

Researchers support lung cancer CT screen in older patients

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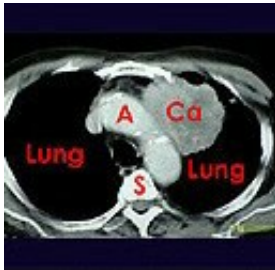


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Miami Valley Hospital,
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65+ and under-65 cohorts (73.2 percent and 75.6 percent).

"Until there is new and direct evidence to the contrary, it does not seem reasonable to exclude persons aged 65 to 74 years from access to screening," writes the author of an accompanying editorial.

Study authors and the editorialist disclosed financial ties to the biomedical industry.

More information: [Abstract](#)

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(HealthDay)—Individuals aged 65 to 74 years with a history of smoking should not be excluded from screening with low-dose computed tomography (LDCT) for lung cancer, according to researchers who published their study findings online Sept. 9 in the *Annals of Internal Medicine*. Copyright © 2014 [HealthDay](#). All rights reserved.

Paul F. Pinsky, Ph.D., of the National Cancer Institute in Bethesda, Maryland, and colleagues conducted a secondary analysis of data from the National Lung Screening Trial to assess the outcomes of LDCT in those aged 65 to 74 years (7,110 participants) compared with those aged 55 to 64 years (19,612 participants).

The researchers found that the false-positive rate for LDCT was higher in the 65+ cohort than in the under-65 cohort (27.7 percent versus 22 percent). The rate of invasive diagnostic procedures after a false-positive screening result was higher in the older cohort than the younger one (3.3 percent versus 2.7 percent), but the complication rate was similar in the two groups (8.5 percent versus 9.8 percent). The [positive predictive value](#) of LDCT was greater (4.9 percent versus 3 percent) and the prevalence of [lung cancer](#) was higher in the older cohort than the younger cohort. Resection rates for screen-detected lung cancer were similar for the

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