

# Lung Cancer Screening

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Although lung cancer is one of the most serious types of cancer, early detection allows for early treatment — and better outcomes. In the general population, about 90% of people with lung cancer die from the disease. This high number is, in part, because lung cancer often isn't caught until symptoms appear. By the time symptoms appear, the cancer has usually spread to other parts of the body, making it harder to treat.

**Lung cancer screening is a quick and painless way to catch cancer early.** Screening helps doctors find small tumors or nodules (masses of extra cells) in the lungs before they grow or spread to other parts of the body. Finding cancer early means it is easier to treat, and the chances of cure improve greatly.

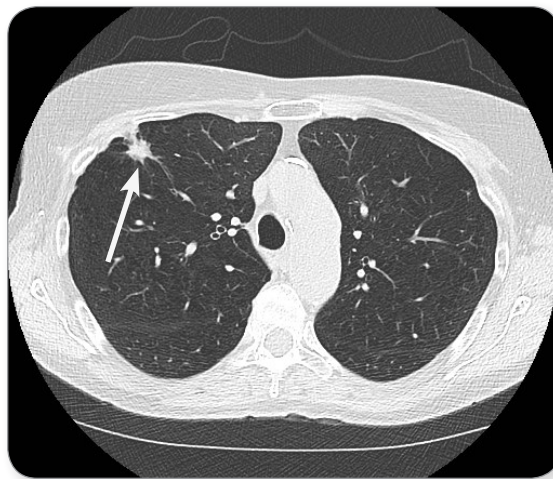
During the screen, a **low-dose CT (computed tomography) scanner** captures images of your lungs using a rotating x-ray. A radiologist then looks at the images for anything abnormal.

## Who should be screened?

Screening is recommended for anyone at high risk for lung cancer. High risk is defined as:

- Anyone **age 55 to 80 with a history of 30 “pack years” or more** (who still smokes or who quit within the last 15 years). (30 “pack years” means 30 years of smoking a pack of cigarettes a day. 15 years of 2 packs a day also equals 30 pack years.)
- People with a smoking history of 20 “pack years” or more **and with other risk factors**. (Risk factors can include personal or family history of lung cancer, exposure to radon, and several occupational risk factors — talk to your doctor to learn more.)

**Smoking** is the biggest risk factor for lung cancer. Smoking causes about 85 percent of lung cancers. The more you smoke, the higher the risk of developing lung cancer. The risk goes down if you quit. The risk also increases with age — most lung cancers occur in people age 55 or older.



Lung cancer screening requires a CT scan. A CT scanner takes images of your lungs in “slices” so that doctors can see anything abnormal. In the image above, the arrow points to the abnormal growth.

If you're not sure whether you should be screened, talk to your doctor. Your risk factors, medical history, personal beliefs, and other factors are an important part of making this decision.

## How often should I be screened?

People who are considered high risk should be screened **once a year**. If you turn 80, have quit smoking for more than 15 years, or cannot tolerate surgery to remove lung cancer if it is found, then screening is no longer recommended.

## I meet the criteria. Why should I be screened?

Screening gives you a chance to catch cancer early. If it's caught early, experts estimate that up to 80% of lung cancer could be cured. Catching the cancer early means that the tumors can be removed before they spread to other parts of the body.

Screening sometimes finds other problems. Treating these problems can also improve your health.

## What happens during the screening?

You'll need to go to the hospital for your screening appointment. Once in the exam room, you'll lie on your back on a table with your arms above your head. While you hold your breath (just for a brief time), the CT scanner rotates to take pictures of your lungs.

Some people worry about the tight spaces of CT scans. It may help to know that your head will be outside of the scanner throughout the scan, and it only takes a few seconds. A healthcare provider called a technician can also see and hear you throughout the scan.



## Will the radiation hurt me?

During your screen, you are exposed to a small amount of radiation. However, the benefits of finding lung cancer early far outweigh the risks of radiation. The radiation exposure is very small — less than you receive from background sources in about 6 months.

## What is the Intermountain Lung Cancer Screening Program?

Intermountain's Lung Cancer Screening Program provides annual CT lung screening and tracks your annual visits and results.

Once you enroll in the program, you'll receive letters in the mail to remind you when it's time for your next screening. After your screening, you'll receive a letter in the mail with your results. If we do find something abnormal, we'll schedule your follow-up appointments and additional screening.

Talk to your doctor for more information about the program.

## Trying to quit?

The most important thing you can do to reduce your risk of developing lung cancer is to quit smoking. Ask your doctor about Intermountain's *Quitting Tobacco: Your Journey to Freedom* booklet.



**Programs:** If you need additional support, these programs can help:

- Quit for Life Program, 800-QUIT-NOW, 866-784-8454, [quitnow.net](http://quitnow.net)
- Freedom from Smoking, [ffsonline.org](http://ffsonline.org)

### National organizations:

- American Lung Association (ALA), 800-586-4872 (Lung HelpLine), [lung.org/stop-smoking](http://lung.org/stop-smoking)
- American Cancer Society (ACS), 800-227-2345, [cancer.org](http://cancer.org)
- American Heart Association (AHA), 800-242-8721, [americanheart.org](http://americanheart.org)

### More helpful websites:

- [cdc.gov/tobacco](http://cdc.gov/tobacco)
- [nicotine-anonymous.org](http://nicotine-anonymous.org)
- [smokefree.gov](http://smokefree.gov)
- [whyquit.com](http://whyquit.com)