

Scheduling an Appointment

Your doctor may refer you for screening, or you may refer yourself by calling **843-792-1178**.

The MUSC Health Lung Cancer Screening Coordinator will walk you through the evaluation process, which includes smoking cessation counseling if you are still smoking. We may also be able to direct you to clinical trials that are appropriate for your concerns or your condition.

Screening Treatment Team

Benjamin A. Toll, Ph.D.

Nichole T. Tanner, M.D., MSCR

Claudia Miller, BSN, RN, OCN, Nurse Navigator

Cassie Frazier, Nurse Practitioner

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Screening Cost

Talk with the Lung Cancer Screening Coordinator about potential costs for lung cancer screening. Medicare and most private insurance plans offer coverage for those who qualify.

Smoking Cessation

Regardless of your decision about screening, avoiding cigarettes is the most important thing you can do to lower your chance of dying from a variety of diseases, not just lung cancer. Quitting smoking helps with emphysema and heart and vascular diseases as well.

If you are still smoking and need help quitting, talk with your MUSC Health care team, call our MUSC Tobacco Treatment Program at 843-792-9101, or call 1-800-QUIT-NOW (1-800-784-8669).

Locations

You can choose from several different MUSC Health locations for your LDCT scan and clinical consultation:

Downtown Charleston

Rutledge Tower
135 Rutledge Avenue, Suite 128
Charleston, SC 29425

Ashley River Tower
25 Courtenay Dr.
Charleston, SC 29425

Mount Pleasant

MUSC Health East Cooper
1600 Midtown Avenue
Mount Pleasant, SC 29464

North Charleston

MUSC Health North Charleston
8992 University Boulevard
North Charleston, SC 29406

West Ashley

West Ashley Medical Pavilion
2060 Sam Rittenberg Boulevard
Charleston, SC 29407

MUSC Health Lung Cancer Screening Program

843-792-1178

hollingscancercenter.org/lungscreening

Lung Cancer Screening Program

Hollings Cancer Center



What is Lung Screening?

- Lung cancer screening is done using a low-dose spiral CT (LDCT) scan. This LDCT scan gives a detailed picture of your lungs.
- You will go to the Radiology (X-Ray) department for your LDCT scan. You will lie on a table and raise your arms above your head. Then the table will slide into the scanner. We will ask you to hold your breath for about 20 seconds during the scan.
- Afterwards, the test results will be sent to your physician for follow-up.

Is Lung Screening Right for Me?

If you have all of these risk factors, you should consider being screened:

- 55–77 years old and
- Have a 30 pack-year history of smoking (this means 1 pack a day for 30 years, 2 packs a day for 15 years, etc.) and
- Are a current smoker, or have quit within the last 15 years

Not everyone who meets the initial criteria will be eligible for screening. Our team will help guide you as to whether screening can benefit you or not.

Does it Make a Difference?

Lung cancer is the primary cause of cancer-related death in both men and women in the United States. The National Lung Screening Trial has shown that screening current or former heavy smokers with LDCT decreases their risk of dying from lung cancer. During the research study, 53,454 current and former smokers were randomly assigned to be screened once a year for 3 years with low-dose CT or chest X-ray.

Based on the research, if a group of 1000 people were screened once a year for 3 years, 3 fewer people in 1000 would die of lung cancer after 6 years. This means that, instead of 21 people, 18 people per 1000 would die of lung cancer. The illustration to the right shows what happened after an average of 6.5 years.

Low-dose CT Screening (1000 people)

Benefits of low-dose CT screening

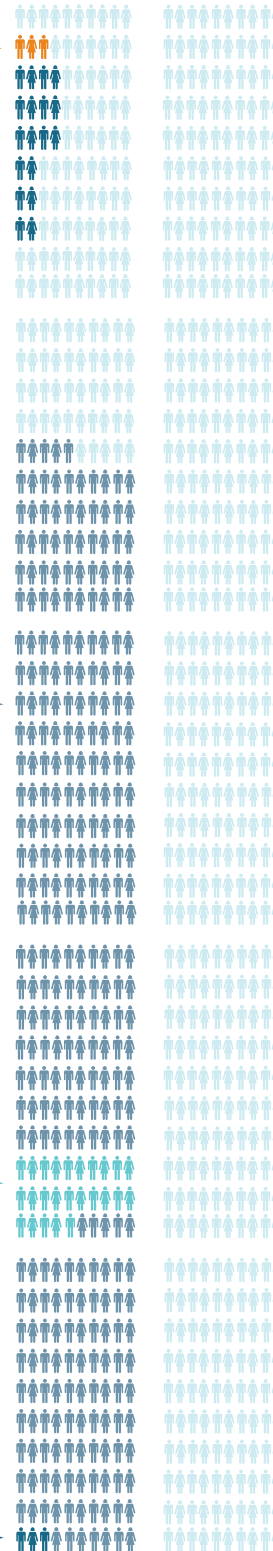
18 people died from lung cancer in a group of 1000 people screened. This was **3 fewer deaths** from lung cancer compared to the group using chest x-ray.

Harms added by screening

365 in 1000 people screened experienced a false positive result.

25 of those false positive results led to an invasive procedure.

3 people developed a major complication from the invasive procedure.



Take Home Messages

Lung cancer screening with CT scans is the only screening test shown to lower the chance of dying from lung cancer.

For perspective, the reduction in deaths from lung cancer with CT screening is larger than the reduction in deaths from the target cancers of other common screening tests, such as mammograms for breast cancer.

There is a tradeoff: CT screening decreases your chance of death but increases your chance of having a false alarm.

If you choose to have CT screening, it is important to have it done at a medical center with special expertise in lung cancer screening and treatment.

Graph data and information courtesy of www.cancer.gov/newscenter/qa/2002/NLSTStudyGuidePatientsPhysicians