



Overview of
**Lung Cancer
Treatment**

Some of the materials in this resource were adapted with permission from:
Understanding Lung Cancer, Juravinski Cancer Centre, Hamilton Health Sciences, 2014.

Reviewed by: Thoracic Cancer Site Team, Nova Scotia Health Authority

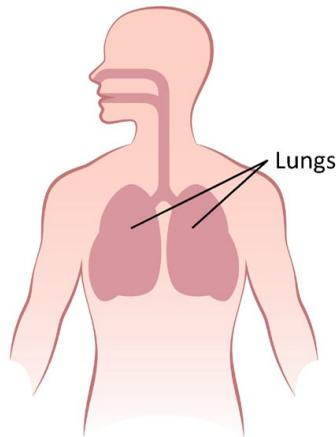
Approved by: The Nova Scotia Cancer Patient Education Committee, 2016

CCNS-0051 Dec 2016

This publication is updated every three years or as clinical practice changes. The information in this booklet does not replace the advice of your health care provider. If you have any questions please ask your health care provider.

© Nova Scotia Health Authority, 2016. May be reprinted with permission from Cancer Care Nova Scotia (1-866-599-2267).

This booklet will give you an idea of the usual treatment for lung cancer. Not all people are the same, so your treatments may be different. Your doctor will explain the details of your specific treatment. If you have questions about your treatment, make sure to ask your cancer specialist, cancer nurse, or cancer patient navigator.



Now that you know you have lung cancer

Your doctor may order tests to find out how far your cancer has spread (also called the “stage”). Some of these tests include:

- **Computed Tomography (CT or CAT scan)** – uses X-rays and computers to see a detailed image of your lungs. You may have an injection of contrast dye to help make the images clearer.
- **Pulmonary Function Tests** – breathing tests to see how well your lungs are working before you have treatment.

- **Positron Emission Tomography (PET)** – you will have an injection of a small amount of radioactive sugar. The PET scanner can detect the radioactive sugar and produce images that show if the cancer cells have spread inside the body. This test is only done in Halifax.
- **Magnetic Resonance Imaging (MRI)** – uses magnetic fields (not X-rays) to produce detailed images of the inside of the body. This is done in some cases to see if cancer has spread to the brain. You may have an injection of contrast dye to help make the images clearer.

Ask your doctor to review your test results and cancer stage with you.

Your doctor should also refer you to the cancer patient navigator in your area. A cancer patient navigator is a cancer nurse who can help support you and your family throughout your treatment and care. You can reach your cancer patient navigator directly by calling 1-866-524-1234.

Your cancer patient navigator can help you:

- Understand your treatment options
- Find answers to your questions and concerns
- Make arrangements to go to the Cancer Centre
- Sign you up for any support programs that you may be eligible for

Treatment

Your doctor may send you to see a cancer specialist to talk about the treatment options that are best for you. Depending on your diagnosis, you may see more than one cancer specialist.

The cancer specialists you may see include:

- **Thoracic surgeon** – a doctor who specializes in lung cancer operations.
- **Medical oncologist** – a doctor who decides what medications are needed to treat your cancer.
- **Radiation oncologist** – a doctor who specializes in using radiation to treat cancer.

There are different types of lung cancer. The type of treatment you have will depend on the type and stage of your lung cancer. Depending on your type of lung cancer, some treatments will work better for you than others.



Common types of lung cancer treatment are:

- **Surgery** – an operation to remove cancer. This is only done in Halifax.
- **Radiation therapy** – the use of radiation from high energy X-ray machines to treat cancer. This is only done at the Cancer Centres in Halifax and Sydney.
- **Systemic therapy** (sometimes called chemo) – a cancer treatment that uses drugs to kill cancer cells or stop them from growing. Depending on the type of systemic therapy it may be given intravenously (by needle) or orally (a pill). You can have your intravenous systemic therapy in hospitals across Nova Scotia. Talk to your doctor about where you can go to have your treatment.

See pages 7 and 13 of this overview for types of cancer treatment for Non Small Cell Lung Cancer and Small Cell Lung Cancers. Not all people are the same, so your treatments may be different.

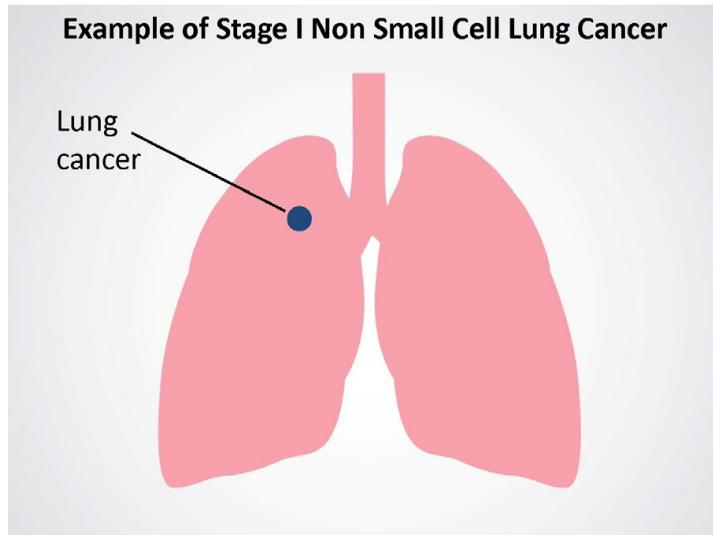
Your family doctor, nurse practitioner and cancer specialists will work together to plan and provide a long term follow up care plan to meet your individual needs.

Non Small Cell Lung Cancer Treatment Overview

This information will give you an idea of the usual treatment for Non Small Cell Lung Cancer. Not all people are the same, so your treatments may be different. Treatment options depend on the size of the tumour, where it is located, where it has spread, and your overall health. Ask your cancer specialist, cancer nurse, or cancer patient navigator about your treatment plan. The doctors and nurses at the Cancer Centre will also give you more information about your treatment.



Stage I

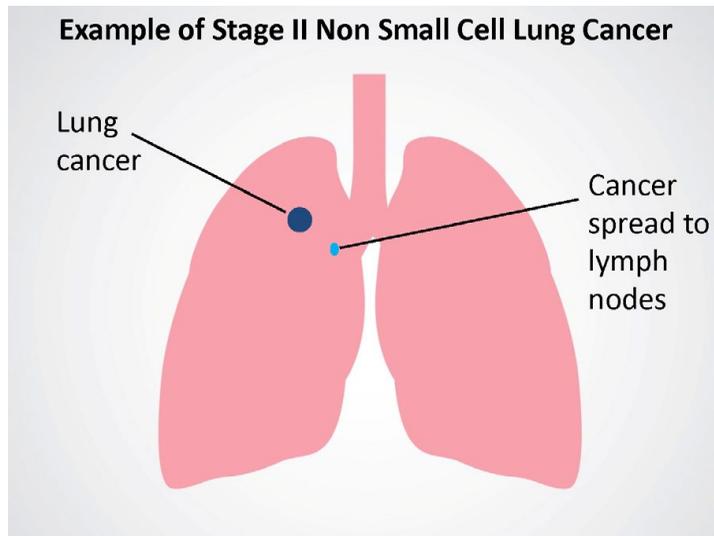


Stage I (1) – the cancer is only in the lung.

Surgery is the main treatment for Stage I Non Small Cell Lung Cancer. The part of the lung with the tumour and some lymph nodes will be removed for testing.

Radiation therapy may be used as the main treatment for people who are unable to have surgery.

Stage II



Stage II (2) – the cancer may have spread to nearby lymph nodes or to the lining of the lung.

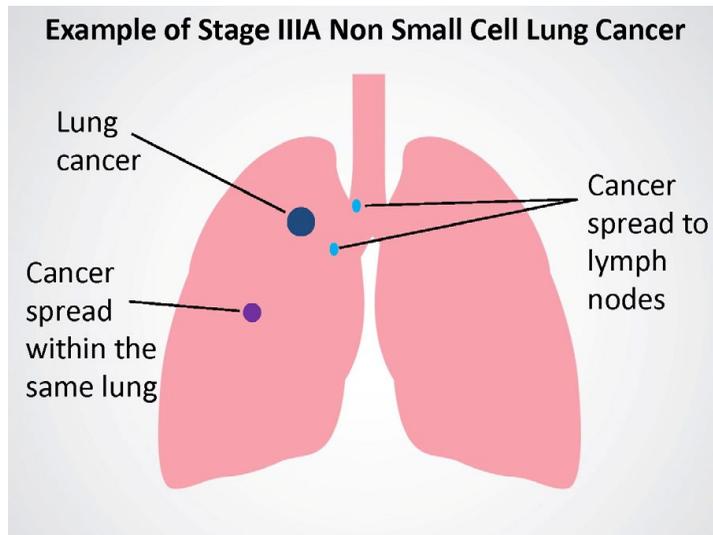
Surgery is the main treatment for Stage II Non Small Cell Lung Cancer. The tumour and some lymph nodes will be removed.

Systemic therapy, radiation therapy or both may be used after surgery to reduce the chance of the cancer coming back.

Radiation therapy may be used as the main treatment for people who are unable to have surgery.

Systemic therapy, radiation therapy, a combination of both or more surgery may be used if the cancer wasn't completely removed.

Stage IIIA



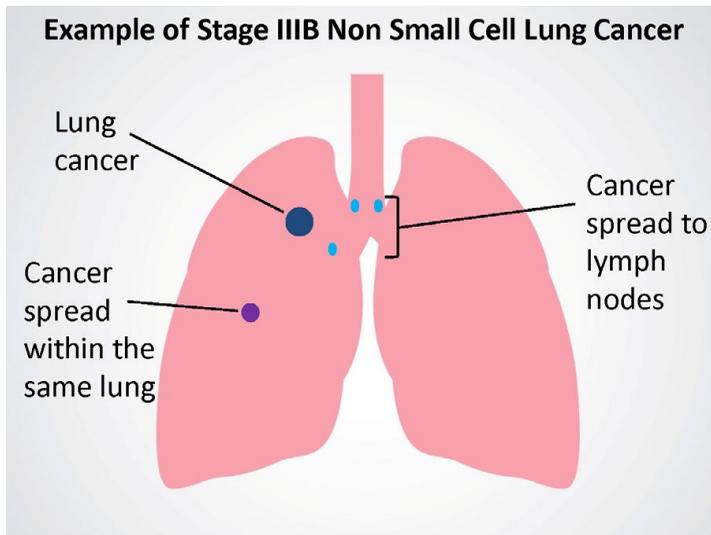
Stage IIIA (3A) – the cancer has spread to nearby lymph nodes and maybe to other areas in the chest on the same side where the cancer started.

Surgery is rarely used for Stage IIIA Non Small Cell Lung Cancer. Systemic therapy and radiation therapy may be used before surgery to help shrink the tumour.

Systemic therapy and/or radiation therapy may be used if the tumour can't be removed with surgery.

Systemic therapy, radiation therapy or both may be used after surgery to reduce the chance of the cancer coming back.

Stage IIIB



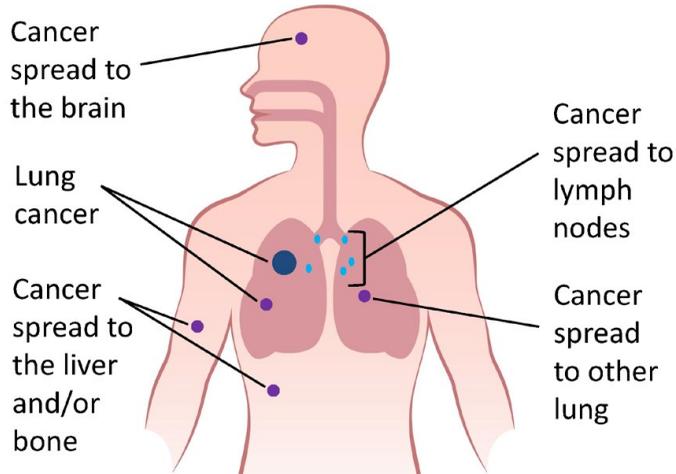
Stage IIIB (3B) – the cancer has spread to more distant lymph nodes and maybe to other areas in the chest on the opposite side of where the cancer started.

Depending on the size and location of your cancer, treatment may include:

- Radiation and systemic therapy together
- Radiation therapy alone

Stage IV

Example of Stage IV Non Small Cell Lung Cancer



Stage IV (4) – the cancer has spread to the other lung or outside of the lungs to other parts of the body.

Systemic therapy is the main treatment for Stage IV Non Small Cell Lung Cancer.

Radiation therapy can be given to treat symptoms related to lung cancer, such as pain or a cough. Radiation therapy can also be used if cancer has spread to the brain.

Small Cell Lung Cancer Treatment Overview

This information will give you an idea of the usual treatment for Small Cell Lung Cancer. Not all people are the same, so your treatments may be different. Your doctor will talk about your treatment options with you, keeping in mind the stage of your cancer.

Ask your cancer doctor, cancer nurse, or cancer patient navigator about your treatment plan. The doctors and nurses at the Cancer Centre will also give you more information about your treatment.

Limited Stage

Limited stage means the cancer is found only in one lung and nearby lymph nodes.

The main treatment for limited stage Small Cell Lung Cancer is systemic therapy and radiation therapy together.

Radiation therapy may be given alone in people who are unable to have systemic therapy.

Radiation therapy to the brain is sometimes given to prevent the cancer from spreading to the brain.

Surgery is an option for some people to remove small tumours.



Extensive Stage

Extensive stage means the cancer has spread to the other lung, lymph nodes on the other side of the chest, or other areas of the body outside of the chest like the bones, liver and brain.

Systemic therapy is the main treatment for extensive stage Small Cell Lung Cancer.

Some patients may also have radiation therapy to help with symptoms. Radiation therapy may also be given to the brain.

Where can I learn more?

Canadian Cancer Society

www.cancer.ca

Lung Cancer Canada

www.lungcancer canada.ca

National Comprehensive Cancer Network*

www.nccn.org

**Please note that this is an American organization and not all information will apply to Canadian patients.*



