# WHAT ABOUT SMOKING?

Regardless of your decision to have a CT lung cancer screening, the most powerful way to lower your chance of developing lung cancer or emphysema, or having a heart attack is to avoid tobacco products completely.

Active smokers should enter a smoking cessation program. Screening is not an alternative to smoking cessation.

Once you quit smoking, it takes 15 years to reduce your risk of lung cancer, compared to that of a non-smoker.

Quitting smoking reduces your risk of:

- High blood pressure
- Lung infections
- Heart attack
- Coughing, sinus infection, fatigue and shortness of breath
- High carbon monoxide levels in the blood
- Cancer of the lung, mouth, throat, bladder, esophagus, kidney, pancreas and colon

## **RESOURCES**

Indiana Tobacco Quit Line • 800-784-8669 indianaquitline.net

American Cancer Society • 800-ACS-2345 cancer.org

American Lung Association • 800-LUNG-USA lungusa.org

American Heart Association • 800-AHA-USA1 americanheart.org

## WHO SHOULD BE SCREENED FOR LUNG CANCER?

If you are a heavy smoker or someone who used to smoke, you may want to discuss getting a CT Lung Cancer Screening with your doctor.

A CT lung cancer screening is recommended for those who meet the following criteria:

- Between ages 55-77
- Asymptomatic no signs or symptoms of lung cancer. No major medical problems that would prevent cancer work-up and treatment if discovered during screening.
- Current smoker, OR quit smoking within the past 15 years.
- years since quitting.
- Tobacco smoking history of 30+ pack years.

How to find your pack years:



Number

of years

you have

smoked







Average number of packs per day Pack years





# preventive

## LUNG CANCER SCREENINGS AVAILABLE AT:

## La Porte Hospital

1007 Lincolnway La Porte, IN 46350 219-326-1234 LaPorteHealth.com

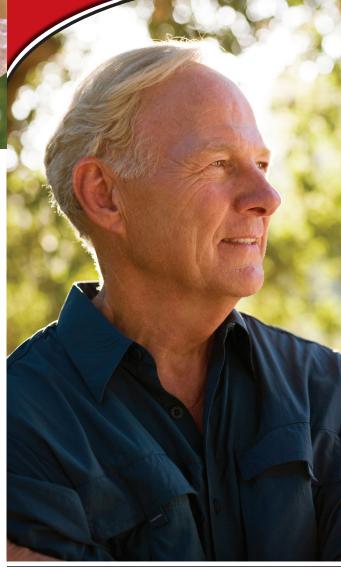
## **Starke Hospital**

102 E Culver Road Knox, IN 46534 574-772-6231 StarkeHealth.com

# LifePlex Diagnostic Imaging Center

2855 Miller Drive #113 Plymouth, IN 46563 574-941-1090

# **Lung Cancer Screening Saves Lives**



## Helping You Decide about Lung Cancer Screening

A Patient Information and Shared Decision Aid



# When it comes to lung cancer, early detection is the key.

# Lung cancer causes more deaths in the United States than any other type of cancer.

A low-dose computed-tomography (CT) scan may help detect lung cancer in its earliest stages, when it's more treatable.

Screenings are available at La Porte Hospital, Starke Hospital – both designated as a Lung Cancer Screening Center by the American College of Radiology – and LifePlex Diagnostic Imaging Center.

# WHAT IS A CT LUNG CANCER SCREENING?

The goal of a lung cancer screening is to detect cancer when it's very small, before it has spread to other sites in the body. Patients must meet certain criteria for CT lung cancer scans and Medicare as well as most insurance companies will cover the screening.

Before your first cancer screening, you'll need to schedule an appointment with your doctor to discuss the benefits and risks of lung cancer screening. You and your doctor can decide whether lung cancer screening is right for you.

You should not undergo screening unless you are willing to allow for lung cancer work-up and treatment. This may include additional imaging tests and potentially invasive procedures.

You should continue annual screening exams until age 77, or until 15 years have passed since you stopped smoking. You should stop screening if you develop a major illness, which would prevent a lung cancer work-up or treatment.

## WHAT ARE THE BENEFITS OF SCREENING?

For people who are eligible for screening and decide to get screened, the chances of finding cancer early are higher. Finding cancer early generally means that there are more treatment options available. A recent study showed that after 6.5 years, among those who were eligible for screening, those who were screened with CT were 20 percent less likely to die from lung cancer compared to those who were not screened with CT.

## WHAT ARE THE RISKS?

CT lung cancer screening only helps to find cancer if it is already there. It cannot prevent cancer. The best way to lower your risk of lung cancer is to stop smoking if you have not already done so. Screening uses a CT scan, which uses a lower dose of X-ray radiation than a conventional CT scan. Any time you are exposed to CT radiation, there is a risk. The additional risk of developing fatal lung cancer from one adult exam is low enough that it is difficult to measure, with the estimated chances of it being between 1 in 100,000 to 1 in 10,000. Other potential harms from screening include: false alarms, overtreatment, and more testing and invasive procedures.

False Alarms: Screening works by finding lung nodules, some of which are cancer. But the vast majority (more than 96 percent) of nodules detected on screening is not cancer. These false positive findings outnumber cancers 25 to 1. False positive findings have the potential to cause anxiety. However, understanding that the majority of lung nodules found on CT screening do not represent cancer helps most patients avoid significant anxiety while they wait for follow-up testing.

#### Overtreatment (or over diagnosing):

Sometimes screening will find a nodule that looks like cancer but was never going to cause problems. This can lead to treatments such as surgery, chemotherapy, and radiation that are unnecessary and considered overtreatment. Overtreatment can cause side effects that make you feel sick.

More testing: To prove a nodule is not cancer, the recommendation is generally to take additional follow-up scans to look for changes. Your doctor will make recommendations for the proper follow-up interval to monitor any lung nodules detected. Most often, this is at intervals of six to 12 months.

Invasive procedures: Sometimes further testing for possible lung cancer leads to the need for invasive procedures, such as biopsies or surgery. These tests can cause harm in people that end up not having cancer. Invasive procedures can result in minor complications such as bleeding and infections. They can also result in more major complications such as a collapsed lung and even death.

For more information, visit shouldiscreen.com



Talk to your doctor about a CT lung cancer screening today.