



We help the world breathe®
PULMONARY • CRITICAL CARE • SLEEP



Key elements for a 5-minute discussion between provider and patient regarding lung cancer screening

Healthcare experts recommend lung cancer screening for individuals at high risk for developing lung cancer. The goal of lung cancer screening is to detect lung cancer early to save lives. Without lung cancer screening, lung cancer is usually not found until a person develops symptom, and at that time, it is more difficult to treat. Lung cancer screening is performed using a lower radiation version of a chest CT scan, taking an image of your lungs and surrounding structures. This is a 10-minute test that is performed as an outpatient.

Eligibility criteria:

- As a Medicare or Medicaid patient. you are eligible for lung cancer screening if you are age 55 to 77, have smoked the equivalent of one pack of cigarettes per day for at least 30 years and are a current smoker or quit smoking within the past 15 years.
- As a private health insurance patient. you are eligible for lung cancer screening if you are age 55 to 80, have smoked the equivalent of one pack of cigarettes per day for at least 30 years and are current smoker or quit smoking within the past 15 years.
- It is important that you have no signs or symptoms of lung cancer including: persistent cough, worsening of chronic cough, coughing up blood, constant chest pain, persistent hoarseness or unintentional weight loss of greater than 10% of baseline weight. If you have any of these symptoms, then a different type of diagnostic evaluation is required.

Potential benefits:

The major benefit of lung cancer screening is preventing death from lung cancer.

- A large national study called the National Lung Screening Trial has shown that lung cancer screening with a low dose CT scan can decrease lung cancer deaths by 20% in high-risk individuals. In other words, CT screening resulted in 3 fewer lung cancer deaths for every 1000 individuals screened.
- CT screening for lung cancer is at least as effective in preventing lung cancer deaths in high-risk individuals as mammography is in preventing breast cancer deaths and colonoscopy is in preventing colon cancer deaths.
- If you are concerned about the possibility of having lung cancer, a normal screening CT scan can be reassuring.

Potential harms:

There are several potential harms to a screening that you should consider:

- Radiation risk:
 - The screening CT scan will expose you to a low level of radiation. equivalent to 6 months of background radiation exposure or 50 coast to coast round trip flights in a commercial airplane.
 - This is considered a very low risk.



We help the world breathe®
PULMONARY • CRITICAL CARE • SLEEP



- Anxiety risk:
 - 1 in 4 patients may have a lung nodule or “spot” found on screening CT. The number of false positive findings or “false alarms” outnumber cancers by 25 to 1.
 - 1 in 10 patients may have an abnormality other than a lung nodule(s) found on the scan that is not causing any symptoms but may require evaluation.
- Complication risk:
 - Sometimes a finding on the screening CT leads to the need for additional testing such as a biopsy or surgery that can cause harm in individuals that do not have cancer.
 - The risk for a major complication from invasive procedures is 3 for every 1000 individuals undergoing such additional testing.
- Overdiagnosis risk:
 - There is a possibility that a lung cancer could be diagnosed by screening out would never cause a problem because it is very slow growing.
 - 1 in 10 lung cancers found by CT screening will never cause a problem for the patient.

Cost:

As an eligible Medicare or Medicaid patient, the screening CT scan will not cost you anything out of pocket.

As an eligible private health insurance patient, the screening CT scan will not cost you anything out of pocket nor be charged to your deductible.

Screening Modality:

- The 20% decrease in lung cancer deaths found in the large national study was through screening with low dose CT scan.
- A separate large national study showed that routine chest x-ray is of no benefit for lung cancer screening.

Patient commitment:

- Like mammography, lung cancer screening is not a one-time test. You should be willing to undergo yearly screening as long as you continue to meet the eligibility requirements.
- In addition, you should be willing to undergo surgery to treat an early stage lung cancer detected by screening.

Smoking Cessation:

- Smoking cessation remains the most effective way to prevent lung cancer as a current smoker, we want to help you quit smoking for good.
- CT screening for lung cancer is most effective in decreasing your risk of death from lung cancer when combined with smoking cessation.