

Only 1 in 5 Eligible Adults in U.S. Screened for Lung Cancer

American Cancer Society researchers stress improving awareness of lung cancer screening is needed to help save 62,000 lives over five years.

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In a new, large study led by the [American Cancer Society](#) (ACS), scientists found that only an estimated 1 in 5 eligible individuals in the United States received lung cancer screening (LCS) in 2024, and increasing current uptake to 100% could raise the number of lung cancer deaths prevented and life-years-gained by three-fold. The findings will be published today in the [Journal of the American Medical Association \(JAMA\)](#).

“It’s disappointing that lung cancer screening uptake remains this low,” said [Dr. Priti Bandi](#), scientific director, cancer risk factors and screening surveillance research at the American Cancer Society and lead author of the study. “More sobering is that this low uptake is translating into a real missed opportunity as three times more lung cancer deaths could be prevented (or lives saved) if everyone eligible were screened.”

Lung cancer is the second most common cancer in the U.S., with around 225,000 new cases diagnosed in 2025, and the leading cause of cancer death, with 125,000 deaths from lung cancer in 2025. Annual LCS reduces lung cancer mortality and is recommended by ACS and the United States Preventive Services Task Force (USPSTF).

For this study, researchers used the 2024 National Health Interview Survey, a nationally representative cross-sectional household survey of non-institutionalized civilians. Study results showed that 12.76 million individuals were eligible for lung cancer screening according to the USPSTF eligibility criteria (55% male, 66.4% aged 60 or older, 82.4% non-Hispanic White). Of screening-eligible individuals, only 18.7% reported being up to date with lung cancer screening. If screening increased to 100%, an estimated 62,110 lung cancer deaths over 5 years would be prevented and 872,270 life-years would be gained. At current screening uptake, only about a quarter of these projected gains are being achieved: 14,970 deaths prevented, and 190,030 life-years gained.

This study also projected deaths prevented and life-years gained in those ineligible for screening

according to the USPSTF criteria (an estimated 28.08 million ever-smoking individuals aged 50-80 years). If these individuals had 100% screening uptake, an estimated 29,690 additional deaths would be prevented and 482,410 additional life-years gained. About 30% or more of this benefit would occur in those with 15 years or more since quitting and 20 or more pack-years (the ACS in 2023 eliminated the years since quitting requirement for LCS eligibility, and the National Comprehensive Cancer Network followed suit in 2025).

“We need to raise these screening numbers. If you’re aged 50-80 and have ever smoked, talk to your doctor to find out if you’re eligible for lung cancer screening and whether it would be appropriate for you,” added Bandi. “Also, expanding current screening eligibility irrespective of years since quitting is warranted and could help save lives.”

The American Cancer Society’s advocacy affiliate, [the American Cancer Society Cancer Action Network \(ACS CAN\)](#), continues to work at all levels of government to advocate for access to lung cancer screenings.

“This research underscores the urgent need to protect and expand access to care to ensure people are able to immediately utilize preventive and early detection screenings at no cost,” said [Lisa Lacasse](#), president of the ACS CAN. “ACS CAN will continue to work with lawmakers to improve access to lifesaving screenings and decrease lung cancer deaths, as well as eliminating patient costs for screening and follow-up tests by all payers, bringing us closer to ending cancer as we know it, for everyone.”

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