

Lung Cancer Workshop XI

Tobacco-induced Disease: Advances in Policy, Early Detection and Management

DATES: May 16-17, 2014

LOCATION: Mount Sinai Medical Center
New York, NY

Outcome Measures

The Lung Cancer Workshop has been an early supporter of high quality, low-dose spiral CT scans since the earliest conversations about the National Lung Cancer Screening Trial (NLST). The workshop has been at forefront in bringing together advocacy and professional groups. Here are just a few examples of Prevent Cancer's achievements centered on the Lung Cancer Workshops:

- At the 2013 lung cancer workshop, the Prevent Cancer Foundation initiated the collaboration of several organizations to send a letter to Secretary Kathleen Sebelius (HHS) that helped move the U.S. Preventive Services Task Force (USPSTF) to issue a draft recommendation for annual low-dose spiral computed tomography (LDCT) screening for lung cancer in high-risk individuals.
- Prevent Cancer collaborated with the UK-based Roy Castle Foundation to host a meeting that led to past NCI Director Richard Klausner's decision to start planning the NLST.
- We also participated in meetings with his successor, Dr. Andrew C. von Eschenbach, who made the decision to fund and launch the NLST.
- A critical enabler for progress in previous Workshops evolved from the productive partnership between the Prevent Cancer Foundation and the Optical Society of America. This interaction has led to the development of dedicated open source lung cancer lesion sizing tools for the research community, the publication of a monograph summarizing the activities of the field and a special issue of *Optic Express*, which features these tools with a range of curated DICOM image files.
- Accomplishments also driven by this forum include facilitating the development of several open source image databases, such as the National Cancer Institute RIDER database the Prevent Cancer Foundation-Cornell University Database and the Lung Cancer Alliance Patient-donated Database (Give-A-Scan). These databases include collections of different types of image files and these diverse resources are critical in allowing the development of software measurement tools.

The 2014 workshop – *Lung Cancer Workshop XI* – is the 11th in a series of annual conferences and as such continues to build on past conferences. This year the learning objectives are:

- Familiarize participants with state-of-the-art approaches to lung cancer screening using computational imaging and consider what other tobacco-induced damage can also be assessed by quantitative imaging.
- Explore policy implications of implementing a national lung cancer screening process in regard to imaging implications for the clinical management, outcomes and cost-effectiveness.
- Engage with the advocacy community to implement strategies for educating patients, the primary care community, and policy makers about the merits and cost-effectiveness of quantitative imaging to improve lung cancer outcomes in concert with national partners under the Lung Cancer Screening Framework
- Consider clinical management implication of obtaining other quantitative imaging data available on a LDCT scan related to other tobacco-induced diseases and how that information can be best obtained.
- Discuss the Quantitative Imaging Biomarker Alliance, in integrating quantitative imaging into screening and drug development clinical trials (especially FDA-reviewed trials) and patient management.
- Develop a plan to support strategic national collaboration to build image/data archives to accelerate progress in computational imaging research.

In closing, the introduction of spiral LDCT screening into the healthcare system presents an opportunity to develop a concurrent mechanism for collecting data, to accelerate research, and to introduce refinements into the screening process as imaging and biomedical advances occur and are validated. The FDA Guidance (Guidance for Industry Standards for Clinical Trial Imaging Endpoints) underscores the foundational importance of this Workshop series in defining processes and validating the integration of quantitative imaging techniques in clinical research.