A fundamental **misunderstanding** of the efficacy of lung cancer screening is a major reason patients aren't being screened.



Ok, what's happening?

Credible peer-reviewed academic sources are misreporting the false-positive rates for LCS, with rates being reported as high as 98%

?



These are actually the **false-discovery** rates

DISCOVERY

What's the difference?

The actual false-positive rates in current clinical practice LCS using Lung-RADS structured reporting are **7-8%**, which is similar to screening mammography.

Identified as having disease

Identified as not having disease

False negative

True positive

False positive

False positive

False positive

False negative

False negative

True negative

False negative

WHAT DOES THIS MEAN FOR PATIENTS?

IF WE THINK THE FALSE POSITIVE RATE IS 90+%

Doctors are **unlikely** to recommend screening for their patients at risk.





Patients may decide not to get the screening test if they think 98% of scans will be positive.