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1 smoking services in the UK will likely impact the amount of available smoking cessation services and
2 readily trained smoking cessation practitioners that could be utilised within lung cancer screening (5).
3 Disparities in service provision, including a lack of community stop smoking services to refer smokers
4 to, have been reported within existing Targeted Lung Health Check sites in England and where there
5 are community services there are lengthy waiting times.

6 The degree to which lung cancer screening programmes advise patients around smoking cessation can
7 range widely and data on the effectiveness of specific smoking cessation interventions integrated in
8 lung screening trials is limited. Determining the optimal approach is therefore acknowledged to be a
9 high priority by various health organisations (6, 7). Work from the SCALE collaboration has shown that
10 to help maximise the reach of smoking cessation interventions, it is important to offer a wide range of
11 cessation treatments (8). Furthermore, those who are eligible for lung cancer screening will have a
12 long-term smoking history and will likely have attempted to stop smoking at multiple points in their
13 lives. Outside of a screening setting, a lung screening eligible population may require a more intensive,
14 person-centred form of behavioural support due to the complexities of behaviour change for this
15 population (9). Similarly, the need for a more intensive form of intervention (i.e. continued support
16 from a smoking cessation practitioner and immediate provision of pharmacotherapy) within a lung
17 screening setting has been highlighted in a systematic review by Williams et al., 2023 (10).

18 Although we know that those eligible to attend lung screening view the integration of smoking
19 cessation positively (11, 12), more participation-centred research that focuses on understanding what
20 form of intervention works best for a lung-screening eligible population is needed. Ongoing research
21 to assess the feasibility and effectiveness of smoking cessation interventions in LDCT screening (13-15)
22 will shed light on some unanswered questions in this area. What is clear from the growing evidence
23 base, however, is that investing in the integration of a high-intensity stop smoking intervention within
24 lung cancer screening programmes is a vital component of a public health strategy that will positively
25 impact on cancer, respiratory and cardio-vascular disease. Not doing so misses an unprecedented
26 opportunity to capitalise on the widespread implementation of lung cancer screening in the UK.

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