

### **Types of Lung Cancer**

Two major types

- 1. Small Cell Lung CA
- 2. Non-small Cell Lung CA
- \* The aggressiveness & treatment options depend on which type

#### **Risk Factors**

Radon is another risk factor (Uranium breaks down in the ground). Is a radioactive gas that cannot be seen, tasted or smelled.

-- Risk of lung CA may be doubled or tripled if live many yrs in radon contaminated home

## **Signs & Symptoms**

In many cases, symptoms do not appear until the CA is quite advanced Signs within the lungs include:

Difficulty breathing, wheezing, SOB Coughing with blood in sputum, dry cough

Recurring pneumonia or bronchitis Chest, shoulder or arm pain Loss of appetite Weight loss Bone pain Hoarseness

Headaches, seizures, neurological symptoms Swelling of face or neck Fatigue

•						
S	CI	'Δ	Δ	n	n	O
_	u		C			S

No **routine** screening tests for lung CA Low dose CT recommended Only for adults who have no symptoms, high risk

#### **Diagnostic Tests**

**CXR** – Initial test to check for any mass or spots on lungs

CT Chest – Detailed cross-sectional images. Provides precise info about size, shape & position of tumor & can help find enlarged LN's. Very effective for diagnosing & staging lung cases. Make sure to document the CT well.

MRI – Scans use radio waves & strong magnet. Primarily used to detect spread of lung CA to brain or spinal cord

#### **Diagnostic Tests**

#### **PET- Positron emission tomography**

Noninvasive eval LNs; see active tumor; used in conjunction to treatment planning; allows staging of disease and identifies surgical candidates; limitations

**Bone Scan** - Areas of bone that may be abnormal. Routinely done small cell lung cancer

#### **Diagnostic Tests**

**Sputum Cytology** – Exam of phlegm checking for CA cells. Pt gives early morning samples 3 days in row. Not done as much as in past.

**Bronchoscopy** – Fiberoptic tube passed thru mouth & into bronchi of lungs looking for tumors or blockages.

**Needle Bx** – Can be done at bronchoscopy or have CT or fluoroscopy guided

#### **Diagnostic Tests**

**Mediastinoscopy** – Small slit made in neck & hollow tube inserted behind sternum. Can evaluate & take samples of mediastinal LN's

**Mediastinotomy** – Small slit incision beside the sternum & allows surgeon to evaluate & reach LN's not reached by mediastinoscopy. Done under general anesthesia

#### **Diagnostic Tests**

Thoracoscopy & Thoracentesis – Eval buildup of fluid around the lungs (pleural effusion) is the result of CA spreading to pleura (membranes surrounding the lungs)

- Thoracentesis removes excess fluid causing the pleural effusion.
- **NOTE:** Document findings in the lab section for the exam of the pleural effusion. Often positive for malig in lung cases.

<b>Diagnos</b>	tic	Tests
----------------	-----	-------

**Bone Marrow Bx** – Mostly done to find spread to marrow from a Small Cell Lung CA

## **Syndromes of Lung CA**

#### **Horners Syndrome**

- Drooping or weakness of eyelid
- Smaller pupil
- Absent perspiration same side of face

# **Syndromes of Lung CA**

Paraneoplastic (tumor-related) Syndromes

Some tumors secrete hormone-like or other substances

### **Syndromes of Lung CA**

Paraneoplastic syndromes associated with Non-Small Cell Lung CA include:

Hypercalcemia

Excessive growth of certain bones especially those in finger tips. Can be painful. Hypertrophic Osteoarthropathy

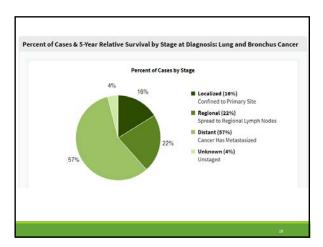
Production of substances leading to blood clots Gynecomastia in men

### **Syndromes of Lung CA**

Syndrome of Inappropriate Antidiuretic Hormone (SIADH) associated with Small Cell Lung CA.

Causes salt levels in blood to become very low

Symptoms include fatigue, loss of appetite, muscle weakness or cramps, nausea, vomiting, restlessness & confusion. Without treatment, may lead to seizures & coma



		•
/ \ \ ı	100	cions
<b>\</b> / I	$1 \leftarrow 1$	1())115
V	<u> </u>	<u>. 1 O I I J</u>

Contact Info Lori Somers, RN Training & Quality Improvement State Health Registry of Iowa <u>Iori-somers@uiowa.edu</u>