# LUNG CANCER SCREENING DECISION TOOL SUMMARY BOOKLET

## What is the aim of this tool?

This tool can help you decide whether you want to start screening for lung cancer. Many people see the benefits and think screening for cancer is a good thing. There are ways that screening can help you, and there are also things you should know before you make a decision to undergo screening.

This booklet is designed to give you information to help you make an informed choice about whether you would prefer to have screening or not. This is your choice – there is no right or wrong answer about whether to have screening.

## What is lung cancer?

Lung cancer is a cancer that starts in the lungs. A group of cells that are not normal and grow out of control and can also spread to other parts of the body.

## What is lung cancer screening?

Lung cancer screening involves a low-dose computed tomography (low-dose CT) scan for people without symptoms (e.g. you do not have an unexplained persistent cough or are not coughing up blood) to look for early signs of cancer. Early detection of lung cancer increases the options for treatment and gives you a better chance of cure.

 Low-dose CT scans for lung cancer screening are free for those with Medicare.

## Am I eligible?

You are eligible for the program if you meet all of the below criteria:

|  |
| --- |
| **Are aged 50 to 70 years**AND**Have no symptoms or signs that suggest lung cancer** (for example, unexplained persistent cough, coughing up blood, shortness of breath for no reason).AND**Smoke tobacco cigarettes or have a history of cigarette smoking** (having quit within 10 years)AND**Have a history of tobacco cigarette smoking of at least 30 pack-years** (for example, a pack a day for 30 years, or 2 packs a day for 15 years) |

**Talk to your doctor to see if you are eligible.**

## How could lung cancer screening help me?

* Find lung cancer early. There are more treatment options and a better chance of a cure when cancers are found early.
* Provide peace of mind about your lung health.
* Gives an opportunity to discuss smoking history and get support if you choose to quit.

## What else should I know about lung cancer screening?

* False positives (i.e. the scan result suggests you may have cancer, but follow-up investigations say you don’t) can happen with any screening or medical test.
* Overdiagnosis can happen with any screening or medical test.
* You may be exposed to a small amount of radiation.
* Screening may pick up additional findings not related to lung cancer.

| **Key questions** | **Screening** | **No screening** |
| --- | --- | --- |
| What are the chances of finding lung cancer at an early stage? | 70 out of 100 lung cancers will be found at an early stage1. | 7 out of 100 lung cancers will be found at an early stage1. |
| What are the chances of the scan result being suggestive of lung cancer but follow-up investigations saying that you don’t have lung cancer? | Of all people screened, around 3 in 100 will have a high or very high-risk nodule found1. To see if a high or very high-risk nodule is cancer, your doctor might suggest further investigation. Fewer than half of those with a high or very high-risk nodule will turn out to have lung cancer. | People who do not have screening will avoid the possibility of unnecessary medical tests but will also not have the chance to find early lung cancers that have no symptoms. |
| What are the chances of finding something other than lung cancer on the scan? | Sometimes the scan will find things which require further tests, and other times the scan will find other serious illnesses that require treatment. These treatments could save your life. | People who do not have screening avoid having extra medical tests, but will also not have the chance to find other treatable health conditions early. |

1Based on best estimates from randomised controlled trials.

## Decision tool

Remember, participating in lung cancer screening is your choice. Use this tool below to help you decide what is important to you.

### ASK YOURSELF: What is important to you when deciding about screening for lung cancer?

Rate each statement from 1 to 5 based on how important it is to you, where 1 means ‘Not important’ and 5 means ‘Very important’.

| **Statement** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Finding lung cancer early, before symptoms develop?**(e.g. an unexplained persistent cough or coughing up blood) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Finding lung cancer early when there are more treatment options?** | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Peace of mind about your lung health?** | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Having an opportunity to discuss smoking history and get support to quit?** | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

### ASK YOURSELF: How concerned are you about:

Rate each statement from 5 to 1 based on how concerned you are, where 5 means ‘Very concerned’ and 1 means ‘Not concerned’.

| **Statement** | **5** | **4** | **3** | **2** | **1** |
| --- | --- | --- | --- | --- | --- |
| **Being worried about participating in lung cancer screening?** | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Being exposed to radiation?** | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Having a false positive?**(i.e. the scan result suggests you may have cancer, but follow-up investigations say you don’t) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Other tests to investigate any findings from the low-dose CT scan?** | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

### Have a look at your answers above

If most of your answers are on the right, you’re in favour of having screening. If most of your answers are on the left, you’re in favour of not having screening

|  |  |
| --- | --- |
| QR code for more information about the National Lung Cancer Screening ProgramFor more information about the National Lung Cancer Screening Program: [www.health.gov.au/nlcsp](http://www.health.gov.au/nlcsp) | For help to quit smoking: [www.quit.org.au](http://www.quit.org.au) |

This resource was developed at The University of Sydney with funding from the International Association for the Study of Lung Cancer (IASLC) and adapted at The University of Melbourne with funding from the Australian Government.