

**US-103155 UNBRANDED ONCOLOGY Lung Ambition Women's
Lung Cancer Brochure - Native American**

Dimensions
8.5"x11"

Add a Lung Cancer Screening with Your Next Mammogram

*Two Screenings,
More Peace of Mind*

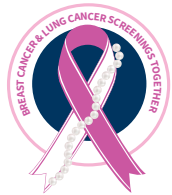
WHY IT MATTERS

Native women are known for their strength—caring for families, supporting their communities, and carrying forward traditions that connect generations. But even the strongest caretakers need care themselves.

Many Native women are proactive about their breast health—getting mammograms and encouraging their sisters, aunts, and daughters to do the same. But lung health matters too. Lung cancer affects Native women at higher rates than many other groups, yet few know that screening for lung cancer is available and can save lives.

Taking time for both a mammogram and a lung cancer screening is a way to honor your health and your future. Both are quick, painless, and can often be done on the same day—making it easier to care for yourself while caring for others.

Your wellness strengthens your family, your circle, and your community. Investing in your health today helps ensure you're here for the people and moments that matter most.



References: Prevent Cancer Foundation. *Cancer and Early Prevention Month*. Accessed March 9, 2026. <https://preventcancer.org/prevention-screening/cancer-prevention-and-early-detection-month/>

Wolf AMD, Oeffinger KC, Shih TYC, et al. Screening for lung cancer: 2023 guideline update from the American Cancer Society. *CA Cancer J Clin*. 2024;74(1):50-81. <https://doi.org/10.3322/caac.21811>

Siegel RL, Kratzer TB, Giaquinto AN, et al. Cancer statistics, 2025. *CA Cancer J Clin*. 2025;75(1):10-45. <https://doi.org/10.3322/caac.21871>

Presented by



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Lung Cancer Can Happen to Anyone

Early Detection Could Save Your Life

Lung cancer is the leading cause of cancer-related deaths among women—and that includes Native women. Many believe lung cancer only happens to people who smoke, but that's not true.

Even women who have never smoked can get lung cancer. Secondhand smoke, exposure to wood smoke or environmental pollutants, and family history can all increase risk.

If you are 50-80 years of age and have a 20-year history of smoking (even if you've quit), you may be eligible for screening. Screening can detect lung cancer early—before symptoms appear—when it's most treatable and survival rates are highest.

Smoking history refers to the use of commercial tobacco products—such as cigarettes, cigars, or vaping—not the ceremonial or traditional use of tobacco in cultural or spiritual practices.*

Early detection may give you more time, more choices, and more moments with the people you love.

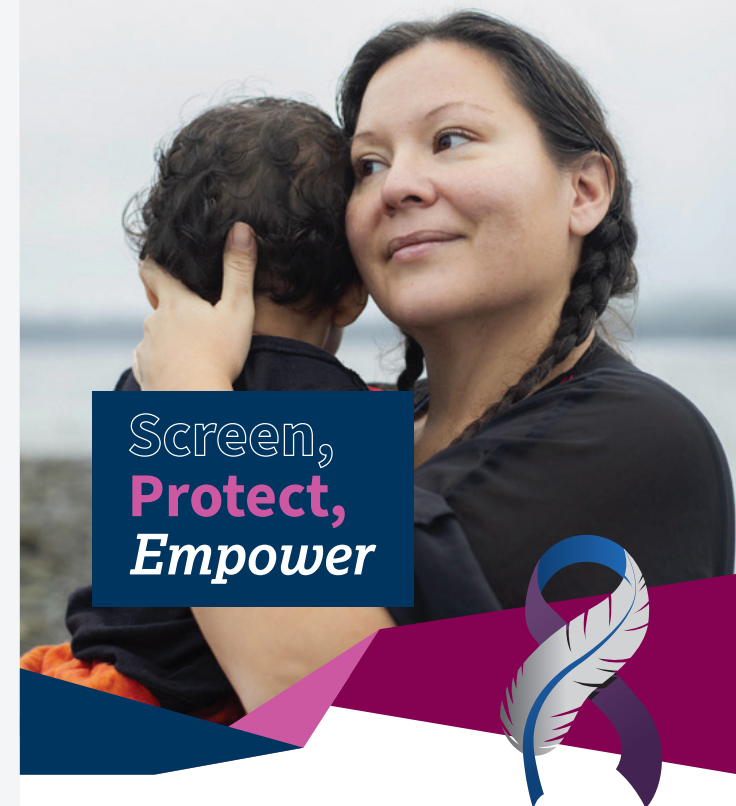
When you talk to your healthcare provider—at your clinic, IHS, or tribal health center—ask if lung cancer screening is right for you. Guidelines are changing, so it's always okay to ask questions.

When lung cancer is discovered and treated early, it may lead to longer survival. That's why early screening matters.

* Traditional or sacred tobacco has deep cultural and spiritual significance in many Native communities. It is distinct from commercial tobacco products, which are mass-produced and contain harmful additives. Lung cancer screening recommendations relate to commercial tobacco use only, not ceremonial or spiritual use.

IHS, Indian Health Service.

References: American Cancer Society. *Cancer Facts & Figures 2025*. Atlanta: American Cancer Society; 2025. Accessed January 29, 2026. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2025/2025-cancer-facts-and-figures-acf.pdf>
National Native Network. *Traditional vs. Commercial Tobacco*. Accessed February 27, 2026. <https://keepitsacred.itcmi.org/tobacco-and-tradition/traditional-v-commercial/>



Screen,
Protect,
Empower

Protect Yourself. Protect Your Future.

You are the heart of your family and your community. Taking care of your health protects more than just you—it protects your loved ones and your future.

Lung cancer takes the lives of more women than breast, ovarian, and cervical cancers combined. But with early detection, we can change that story. Ask your healthcare provider about adding a lung cancer screening to your next mammogram appointment.

References: Henschke CI, Yip R, Shahan D, et al. The Regimen of Computed Tomography Screening for Lung Cancer: Lessons Learned Over 25 Years From the International Early Lung Cancer Action Program. *J Thorac Imaging*. 2021; 36(1):6-23. doi:10.1097/RTI.0000000000000538
American Cancer Society. Lung cancer survival rates; 2025. Accessed January 29, 2026. <https://www.cancer.org/cancer/types/lung-cancer/detection-diagnosis-staging/survival-rates.html>



"I never imagined lung cancer could be such a threat to women in my community. But when I learned how often it's diagnosed at late stages, I knew I couldn't wait."

– Marjorie, 59

61.6–71.8% of AI/AN women present with late-stage lung cancer compared to **58.6–67.3%** of White women.



"In my community, traditional healing is an important part of how we stay well. I didn't realize that a lung screening could also be part of taking care of myself."

– Maria, 76

Lung Cancer is one of the most commonly diagnosed cancers in **Native women**.

Quotes are not from actual patients.

AI/AN, American Indian/Alaska Native.

References: Roubidoux MA. Lung Cancer Among American Indians and Alaska Natives. In: Garvey G. (ed) *Indigenous and Tribal Peoples and Cancer*. Springer, Cham; 2024. https://doi.org/10.1007/978-3-031-56806-0_39
American Cancer Society. Cancer Facts and Figures 2022 - Special Section: Cancer in the American Indian and Alaska Native Population. Accessed January 30, 2026. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2022/2022-special-section-ai-an.pdf>



"When I learned that people in many Native American communities die from lung cancer at higher rates than non-Native people, it broke my heart. We need to fight for better access and better care to help change these numbers."

– Evelyn, 65

Mortality rates are **12%** higher among AI/AN populations.



"I live over 40 miles from the nearest screening center, and it's not easy to get there. But I made the trip because I want to be here for my family."

– Rita, 63

AI/AN communities are on average **43–49** miles from the nearest screening facility.

Reference: Roubidoux MA. Lung Cancer Among American Indians and Alaska Natives. In: Garvey G. (ed) *Indigenous and Tribal Peoples and Cancer*. Springer, Cham; 2024. https://doi.org/10.1007/978-3-031-56806-0_39



"So few people in my community are getting screened, and that number isn't just data—it's our relatives, our elders, our children. We have to take care of each other, because when one of us is affected, it affects everyone."

– Thomas, 54

Less than **2%** of Native Americans eligible to be screened for lung cancer are getting screened.



"I lost two brothers to lung cancer before I even realized how common it was in my community. Now I share my story so no one else has to find out too late."

– Calvin, 70

Non-Hispanic American Indian and Alaska Native people have higher rates of getting certain kinds of cancer than non-Hispanic White people.

References: Kee D, Wisnivesky J, Kale MS. Lung Cancer Screening Uptake: Analysis of BRFSS 2018. *J Gen Intern Med*. 2021 Sep;36(9):2897-2899. doi:10.1007/s11606-020-06236-9
US Centers for Disease Control and Prevention. Cancer and American Indian and Alaska Native People. Accessed February 2, 2026. <https://www.cdc.gov/cancer/health-equity/american-indian-alaska-native.html>