



People With HIV Can Benefit From Lung Cancer Screening

Screening is recommended for current and former heavy smokers ages 50 to 80, but HIV-positive people may benefit from earlier screening.

December 21, 2022 By [Liz Highleyman](#)

People living with HIV who are current or former heavy smokers may be at high risk for [lung cancer](#) and can benefit from regular screening, according to the [Forum of International Respiratory Societies \(FIRS\)](#), an organization consisting of the world's leading professional respiratory societies.

"As antiretrovirals have prolonged the lives of people with HIV and made it more like a chronic disease, lung cancer has emerged as a leading cause of death in smokers infected with HIV," said American Thoracic Society president Gregory Downey, MD, [in a FIRS press statement](#) on World AIDS Day. "Lung cancer is a major and preventable cause of death. Screening done by chest CT scans, as well as stepped up smoking cessation efforts, may slow this trend."

Prior research has shown that HIV-positive people are more likely to develop several types of cancer, including AIDS-related cancers such Kaposi sarcoma, and malignancies that are not directly attributed to HIV. Lung cancer is the leading cause of cancer death for people living with HIV in the United States and worldwide—as it is for HIV-negative people—and it could account for 15% of all cancers among HIV-positive people [by 2030](#).

People living with HIV are more likely to smoke than their HIV-negative peers—40% versus 15%, [according to one estimate](#)—and they may have impaired cancer-fighting immune function even if they are on effective antiretroviral treatment.

A study recently published in The Lancet HIV found that although the incidence rate has declined in recent years, HIV-positive people are [still more likely to develop lung cancer](#) HIV-negative people. What's more, people with HIV—especially women—tend to develop lung cancer [at an earlier age and with a less extensive smoking history](#) than those in the general population.

Some geographic regions are especially hard hit by both HIV and lung cancer. According to FIRS, sub-Saharan Africa is home to approximately half of the world's HIV-positive people, and these individuals have a [threefold higher incidence of lung cancer](#) than HIV-negative people. Several sub-Saharan regions have seen increases in lung cancer incidence in the past several years, but

access to care is limited.

Lung cancer often does not have symptoms at early stages, so it is often diagnosed at a later stage, when it is more difficult to treat. Fortunately, regular screening using low dose CT scans can help detect tumors sooner. The U.S. Preventive Services Task Force [recommends annual lung cancer screening](#) for people ages 50 to 80 who have at least a 20 pack-year smoking history (the equivalent of one pack of cigarettes a day for 20 years). Screening [may be even more important](#) for people living with HIV.

While studies have shown that low-dose CT screening has saved lives, it may not be the right choice for all current and former smokers. FIRS advises people living with HIV to talk with their primary care provider or a pulmonologist to determine if lung cancer screening is appropriate for them.

Click here for more news about [cancer in people living with HIV](#) and [the impact of smoking](#).

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