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## **Willingness to Engage in Smoking Cessation Intervention Among Participants in a Population-Based Lung Cancer Screening Pilot**

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### Introduction

Following the 2022 European Council recommendation on lung cancer screening (LCS), several implementation studies have explored how screening can be combined with smoking cessation, a key component for maximising the health benefits of LCS. The TAMIRO-STOP study was embedded within the ZORALCS population-based LCS pilot ([www.zoralcs.be](http://www.zoralcs.be)) to assess willingness to engage in a structured smoking cessation support among those screening participants who still smoked or recently quit (<1 year).

### Methods

All eligible participants who provided informed consent were randomised 1:1 to either a control arm with a minimal intervention (flyer advising referral to a healthcare professional of the participant's choice or to the telephone quit line TABAKSTOP™) or an intervention arm wherein 8 sessions with a smoking cessation expert and free nicotine replacement therapy (NRT) were added to that minimal intervention.

### Results

As of January 1, 487/878 (55.5%) participants in the ZORALCS-study met the smoking-related eligibility criteria, of whom 333/487 (68.4%) participants were enrolled in the study. Randomisation allocated 142/333 (42.6%) participants to the intervention arm and 149/333 (44.7%) to the control arm; 45/487 (9.2%) declined further participation after consenting. From 102/142 (71.8%) who attended the first counselling session in the intervention group, already 38/142 (26.8%) initiated NRT.

### Conclusion

Embedding a structured smoking cessation trial within a population-based LCS programme is feasible and associated with high willingness to participate. These findings support systematic integration of smoking cessation interventions in future LCS implementation strategies. More outcome data will be presented at the conference.