



# DE Cancer Consortium and Screening for Life Statewide Lung Cancer Screening Program Status

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DE Cancer Consortium Retreat



# Early Detection And Prevention Committee

**GOAL 1: Continue to promote breast, cervical, colorectal, lung, and prostate cancer screening.**

<b>OBJECTIVE 1D: Decrease the number of late-stage (distant) lung cancer diagnoses by 20%.</b>			
<b>Task/Actions</b>	<b>Responsible Party</b>	<b>Data Source</b>	<b>Timeframe</b>
Determine baseline number of late-stage lung cancers diagnosed.	DPH	DCR	Year 1
Support patient navigators to support lung cancer screening.	ED&P Committee and DPH	Contracts	Year 1
Maintain current and establish new relationships with primary care providers to increase screening rates for Medicare patients.	DPH and Navigators	MOU	Year 1-5
Enhance relationships with Medicaid and FQHCs to increase screening rates.	DPH	Organization data	Year 1-5
Increase the number of screenings performed in areas where late-stage lung cancers are more predominately diagnosed.	Navigators and DPH	Cancer Incidence and Mortality data	Year 1
Explore expanding lung cancer screenings to those with occupational exposure and/or those exposed to secondhand smoke.	DCC	National lung cancer screening guidelines	Year 3
Conduct targeted media campaign aimed at educating providers and consumers on the importance of lung cancer screening.	DPH	National lung data	Year 1 and ongoing





# Lung Cancer in Delaware

- Lung cancer is the **#1** cancer killer in Delaware
  - **14%** of all newly-diagnosed cancer
  - **30%** of all cancer deaths
- **3965** cases of lung cancer were diagnosed among Delawareans and **2,839** Delawareans died from the disease between 2010-2014
- Delaware ranked **10<sup>th</sup>** in the U.S. for lung cancer incidence and **13<sup>th</sup>** in the U.S for lung cancer mortality



# Delaware Lung Cancer Screening Potential

- **Potential of 113 deaths avoided annually**
  - **2839** Lung Cancer Deaths from 2010-2014
  - **567** deaths annually
  - Screening can reduce mortality by 20%
  - Estimated **35,500** Delawareans eligible for Lung Screening





# Lung Screening Program

- Two State Wide **Nurse Navigators** –
  - Christiana Care and Bayhealth
  - Coordination with each site
- The Delaware **Screening for Life Program (SFL)** covers uninsured for lung CA screening
  - Low Dose Helical CT and interpretation
  - Multi Disciplinary Team (MDT) evaluation and subsequent testing
  - If cancer, then coverage transfers to Delaware Cancer Treatment Program
- Radiology Contracting at Christiana Care, Bayhealth, Beebe, Nanticoke, and Delaware Imaging Network
- Multidisciplinary Teams at the above institutions





# CMS & Delaware Coverage Decision

## CMS:

- Age 55 – 74 years
- $\geq 30$  Pack Years
- Current or quit  $\leq 15$  years
- Written Order for LDCT
- Shared decision documentation
- Radiologist & Imaging Center Qualifications
- Data Collection

## DELAWARE:

- Age 55 – 80 years
- $\geq 30$  Pack Years
- Current or quit  $\leq 15$  years
- Written Order for LDCT
- Shared decision with NN
- Radiologist and Imaging Qualifications
- Data Collection
- Reporting and Therapy Algorithms
- Multidisciplinary Referral



# DE Lung Screening Program Status

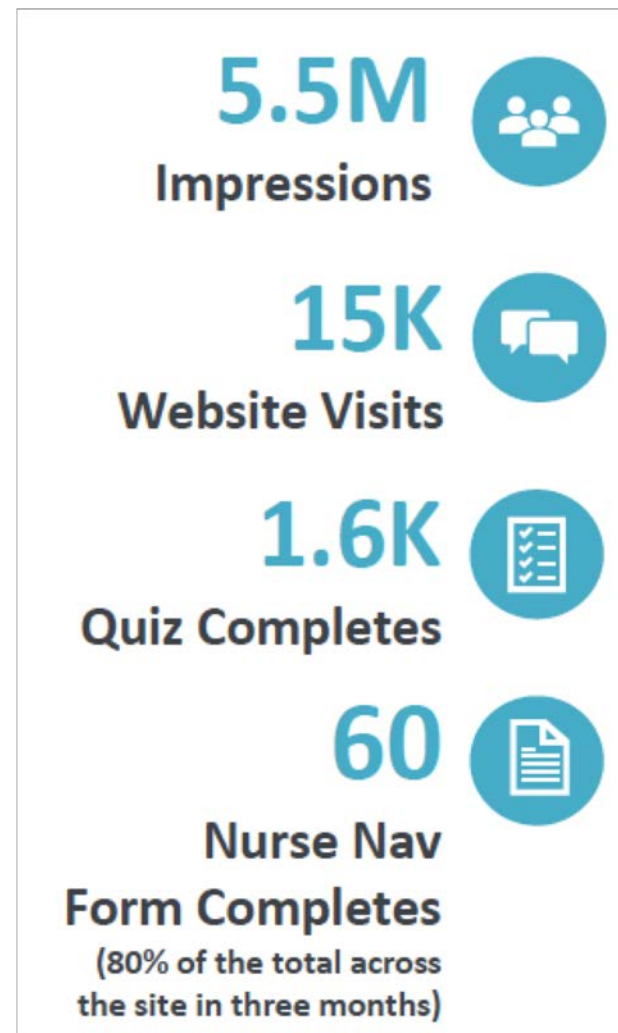
- Data Collection by Nurse Navigators and Storage at the DE Registry (I-ELCAP)
  - Bayhealth, Beebe, and Nanticoke using ACR registry
- Marketing by AB+C
- Smoking Cessation Links – Quitline Refer
- First Enrollment through SFL 3/15/2015
- 328 persons screened through SFL Navigator (12/31/2018)
  - 3.9% - SFL





# Lung Cancer Campaign: Fall 2018

- **Timeframe:** September-November 2018
- **Tactics included:**
  - Print ads in Delaware Medical Journal, Delaware Family Doc, DNA Reporter
  - Branded pharmacy bags
  - Provider email blast
  - Digital ads
  - Pandora :30 radio
  - Facebook





# Lung Cancer Campaign: Creative

## Are you or have you been a smoker?

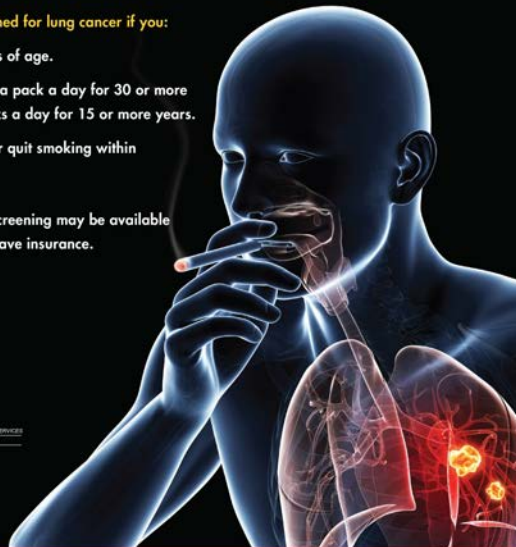
A lung cancer screening could save your life.

A screening called a low-dose CT scan has been approved to help detect lung cancer at an early stage, when it's most treatable. Studies have shown that this form of screening can reduce the risk of dying of lung cancer.

You should be screened for lung cancer if you:

- Are 55 to 80 years of age.
- Smoke or smoked a pack a day for 30 or more years, or two packs a day for 15 or more years.
- Currently smoke or quit smoking within the last 15 years.

A free lung cancer screening may be available to you if you don't have insurance.



**HEALTHY DELAWARE**

DELAWARE HEALTH AND SOCIAL SERVICES  
Division of Public Health  
Bureau of Chronic Diseases

TAKE THE QUIZ TO SEE IF YOU SHOULD HAVE A LUNG CANCER SCREENING:

Visit [HealthyDelaware.org/LungScreening](http://HealthyDelaware.org/LungScreening) or call 302-990-0923 to schedule your screening today.



**HEALTHY DELAWARE**  
Sponsored (demo)

Are you a smoker or an ex-smoker aged 55-80? See if a lung cancer screening may be right for you.

**HEALTHY DELAWARE**

HEALTHYDELAWARE.ORG  
**Take the Quiz Now!**  
If you or a loved one is a current or former smoker, learn...

[Learn More](#)

## Research has shown that a lung cancer screening can save lives.

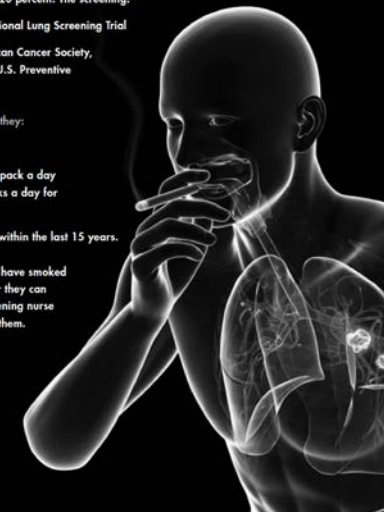
A low-dose CT scan has been proven to reduce mortality risk in smokers and former smokers by 20 percent. The screening:

- Is the result of findings of the National Lung Screening Trial
- Has been endorsed by the American Cancer Society, American Lung Association, and U.S. Preventive Services Task Force

Your patients should be screened if they:

- Are 55 to 80 years of age.
- Have smoked the equivalent of a pack a day for 30 or more years, or two packs a day for 15 or more years.
- Currently smoke or quit smoking within the last 15 years.

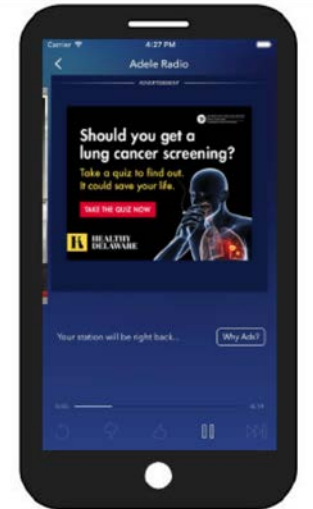
Talk to your patients who smoke or have smoked about the lung cancer screening. Or they can call (302) 754-5574 to have a screening nurse navigator schedule a screening for them.



**HEALTHY DELAWARE**

302-754-5574 | [HealthyDelaware.org/LungScreenings](http://HealthyDelaware.org/LungScreenings)

DELAWARE HEALTH AND SOCIAL SERVICES  
Division of Public Health  
Bureau of Chronic Diseases



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# Lung Cancer Campaign: Spring 2019

- **Timeframe:** April-June 2019
  
- **Tactics include:**
  - **NEW** :30 video for Comcast Cable, Network TV, physician offices
  - Banner stands at supermarkets, community centers, senior centers, walk-in clinics
  - Liquor store stands and floor clings
  - Branded pharmacy bags
  - Print ads in Letters from CAMP Rehoboth, Independent Newspaper, Milford Chronicle, Sussex Post, etc.
  - Pandora :30 radio
  - Facebook & Instagram video ad
  - Native and display banners
  - Keyword and text ads





# Finding Our Eligible Population

- 2018 Behavioral Risk Factor Surveillance Survey (BRFSS) includes pack year questions:
  - **How old were you when you first started smoking cigarettes regularly?**
  - **How old were you when you last smoked cigarettes regularly? What was your age at that time?**
  - **When you smoked, about how many cigarettes did you smoke daily?**
  - **In the last 12 months, did you have a CT or CAT scan? If so, what was the reason?**
- Will provide us with the data needed to measure screening rates





# Finding Our Eligible Population

- In the last 12 months, did you have a CT or CAT scan?
  - Answer choices include:
    - ✓ Yes, to check for lung cancer
    - ✓ No (did not have a CT scan
    - ✓ Had a CT scan, but for some other reason

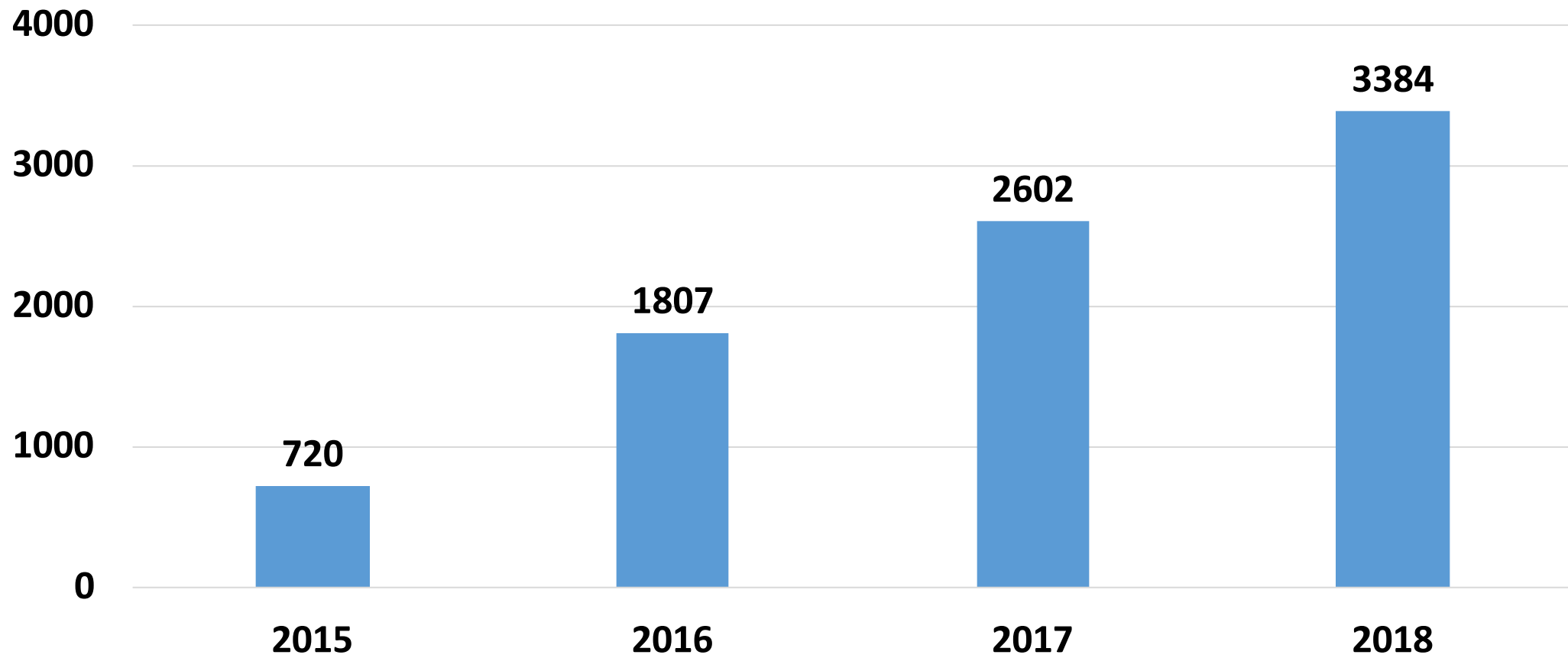




Delaware Lung  
Screening Results  
2015-2018

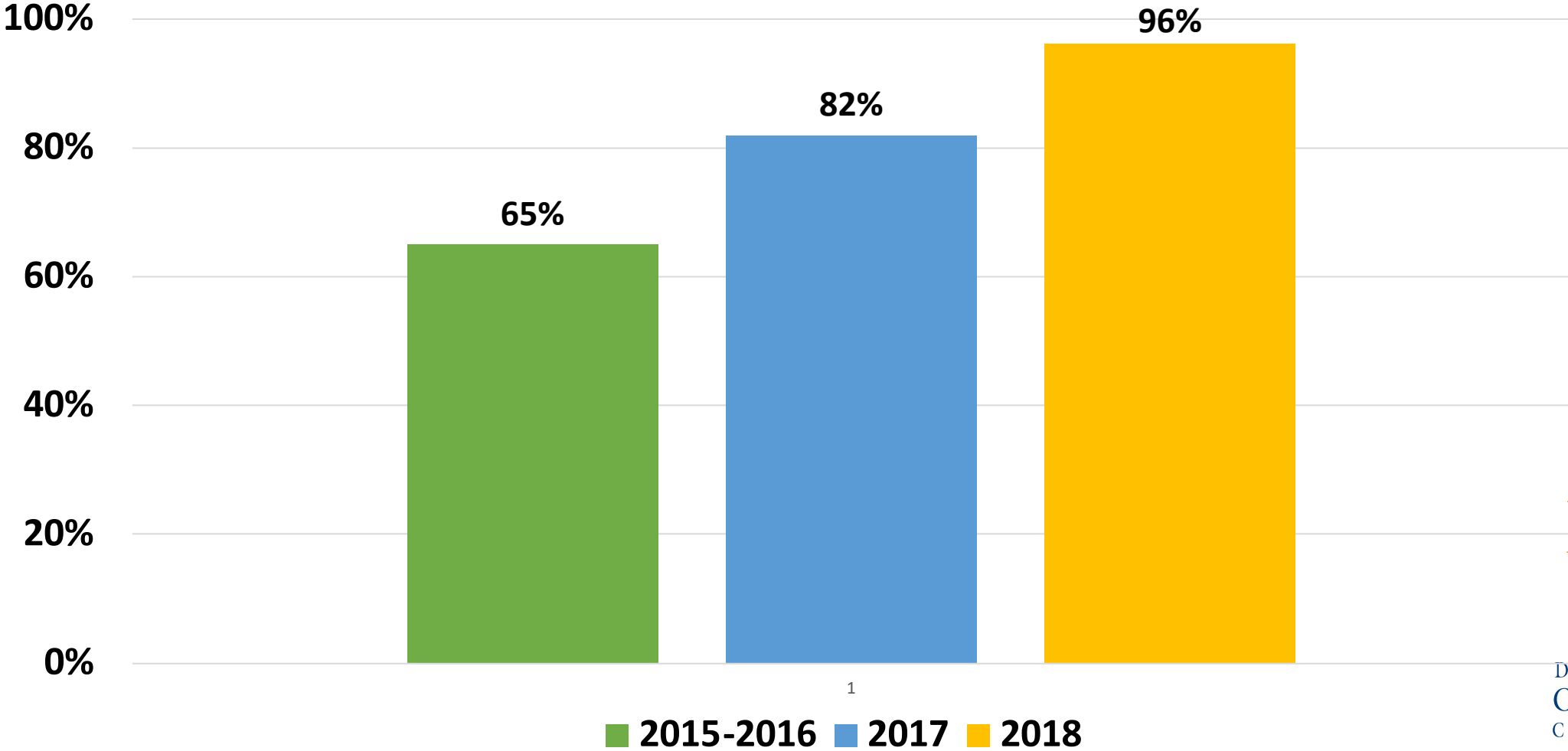


# Screenings per Year





# Eligible vs Screened by Percentage 2 Sites





# Detected Lung Cancers

- **DE 121 Cancers diagnosed through 2018**
  - 117 Non-small cell (96.7%)
  - 3 small cell (2.5%)
  - 1 in-situ (0.8%)
- **National Lung Screening Trial (NLST)**
  - 92% non small cell
  - 7% small cell
  - 1% carcinoid
- **Cancer Detection Rate for three years of screening**
  - DE: 121 cancers/ 8513 screening exams = 1.42%
  - NLST: 649 cancers/ 75126 screening exams = 0.86%







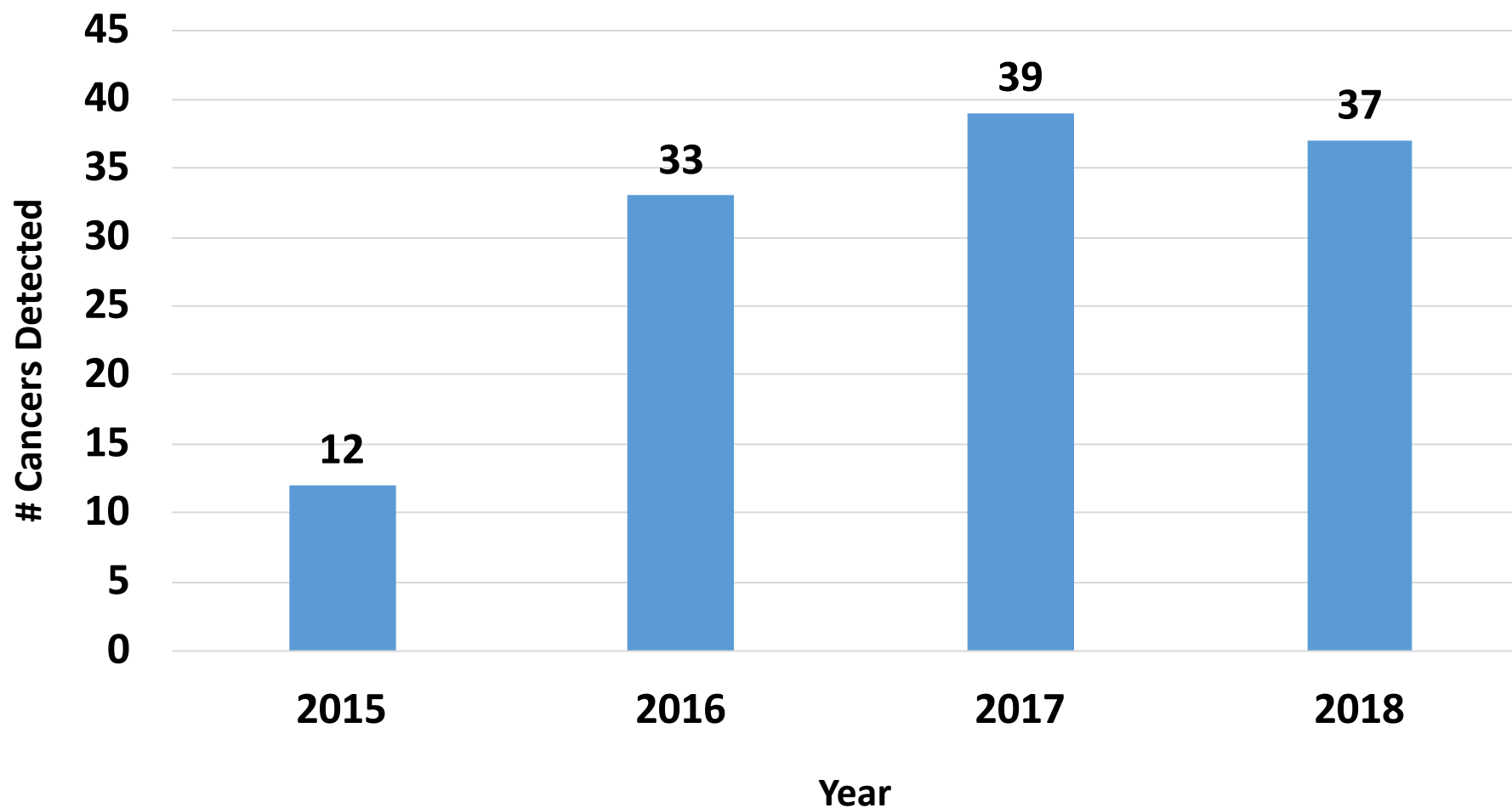
# Lung Cancers Diagnosed From LDCT

<b>Year</b>	<b>Total LDCT Performed</b>	<b>Total Cancers Detected</b>	<b>%</b>
<b>2015</b>	<b>720</b>	<b>12</b>	<b>1.7%</b>
<b>2016</b>	<b>1807</b>	<b>33</b>	<b>1.8%</b>
<b>2017</b>	<b>2602</b>	<b>39</b>	<b>1.5%</b>
<b>2018</b>	<b>3385</b>	<b>37</b>	<b>1.1%</b>
<b>Total</b>	<b>8514</b>	<b>121</b>	<b>1.4%</b>





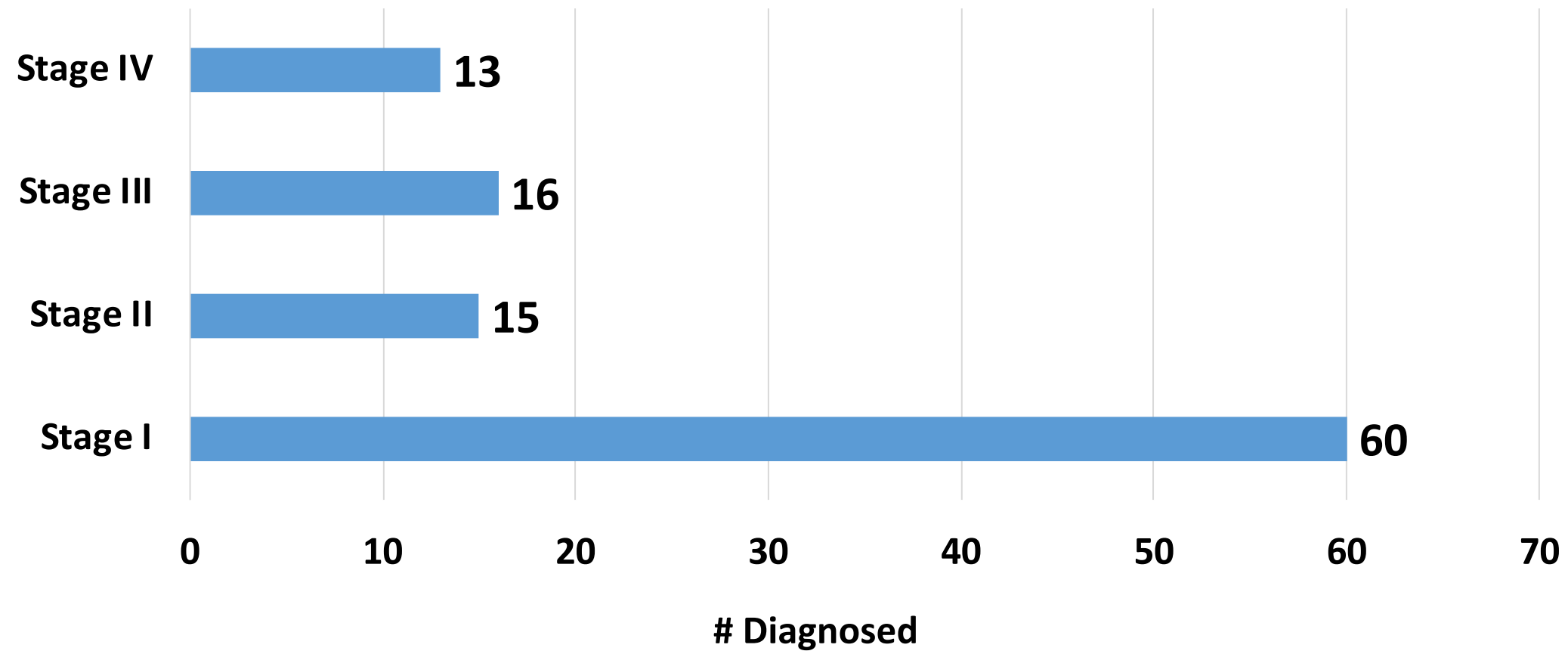
# Lung Cancers Diagnosed by Year





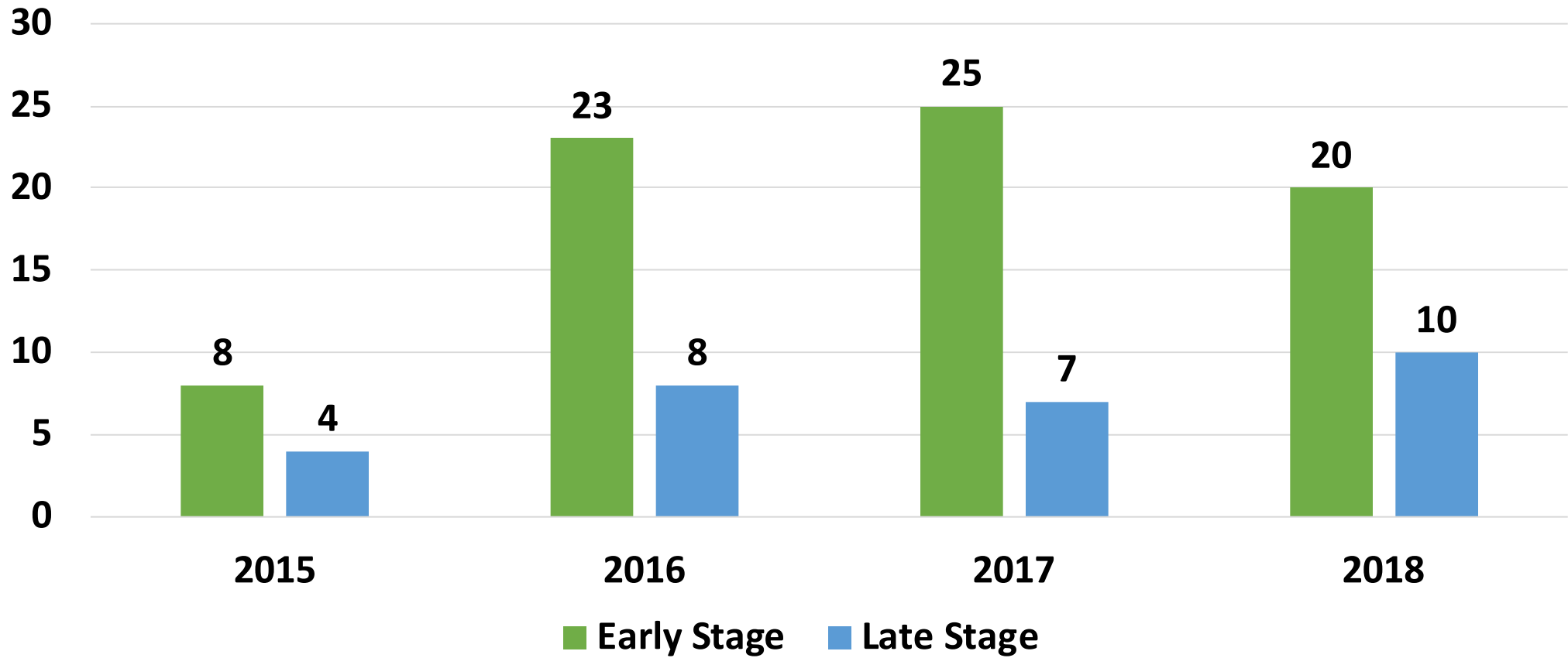
# Lung Cancer Stage at Diagnosis Between 2015-2018

**Stage at Diagnosis 2015-2018**





# Lung Cancer Stage at Diagnosis by Year



Early Stage: Stages 1 and 2

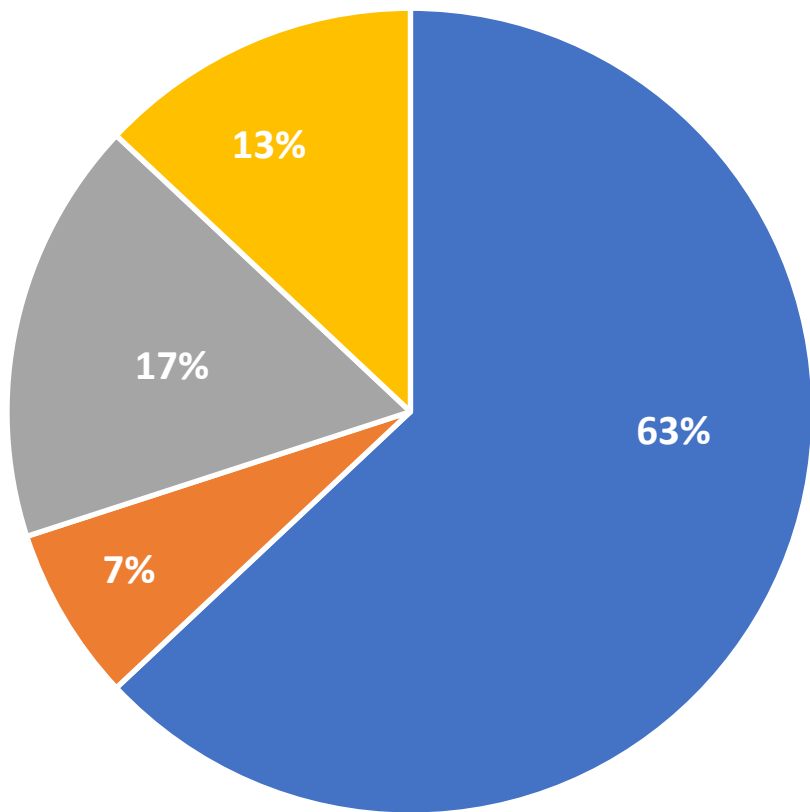
Late Stage: Stages 3 and 4





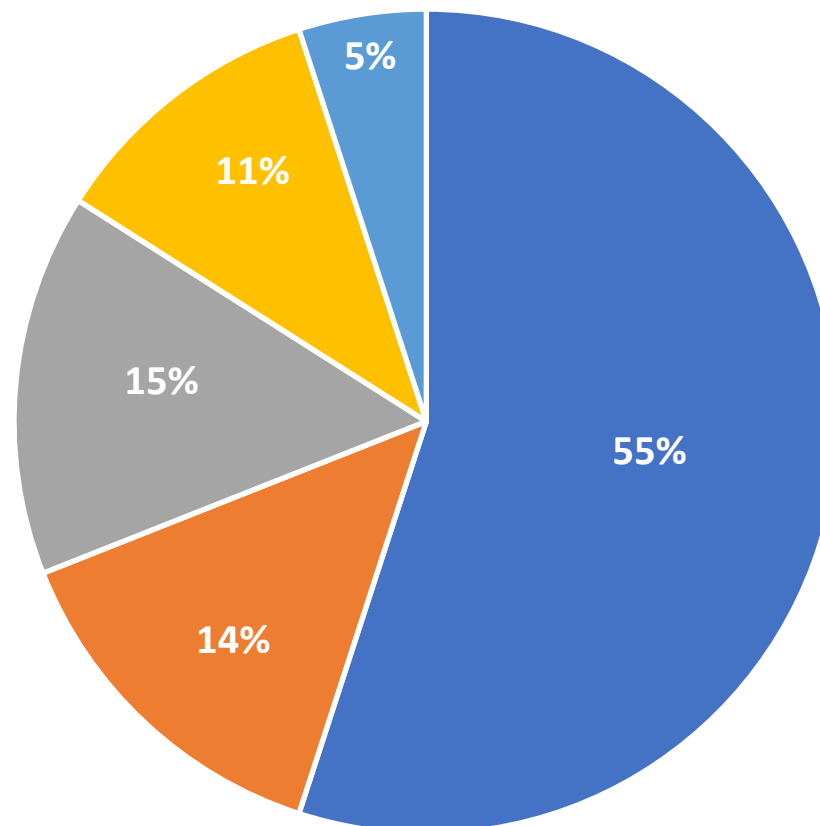
# Stage Distribution Comparison of Detected Lung Cancers

## Screening Trial Results



- Stage I  
63%
- Stage II  
7%
- Stage III  
17%
- Stage IV  
13%

## Delaware Results



- Stage I  
55%
- Stage II  
14%
- Stage III  
15%
- Stage IV  
11%
- Unknown  
5%





# DE Lung Cancer Screening Conclusions

- Lung Cancer Screening in DE has increased at greater than 30% per year since inception in 2015.
- Extrapolated DE screening data suggests that 10% to 12% of estimated eligible participants have entered screening by 2018
- Screening compliance rates of eligible patients reporting to screening programs has increased annually is now greater than 95%
- DE screening is detecting cancers at early stages and is favorably comparable to the NLST trial
- DE cancer detection rates appear higher than the NSLT





# DE Lung Screening Challenges

- Data Collection and Consistency
  - Multiple screening data repositories (ACR, I-ELCAP)
  - Imaging Site insurance information
  - Eligibility information
  - Administrative burden
- Coordination with tumor registry data
- Increase Lung Screening Rate (Breast & Gyn > 90%, CRC 75%)





# Next Steps

- Develop the ability to work with ACR data
- Examine BRFSS data to understand how well outreach has permeated the eligible population of Delaware
- Longitudinal tracking of stage of diagnosis and mortality
- Further educate Health Care Providers about LDCT screening for early lung cancer detection







# DE Lung Cancer Screening Final Thoughts

- The First State remains the **only state** with a state wide comprehensive lung cancer screening program
- DE is recognized again for **innovative state wide cancer control**
- Early data points toward the ultimate outcome of **reduced lung cancer mortality**
- **Congratulations to all that contribute to this successful program**





# Special Thanks to the Members of the DCC Early Detection and Prevention Committee and Support Staff

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Thank you!



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