EarlyCDT-Lung for lung cancer risk classification of indeterminate pulmonary nodules

EarlyCDT-Lung is a blood test used to assess the malignancy risk of indeterminate pulmonary nodules found by chest CT or X-ray. It measures 7 autoantibodies produced in response to tumour associated antigens related to lung cancer. The test uses a standard enzyme-linked immunosorbent assay (ELISA). Currently, PET-CT and the Brock model are used to estimate the risk that an indeterminate pulmonary nodule is lung cancer. People whose nodules have a malignancy risk less than 10% are offered CT surveillance and those with a risk over 70% are considered for surgery. For people whose nodules have a malignancy risk in the range of 10%-70%, image guided biopsy, excision biopsy or CT surveillance are considered. It is claimed that EarlyCDT-Lung could be used to identify malignant pulmonary nodules that need immediate treatment or need further tests such as PET-CT or a biopsy. It could result in treatment being offered earlier, giving improved patient outcomes. This test could also reduce CT scans, patients waiting times and radiologist time, enabling efficient use of NHS resources.

The NICE diagnostics assessment programme will assess the clinical and cost-effectiveness of EarlyCDT-Lung test (and any other alternative technologies identified during scoping) to make recommendations on their use in the NHS.