

Q: What is Lung Cancer CT Screening?

A: Lung Cancer screening uses low dose computed tomography (LDCT) i.e. a CT scan with low dose of radiation, to find lung nodules, some of which may be cancer. People who take part in screening can lower their chances of dying from lung cancer. A recent study showed that after 6.5 years, among those who were eligible for screening, those who were screened with CT were 20% less likely to die from lung cancer compared to those who were not screened with CT.

Q: What are the harms of screening?

A: Lung cancer CT screening only helps to find cancer if it is already there. It cannot prevent cancer. The only way to prevent cancer is to stop smoking if you have not already done so. Screening uses a low dose CT scan which has radiation like an X-ray. However, the CT scan used for lung screening uses a lower amount of radiation than the conventional CT scans. That said, the low dose radiation from lung cancer CT screenings increases your chance of developing a new cancer 10-20 years later by a small amount.

Q: Who is eligible for screening?

A: Lung Cancer screening is not appropriate for everybody. You qualify for screening if you:

- Are between 55 and 77 years old
- No signs or symptoms of lung cancer
- Tobacco smoking history of at least 30 pack-years or quit smoking within the last 15 years.

Q: What happens after my first screening?

A: If a lung nodule is found on your CT scan, your doctor may recommend a follow-up CT scan, usually 6 months later to check that the nodule has not grown. In the unlikely case that the nodule does grow or may present a worry, your doctor may recommend further testing using PET scan or a biopsy.

However, since more than 95% of lung nodules found are **not** cancer, you may only need to go back in one year as with other annual health checks to continue the process of screening.

Remember, lung cancer screening is not a single test: it is a process that must be done correctly under the directions of your doctor.