

How Screening Saves Lives: Breast Cancer and Lung Cancer Screening in Low Socioeconomic Status Populations

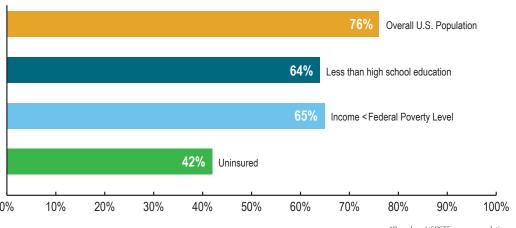
Breast and lung cancers are responsible for a large portion of cancer deaths, causing an estimated 170,770 combined deaths in 2023.¹ Disparities and significant differences in early detection, diagnosis, treatment, and survivorship persist for breast and lung cancer, partially due to socioeconomic status (SES) characteristics, such as level of income, education, and access to health care.²,3

Breast Cancer

Breast cancer is the most common cancer diagnosis and the second most common cause of cancer death among women in the United States, accounting for 15% of all cancer deaths in women in 2023. Mammograms can detect cancer early when it can be easier to treat. Early detection has increased the 5-year survival rate for invasive breast cancer to an estimated 91%.

Breast cancer does not affect all populations equally. For instance, 5-year relative survival rates for Black women with breast cancer are 9% lower than for White women.¹ Additionally, women with low SES characteristics are less likely to be up to date on cancer screening, increasing the risk of later diagnosis and worse cancer outcomes.

Bar Graph 1: Percent of Women Who are Up to Date on Breast Cancer Screening by Selected SES Demographic¹³



*Based on USPSTF recommendations

Lung Cancer

Lung cancer is the most common cause of cancer death for both men and women. Commercial tobacco use causes 80% or more of lung cancer cases. However, environmental factors, such as exposure to radon or secondhand smoke, are also associated with lung cancer.⁵

Lung cancer screening can detect lung cancer in early stages, when treatment is most effective. Early detection of lung cancer can lower the rate of death by an estimated 20%.⁶ However, screening rates remain low, and most cases of lung cancer are diagnosed in advanced stages with low 5-year survival rates.⁷





of ~8.51 million eligible people received lung cancer screening (2020).8

How Can States, Organizations, and Employers Help Cultivate Healthier Communities?

Cancer screening is not a one-time event, and effective screening requires multifold care. To improve cancer survival rates and decrease cancer inequities, organizations can send reminders for screenings, provide in-house screening when possible, and help resolve barriers to care, such as transportation or appointment scheduling. The Community Guide notes that the Community Preventive Services Task Force recommends interventions that engage community health workers and patient navigators to increase screenings. Outreach campaigns that pair cancer screenings, such as mammography and lung cancer screening, can reach more people. Because more women are up to date on breast cancer screening than lung cancer screening, identifying low-income women eligible for lung cancer screening during breast cancer screens can help close the lung cancer screening gap.

Who Should Get Screened for Lung Cancer?¹²

People who are at a high risk of lung cancer are encouraged to talk to their doctor about getting screened for lung cancer, including:

- · People with a history of smoking,
- People aged 50-80 years with a smoking history of 20+ pack years who are still smoking or have quit within the last 15 years,
- People with a history of radon or asbestos exposure, and
- People with a family history of lung cancer.

As reflected in the American Lung Association's <u>State of Lung Cancer Report</u>, lung cancer screening rates among adults eligible for or considered at high risk and eligible varies by state.

Featured Resource:

The Pink & Pearl Campaign, originally spearheaded by the Tennessee Department of Health, pairs breast and lung cancer screening to help improve lung cancer screening rates among women. The American College of Radiology has expanded the Pink & Pearl Campaign to reach women nationwide.

Resources for Free and Low-Cost Screening, Follow-up, and Support:

American Lung Association's <u>State of Lung Cancer Report</u>, <u>Saved by the Scan Campaign</u>, <u>How Saved By The Scan Saved Milli's Life</u>, and <u>Saved By The Scan: A Hope Story</u>
American Academy of Family Physicians' <u>Neighborhood Navigator</u>

American Cancer Society's (ACS) <u>Patient Programs and Services</u> and <u>Crucial Catch Initiative</u>
American Lung Cancer Screening Initiative's <u>Leaders for Lung Cancer Screening Public Service Announcements</u>

American Society of Clinical Oncology Navigating Cancer Care Resources Cancer Care's Lung Cancer Stories of Help and Hope

References:

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- ² Eliminate Inequities—National Cancer Plan. National Cancer Institute. Posted April 3, 2023. Accessed October 12, 2023. https://nationalcancerplan.cancer.gov/goals/eliminate-inequities
- 3 Healthy People 2030 Social Determinants of Health Literature Summaries. United States Department of Health and Human Services. Accessed October 12, 2023. https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries
- 4 Breast Cancer Screening. National Cancer Institute. Updated August 2023. Accessed October 12, 2023. https://progressreport.cancer.gov/detection/breast_cancer
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- ⁶ Lung Cancer Key Findings. American Lung Association. Updated November 17, 2022. Accessed October 12, 2023. https://www.cdc.gov/cancer/lung/basic info/risk factors.htm
- ^{7.} Siegel RL, Miller KD, Wagle NS, Jemal A. Cancer Statistics, 2023. CA: A Cancer Journal for Clinicians. 2023; 73(1):17-48. doi: https://doi.org/10.3322/caac.21763

Centers for Disease Control and Prevention's My Family Health Portrait App,

Cancer Screening Change Packages for Health System Interventions, Cancer Survivor Stories, and National Breast and Cervical Cancer Early Detection Program

National Cancer Institute's Cancer Support Services Directory

National Lung Cancer Roundtable and ACS' National Lung Cancer Screening Day

National Quality Forum and Humana's Food Insecurity and Health Guide

U.S. Food and Drug Administration Oncology Center of Excellence's Cancer Screening PSA

Veterans Administration National Oncology Program's Cancer Screening for Veterans

West Virginia University Cancer Institute's LUCAS Program

- ⁸ Fedewa SA, Bandi P, Smith RA, Silvestri GA, Jemal A. Lung Cancer Screening Rates During the COVID-19 Pandemic. Chest. 2022; 161(2):586-589. doi: https://doi.org/10.1016/j.chest.2021.07.030
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