



# Phelps Health offers lung cancer screening for high-risk patients

ROLLA, Mo. – If you are 50 years or older and are or were a heavy smoker, you may be considered high-risk for developing lung cancer. Fortunately, a simple scan could save your life.

Just like a colonoscopy or mammogram can help detect abnormalities and detect colon or breast cancer, respectively, lung cancer screening is a preventive tool to look for signs of lung cancer in high-risk patients. Lung cancer screenings can find concerns before you have symptoms.

Lung cancer is the third most common type of cancer and the leading cause of cancer-related deaths in the US.

An estimated 5,690 new cases of lung and bronchus cancer will be diagnosed in Missouri this year, and about 3,200 Missourians will die from lung and bronchus cancer in 2022. A majority of lung cancer deaths are related to smoking.

Lung cancer screening using a low-dose computed tomography (LDCT), or lowdose CT, scan is recommended for people who meet the following criteria:

- Ages 50-80
- Minimum 20 pack-years smoking history (To calculate pack-years, multiply the number of cigarette packs you smoked per day by the number of years you have smoked.)
- Current smoker or former smoker who quit less than 15 years ago
  - No symptoms of lung cancer · Participated in a shared decision-
- making visit with your healthcare provider Prior counseling on quitting smoking,

if applicable

For example, a 60-year-old patient who quit smoking 10 years ago and has no symptoms of lung cancer (persistent cough, constant chest pain, coughing up blood, etc.) would be eligible, if they smoked heavily.

A heavy smoker is defined as someone who has at least 20 pack-years. If this individual smoked one pack of cigarettes (one pack equals 20 cigarettes) per day for 20 years, they would have a smoking history of 20 pack-years.

The patient's doctor may identify this individual as a potential candidate for lung cancer screening. The patient would meet with their healthcare provider for a shared decision-making visit in order to confirm their eligibility and discuss the risks and benefits of screening. The shared decisionmaking visit can be conducted during any in-person visit with your healthcare

Despite the benefits of lung cancer screening, only about one in 15 eligible people were screened in 2019 and 2020, according to the American Cancer Society, which recommends lung cancer screening with LDCT for patients at high risk of developing lung cancer.

Yearly LDCT scans are the only screening test shown to lower the chance of death from lung cancer, according to several studies. Scans from LDCT may reveal abnormalities that could be lung cancer or other health issues. Screening also may provide smokers with motivation to quit, said Devon Griep, lung cancer screening coordinator at Phelps Health.

If the doctor and patient decide to move forward with the screening process, the doctor will place an order for the scan, and the patient will be contacted to schedule the scan.

On the day of the scan, the patient will go to Phelps Health and can expect to be in the clinic for about 30 minutes to an hour.

Phelps Health is currently accredited by the American College of Radiology to perform LDCT scans, according to Christopher Spencer, MD, DABR, the medical director of the Phelps Health Delbert Day Cancer Institute (DDCI) and medical director of radiation oncology at Phelps Health.

The CT scan will take pictures of your lungs, and a radiologist will scan the images for abnormalities or nodules – spots on your lungs. The scan takes about a minute and no needles or contrast dyes are used. LDCT scans use less amounts of radiation compared to other CT imaging.

The patient will be contacted via

MyChart, phone call or mail – usually within four business days of their scan being read. If the results are negative, the patient will return in a year for another scan as long as they are still eligible. If the results are positive, the patient and their provider will discuss the best next steps.

Medicare and many private insurance companies currently cover the costs of lung cancer screening for eligible patients. Patients should check with their insurance companies if they have questions about their coverage, Griep said.

As a member of the Siteman Cancer Network, Phelps Health's partnership with Siteman Cancer Center "has allowed us to leverage their resources in order to build a [lung cancer screening] program that we hope to play a key role in improving the health and wellness of our community," said Dr. Spencer.

Talk to your doctor to see if an annual lung cancer screening is recommended for you. Learn more about lung cancer screening at phelpshealth.org.

Phelps Health serves over 200,000 residents in south-central Missouri. Phelps Health is county-owned, non-tax supported and is overseen by a five-member elected board. Phelps Health employs more than 1,900 people, including 100-plus providers. Phelps Health, which includes a hospital licensed for 242 patient beds. Its main campus and several clinics is located in Rolla with clinics in Salem, St. James, Vienna and Waynesville. For more information, visit phelpshealth.org.

PATIENT SHERRY Gunnels undergoes a lung cancer screening using a low-dose computed tomography (LDCT) scan with Christy, a CT technologist at Phelps Health.



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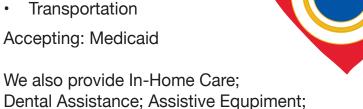
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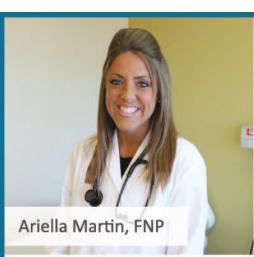
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To date there is no definitive cure for cancer, nor any one preventative treatment. But individuals should not resign themselves to the fact that cancer is inevitable. There are plenty of lifestyle modifications that can go a long way toward reducing cancer risk. Here's a deeper look at some of the more effective.

#### Avoid tobacco

Not only does smoking cause between 80 and 90 percent of lung cancer deaths, according to the Centers for Disease Control and Prevention, it also contributes to many other forms of the disease, including cancers of the pancreas, liver, bladder, and cervix. Quitting smoking and avoiding secondhand smoke can reduce cancer risk.

#### **Exercise regularly**

Physical activity can lower estrogen levels, reduce levels of insulin in the blood, help a person lose weight, and reduce inflammation — all factors that contribute to the formation of cancer. Experts recommend 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity exercise a week.

#### Eat healthy foods

The American Institute for Cancer Research indicates certain minerals, vitamins and phytochemicals can produce anti-cancer effects. Many foods, namely fruits, vegetables, whole grains, and legumes, can boost health and contribute to lower cancer risk.

#### Avoid excessive alcohol consumption

Drinking alcohol regularly increases the risk of cancers to the mouth, voice box and throat, according to the CDC. Furthermore, alcohol consumption is a primary risk factor for liver cancer. By limiting alcohol consumption, individuals can reduce their cancer risk.

Be cautious of hepatitis C Individuals should avoid behaviors that put them at risk of contracting hepatitis C, which causes inflammation of the liver. Hepatitis C can be contracted by receiving a piercing or tattoo in an unsanitary environment, through injecting or inhaling illicit drugs, through unsafe sex, or if you are a healthcare worker exposed to infected blood through an accidental needle prick.

#### **Apply sunscreen**

Protect the skin from exposure to ultraviolet rays from the sun and tanning beds, as skin cancer is the most common form of the disease in the United States. Simply reducing exposure can help prevent skin cancers and other damage. This includes wearing wide-brimmed hats, applying sunscreen with an SPF of at least 30, avoiding the sun between 10 a.m. and 4 p.m., and wearing sun-protective clothing. Tanning

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beds are not safer for the skin than being out in the sun, so they should be avoided.

#### Get enough sleep

The importance of sleep to overall health is easily overlooked. Lancaster General Health says, while there is no specific data

for sleep on cancer prevention, sleep deprivation can lead to harmful behaviors, such as overeating, drinking too much alcohol or being too tired to exercise, each of which increases cancer risk.

Relatively easy lifestyle changes can go a long way toward reducing cancer risk.



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### Myths and facts about **immunizations**

Vaccine skepticism has existed for as long as vaccines have been available. However, many people might not have realized the scope of that skepticism until the last two years, when the world confronted a global pandemic. Though vaccinations against COVID-19 were available less than a year after the World Health Organization first declared a pandemic in March 2020, millions of people refused to be immunized. The lukewarm reaction to the approval of the COVID-19 vaccines is a reflection of the skepticism many people still have about vaccines. Debunking some common myths about immunizations may help people rest

### Myth: Vaccines are not safe.

Facts: The WHO notes that the licensing of a vaccine requires exhaustive evaluation and testing. That evaluation and testing is conducted to determine not just the efficacy of a vaccine, but also the safety of it. Any side effects that appear during the prequalification and licensing phase of vaccine development are thoroughly investigated.

#### Myth: It is better to be immunized through disease than vaccines:

Facts: This was a popular outlook among people who did not choose to receive the COVID-19 vaccine, but the facts do not support it. The WHO notes that the immune response to vaccines is similar to the one produced by natural infection. In addition, WHO warns that the price paid for immunity through natural infection can be significant. Mental retardation, birth defects from congenital rubella infection, liver cancer from the hepatitis B virus, or death from measles are some noted potential consequences of natural infection.

#### Myth: Vaccines cause autism.

Facts: Autism Speaks, an organization devoted to supporting and advocating for individuals with autism and their families, notes that extensive research has been conducted over several decades and concluded that there is no link between childhood vaccinations and autism. In fact, the WHO notes that the author of a 1998 study that raised concerns about a possible link between the MMR vaccine and autism was found guilty of serious professional misconduct by the General Medical Council in 2010.

#### Myth: Vaccines contain mercury, which is dangerous.

Facts: The WHO reports that very few vaccines contain thiomersal, an organic, ethylmercury-containing compound. Vaccines that contain thiomersal have only a small amount of it, and the WHO notes that no evidence exists to suggest that the amount of thiomersal found in vaccines poses a health risk.

#### **Myth: Vaccine-preventable childhood** illnesses are a fact of life.

Facts: Vaccine-preventable diseases are preventable. Such diseases can lead to serious complications in children and adults who are not vaccinated. Complications can include pneumonia, encephalitis, blindness, diarrhea, ear infections, and even death.

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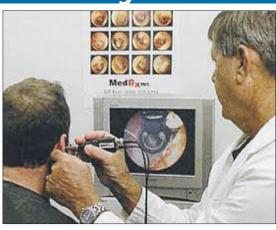
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