



LUNG CANCER ALLIANCE

UNDERSTANDING
YOUR
DIAGNOSIS

1-800-298-2436

[LungCancerAlliance.org](https://www.LungCancerAlliance.org)

A GUIDE FOR THE PATIENT

RECEIVING A DIAGNOSIS OF LUNG CANCER CAN BE OVERWHELMING.

THIS BROCHURE PROVIDES
BASIC INFORMATION
TO HELP YOU UNDERSTAND
YOUR DIAGNOSIS AND YOUR
TREATMENT OPTIONS.

The content of this publication is for informational purposes only and is not intended to be a substitute for professional medical advice, diagnosis or treatment. Only your doctor can provide you with advice on what is safe and effective for you.

WHAT IS LUNG CANCER?

Cancer is a group of diseases in which cells grow out of control. In lung cancer, these uncontrolled cells form a mass or masses (also called tumors) in the lungs, the sponge-like organs located in the chest that are part of the respiratory system.

As in other cancers, lung cancer cells can leave the primary tumor site (where the tumor started to form) and spread to neighboring tissues or other parts of the body. When this happens, the cancer is said to have metastasized. Other cancers may spread to the lungs but are not considered lung cancer and may be treated very differently.

Lung cancer is separated into categories based on the type of cell that makes up the cancer. The majority of lung cancer cases fall into one of the following two categories:

- **NON SMALL CELL LUNG CANCER (NSCLC)** is the most common type of lung cancer making up nearly 85% of all cases. There are three main kinds of NSCLC:
 - Adenocarcinoma
 - Squamous cell carcinoma
 - Large cell carcinoma

NSCLC is categorized into four stages (I, II, III and IV) based on the size of the primary tumor and if and where the cancer has spread.

- **SMALL CELL LUNG CANCER (SCLC)** cells are smaller in size and tend to spread quickly to other parts of the body. SCLC is usually staged as either limited or extensive depending on if and where the cancer has spread.

HOW DID YOU GET LUNG CANCER?

Although the exact cause of lung cancer remains unclear, many factors increase the risk of developing it. **A history of smoking is the main risk factor for developing lung cancer.** Cigarette smoke contains many proven carcinogens (substances that cause cancer). Other risk factors may include:



Exposure to radon (an invisible, odorless, tasteless radioactive gas that occurs naturally in soil and rocks)



Exposure to industrial chemicals including arsenic, asbestos, beryllium, uranium and Agent Orange.



Exposure to secondhand smoke (or passive smoking)



A family history of lung cancer



Radiation therapy to the chest area



Other lung illnesses (such as emphysema, chronic obstructive pulmonary disease [COPD] or tuberculosis)

LUNG CANCER OFTEN DOES NOT CAUSE SYMPTOMS UNTIL THE DISEASE HAS SPREAD. EVEN WHEN THERE ARE SYMPTOMS THEY CAN BE SIMILAR TO THOSE OF OTHER COMMON ILLNESSES.

SYMPTOMS MOST COMMONLY ASSOCIATED WITH LUNG CANCER

Frequent coughing
Shortness of breath (dyspnea)
Tiredness (fatigue)
Wheezing
Pain in the chest, shoulder, upper back or arm
Coughing up blood (hemoptysis)
Repeated pneumonia or bronchitis
Loss of appetite (anorexia) and weight loss
General pain
Hoarseness
Swelling of face or neck

In order to make a diagnosis of lung cancer, your doctor may order one or more of the following diagnostic tests:

IMAGING TESTS CT (computed tomography) scans, MRI (magnetic resonance imaging) scans and PET (positron emission tomography) scans are used to find out more about the cancer. These tests can indicate where the cancer is, the size of the tumor(s) and if and where the cancer has spread.

BIOPSY A biopsy confirms the presence of cancer. Small pieces of the suspicious tissue are removed from the body and examined under a microscope.

LABORATORY TESTS Many laboratory tests (for example, blood and urine) can indicate how other organs, such as your liver and kidneys, are functioning. These results may provide valuable information regarding overall health, as well as the potential spread of cancer.

WHAT TREATMENT OPTIONS ARE AVAILABLE FOR YOU?

After your diagnosis, your doctor may recommend one or more treatment options. The choice of treatment is based on the type of lung cancer, where it is located, if it has spread and other factors including your age, general health and medical history. Certain biomarkers, including genetic mutations, may help to select the right treatment for the right patient as well as predict response to treatment. Learning about the potential treatment options may help you to have an informed discussion with your doctor.

SURGERY is an operation to remove the tumor. The type of surgery depends on the tumor's location, size and type. The type of surgery is also determined by the stage of the lung cancer and your overall health. Types of lung cancer surgery include:

- **WEDGE RESECTION** Removal of the tumor as well as a small amount of normal lung tissue (the margin).
- **LOBECTOMY** Removal of an entire lobe of the lung. The right lung is divided into three lobes; the left lung has two lobes.
- **BILOBECTOMY** Removal of two lobes of the right lung.
- **PNEUMONECTOMY** Removal of an entire lung.

There are two surgical procedures that are used to remove lung tumors and surrounding tissue.

- **THORACOTOMY** The traditional open surgery in which a large incision is made in the chest to remove lung tissue.
- **MINIMALLY INVASIVE SURGERY** Newer surgical procedures, including VATS (video assisted thoracoscopic surgery) and robotic-assisted thoracic surgery, generally require shorter hospital stays and less recovery time than thoracotomy.

In addition to surgery, your doctor may prescribe chemotherapy and/or radiation to be given either before or after surgery or both.

ONS ARE

If surgery is not an option, your doctor may recommend one or more of the following:

CHEMOTHERAPY uses chemicals to kill cells that grow quickly. This includes cancer cells. Initial chemotherapy for lung cancer often includes a combination of two or more drugs (cisplatin or carboplatin along with another drug such as paclitaxel, docetaxel, etoposide, gemcitabine or pemetrexed).

RADIATION THERAPY is used to kill or shrink cancer cells at the site of the tumor; for palliative care (pain management); or to prevent cancer from spreading to the brain after initial treatments.

TARGETED THERAPIES are designed to target cancer cells based on the unique ways in which they grow and divide. Current targeted therapies available in the United States for use in NSCLC are erlotinib, crizotinib and bevacizumab. Newer targeted therapies are in development and are currently being studied in clinical trials.

CLINICAL TRIALS are research studies that allow patients to try new treatments, new approaches to surgery or radiation therapy, new combinations of treatments or new methods of treatment (such as cancer vaccines).

IF YOU SMOKE, QUITTING IS ONE OF THE SINGLE MOST IMPORTANT LIFESTYLE CHANGES YOU CAN MAKE TO IMPROVE YOUR HEALTH.

Even if you have lung cancer, quitting may help improve how you respond to treatment. If you want to quit, help is available. Ask your doctor or other healthcare provider for information.



YOUR TREATMENT TEAM MAY INCLUDE:

MEDICAL ONCOLOGIST A doctor who specializes in diagnosing and treating cancer.

THORACIC SURGEON A doctor who performs surgeries in the chest (thoracic) region. Some thoracic surgeons specialize in lung cancer.

PATHOLOGIST A doctor who specializes in diagnosing and classifying cancer by studying tissue, fluid or blood samples.

RADIATION ONCOLOGIST A doctor who specializes in treating cancer using various forms of radiation by focusing it on the tumor site in the body.

PULMONOLOGIST A doctor who specializes in treating diseases and conditions involving the lungs.

PULMONARY REHABILITATION SPECIALIST A specialist who works to reduce symptoms and side effects from diseases of the lung—including lung cancer—and your treatments.

ONCOLOGY NURSE A nurse who specializes in helping people with cancer and who may further specialize in the surgical or medical management of a patient's care.

ONCOLOGY SOCIAL WORKER OR COUNSELOR A social worker or counselor who specializes in helping you and your loved ones cope with the emotional impact of cancer and who may help identify other needed resources.

PATIENT NAVIGATOR A nurse, social worker or trained lay person who assists you and your loved ones on your journey through the health care system, coordinating appointments and helping to manage your care.

COMMON TREATMENT SIDE EFFECTS

Depending on the treatment(s) you receive, you may experience side effects. Not everyone experiences the same side effects and they may vary in severity. It is important to know that in most cases, side effects can be managed. You and your doctor should discuss any potential side effects you may experience.

Here are some common side effects, which may depend on what type of treatment(s) you receive.

- Hair loss
 - Nausea and vomiting
 - Loss of appetite (anorexia)
 - Constipation
 - Diarrhea
 - Shortness of breath (dyspnea)
 - Tiredness (fatigue)
 - Numbness or tingling in the hands and/or feet (neuropathy)
 - Rash
 - Low red/white blood cell count
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WHAT ADDITIONAL QUESTIONS SHOULD YOU ASK ABOUT YOUR LUNG CANCER?

To learn more about your diagnosis, treatment options and support that may be available to you, here is a list of questions to ask your treatment team. We suggest bringing paper and pen to write down the answers.

ABOUT DIAGNOSIS

- What type of lung cancer do I have?
- What stage is my lung cancer?
- Has the cancer spread to other parts of my body?
- Do I need more tests?

ABOUT TREATMENTS

- What are my treatment options?
- What type of treatments do you recommend for me? Why?
- What are the potential side effects associated with these treatments?
- When do I need to start treatment? How long will it last? How often will I get it?
- Do I qualify for any clinical trials? If so, how do I find more information?
- Which treatments are covered by my insurance?

ABOUT SUPPORT SERVICES

- Are there any support groups available for me and/or my family and friends?
- What other support is available besides traditional support groups?
- Where can I get more information about lung cancer?
- Where can I get financial assistance?
- Where can I get treatment-related assistance, such as transportation to appointments or wigs?
- Is there someone who can help me find resources?



LUNG CANCER ALLIANCE

Lung Cancer Alliance is the only national non-profit organization dedicated to providing information, support and advocacy for people living with lung cancer and those at risk for the disease.

ENDING INJUSTICE AND SAVING LIVES
THROUGH AN ALLIANCE OF ADVOCACY,
EDUCATION AND SUPPORT.

ABOUT THE AMERICAN COLLEGE OF CHEST PHYSICIANS

The American College of Chest Physicians (ACCP) is an international medical society and the leading resource for improvement in pulmonary, critical care and sleep medicine worldwide. The ACCP promotes the prevention and treatment of chest disease through leadership, education, research and communication. Its philanthropic arm, The CHEST Foundation, helps patients live and breathe easier through work in four key areas: tobacco prevention, humanitarian service, clinical research and critical care/end-of-life care. By giving life to projects in local communities and across the world, The CHEST Foundation enables the ACCP to realize its vision of being the “leading resource for the improvement in cardiopulmonary health and critical care worldwide.”



WHERE CAN YOU GO FOR MORE INFORMATION AND SUPPORT?

For more information about lung cancer and current treatments, to discuss support options or for referral to other resources such as financial and legal assistance, please contact us.

INFORMATION LINE | 1-800-298-2436

CLINICAL TRIALS MATCHING SERVICE | 1-800-698-0931

PHONE BUDDY PROGRAM | 1-800-298-2436

WEBSITE | lungcanceralliance.org

E-MAIL | support@lungcanceralliance.org

MAIL | 888 16th Street NW Suite 150 Washington, DC 20006

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