

# Researchers advise annual low-dose CT lung screening for high-risk individuals

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respectively). A reduction in lung cancer mortality was seen in NELSON (calculated incidence rate ratio, 0.75) with four rounds of LDCT screening in current and former smokers aged 50 to 74 years.

Based on these findings, the USPSTF recommends annual LDCT screening for lung cancer for adults aged 50 to 80 years with a 20 pack-year smoking history and who currently smoke or who quit within the last 15 years (B recommendation).

The draft recommendation statement and evidence review have been posted for public comment; comments can be submitted from July 7 to Aug. 3, 2020.

**More information:** [Draft Evidence Review](#)  
[Draft Recommendation Statement](#)  
[Comment on Recommendation Statement](#)

(HealthDay)—The U.S. Preventive Services Task Force (USPSTF) recommends annual low-dose computed tomography (LDCT) screening for people aged 50 to 80 years at high lung cancer risk due to smoking history. These recommendations form the basis of a draft recommendation statement, published online July 7 by the USPSTF.

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Daniel E. Jonas, M.D., M.P.H., from the RTI International-University of North Carolina at Chapel Hill, and colleagues reviewed data from seven randomized controlled trials with 86,486 participants that evaluated [lung cancer screening](#) with LDCT. The National Lung Screening Trial (NLST) and the Nederlands-Leuvens Longkanker Screenings Onderzoek (NELSON) were adequately powered. The researchers identified reductions in lung cancer and all-cause mortality with three rounds of annual LDCT screening versus chest X-ray for high-risk current and former smokers aged 55 to 74 years in the NLST (calculated incidence rate ratios, 0.85 and 0.93,

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