

# USPSTF expands eligibility for annual lung cancer screening

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(HealthDay)—The U.S. Preventive Services Task Force (USPSTF) recommends annual low-dose computed tomography (LDCT) screening for lung cancer for high-risk adults aged 50 to 80 years. This recommendation forms the basis of a final recommendation statement published in the March 9 issue of the *Journal of the American Medical Association*.

Daniel E. Jonas, M.D., M.P.H., from The Ohio State University in Columbus, and colleagues reviewed seven randomized controlled trials with 86,486 individuals for [lung cancer screening](#) with LDCT; the two largest trials were the National Lung Screening Trial (NLST) and the Nederlands-Leuvens Longkanker Screenings Onderzoek (NELSON). The researchers observed a reduction in lung cancer mortality in the NLST (incidence rate ratio [IRR], 0.85) with three rounds of annual screening versus chest radiograph for high-risk current and former smokers (age 55 to 74 years). A reduction in lung cancer mortality was seen in NELSON (IRR, 0.75) with four rounds of LDCT

screening versus no screening for high-risk current and former smokers aged 50 to 74 years.

Rafael Meza, Ph.D., from the University of Michigan in Ann Arbor, and colleagues conducted a comparative simulation modeling study to examine the benefits and harms of LDCT screening strategies. The researchers found that most of the efficient risk factor-based strategies initiated screening at 50 or 55 years and stopped screening at age 80 years. Efficient annual strategies had a minimum criterion of 20 pack-years of smoking.

Based on these findings, the USPSTF concludes that for adults aged 50 to 80 years who have a 20 pack-year smoking history and currently smoke or quit within the last 15 years, annual screening for lung cancer with LDCT is recommended (B recommendation). "This recommendation replaces the 2013 USPSTF statement that recommended annual screening for [lung cancer](#) with LDCT in adults aged 55 to 80 years who have a 30 pack-year smoking history and currently smoke or have quit within the past 15 years," the task force authors write.

Several authors from the modeling study disclosed financial ties to the pharmaceutical and other industries. One author from the [recommendation](#) statement disclosed ties to Healthwise.

**More information:** [Evidence Report Modeling Study](#)  
[Final Recommendation Statement](#)  
[Editorial 1](#)  
[Editorial 2](#)  
[Editorial 3](#)  
[Editorial 4](#)

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