/lung-cancer-newsbulletin.pdf

The Impact of Lung Cancer

Approximately 1 in 5 of All Cancer Deaths Are Attributed to Lung Cancer, Making It the Leading Cause of Cancer Deaths Among Men and Women in the United States¹

The American Cancer Society's estimates for lung cancer in the United States for 2023 are²:

238,340

new cases of
lung cancer
(117,550 men
and 120,790
women)



127,070

deaths from
lung cancer
(67,160 men
and 59,910
women)

1. American Cancer Society. Last revised January 12, 2023. Accessed January 20, 2023. <https://www.cancer.org/cancer/lung-cancer/about/key-statistics.html> 2. American Cancer Society. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2021/cancer-facts-and-figures-2023.pdf>

US Preventive Services Task Force Recommendations for Lung Cancer Screening¹

The US Preventive Services Task Force issued a recommendation statement for annual lung cancer screenings with low-dose computed tomography in 2021¹:

The recommendations have been updated to adults who meet all 3 of the following criteria:

- ✓ Age between 50 and 80 years old
- ✓ Currently smoke cigarettes, or have quit within the past 15 years^a
- ✓ A smoking history of at least 20 pack-years^b

^aScreening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability to have lung surgery.²

^bA pack-year is the number of packs of cigarettes a person smoked per day multiplied by the number of years they have smoked.³

Based on the updated US Preventive Services Task Force recommendations, up to 14.5 million individuals now meet the high-risk criteria for annual lung cancer screening.⁴



1. US Preventive Services Task Force issues final recommendation statement on screening for lung cancer. US Preventive Services Task Force Bulletin. Published March 9, 2021. Accessed January 12, 2023. https://www.uspreventiveservicestaskforce.org/uspstf/sites/default/files/file/supporting_documents/lung-cancer-newsbulletin.pdf 2. US Preventive Services Task Force (USPSTF). Screening for lung cancer. US Preventive Services Task Force Recommendation Statement. JAMA. 2021;325(10):962-970. 3. National Cancer Institute. Pack year. Dictionary of Cancer terms. Accessed January 19, 2023. <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/pack-year> 4. Nelson R. March 9, 2021. Accessed October 28, 2022. <https://www.medscape.com/viewarticle/947102>

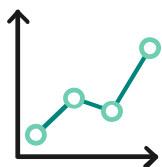
The Unequal Impact of Lung Cancer in the United States

Lung cancer is the leading cause of cancer death among men and women¹

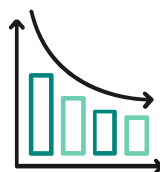
Black men have a **15% higher** mortality rate from lung cancer than White men

The 5-year overall survival rate is slightly **lower** for Black men and women overall at **20%** vs White people at **22%**

Additional studies demonstrate that even when lung cancer is diagnosed at the early stage, Black people are less likely than White people to receive surgery, which is the most effective treatment for survival²



Black men are diagnosed with lung cancer at a rate 12% higher than that for White men²



Hispanic patients are less likely to be diagnosed with localized disease at 22% compared to 25% in non-Hispanic White people



The 2021 updated US Preventive Services Task Force recommendations were revised to capture additional people in the high-risk population. This has expanded eligibility for more people, including women and Black people⁴

1. American Cancer Society. Last revised January 12, 2023. Accessed January 20, 2023. <https://www.cancer.org/cancer/lung-cancer/about/key-statistics.htm>

2. American Cancer Society. Published 2022. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-facts-and-figures-for-african-americans/2022-2024-cff-aa.pdf>

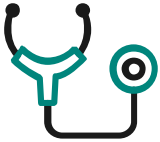
3. American Cancer Society. Published 2021. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-facts-and-figures-for-hispanics-and-latino-hispanic-latino-2021-2023-cancer-facts-and-figures.pdf>

4. US Preventive Services Task Force issues final recommendation statement on screening for lung cancer. US Preventive Services Task Force Bulletin. Published March 9, 2021. Accessed January 12, 2023. https://www.uspreventiveservicestaskforce.org/uspstf/sites/default/files/file/supporting_documents/lung-cancer-newsbulletin.pdf

The Importance of Early Screening/Detection^{1,2}



When cancer is found only in the part of the body where it started, it is considered localized; if it has spread to a different part of the body, it is considered regional or distant²



In the United States, data from 2012-2018 revealed that only **19% of people diagnosed with lung cancer had early-stage disease**, while **77%** of people diagnosed had either regional or distant disease²



Lung cancer is most commonly detected when symptoms have developed, which usually do not appear until the cancer is advanced.^{2,3}

Encourage patients at high risk for lung cancer to talk to their health care provider even if they do not currently have any symptoms.⁴

1. American Lung Association. Last revised October 21, 2022. Accessed November 15, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/resource-library/lung-cancer-fact-sheet> 2. National Cancer Institute. Accessed January 18, 2023. <https://seer.cancer.gov/statfacts/html/lungb.html> 3. American Cancer Society. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2023/2023-cancer-facts-and-figures.pdf> 4. US Preventive Services Task Force issues final recommendation statement on screening for lung cancer. US Preventive Services Task Force Bulletin. Published March 9, 2021. Accessed January 12, 2023. https://www.uspreventiveservicestaskforce.org/uspstf/sites/default/files/file/supporting_documents/lung-cancer-newsbulletin.pdf

Common Risk Factors for Lung Cancer

While anyone can get lung cancer, a person's risk increases when they meet ≥ 1 of the following criteria^{1,a}:



Currently smoke or have smoked in the past¹



Have exposure to secondhand smoke¹



Have a family history of lung cancer, such as a parent or sibling¹

^aThe above list does not include all risk factors for lung cancer.

Most lung cancers do not cause any symptoms until they have spread, but some people with early lung cancer do have symptoms.² It is critical for individuals eligible under the updated US Preventive Services Task Force recommendations who are at a high risk but without symptoms to be screened annually, as lung cancer diagnosed at an earlier stage is more likely to be successfully treated.³

1. American Cancer Society. Last revised January 12, 2023. Accessed January 20, 2023. <https://www.cancer.org/cancer/lung-cancer/causes-risks-prevention/risk-factors.html>

2. American Cancer Society. Last revised October 1, 2019. Accessed January 18, 2023. <https://www.cancer.org/cancer/lung-cancer/detection-diagnosis-staging/signs-symptoms.html>

3. American Lung Association. Last revised October 21, 2022. Accessed November 15, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/resource-library/lung-cancer-fact-sheet>

According to the American Lung Association, Only 5.8% of Americans at a High Risk for Lung Cancer Were Screened in 2021¹

The low rate of screening may be due to:



People being unaware of the potential benefits of yearly lung cancer screenings²⁻⁴



Concern that this preventative care may not be covered by insurance⁵



Fear or anxiety from the lung cancer screening process⁶

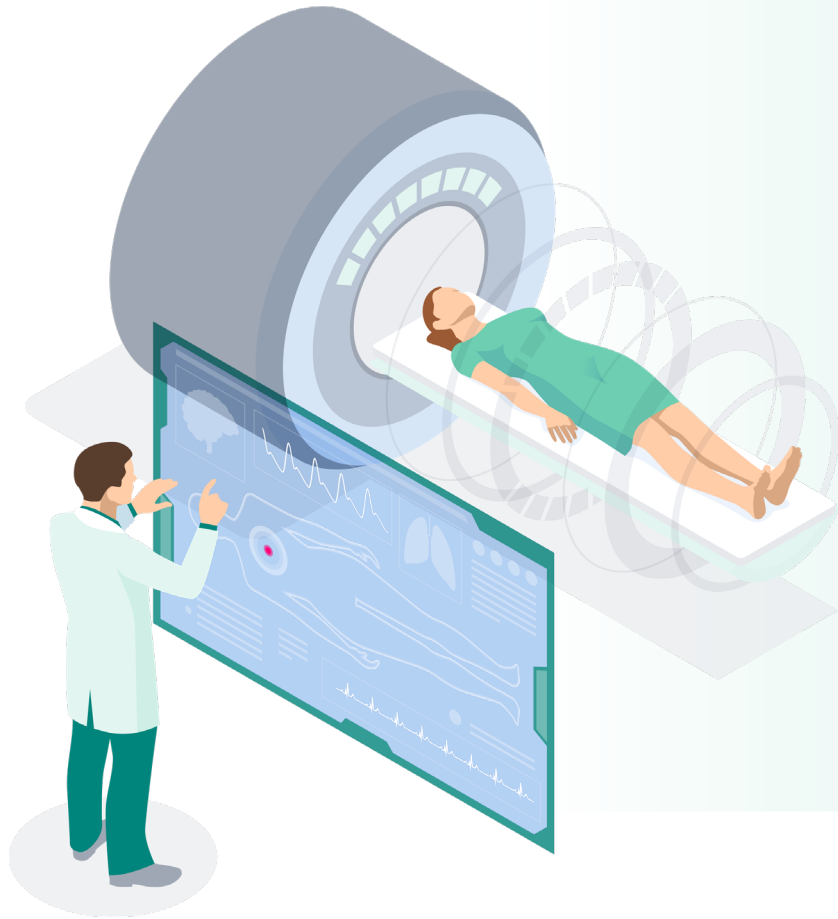


Health care providers not being aware of the updated US Preventive Services Task Force recommendations for lung cancer screening⁴

1. American Lung Association. Updated November 4, 2022. Accessed November 15, 2022. <https://www.lung.org/research/state-of-lung-cancer/key-findings> 2. American Lung Association. Last revised October 21, 2022. Accessed November 15, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/resource-library/lung-cancer-fact-sheet> 3. National Cancer Institute. Cancer Stat Facts: Lung and Bronchus Cancer. Accessed January 18, 2023. <https://seer.cancer.gov/statfacts/html/lungb.html> 4. Coughlin JM, Zang Y, Terranella S, et al. Understanding barriers to lung cancer screening in primary care. *J Thorac Dis.* 2020;12(5):2536-2544. 5. Wang GX, Baggett TP, Pandharipande PV, et al. Barriers to lung cancer screening engagement from the patient and provider perspective. *Radiology.* 2019;290(2):278-287. 6. Patel J. What is scanxiety? How people with cancer and survivors can cope. Cancer.Net. Published October 28, 2021. Accessed February 9, 2023. <https://www.cancer.net/blog/2021-10/what-scanxiety-how-people-with-cancer-and-survivors> cancope#:~:text=For%20people%20who%20have%20had,call%20these%20feelings%20%E2%80%9Cscanxiety.%E2%80%9D

Screening for Lung Cancer

Understanding Lung Cancer Screenings



A low-dose computed tomography (LDCT) scan is recommended as a screening test for patients with a high risk of developing lung cancer based on age and smoking history.¹

Compared with single-view chest X-ray screening, screening by LDCT scanning is associated with a **20% lower risk of death** from lung cancer for those at risk.²

These screenings are easy for patients, taking less than 10 minutes to complete and not requiring any medications or needles to perform.²

1. National Cancer Institute. Low-dose CT scan. Dictionary of cancer terms. Access June 21, 2022. <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/low-dose-ct-scan>

2. The University of Kansas Cancer Center. Low-dose CT scan FAQ. Accessed June 13, 2022. <https://www.kucancercenter.org/cancer/cancer-types/lung-cancer/lung-cancer-diagnosis-screening/low-dose-ct-faq>

Value of Preventative Care

Over the past decade, studies contracted by the Lung Cancer Alliance have demonstrated the following¹:

Low-dose CT scans for lung cancer have compared favorably to other established screening exams in terms of cost-effectiveness.¹

In a 2012 study, lung cancer screening was found to be more cost effective per life-year saved than colorectal, breast, and cervical cancer screening, all of which are recommended by the US Preventive Services Task Force.¹

In 2014, a study concluded **that if 50% of the Medicare population at a high risk for lung cancer had been screened, an average of <\$19,000 per life-year would have been saved**, and approximately 358,134 people with current or previous lung cancer would have been alive at the end of the study in 2014.¹



In 2015, the National Institutes of Health estimated²:

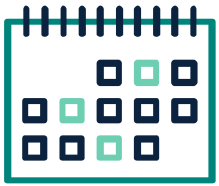
A **productivity loss of \$36.1 billion** caused by premature lung cancer death



1. GO2 Foundation. Accessed November 15, 2022. <https://go2foundation.org/for-professionals/cost-effectiveness-of-lung-cancer-screening/> 2. America Lung Association. Accessed October 31, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/resource-library/lung-cancer-fact-sheet>

Opportunities for Patient Support

How to Effectively Embrace Awareness and a Proactive Approach to Health for Patients Who Are Eligible Under the US Preventive Services Task Force Recommendations



Address the importance of screening for lung cancer in patients who are eligible under the updated US Preventive Services Task Force recommendations, as lung cancer diagnosed earlier may be more successfully treated^{1,2}



Emphasize the importance of yearly screenings³ and encourage confirmation of insurance coverage for yearly screenings



Increase awareness of educational resources to demonstrate the benefits and ease of lung cancer screenings, which are quick to complete and do not involve needles or medication⁴



Stress the importance of supporting patients when encouraging screening for lung cancer, which can be a stressful, overwhelming, and frightening experience^{5,6}

1. American Lung Association. Last revised October 21, 2022. Accessed November 15, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/resource-library/lung-cancer-fact-sheet> 2. National Cancer Institute. Cancer Stat Facts: Lung and Bronchus Cancer. Accessed January 18, 2023. <https://seer.cancer.gov/statfacts/html/lungb.html> 3. US Preventive Services Task Force issues final recommendation statement on screening for lung cancer. US Preventive Services Task Force Bulletin. Published March 9, 2021. Accessed January 12, 2023. https://www.uspreventiveservices.org/uspstf/sites/default/files/file/supporting_documents/lung-cancer-newsbulletin.pdf 4. The University of Kansas Cancer Center. Low-dose CT scan FAQ. Accessed January 20, 2023. <https://www.kucancercenter.org/cancer/cancer-types/lung-cancer/lung-cancer-diagnosis-screening/low-dose-ct-faq> 5. Wang GX, Baggett TP, Pandharipande PV, et al. Barriers to lung cancer screening engagement from the patient and provider perspective. *Radiology*. 2019;290(2):278-287. 6. Patel J. What is scanxiety? How people with cancer and survivors can cope. Cancer.Net. Published October 28, 2021. Accessed February 9, 2023. <https://www.cancer.net/blog/2021-10/what-scanxiety-how-people-with-cancer-and-survivors-cancope#:~:text=For%20people%20who%20have%20had,call%20these%20feelings%20%E2%80%9Cscanxiety.%E2%80%9D>

Encourage People to Continue Their Regular Health Care Visits and Screenings, for Appropriate Patients, for Lung Cancer

Consider:

- Sending communications to high-risk patients who are now eligible for lung cancer screenings under the updated US Preventive Services Task Force recommendations¹
- Adopting or continuing to adhere to the latest US Preventive Services Task Force lung cancer screening guidelines¹
- Educating patients on the benefits and ease of screening²
- Encouraging yearly screenings for patients who are eligible¹
- Adding an alert to your EHR system to help identify patients who may be eligible for lung cancer screenings

Additional resources and information can be found at:



<https://www.alcsi.org/>



lungcancerresearchfoundation.org



EHR=electronic health record.

1. US Preventive Services Task Force issues final recommendation statement on screening for lung cancer. US Preventive Services Task Force Bulletin. Published March 9, 2021. Accessed January 12, 2023. https://www.uspreventiveservicestaskforce.org/uspstf/sites/default/files/file/supporting_documents/lung-cancer-newsbulletin.pdf 2. The University of Kansas Cancer Center. Low-dose CT scan FAQ. Accessed January 20, 2023. <https://www.kucancercenter.org/cancer/cancer-types/lung-cancer/lung-cancer-diagnosis-screening/low-dose-ct-faq>