

- Lung cancer is the leading cause of cancer deaths in Michigan. ¹
- In 2019, it is estimated that there will be **8,070** new cases of lung cancer and **5,410** deaths from lung cancer in Michigan. ¹

Lung Cancer Screening

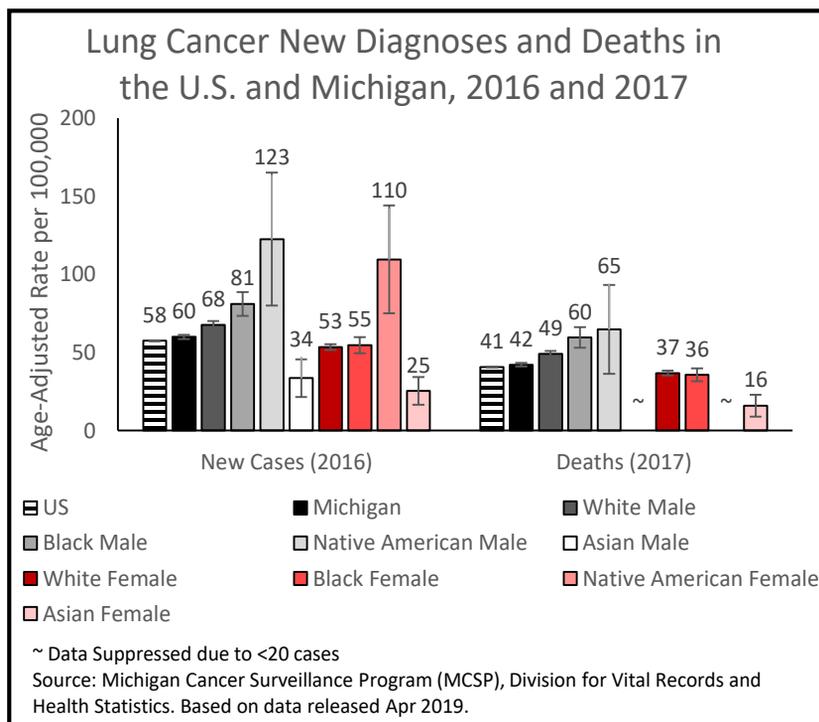
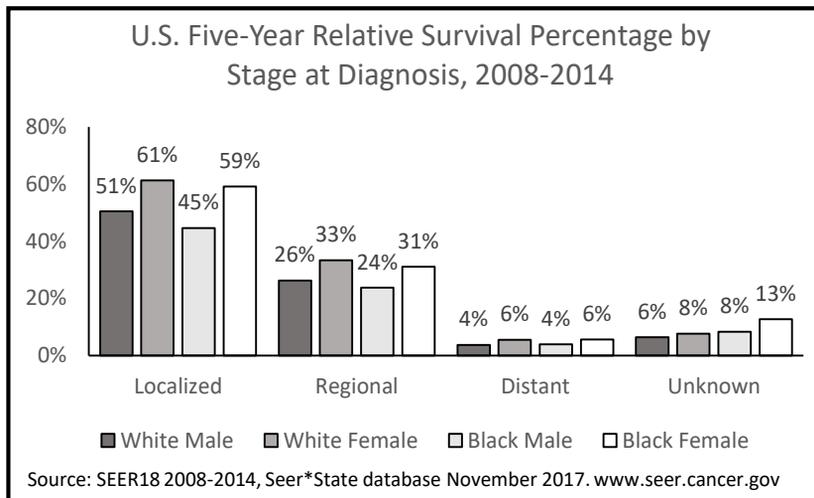
- Lung cancer screening with low-dose spiral Computed Tomography (CT) Scan has been shown to decrease mortality. Lung cancer screening is recommended for people who:
 - Have a 30 or more pack-year smoking history **AND** currently smoke or have quit in the past 15 years **AND** are between 55 and 80 years old ²
 - About 6 out of 100 adults meet this recommendation in Michigan. ³
- Among the recommended population, 16% report **EVER** having a low-dose spiral CT scan and 6% report having the scan in the last year. ³

Early Detection is key!

- Five-year relative survival for lung cancer patients diagnosed in the localized stage is 56%; however, in Michigan only 24% of people are diagnosed at this stage. ^{4,5}

Michigan Lung Cancer Disparities

- In Michigan, 45% of Native Americans report being a current smoker. ³
- Native American males and females have the highest number of new cases and deaths from lung cancer compared to other races.
- Black males are 37% more likely to develop lung cancer than White males. ⁶
- Black males are more likely to choose menthol cigarettes due to targeted advertisements. ⁶
 - Research suggests the chemical difference of menthol cigarettes may be associated with more severe levels of addiction. ⁶
- Other factors that may contribute to the higher rates of lung cancer in American Indians and Black males include: limited access to health care, increased exposure to environmental toxins from nearby industrial sources, and cultural practices. ⁶

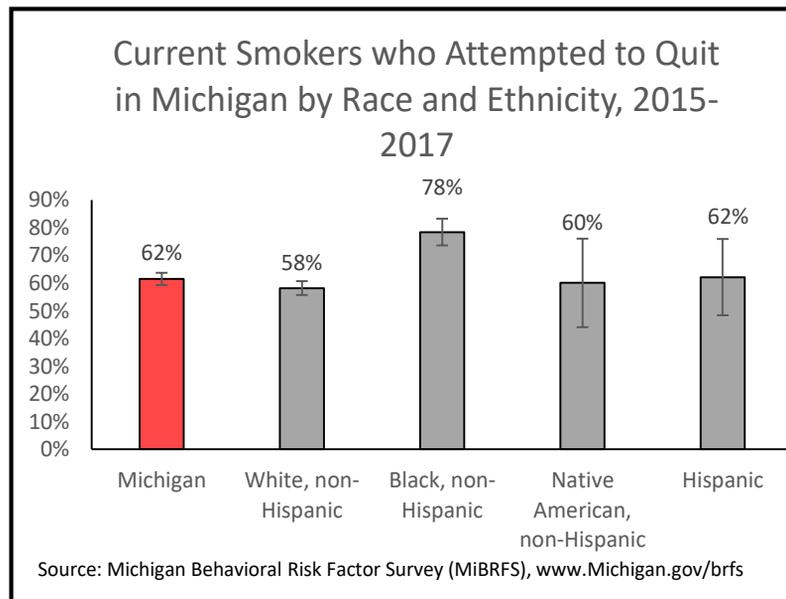


What puts people at high-risk for lung cancer? ⁷

- **Smoking:** About 90% of lung cancers are associated with smoking.
 - Native Americans and Blacks have the highest smoking rates in Michigan (45% and 24%). ³
- **Secondhand smoke exposure**
 - Native Americans and Blacks report the highest exposure to secondhand smoke in Michigan (37% and 34%). ³
- **Radon exposure:** The leading cause of lung cancer in non-smokers.
- **Exposure to certain chemicals:** Asbestos, arsenic, diesel exhaust, silica, and chromium are most commonly associated with lung cancer.
- **Family history of lung cancer**
- **Prior diagnosis with lung cancer**
- **Radiation therapy to the chest:** Cancer survivors who had chest radiation have a higher risk of developing lung cancer.

Tobacco Cessation

- From the Michigan Behavioral Risk Factor Survey (MiBRFS), Black respondents were more likely to report they were attempting to quit compared to other races.
- Evidence shows that cancer patients benefit from smoking cessation. Quitting can improve the effectiveness of treatment, prolong survival, improve quality of life, and reduce the risk of developing a secondary cancer. ⁸ Providers should consider:
 - Talking to patients about the health consequences of smoking and secondhand smoke exposure.
 - Referring patients to tobacco dependence treatment resources like the Michigan Tobacco Quitline: 1-800-QUITNOW (785-8669) or <http://michigan.quitlogix.org>.
 - Visiting the MDHHS Tobacco Control Program for resources: www.michigan.gov/tobacco.



Radon Exposure ⁹

- Radon is a colorless, odorless, radioactive gas that can cause lung cancer.
- To avoid long-term exposure, encourage patients to get **their homes tested for radon**.
- Radon test kits can be obtained from county and city health departments.
- For more information about radon and how to obtain radon test kits please visit www.michigan.gov/radon or email radon@michigan.gov.

References: 1) American Cancer Society. Cancer Statistics Center: Michigan at a Glance 2017. Retrieved at: <http://cancerstatisticscenter.cancer.org/#/> 2) The National Lung Screening Trial Research Team. Reduced lung-cancer mortality with low-dose computed tomographic screening. NEJM. 2011; 365(5): 395-409. 3) Michigan Behavioral Risk Factor Survey. www.Michigan.gov/brfs. Division of Lifecourse Epidemiology and Genomics. Michigan Department of Health and Human Services. 2016. 4) Michigan Cancer Surveillance Program. Invasive lung cancer incidence by stage, 2015. Division of Vital Records and Health Statistics. Michigan Department of Health & Human Services. Accessed June 2018 5) Surveillance, Epidemiology, and End Results (SEER) Program (www.seer.cancer.gov) SEER*Stat Database: Incidence - SEER 18 Regs Research Data + Hurricane Katrina Impacted Louisiana Cases, Nov 2017 Sub (2000-2015), National Cancer Institute, DCCPS, Surveillance Research Program, Surveillance Systems Branch, released April 2018, based on the November 2017 submission. 6) Too Many Cases, Too Many Deaths: Lung Cancer in African Americans. American Lung Association. Retrieved at: <http://www.lung.org/assets/documents/research/ala-lung-cancer-in-african.pdf>. 7) Centers for Disease Control and Prevention. What are the risk factors for lung cancer? Retrieved at http://www.cdc.gov/cancer/lung/basic_info/risk_factors.htm. 8) Cataldo JK, Dubey S, Prochaska JJ. Smoking Cessation: an integral part of lung cancer treatment. Oncology. 2010; 78 (5-6): 289-301 9) American Cancer Society. Radon and Cancer. Retrieved at <https://www.cancer.org/cancer/cancer-causes/radiation-exposure/radon.html>