REPORT OF OUTCOMES

Lung Cancer/Lung Nodule Screening Program

Hackensack Meridian Health Mountainside Medical Center Cancer Program, an approved Program of the American College of Surgeons Commission on Cancer, would like to share the outcomes of its Lung Cancer/Lung Nodule Screening program. The public reporting of these outcomes is one of the required standards to ensure patient-centered care.

In the United States, lung cancer is the second most common cancer in both men and women and is the leading cause of death from cancer. The goal of lung cancer/nodule screening programs is to find lung cancer at an early stage when it is small, before it has spread and is most likely to be treated successfully. Unfortunately, by the time people have signs and symptoms, the cancer is usually advanced and does not respond to curative treatments.

Lung cancer screening is for people who are at a high risk of developing lung cancer and is done through testing with low-dose CAT scanning (LDCT). The use of LDCT has saved more lives when compared to chest x-rays. It is recommended for older adults who are longtime smokers and do not have any signs and symptoms of lung cancer.

Lung cancer sometimes shows as a small spot in the lungs called a nodule. Unfortunately, other lung disorders may look the same, including scar tissue from previous illnesses and noncancerous (benign) type masses. Most small nodules only require monitoring and no immediate testing or treatment. It may not be checked again until the patient's next annual screening or it may be suggested that the patient come back in a few months for another CT. A large or growing nodule is more likely to be cancer. If a doctor is concerned, a patient may need a biopsy or further imaging like positron emission tomography (PET).

Hackensack Meridian Health Mountainside Medical Center Cancer Program Screening Data

- 2016 40 LDCTs for lung cancer screening (LCS) and 16 for nodule
 - No cancers were detected
- 2017 56 LDCTs for LCS and 11 for nodule
 - 2 patients with lung cancer detected
 - I patient had incidental finding of renal mass that turn out to be cancer and was surgically removed
- 2018 71 LDCTs for LCS and 14 for nodule
 - 2 patients with lung cancer detected
- 2019 (through September) 48 LD CTs for LCS and 21 for nodule
 - o I patient with lung cancer
 - o 2 patient undergoing additional work up for suspected lung cancer

All detected lung cancers were early stages and all had curative resections.

Note: People who have smoked for long periods of time are at risk for other health conditions that may be detected on LDCT scanning. If your doctor discovers additional health conditions, you may be asked to have further testing or invasive procedures that may not have been followed if there had not been a lung screening LDCT.

Are You at Risk?

To determine your risk for lung cancer, please check all that apply:

- 🗆 I am 55-77
- $\hfill\square$ Currently smoke tobacco or have quit within the past 15 years
- $\hfill\square$ I have smoked at I pack per day for 30 years or more
- □ I have no signs or symptoms of lung cancer

IF you fall into any of the above risk categories, or have questions about your risk for lung cancer, don't wait. Call (973) 429-6444 for more information about our Low-dose CT Lung Cancer Screening and Lung Nodule Programs and to discuss your eligibility.