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Joint Meeting on
**THORACIC
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11th International Meeting on General Thoracic Surgery



10th International Workshop on Surgical Exploration of the Mediastinum and Systematic Nodal Dissection



5th Meeting of the Thoracic Oncology, Thoracic Surgery, Techniques & Transplant, Respiratory Nursing and Respiratory Physiotherapy Areas of the Spanish Society of Pneumology and Thoracic Surgery (SEPAR)



3rd Joint Meeting of the Spanish Society of Thoracic Surgery (SECT)



30th Congress of the "Asociación Iberoamericana de Cirugía Torácica" AIACT



10th International Workshop on Surgical Exploration of the Mediastinum and Systematic Nodal Dissection



LUNG CANCER SCREENING IN POLAND

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Between 2006 and 2020, groundbreaking events and key publications took place that allowed for the introduction of population based LDCT lung cancer screening in USA and other countries. During this period, between 2008 and 2020, in 4 independent centers lung cancer screening projects were designed and conducted by thoracic surgeons in Gdańsk, Szczecin, Poznań and Warsaw. More than 70.000 high risk individuals were screened between 2008 and 2018 in these programs. As a result of this research, the Consensus Statement on LCS was published in 2018, containing guidelines for the implementation of LCS in Poland. It was agreed with the Ministry of Health that the introduction of LCS in Poland will be gradual, first a pilot will be carried out and based on its results, nationwide implementation will take place in 2025.

The pilot study was addressed to heavy smokers with at least 20 py smoking history in the age between 50 and 74. It was conducted throughout the country, which is divided into 6 macroregions. In each of them, a leading institution was appointed whose task was to select partners in the macroregion. The LDCT examination could be performed in any of these institutions, but the decision regarding intervention should only be made in the leading institution. 19,500 volunteers were screened in three rounds of annual LDCT. Tobacco intervention accompanied all contacts with medical staff. Detection rate was 1.8%, adherence was 66% on average. Early lung cancer was detected in over 70% of volunteers and 66% of them underwent surgery. Based on these experiences, a nationwide program is currently being constructed, which was supposed to start in January 2024, but due to delays, it will start with 6-month later.