



NACCHO

National Aboriginal
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SHOULD I SCREEN FOR LUNG CANCER?

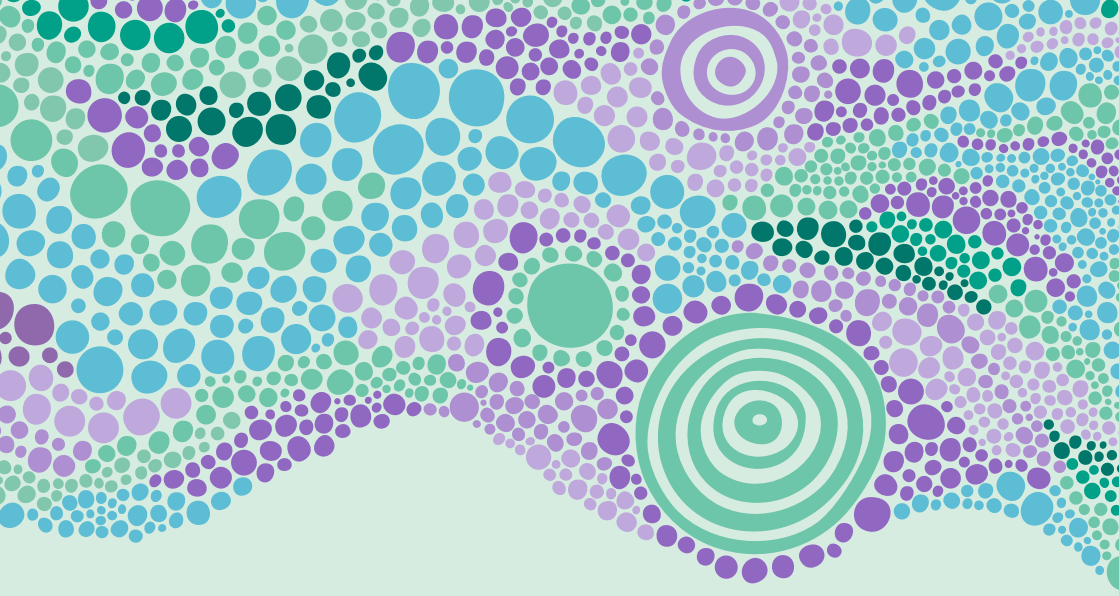


NATIONAL
**LUNG CANCER
SCREENING**
PROGRAM

The National Lung Cancer Screening Program
is an Australian Government program



**Lung
Screening**



ACKNOWLEDGEMENT

We acknowledge the Aboriginal and Torres Strait Islander peoples on whose lands we conduct our work and offer our respects to all Elders and their continuing care for Country and connection to culture.

The development of this resource was led by Yardhura Walani, National Centre for Aboriginal and Torres Strait Islander Wellbeing Research, Australian National University.

This resource was developed by Aboriginal and Torres Strait Islander peoples for Aboriginal and Torres Strait Islander peoples.

Unless otherwise specified, all images supplied by the Australian Government Department of Health, Disability and Ageing.

SHOULD I SCREEN FOR LUNG CANCER?

Lung cancer affects many Aboriginal and Torres Strait Islander people, families and communities.

It is the most common type of cancer and the most common cause of cancer death among Aboriginal and Torres Strait Islander people.

More than 7 out of 10 of lung cancers diagnosed in Australia are caused by tobacco smoking.

Lung cancer screening provides an opportunity to change this and improve health outcomes for our communities.

Screening helps to detect cancers at an early stage, which can lead to better treatment options and outcomes.

It is expected that Australia's National Lung Cancer Screening Program will save hundreds of lives each year from lung cancer.

It is estimated that **7 out of 10 lung cancers** will be found early with screening.



Less than **1 out of 10 lung cancers** will be found early with no screening program.



WHAT IS THIS SHARED DECISION-MAKING TOOL FOR?

This tool is to help you (and your family) and your health professional decide if you would like to participate in lung cancer screening.

You are eligible to screen if you:



50-70
years old

Are 50-70 years old;
and



Currently smoke or
have quit smoking in
the last 10 years; and



Have a 30-pack year
history of smoking (e.g.
smoked a pack a day
for 30 years); and



Don't have any signs
of lung cancer

Screening for lung cancer involves a scan of your chest called a low-dose CT scan.

The ***Making Decisions Together*** model can help you to talk about what is best for you and make a shared decision with your health professional. This could be your doctor, nurse, or an Aboriginal and Torres Strait Islander Health Worker or Practitioner.

People who are not eligible to screen, who would like more information, can speak to their health professional.

Figure 1. The ***Making Decisions Together*** model to support an informed decision for people participating in lung cancer screening.



1. WHAT ARE YOUR CHOICES?

You can yarn with your health professional about your choices:

1. GP refers for screening

Your doctor or nurse practitioner will write you a referral to have a chest scan, called a low-dose CT scan.

OR

2. Not right now

Talk with your health professional about a time you would like to discuss it again.

You can change your mind at any time.

With either option you can have a yarn with any other people important to you.

With either option, you can be offered support to stop smoking.

If you still need more information after you complete this tool, speak to your health professional.





2. WHAT ARE THE BENEFITS?

These boxes identify the benefits (why should you screen) and potential harms (what else should you know about screening) for people who participate in lung cancer screening.

Why should I screen?

- ✓ Screening can detect lung cancer early, even when there are no symptoms.
- ✓ Early detection of lung cancer increases the options for treatment, which can lead to longer and healthier lives.
- ✓ Lung cancer screening is done with low-dose CT scans. These scans screen your whole chest and may pick up other concerns that your healthcare professionals can talk to you about.
- ✓ Smoking is the biggest risk factor for lung cancer and quitting can prevent you from getting it. If you smoke or have quit smoking in the past 10 years, lung cancer screening may benefit you.

For most people, participation in the National Lung Cancer Screening Program will not be a one-off scan and the benefits and risks may need to be assessed for each scan.



What else should I know about screening?

- Having scans for lung cancer screening will expose you to a very small amount of radiation. For those eligible, the benefits of screening outweigh the potential harms from exposure.
- Lung cancer screening may lead to a false-positive result (i.e., the scan result suggests you may have cancer, but follow-up investigations say you do not). This can cause you and your family unnecessary worry.
- Some cancers are very slow growing and may not cause problems during your lifetime. This is called “overdiagnosis” and happens for around 1 in 30 cancers found during lung cancer screening. Overdiagnosis can happen with any screening or medical test.
- The low-dose CT scan is free as part of the National Lung Cancer Screening Program. However, there may be other direct and indirect costs to consider (e.g. cost of travel to have the scan, GP consultation costs if applicable).



Image supplied by Spartan First Imaging, Kalgoorlie. CT artwork by Wongai and Mirning artist Carol Thompson.





3. WHAT ARE THE NEXT STEPS?

Now you know what your choices are, it is important to have a yarn with your health professional about what happens next.

If you choose to undertake lung cancer screening, these are the next steps you may wish to discuss with your healthcare provider:

- 1** Getting the referral and making the appointment for the scan: who makes the appointment, how to make your own appointment?
- 2** Going to the scan: location of the scan, preparing for the scan (e.g., what to wear), transport services to attend scan.

Costs of lung cancer screening: While the scan is bulk billed there may be other costs associated with the appointment, such as travel or parking costs.
- 3** Having the scan: The scan process takes 5 to 10 minutes, does not involve any needles or injections, and is a scan of the chest.
- 4** Getting your results: By who, how and when will you be told the results of the scan?
- 5** Follow up investigations: Depending on the results, you may need to have further scans or investigations; what are these and what might the timeframes be? If your scan is all clear, you will be invited to re-screen in two years.
- 6** Support to stop smoking: This is available to all people who currently smoke, even if you choose not to screen at this time.



National Cancer Screening Register: Your healthcare provider will register you with the National Cancer Screening Register so that your results can be recorded and reminders for future screening can be sent to you. If you do not wish to be registered, you can speak to your healthcare provider.

If you choose the 'not right now' option, you may wish to discuss the following with your healthcare provider:

- 1** Support to stop smoking.
- 2** What happens if I choose to wait (e.g., It is okay to take a break when making your decision, delayed decisions can reduce the potential for finding cancer early).
- 3** Making a time to revisit the decision.





WHAT ARE YOUR CURRENT NEEDS AND SUPPORTS?

It is important to know what you and your family need to support screening.

You may wish to think about and talk to your healthcare provider about who you would like involved in making these decisions with you.

This may include family and community members and/or healthcare workers such as Aboriginal and Torres Strait Islander Health Workers/Practitioners.



What supports are needed for you and your family for you to have your scan?

You may want to think about supports such as:



Having a support person attend with you



Support to quit smoking



Information about screening and lung cancer



Social, emotional and practical supports



Interpreters



Travel assistance



5. WHAT IS IMPORTANT TO YOU?

This is an opportunity to talk to your healthcare provider about the things that are important to you that may help you make your decision about lung cancer screening.

You might consider your connection to family and Country, your personal experiences, beliefs and values, and cultural role, responsibilities and local community protocols.





6. MAKING YOUR DECISION AND TAKING ACTION

Participating in screening can be a way to focus on your health. Do you feel confident to make your decision?

Having a yarn with the people you want involved in making this decision with you can help you decide if you wish to screen now or later.

For more information:

About the National Lung Cancer Screening Program:
health.gov.au/our-work/nlcsp/resources/general-public



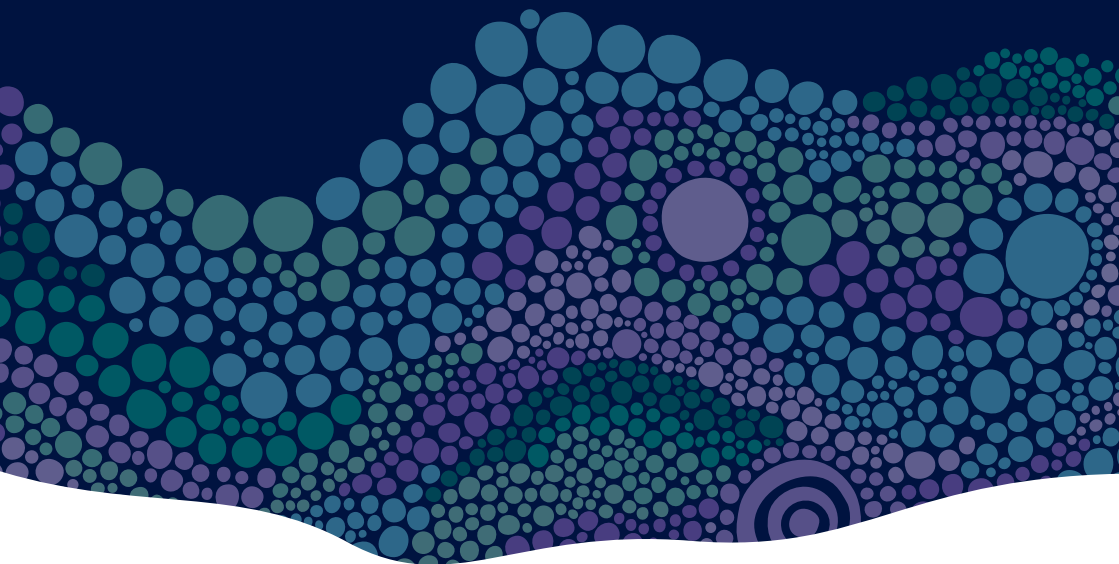
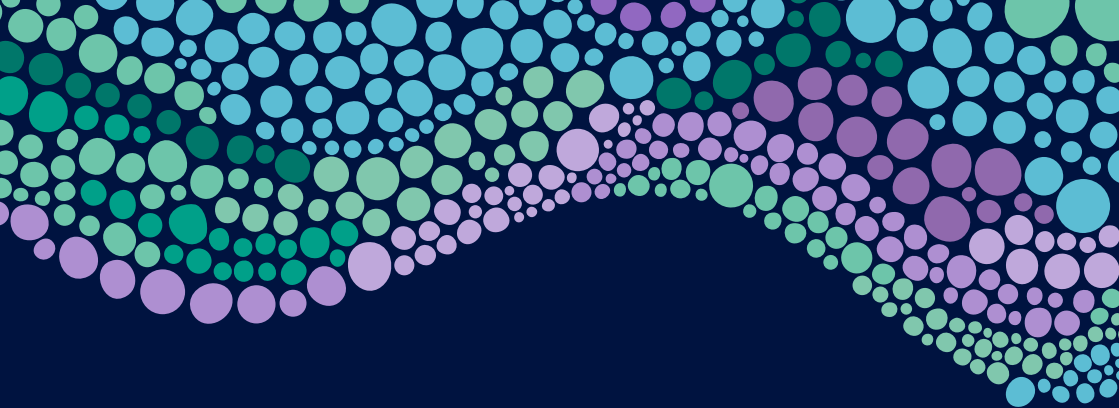
About lung cancer:
ourmobandcancer.gov.au/common-cancer-types/lung



Help to stop smoking:

Aboriginal Quitline:
aql.org.au





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naccho.org.au/lung-cancer