

Many pulmonologists under-, over-screen with LDCT

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(HealthDay)—Almost half of pulmonologists have a propensity for over- or under-use of low-dose computed tomography (LDCT) screening for lung cancer, according to a study published online Sept. 14 in the *Annals of the American Thoracic Society*.

Jonathan M. Iaccarino, M.D., from Boston University, and colleagues examined pulmonologists' propensity to offer [lung cancer screening](#) and their perceptions about LDCT [screening](#) with data from a national Web-based survey. The survey was administered to all staff pulmonologists active in Veterans Health Administration pulmonary clinics; 49.8 percent of 574 eligible pulmonologists participated.

The researchers found that about half of participants (52.4 percent) had a propensity for guideline-concordant screening, while 22.7 and 24.9 percent, respectively, had a propensity for over- and under-screening.

Guideline concordance correlated with acceptance of trial evidence, guidelines, and screening efficacy. Compared with guideline-concordant screeners, under-screeners were more likely to cite potential harms of screening as influential factors and were less influenced by trial evidence and guidelines in multivariable models. Screening propensity was not affected by local resource availability; commonly perceived barriers to implementation included insufficient infrastructure and personnel.

"To minimize potential harms as LDCT screening is widely implemented, physicians must understand which patients are appropriate candidates and engage patients in a shared decision-making process regarding the trade-offs of LDCT screening," the authors write.

More information: [Full Text \(subscription or payment may be required\)](#)

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