

PROMOTING LUNG CANCER SCREENING DURING THE COVID-19 PANDEMIC



The American Cancer Society (ACS) recommends that people who currently smoke, or once smoked but have quit within the past 15 years, ages 55-74 in good health, and with at least a 30 pack-year history of smoking should undergo annual screening with low-dose computed tomography (LDCT). [To learn more, access the ACS guidelines for lung cancer screening.](#)

WHY IS LUNG CANCER SCREENING IMPORTANT?



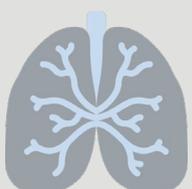
- Lung cancer screening with LDCT is relatively new. It is recommended by leading health organizations, and is covered by private health insurance, Medicare, and in some states, it is covered by Medicaid.
- In adults at high risk for lung cancer due to their smoking history, lung cancer screening with LDCT can save lives, but only if they get tested.
- Lung cancer screening rates still are low in the U.S., and most cases of lung cancer still are diagnosed when patient's present with symptoms.

WHAT ARE THE IMPLICATIONS OF COVID-19 ON LUNG CANCER SCREENING?



- Although declines in lung cancer screening have not been reported, we expect screenings have declined similar to other cancer screening tests.
- Further, a recent study of the decline in new patient encounters for incident lung cancer had [declined by 47%](#) in April 2020 compared with a similar period in 2019.
- Missed opportunities for early detection or delays in diagnostic evaluations for symptoms means more patients will be diagnosed later, when treatment is likely to be less successful.

SCREENING FOR LUNG CANCER DURING COVID-19

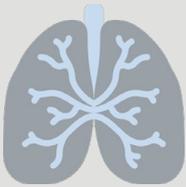


- Despite the challenges we face during the pandemic, lung cancer remains a public health priority, and we must provide high-risk individuals with safe opportunities to detect lung cancer early.
- Individuals who have undergone screening and are in a period of short-term surveillance for nodules, or individuals who have possible signs or symptoms of lung cancer, should be prioritized during the resumption of services.
- *Continued on next page.*

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SCREENING FOR LUNG CANCER DURING COVID-19, CONT.



- As imaging facilities reopen for screening, prioritize imaging for adults who are:
 - ✓ undergoing nodule surveillance;
 - ✓ adults who are older;
 - ✓ adults who are approaching 15 years from date they quit smoking;
 - ✓ adults who are near the upper age at which screening will no longer be covered by insurance and
 - ✓ adults who had undergone screening and are the furthest past their 12 month anniversary when their next exam was due.

MESSAGING TO PROMOTE LUNG CANCER SCREENING DURING COVID-19



- Lung cancer screening with LDCT is an effective and recommended test that has been shown to be the only effective method to detect lung cancer early in high-risk adults, when treatment is much more effective.
- All high-risk adults who smoke should be referred to smoking cessation programs.
- Adults who are experiencing possible signs and symptoms of lung cancer should be prioritized for diagnostic workup.
- Screening disparities are already evident and, without deliberate focus, are likely to increase as a result of the COVID-19 pandemic.

For more information and resources, visit [cancer.org](https://www.cancer.org)