



Lung Cancer: What to Ask Your Doctor

What type of lung cancer do I have?

There are two main types of lung cancer: non-small cell lung cancer (NSCLC) and small cell lung cancer (SCLC). These two types of lung cancers differ in how they grow and spread, and how they are treated.

What is the stage of my cancer? What does this mean?

Non-small cell lung cancers are classified into four stages, while SCLC is classified as either limited or extensive stage. Staging depends on the size of a tumor, whether it has spread to surrounding lymph nodes and whether or not it has spread to other organs. The lower the stage number, the less the cancer has spread.

What are my treatment options?

There are two main types of treatment for lung cancer: local and systemic treatments. Local treatments target cancer at their point of origin, and are aimed at removing tumors. Surgery and radiation therapy are examples of local treatments. Systemic treatments aim to kill cancer cells in every part of the body to which they have spread. Systemic treatments include chemotherapy, radiation therapy and immunotherapy.

Treatment options will differ based on the type and stage of cancer. Non-small cell lung cancers diagnosed in their early stages (Stages I-II) may be treated solely with surgery to remove the tumor or the part of the lung containing the tumor. In some cases, chemotherapy may be recommended before surgery to shrink the size of a tumor before operation, or after surgery as a way to enhance treatment. Non-small cell lung cancers diagnosed in the later stages (Stages IIIA/B-IV) are treated with some combination of both local and systemic treatments. These

treatments target the tumor, any lymph nodes that are likely to have the cancer and any other distant sites to which the cancer has spread.

Small cell lung cancers diagnosed in the limited stage are treated first with surgery that removes the tumor and any affected lymph nodes, and then with chemotherapy. Cancers diagnosed in the extensive stage are treated solely with chemotherapy. Patients with extensive stage SCLC may benefit from clinical trials of new chemotherapy drugs and combinations.

What is the prognosis?

You cannot predict your individual likelihood of survival of lung cancer with precision. Generally, lung cancer cases diagnosed in an early stage have a 5-year survival rate of 56%. Cases diagnosed in later stages have a 5-year survival rate of 5%. The overall 5-year survival rate for NSCLC is about 18%, while the 5-year survival rate for SCLC, the more aggressive and rapidly-spreading form of cancer, is 6%.

There are a number of factors which can impact survival rates, including a patient's age, the presence of other medical conditions and whether a patient continues smoking during treatment.

Should I stop smoking?

Research suggests that continued tobacco use during treatment of lung and other types of cancer is associated with greater probability of recurrence, reduced survival and increased symptom burden (e.g., nausea, fatigue, depression).

It is never too late to quit smoking, even after a lung cancer diagnosis. Smoking cessation before or during treatment may result in



What you need to know about...

improved treatment outcomes and reduced risk for secondary cancers and diseases.

RHA recommends all smokers consider quitting and that they enroll in evidence-based tobacco cessation programs such as RHA's Courage to Quit®.