



**NLCRT**  
NATIONAL LUNG CANCER ROUNDTABLE

# 2020 Annual Meeting

EXECUTIVE SUMMARY

December 7-8, 2020

# NLCRT 2020 Annual Meeting Executive Summary

## Forging the New Frontier of Lung Cancer

The [National Lung Cancer Roundtable](#) (NLCRT) convened its 4<sup>th</sup> annual meeting on December 7-8, 2020. The two-day virtual conference included a comprehensive series of expert speakers and panels that shared the latest research, knowledge, and best practices in the field. The theme, *Forging the New Frontier of Lung Cancer*, highlighted current and future lung cancer care and control initiatives, across the continuum from screening to survivorship. The NLCRT leveraged the unique nature of the virtual conference and encouraged broad participation from NLCRT members and the greater lung cancer community. With over 800 registrants and more than 600 attendees participating in the virtual meeting at any time over the two-day period, we considered the meeting a great success. The conference was divided into eight major sessions with action-oriented panels.

The mission of the NLCRT is to decrease lung cancer mortality and create survivors. Since launching in 2017, the Roundtable has grown to a membership of 149 key organizations. We have galvanized more than 200 national and international volunteer experts and patient and caregiver advocate representatives to serve on the Steering Committee and the 10 Task Groups. These working committees highlighted the projects that focused on specific areas of lung cancer, which together support a multidisciplinary approach to cancer care and control. By fostering collaboration among organizations, the NLCRT strives to affect change through the lung cancer community's collective power and expertise.

**On December 7, Session 1** of the conference began with NLCRT Chair Dr. Ella Kazerooni welcoming the participants and new NLCRT members, highlighting the work of those dedicated to the future of lung cancer care and control, and thanking NLCRT sponsors. Mrs. Millicent Wilson, patient advocate from the American Lung Association, then shared her personal story of survivorship. Following her presentation, Dr. Harry de Koning from the Erasmus Medical Center in Rotterdam, the Netherlands, delivered the keynote address. Dr. de Koning is Principal Investigator of the Dutch-Belgian NELSON trial, which was the second randomized controlled trial to demonstrate the efficacy of low-dose CT lung cancer screening, and provided important new information on the effectiveness of lung cancer screening that influenced the USPSTF's 2020 draft update of the lung cancer screening recommendations, which lower both screening age and smoking history for eligibility. The day progressed with **Session 2: Appraising Lung Cancer Across the Care Continuum**. This session highlighted the work of those who are shaping the future direction of lung cancer care and control through a series of "rapid fire" presentations in areas such as screening, tobacco treatment, surgical, medical and radiation oncology, survivorship, disparities, and policy. **Session 3: NLCRT Poster Highlights** featured 18 pre-recorded presentations on lung cancer-related projects. This session will continue with an interactive webinar with the presenters and lung cancer community and afford an opportunity to take a deeper dive into the work these experts are conducting across the country. More information to come in early 2021. **Session 4: NLCRT Task Group Showcase**

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included the collective work of the Provider Engagement and Outreach Task Group, the Shared Decision-Making Task Group, the Lung Cancer Screening Implementation Strategies Task Group, and the Tobacco Treatment in the Context of Lung Cancer Task Group. Day 1 concluded with final remarks from Dr. Kazerooni. The Day 1 session recordings can be accessed in the table below.

<b>December 7 - Day 1 Session Presentations</b>	
<b>Session 1:</b> Welcome to the NLCRT 4 <sup>th</sup> Annual Meeting and Opening Session	- <a href="#">Welcome to the NLCRT 4<sup>th</sup> Annual Meeting and Opening Session</a>
<b>Session Two:</b> Appraising Lung Cancer Across the Care Continuum	- <a href="#">Lung Cancer Screening</a> - <a href="#">Tobacco Treatment</a> - <a href="#">Surgical, Radiation, and Medical Oncology</a> - <a href="#">Disparities, Survivorship, Policy, and Practice in Lung Cancer Care</a>
<b>Session Three:</b> NLCRT Poster Highlights	- <a href="#">Poster Presentations</a>
<b>Session Four:</b> NLCRT Task Group Showcase	- <a href="#">Provider Engagement and Outreach Task Group</a> - <a href="#">Shared Decision-Making Task Group</a> - <a href="#">Lung Cancer Screening Implementation Strategies Task Group</a> - <a href="#">Tobacco Treatment in the Context of Lung Cancer Task Group</a>

On December 8, Session 5 of the conference began with opening remarks and an overview of the presentations offered on Day 1 by NLCRT Vice Chair Dr. Douglas Wood. Patient advocate, Mrs. Gina Kenney, shared her personal story as a lung cancer and breast cancer survivor. This session also highlighted two presentations and a discussion of national access to and utilization of lung cancer screening. The conference continued with **Session 6: NLCRT Priority Initiatives and Special Projects**, with two panels detailing strategic summits, priority initiatives, and priority projects that were initiated throughout the year. **Session 7: Advocacy/Health Plan/Industry Panel** featured a moderated discussion with representatives from [Amgen](#), [AstraZeneca](#), [Genentech](#), [Humana](#), [EGFR Resisters](#), and the [LUNgevity Foundation](#).

The conference concluded with **Session 8: NLCRT Task Group Showcase**, which included presentations from the Lung Cancer in Women Task Group, State-Based Initiatives Task Group, Advanced Imaging Task Group, and Policy Action Task Group. Dr. Kazerooni and Dr. Wood gave closing remarks. The Day 2 session recordings can be accessed in the table below.

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<b>December 8 - Day 2 Session Presentation Videos</b>	
<b>Session 5:</b> Welcome to Day 2 of the NLCRT Annual Meeting & National Access to Utilization of Screening	- <a href="#">Welcome to Day 2 of the NLCRT Annual Meeting</a>
<b>Session Six:</b> NLCRT Priority Initiatives and Special Projects	- <a href="#">NLCRT Highlights: Summits &amp; Priority Initiatives</a> - <a href="#">NLCRT Highlights: Priority Projects</a>
<b>Session Seven:</b> Advocacy/Health Plan/Industry Panel	- <a href="#">Advocacy/Health Plan/Industry Panel</a>
<b>Session Eight:</b> Task Group Showcase	- <a href="#">Lung Cancer in Women Task Group</a> - <a href="#">State-Based Initiatives Task Group</a> - <a href="#">Advanced Imaging Task Group</a> - <a href="#">Policy Action Task Group</a>

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## Session Highlights

Monday, December 7, 2020

### *Day 1, Session 1 of 8: Welcome, Patient Story, and Keynote*

The first of eight moderated sessions contained the meeting welcome and provided a brief overview of the NLCRT for NLCRT members and new participants alike, a patient story video, and the keynote presentation. During the patient video, a survivor shared her moving journey from screening through treatment into survivorship and highlighted how the American Lung Association's Saved by the Scan campaign encouraged her to be screened. She advocated for patients to partner with their healthcare professionals regarding lung cancer screening.

Dr. Harry de Koning presented the keynote address, *10 Years and Beyond Results in the NELSON Trial*. The Trial evidence described in the presentation showed that lung cancer screening is a positive intervention with benefits outweighing the harms. The 10-year results after the NELSON trial show that low-dose computed tomography (LDCT) lung cancer screening is a cost-effective preventive healthcare intervention.

### *Day 1, Session 2 of 8: Lung Cancer Screening*

In the second morning session, speakers presented on the following topics: Lung Cancer Screening; Tobacco Treatment; Surgical, Radiation, and Medical Oncology; and Disparities, Survivorship, Policy, and Practice in Lung Cancer Care.

The Lung Cancer Screening speakers provided the latest information on multi-professional society guidance on screening and lung nodule management during the COVID-19 pandemic. A partnership between the Department of Veterans Affairs and the GO<sub>2</sub> Foundation for Lung Cancer highlighted the ways it is improving the lives of veterans affected by lung cancer. The speakers also discussed the characteristics of the first million screens in the Lung American College of Radiology's Lung Cancer Screening Registry (ACR LCSR) compared to the demographics of the 8 million Americans eligible for screening and presented an update regarding the USPSTF lung cancer screening guidelines.

The Tobacco Treatment speakers explored the key components and characteristics of successful smoking cessation programs combined with LDCT interventions in the Smoking Cessation at Lung Examination (SCALE) Collaboration project. They also described the NCI Cancer Center Cessation Initiative (C3I) for delivering evidence-based smoking cessation at cancer centers. Finally, they provided an overview of the key results from the 2020 Report of the U.S. Surgeon General on Smoking Cessation.

The Surgical, Radiation, and Medical Oncology speakers showed how using state-of-the-art minimally invasive surgeries and ERAS (enhanced recovery after surgery) helped to reduce the

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length of hospital stays significantly and how Stereotactic Body Radiation Therapy (SBRT) for Lung Cancer improved outcomes for non-small cell lung cancer (NSCLC) patients in clinical trials. The speakers further showed how advances in biomarker-driven therapies in the past decade had reduced the percentage of lung cancers with no oncogenic driver identified for almost 50% of patients in 2012 to 11% in 2020. Thus, in 2020 about 89% of non-squamous NSCLC have known biomarkers and associated drug therapies. The last speaker in the session discussed how the first wave of COVID-19 affected lung cancer outcomes in New York City. Patient outcomes were worse with COVID-19, but a majority recovered, and lung cancer was still the major problem.

The Disparities, Survivorship, Policy, and Practice in Lung Cancer Care speakers used geospatial cluster analysis of the ratio of high-quality lung cancer screening facilities per 100,000 at-risk persons to show that disparity exists across the nation (and in the Southeastern U.S., especially) and how increasing physical activity is a very important part of survivorship care because it improves outcomes. The speakers showed how new HEDIS (Healthcare Effectiveness Data and Information Set) measures could help to support health equity goals. They also discussed how improving access to biomarker testing by reducing barriers to coverage, cost, and awareness can improve patient outcomes by increasing the use of biomarker-driven targeted drug therapies.

## *Day 1, Session 3 of 8: Video Poster Session*

The third session of the day was a 60-minute video highlighting the efforts of 16 organizations working on lung cancer screening, treatment, and care. The video was well-received and positively reviewed. The NLCRT will host a webinar in early 2021 highlighting these presenters and encouraging dedicated conversation time with the researchers.

## *Day 1, Session 4 of 8: NLCRT Task Group Showcase #1*

In the afternoon of Day 1, the fourth session was devoted to NLCRT Task Group Showcase presentations from the Provider Engagement and Outreach Task Group, the Shared Decision-Making Task Group, the Lung Cancer Screening Implementation Strategies Task Group, and the Tobacco Treatment in the Context of Lung Cancer Screening Task Group. The presentations showed significant and continued progress in the collaborative fight against lung cancer.

The Provider Engagement and Outreach Task Group highlighted their progress and plan to increase the engagement of healthcare providers (e.g., American Academy of Family Physicians (AAFP) members) in lung cancer screening through the use of evidence-based guidelines and training and how to increase the use of shared decision-making regarding screening decisions through the deployment of surveys to AAFP members and development of targeted shared decision-making tools. The task group will develop a shared decision-making training program that identifies, educates, and engages patients in lung cancer screening programs.

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The Lung Cancer Screening Implementation Strategies Task Group gave an update on their completed projects focused on use of electronic health records and establishment of quality metrics for lung cancer screening programs. Current collaborative projects include identifying and modeling required resources for screening and nodule surveillance and an ongoing collaboration with the ACR to establish guidance regarding incidental findings on lung cancer screening imaging and deployment of a guide detailing economics/billing steps for screening programs. Planned future projects to develop best practices for scalable screening models focused on creation of a HEDIS measure and partnering with breast cancer screening programs to identify women eligible for lung cancer screening will help to overcome barriers to delivering high-quality lung cancer screening.

The Tobacco Treatment in the Context of Lung Cancer Screening Task Group presented an update on their approach to identifying gaps and barriers in lung cancer screening where tobacco treatments can be integrated into the workflows. The presentation also discussed specific collaborative projects, including two papers being prepared with the ACR utilizing LCSR data to describe variation in provision of smoking cessation at screening centers and changes in self-reported smoking status at annual screens.

The day ended with closing remarks by the Chair of the NLCRT.

## Tuesday, December 8, 2020

The second day focused on NLCRT priority initiatives and special projects in the lung cancer field, an innovative advocate/health plan/industry panel on how to optimize the use of NSCLC biomarkers and targeted therapies, and a closing showcase of accomplishments by the second set of NLCRT Task Groups.

### *Day 2, Session 5 of 8: Welcome and National Estimates of Lung Cancer Screening Access*

The fifth and opening session on Day 2 began with a recap of the Day 1 presentations and was followed by a second inspirational patient advocate story.

The session closed with a presentation on the National Estimates of Access to and Utilization of Lung Cancer Screening, which described the characteristics of lung cancer screening utilization across the nation using 2017 Behavioral Risk Factor Surveillance System (BRFSS) data for ten states in the analysis. The goals of the project in the first presentation were to develop a method to examine lung cancer screening rates in all 50 states and determine if they are associated with sociodemographic factors. The hope is to increase lung cancer screening among eligible adults; currently, only 5-6% of eligible adults receive LDCT lung cancer screening. The second presentation used geospatial analysis to evaluate access to lung cancer screening within a 40-mile radius of eligible individuals who smoke and then overlaid the estimated number of those who smoke with lung cancer mortality rates.

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## *Day 2, Session 6 of 8: NLCRT Priority Initiatives and Special Projects.*

The sixth session included two sets of presentations on NLCRT Highlights: Summits & Priority Initiatives and on NLCRT Priority Projects.

The first set of speakers in the NLCRT Highlights: Summits & Priority Initiatives panel provided an update on the NLCRT Strategic Plan, an advocate perspective on working with the NLCRT Stigma Initiative, a history of the national NLCRT Lung Cancer Stigma Initiative, Summit and Strategic Plan, and a description of the 3-pronged approach used by the initiative to reframe lung cancer, enhance understanding and empathy, and amplify and expand research.

The second set of speakers in the Optimizing Lung Cancer Biomarkers in Practice panel presented an advocate perspective that emphasized personalized treatment and the need to test and retest during treatment to facilitate use of appropriate therapy during treatment. The speakers also gave an overview of the 2020 NLCRT Biomarker Summit: Optimizing Lung Cancer Biomarkers in Practice. They described a summit presentation on stakeholder confessions on barriers to comprehensive biomarker testing that encouraged stakeholders to be accountable for their contributions to creating barriers to biomarker testing. Finally, they described the NLCRT Biomarker Initiative Strategic Plan to address barriers to the effective use of biomarker testing.

The third set of speakers in the sixth session focused on NLCRT Highlights: Priority Projects. The first speaker gave a presentation on the State Lung Cancer Coalition-Building Guide to advance lung cancer priorities at the state and regional level. In addition, an interactive web-based resource that provides the user with an online planning tool and access to an inventory of the details of state-based initiatives and shared resources will be launched in early 2021. The second speaker presented on High-Quality Lung Cancer Screening and Nodule Surveillance Programs and described the business thinking, resource allocations, patient volumes, payer collaborations, and financial modeling required to create and sustain successful programs.

The third speaker described a Partnership with the American Academy of Family Physicians (AAFP) that included new shared decision-making tools that will be disseminated through the AAFP membership and other NLCRT member organizations. The fourth speaker gave an American Cancer Society Regional Cancer Control Update that summarized the many government, payer, and provider partnerships involved in working with health systems at the state and regional level to positively impact lung cancer health outcomes across the cancer continuum.

## *Day 2, Session 7 of 8: Advocacy/Health Plan/Industry Panel*

In the seventh session, a panel of representatives from industry, payer, and advocacy organizations discussed a variety of important challenges around making biomarker testing routine and efficient for patients with advanced NSCLC. The panel highlighted valuable perspectives because it contained representatives from the companies that made biomarker-driven targeted therapeutics, the health



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plans that covered and paid for the therapies, and the patient advocates who were the ultimate recipients of the therapies.

## *Day 2, Session 8 of 8: NLCRT Task Group Showcase #2*

The last session showcased the progress of several NLCRT task groups, including the Lung Cancer in Women Task Group, the State-Based Initiatives Task Group, the Advanced Imaging Task Group, and the Policy Action Task Group.

The Lung Cancer in Women Task Group presented opportunities and proposed studies to mitigate disparities and associated factors that impact lung cancer in women, including provider bias, delayed diagnoses, and missed opportunities for lung cancer screening among women presenting for mammography.

The State-Based Initiatives Task Group presented updates on the past accomplishments of the Task Group and the Spring 2020 Lung Cancer Webinar Series: What Comprehensive Cancer Control Coalitions Need to Know, including tip sheets hosted on the new [acs4ccc.org](https://acs4ccc.org) website. The Task Group also reported on the upcoming State Cancer Plan Tip Sheet for how to incorporate lung cancer screening into a state cancer plan. They shared goals from the 2021 Task Group Strategic Plan, which includes the development of an adaptable web-based, state-based initiatives resource guide for the NLCRT.

## *Conference Concluding Remarks*

The conference ended with closing remarks made by the Chair of the NLCRT, who highlighted the targeted conference presentations that focused on key lung cancer topics and collaborations, updated guidelines, and advances in control and care throughout the lung cancer continuum.

The Chair of the NLCRT closed by thanking the survivors for their inspirational stories, all attendees for their contributions to the fight against lung cancer, and the NLCRT sponsors.

# Thank you to our NLCRT Sponsors!



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