



LUNG CANCER FACTS: MILITARY MEN & WOMEN

Lung cancer is an urgent priority among military men and women, and veterans.

Veterans and active duty military are at increased risk for lung cancer and may have lower survival rates than the civilian population.¹

SMOKING

- 32% of active duty personnel vs. 20% of civilians²
- Prevalence of smoking 50% higher in those who have been deployed²
- Cigarettes free in K and C rations until 1976 and still sold at reduced prices
- Damaged cells can take decades to develop into lung cancer³

EXPOSURE

- Agent Orange, radon, asbestos, beryllium, chromium, diesel exhaust, pesticides, pollutants and particulate matter from burn pits, oil well fires, destruction of chemical weapons⁴
- Lung cancer deemed service-connected for in theatre Vietnam veterans as well as Gulf War and post 9-11 Veterans with environmental toxic exposures associated with their military service
- 2010 President's Cancer Advisory Panel links 20 agents to lung cancer⁵
- Higher rates of lung cancer in Gulf War veterans in 2010 study and 2014 update^{6,7}

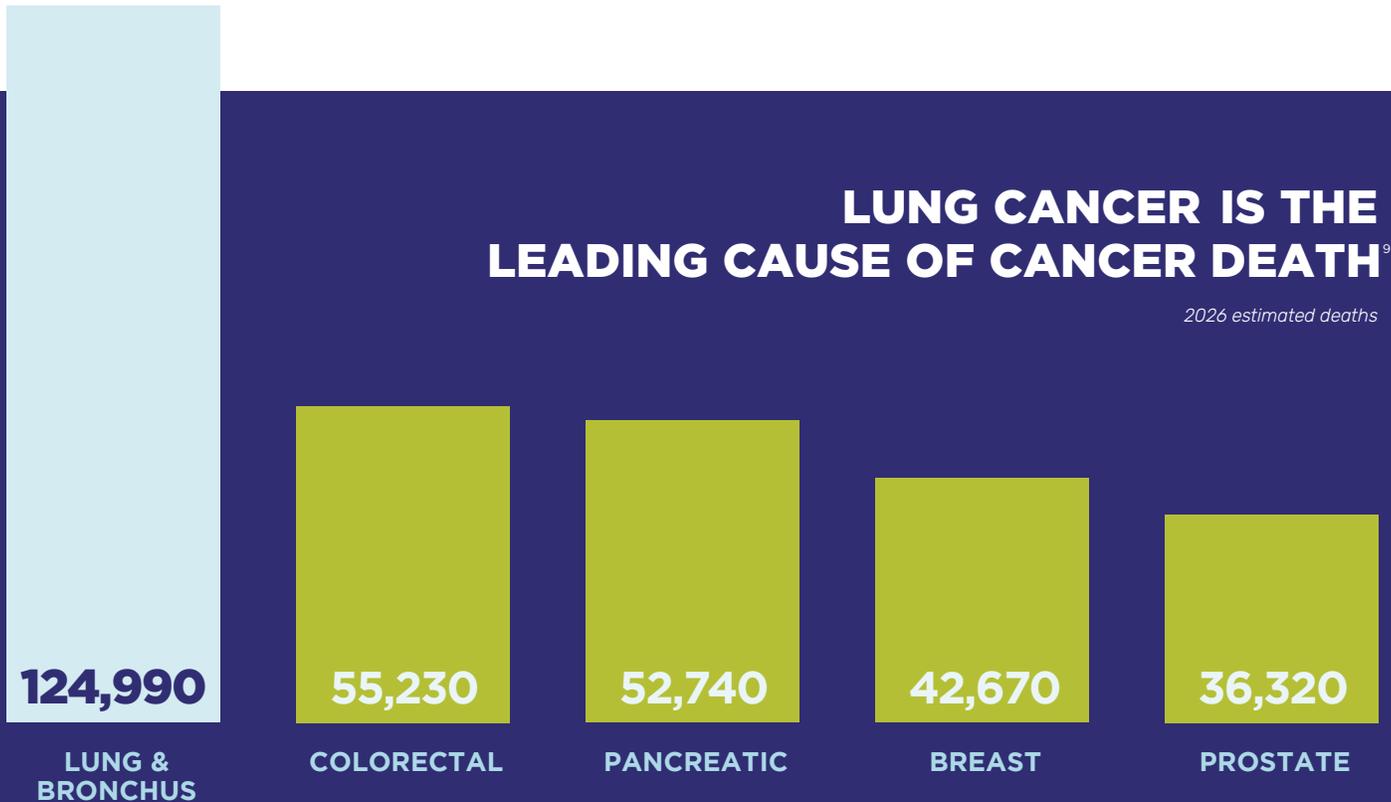
A low dose CT (LDCT) scan is the only proven screening method to detect lung cancer before symptoms appear. The disease can be discovered early at its most treatable and curable stage.



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ANYONE CAN GET LUNG CANCER

An estimated **20%**
of people diagnosed with
lung cancer never smoked⁸



(1) Campling BG, Hwang WT, Zhang J, et al. A Population-based Study of Lung Carcinoma in Pennsylvania: Comparison of Veterans Administration and Civilian Populations. *Cancer*. 2005; 104(4)

(2) IOM (Institute of Medicine). 2009. *Combating Tobacco Use in Military and Veteran Populations*. Washington, DC: The National Academies Press

(3) Spatial and temporal diversity in genomic instability processes defines lung cancer evolution Elza C. de Bruin, PhD et al, *Science* 10 October 2014

(4) US Department of Veterans Affairs. Public Health: Gulf War Exposures, <http://www.publichealth.va.gov/exposures/gulfwar/sources/index.asp>

(5) Reducing Environmental Cancer Risk, President's Cancer Panel, Annual Report: http://deainfo.nci.nih.gov/advisory/pcp/annualReports/pcp08-09rpt/PCP_Report_08-09_508.pdf

(6) Investigating the Risk of Cancer in 1990–1991 US Gulf War Veterans. Young et al, *Ann Epidemiol* 2010;20:265–272. <http://digitalcommons.unl.edu/cgi/viewcontent.cgi?article=1202&context=publichealthresources>

(7) Gulf War Illness and the Health of Gulf War Veterans: Research Update and Recommendations. 2009–2013, Research Advisory Committee on Gulf War Veterans' Illnesses. <http://www.bu.edu/sph/files/2014/04/RAC2014.pdf>

(8) Prevalence Survey, Source: Centers for Disease Control and Prevention, *Morbidity and Mortality Weekly Report*, "Cigarette Smoking Among Adults –United States November 9,2007/56(44): 1157–1161, Table 2

(9) Siegel RL, Kratzer TB, Wagle NS, Sung H, Jemal A. Cancer statistics, 2026. *CA Cancer J Clin*. 2026 Jan-Feb;76(1):e70043. doi: 10.3322/caac.70043. PMID: 41528114; PMCID: PMC12798275.