Lung cancer is a deadly disease, but that may be changing. An alarming 160,000 Americans die from lung cancer each year, and the combination of smoking with exposure to workplace dusts and toxins can put construction workers at an elevated risk. Ultra-low dose CT-scans can enable early intervention.

The National Cancer Institute ended its National Lung Cancer Screening Trial as soon as it found that high-risk individuals screened with low-dose CT-scans (LDCT) had a 20% lower mortality rate than individuals screened with chest x-rays. The medical benefits of screening for lung cancer were established with sufficient evidence to add this practice to routine care. The trial clearly demonstrated its value to high-risk workers.

Building off of NCI’s research, BTMed continued and expanded its Early Lung Cancer Detection Program (ELCD) using LDCT. BTMed has been delivering the low-dose scan, free of charge, at Oak Ridge, Tenn., since 2011, and now does so at the nation’s largest DOE site in Hanford, Wash. Workers with high risk factors are eligible for the low-dose scan, which can identify small nodules developing on the worker’s lungs. Workers found to have nodules are referred to specialists for further testing and, if the nodules prove to be cancerous, treatment. Lung cancer has a 16% survival rate when detected using conventional methods; early detection, like that promised by low-dose CT screening, can boost this rate as high as 80%. CT scans can also detect serious finding other than lung cancer.

We are working to expand CT scanning availability to include other DOE sites and will partner with regional multi-disciplinary facilities that will provide services. This integrated regional delivery system will provide workers with optimal care. If you have questions about BTMed’s ELCD program, please contact Dr. Laurie Welch (lwelch@cpwr.com).

These researchers and physicians from CPWR, the University of Washington and Seattle Cancer Care Alliance are instrumental in reading CT scans and providing follow-up care to workers.

Did you know?

BTMed is more than a network of clinics offering screening: it’s a large service-oriented program that collects and searches for trends of illness and disease among construction workers using de-identified data. While individual test results are confidential, the aggregate data provided by the large-scale testing has informed numerous studies of construction occupational hazards, both typical and arcane.

For an example of the latter, take beryllium. Workers engaged in abrasive blasting using certain coal slag products, or particular types of welding and brazing, are at risk of exposure to the toxic metal. The ominous sounding element was widely used in nuclear weapons facilities, and for more than a decade BTMed has tested workers for beryllium sensitivity. BTMed researchers reviewed data from nearly 14,000 BTMed blood tests, finding that 1.4% had tested positive for beryllium sensitivity, and 15% of those with sensitivity developed Chronic Beryllium Disease, a lung disorder. The results of the study were published in the American Journal of Industrial Medicine. Check out the paper, at www.btmed.org (under the publication tab).

Are You Using the BTMed Provider Portal?

This is an easy way to make your work more efficient and save time!

The BTMed Provider Portal offers clinics a way to easily access a patient’s file for viewing and entering exam results. Providers have immediate access to b-read, beryllium and GHP results. Program documents can be easily downloaded. Many providers are already using this system. You can access the provider portal at www.btmed.org (under the provider tab).

For more information call Sue Boone at 1-800-866-9663.

BTMed Screening Results

BTMed identifies construction workers who have been employed on DOE sites and screens them for occupational illnesses. In its 17-year history, BTMed has provided 28,000 screenings to more than 21,000 workers for medical conditions in a network of 200 specially credentialed clinics across the country. Workers are provided an initial screening and can come back every three years for another screening.

The program has found abnormal chest x-rays in 18% of these workers, abnormal pulmonary function in 40%, and evidence of hearing loss in a striking 64%. Workers presenting symptoms like these are referred for additional testing and care. BTMed is proud to report a 97% satisfaction rate among participants in the program.