

Title: No Screening for Lung Cancer

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Abstract:

The most recent assessment of available evidence on lung cancer screening with a sensitive modality (computed tomography) found that we cannot conclude that such screening provides a mortality benefit. The main reason for this, is that there is no available trial that compares CT screening to no screening over an adequate duration of time. Of note, false positive results were very common and tumors found on screening had different characteristics from those found clinically.

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Still smoking cigarettes after all these years? Considering buying your first pack?

Putting your faith in medical diagnostics to allow you to smoke safely, over the long term?

Unfortunately, we cannot, at this time, rely on screening with the most sensitive radiological studies to reduce mortality.



Why not?

-We have no evidence that screening smokers with CT exams reduces mortality. There are no long term trials comparing people who have been screened with CT to people who have not been screened.

Why not do it anyway?

-There are many more false positives than there are true positives. Most of the positive findings on a CT exam are not cancerous. But it is difficult or impossible to tell based on a screen alone, what a “finding” is. That means, if you have a “positive finding” you will go through a whole battery of tests, maybe have surgery, even if your “positive finding” is something harmless, or is not destined to become disease.

What to do?

-Because we cannot safely screen everyone at risk for lung cancer, it is important that you reduce your own risk. That means, avoiding the airborne carcinogens that pour out of cigarettes.