Lung Screening

Lung Screening





Lung cancer screening is recommended for people at high risk for lung cancer who do not have symptoms of lung cancer.

People may qualify for lung cancer screening if they:

- Are age 55 to 80; and
- Have smoked cigarettes every day for at least 20 years it does not have to be 20 years in a row, which means there could be times when you did not smoke.

People should talk to their health care provider about being referred to an Ontario Lung Screening Program (OLSP) location.

People can also contact an OLSP location directly by visiting **<u>ontariohealth.ca/</u> <u>lungscreeninglocations</u> or calling 1-866-662-9233** to get the names of OLSP locations they can contact.

Qualifying for Lung Screening



Qualifying for Lung Screening

 Qualifying



When someone is referred to, or contacts, an Ontario Lung Screening Program (OLSP) location, the location will call them to learn more about their risk of getting lung cancer and ask questions about their health and smoking history.



Based on their answers to these questions, the OLSP site will let them know if they qualify for lung cancer screening.

Not everyone who is referred to the OLSP will qualify to get screened.

What if Someone **Does Not Qualify for Lung Screening?**



What if Someone **Does Not** Qualify for Lung Screening?







Someone's risk of developing lung cancer can change over time. If an Ontario Lung Screening Program (OLSP) location tells someone that they do not qualify for screening, they should check again in 3 years to see if they qualify. They should reach out to their health care provider or contact the OLSP location to see if they should get checked again sooner if they have:

- Started smoking again (if they had quit)
- Been told they have chronic obstructive pulmonary disease (COPD)
- A new family history of lung cancer

Lung Screening Test



Lung Screening Test

Lung Screening Test



About the Test

If someone qualifies for lung cancer screening, they will be offered an appointment for a type of computed tomography (CT) scan that uses a small amount of radiation. This test is called a low-dose CT scan.



During the scan, people lie on an open table that passes through a large donutshaped machine, called a scanner. The scanner uses a small amount of radiation to take detailed pictures of the lungs. The

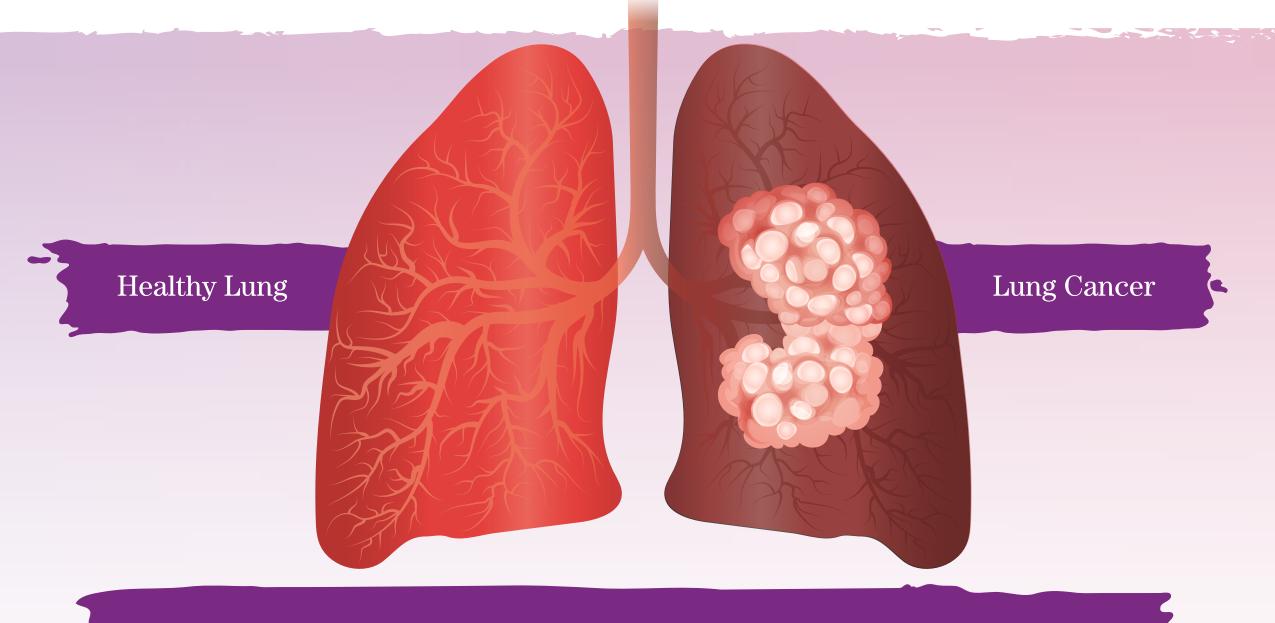
test only takes a few minutes and is not painful. There are no medications or needles given during the test.

Low-dose CT scans look for lung nodules, which are spots on someone's lungs.

Nodules are small lumps of tissue.

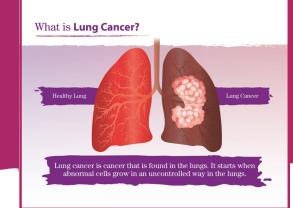
Many people have nodules. Nodules can be caused by cancer, infections, scar tissue or other conditions. Most nodules are **not** cancer.

What is **Lung Cancer?**



Lung cancer is cancer that is found in the lungs. It starts when abnormal cells grow in an uncontrolled way in the lungs.

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Lung cancer is the most common cancer among First Nations people in Ontario, Métis people in Canada, and Inuit in Inuit Nunangat. In the past, most people with lung cancer died because their cancer was found late, when treatment may not work as well.

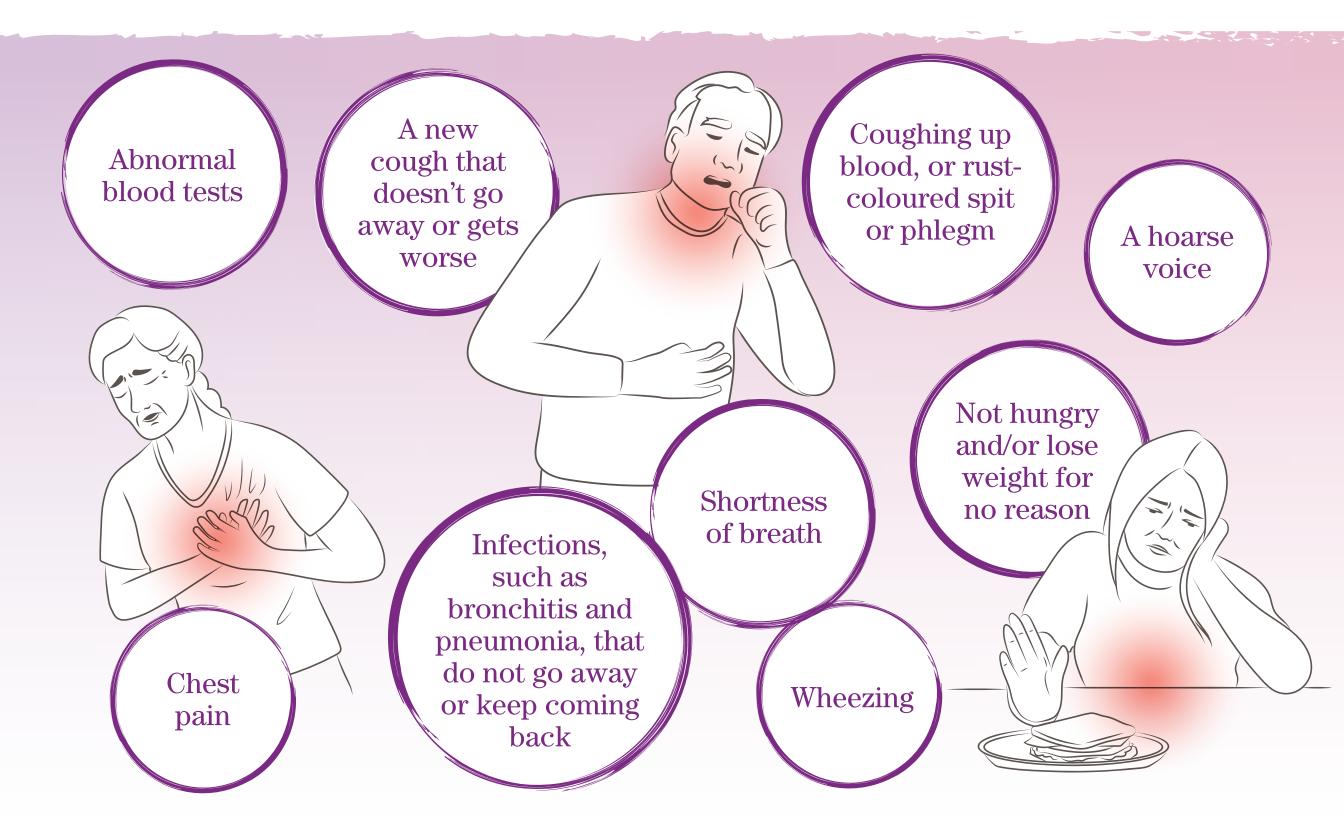
Now there is an effective way to screen (check) people for lung cancer so it can be found early, when treatment has a better chance of working.

Carrière GM, Tjepkema M, Pennock J, Goedhuis N. Cancer patterns in Inuit Nunangat: 1998-2007. Int J Circumpolar Health. 2012 May 15;71:18581.

Chiefs of Ontario, Cancer Care Ontario and Institute for Clinical Evaluative Sciences. Cancer in First Nations People in Ontario: Incidence, Mortality, Survival and Prevalence. Toronto, 2017.

Mazereeuw MV, Withrow DR, Nishri ED, Tjepkema M, Vides E, Marrett LD. Cancer incidence and survival among Métis adults in Canada: results from the Canadian census follow-up cohort (1992–2009). CMAJ Can Med Assoc J [Internet]. 2018 Mar 19 [cited 2025 Jan 24];190(11):E320–6.

Lung Cancer Symptoms



Lung Cancer Symptoms

Abnormal blood tests Abnormal blood or rusdoesn' go wyorge Unfections Chest Chest

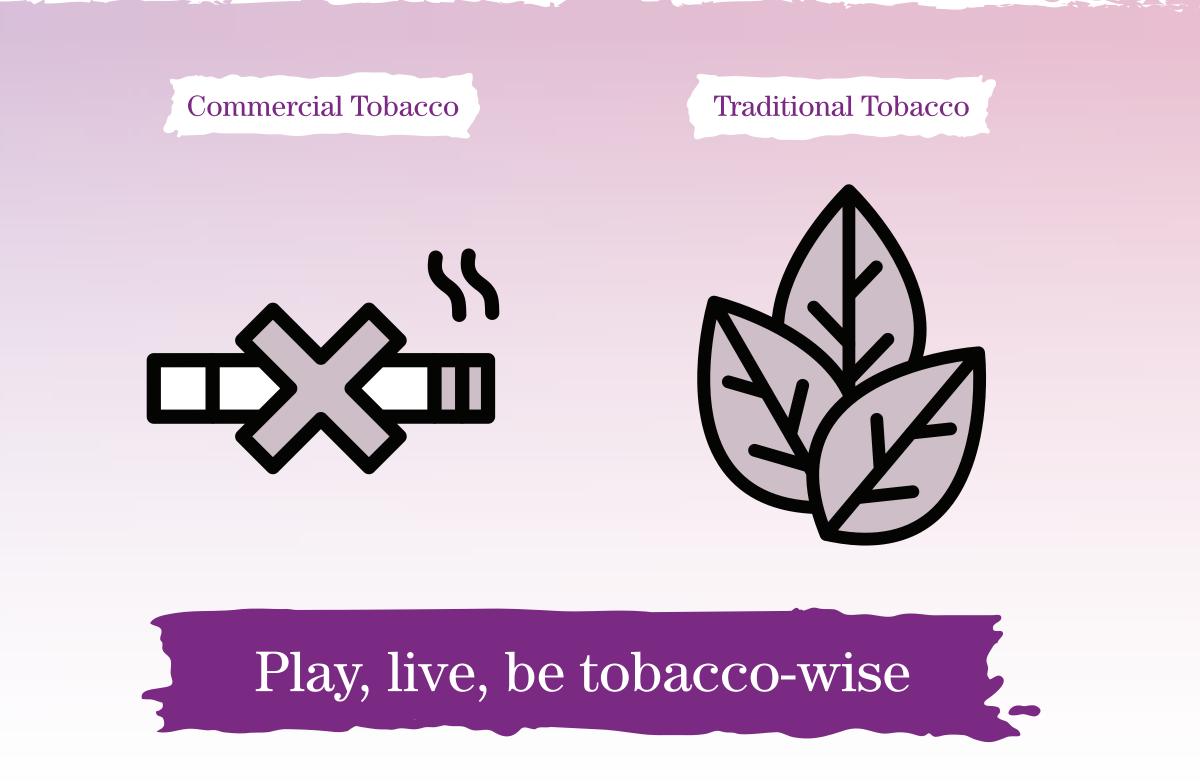
Symptoms and Issues

- A new cough that doesn't go away or gets worse
- Chest pain that is often worse when someone breathes deeply, coughs or laughs
- A hoarse (scratchy-sounding) voice
- Not hungry and/or lose weight for no reason
- Coughing up blood, or rust-coloured spit or phlegm
- Shortness of breath (get out of breath easily and have trouble catching your breath)
- Infections, such as bronchitis and pneumonia, that do not go away or keep coming back
- Wheezing (a whistling or rattling sound when you breathe)
- Abnormal blood tests

See your health care provider if you have symptoms of lung cancer.



Smoking **Cessation**



Smoking Cessation



Quitting Smoking

Traditional tobacco is used in many different ceremonies for spiritual purposes. It does not have the same connection to disease as commercial tobacco.



Quitting smoking is one of the best things a person can do to improve their overall health, including reducing their chance of getting cancer.

Quitting can be hard, but it is possible, and someone is more likely to quit if they get help.

If someone currently smokes and comes to one of the Ontario Lung Screening Program (OLSP) locations, they will be offered free services to help them quit smoking.

Indigenous Tobacco Program

The Indigenous Tobacco Program (ITP) works directly with First Nations, Inuit, Métis and urban Indigenous communities and organizations to provide commercial tobacco, cannabis and vaping prevention and cessation workshops. The ITP also works to address chronic disease more broadly (i.e., healthy eating, physical activity, managing stress).



For more information on the ITP or on how to quit smoking, please visit: **TobaccoWise.com**

People can also contact the following services directly for help to quit smoking:

- Talk Tobacco: by dialing 1-833-998-TALK (8255) or visiting <u>TalkTobacco.ca</u>
- Health811: by dialing 811 (TTY: 1-866-797-0007)