The importance both of early diagnosis and smoking cessation in the battle against lung cancer

Alfredo Tartarone

Department of Onco-Hematology, Division of Medical Oncology, IRCCS-CROB Referral Cancer Center of Basilicata, Rionero in Vulture (PZ), Italy

Correspondence to: Dr. Alfredo Tartarone. Department of Onco-Hematology, Division of Medical Oncology, IRCCS-CROB Referral Cancer Center of Basilicata via Padre Pio 1, 85028 Rionero in Vulture (PZ), Italy. Email: tarta1@virgilio.it.

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The importance both of early diagnosis and smoking cessation to reduce the incidence and mortality of lung cancer (LC) is highlighted in this special issue of Journal of Thoracic Disease with a selection of articles written by a panel of eminent experts.

Screening programs are fundamental to detect early LC and to reduce the mortality rate, as demonstrated by several randomized trials with low-dose computed tomography (LDCT) in high-risk subjects (1-3). However, although LDCT screening is already available in some countries, its large-scale implementation has not yet taken place.

Since 1950 Wynder and Graham in their study published in the Journal of the American Medical Association (now known as JAMA) reported the correlation between tobacco smoking and LC (4). Tobacco smoking is a leading cause not only of LC but also of cardiovascular diseases. The magnitude of the problem has forced many nations to formulate public policies related to tobacco usage with the aim to encourage smokers to stop smoking, to discourage non-smokers from starting and to protect non-smokers from the effects of passive smoking. However, the number of smokers is declining only in developed countries, while in the rest of the world the number of smokers is increasing. As recently reported, in USA the continuous decrease in LC cancer mortality is mainly due to smoking reduction interventions, as well as to advances in LC treatment; moreover, LC incidence declines twice as fast in men as in women, reflecting differences in tobacco uptake and cessation between males and females (5).

In conclusion, implementation of screening programmes, tobacco control policies, new smoking cessation methods, as well as advances in diagnosis and treatment, represent the best strategy to transform LC in a preventable and a curable disease.

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