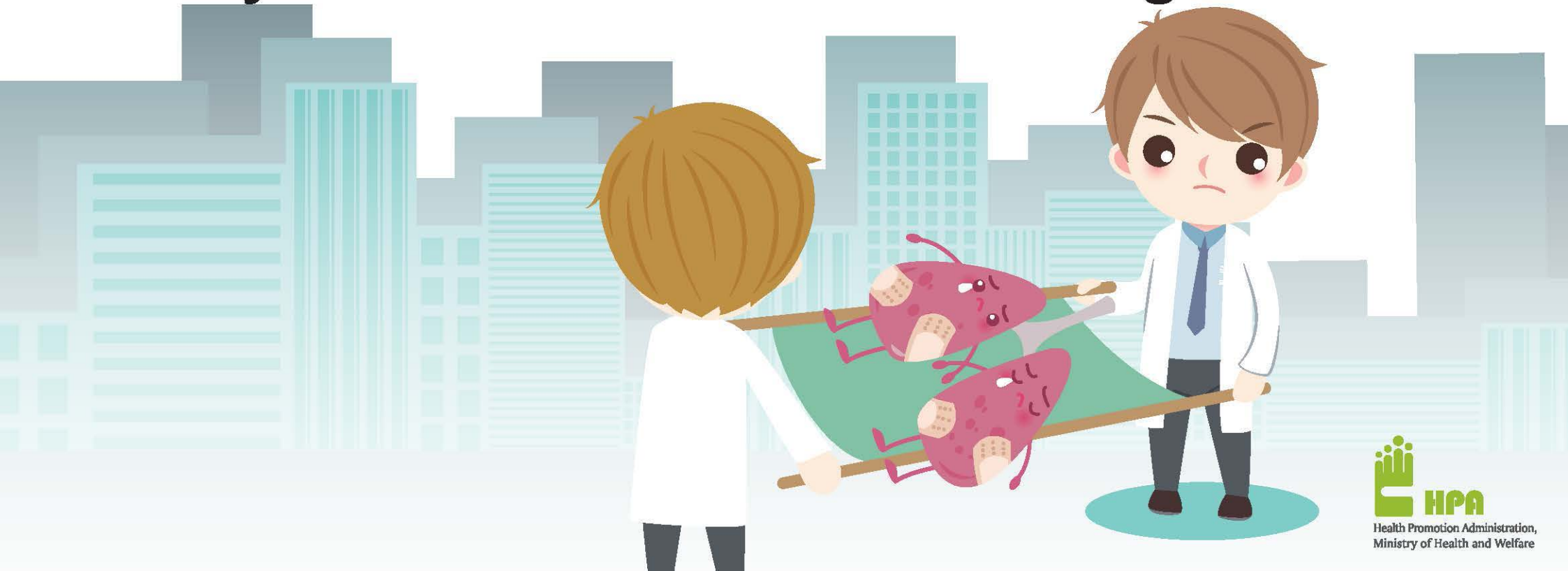


Lung cancer

the Big Questions?

**7 illustrations with the facts
you need to know about lung cancer**





Q1


- Smoking rates have steadily declined, yet an increase in the number of cases being diagnosed with lung cancer. Is that rising because lung cancer has nothing to do with smoking?

No!

The number of patients with lung cancer has been increasing, reflecting the increase in aging population. Also, it takes at least 20 years to develop lung cancer for smoking. The drop in lung cancer rates began, preceding the decline in smoking rates by approximately 20-30 years.



20 years



Q2

Most women with lung cancer are not smokers.
Does that mean they're higher risk than those who
smoked?

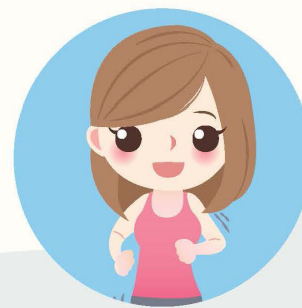
No!

From the analysis of data, it's clear that smokers are greater risk than non-smokers in female.



Female smoker

14 out of every 10,000
develop lung cancer



Female non-smoker

4 out of every 10,000
develop lung cancer

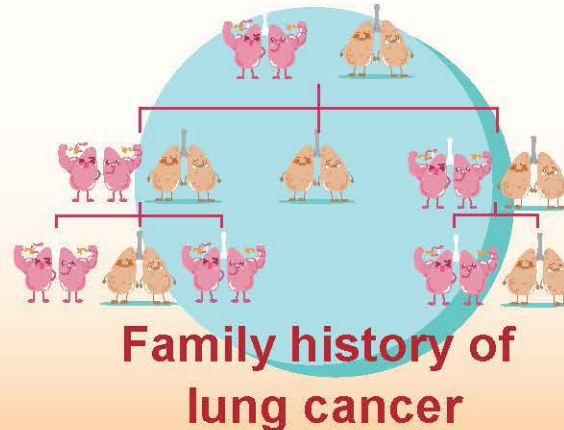


**Female smokers in Taiwan are 3-4 times more likely
than female non-smokers to develop lung cancer.**

Q3

The number of lung cancer occurs is on the rise.
Which is the main culprit?

There are many risk factors for lung cancer. The leading cause of lung cancer is smoking, which is linked to about 70% of lung cancers.





Q4

Low-dose computed tomography (LDCT) screening is hailed as a way to catch early-stage lung cancer. Is LDCT as promising as it sounds?

LDCT is a type of CT scan that can reveal lung abnormalities, even small nodules. As a screening tool, LDCT can indeed be used to detect early-stage lung cancers. Nevertheless, it also has potential harms.

Pros

1. Nodules less than 1 cm could be detected.
2. LDCT screening reduced mortality in heavy smokers, compared with screening by chest X-ray.

*Note: A nodule is an abnormal growth on the lungs that show up as a white spot on image scans.

Note: A nodule is an abnormal lung growth that shows up in scans as a white spot

Cons

1. False-positive results could give rise to emotional distress.
2. Invasive procedures may increase the risk of complications like pneumothorax.
3. Overdiagnosis could lead to treatment that is not needed.
4. Radiation risk from repeated follow-up LDCT.
5. Costly.

Q5

Should everybody get screened for lung cancer with LDCT?

No!

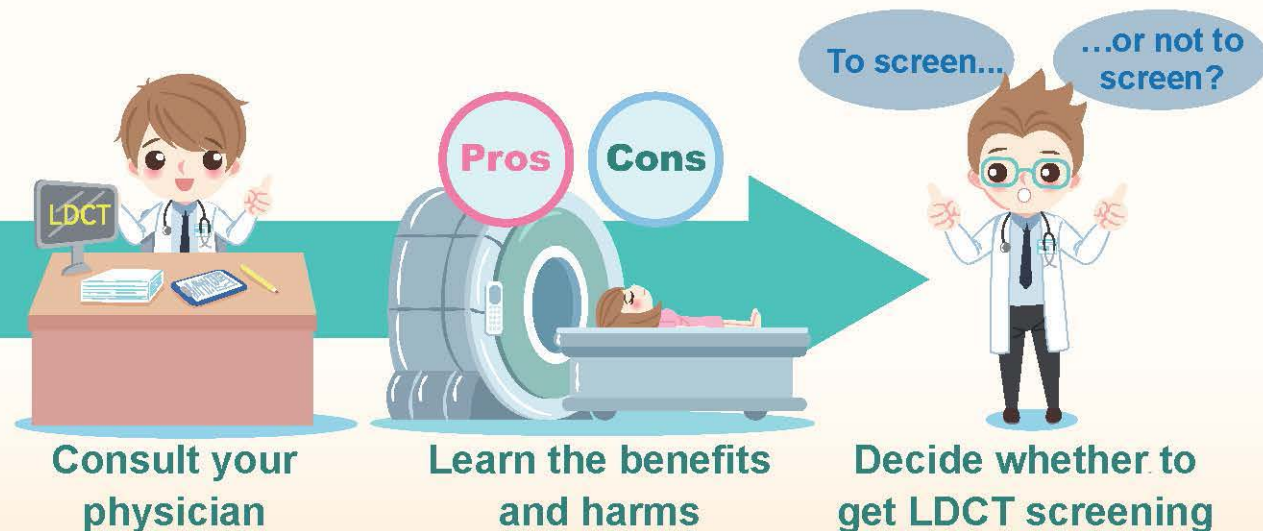
LDCT screening isn't recommended for everyone

Who should be screened?

1. Heavy smokers aged 55-74 years (smoking history of 30 pack years or more)
2. If you are not at high risk for lung cancer, there is insufficient evidence to recommend for LDCT screening

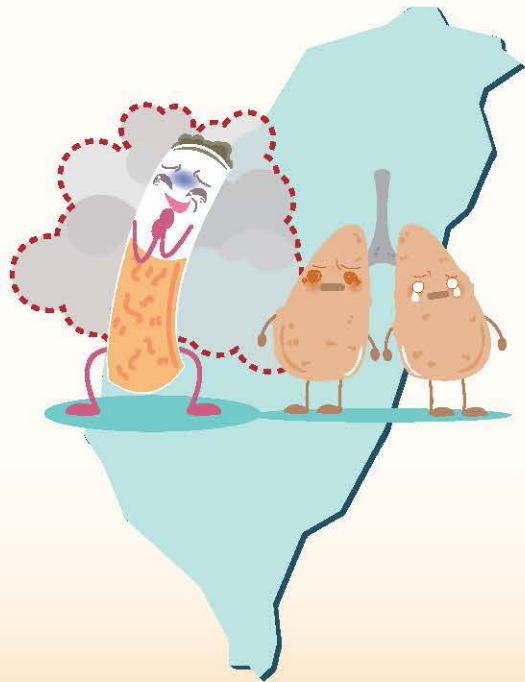
Here's what to do:

If you are at high risk for lung cancer and thinking about getting screened, talk to your doctor.



TOPIC: Key Point Summary

Smoking is the leading cause
of lung cancer.



Before getting LDCT screening,
be sure to understand
the pros and cons and discuss
with your doctor.

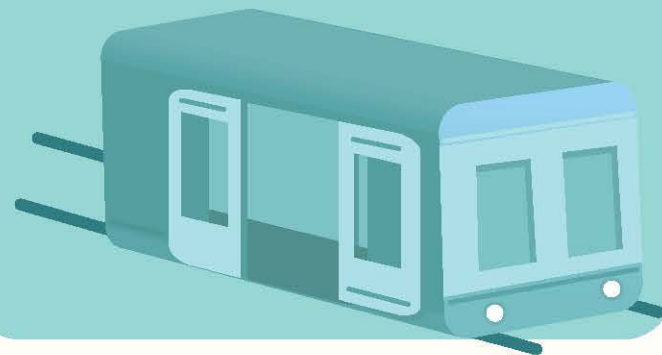


Ways to prevent against lung cancer

Say no to firsthand, secondhand, and thirdhand smoke to keep your lungs healthy.



Take public transport or ride a bike to reduce air pollution.



As air pollution gets worse, wear a facemask to protect by yourself.



Recognize the 7 sign of lung cancer is key to early detection:

- *A cough that is getting worse and lasts for weeks
- *Coughing up blood or rust-colored phlegm
- *Chest pain
- *Hoarseness
- *Pain in bones
- *Unintentional weight loss

