If You Have Non-small Cell Lung Cancer

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What is lung cancer?

Cancer can start any place in the body. Cancer that starts in the lung is called lung cancer. It starts when cells in the lung grow out of control and crowd out normal cells. This makes it hard for the body to work the way it should.

Cancer cells can spread to other parts of the body. Cancer cells in the lung can sometimes travel to the brain and grow there. When cancer cells do this, it’s called metastasis. To doctors, the cancer cells in the new place look just like the ones from the lung.

Cancer is always named for the place where it starts. So when lung cancer spreads to the brain (or any other place), it’s still called lung cancer. It’s not called brain cancer unless it starts from cells in the brain.
The lungs Ask your doctor to show you on this picture where your cancer is found.

The lungs

The lungs are 2 sponge-like organs found in the chest. The right lung has 3 parts called lobes. The left lung has 2 lobes. The lungs bring air in and out of the body. They take in oxygen and get rid of carbon dioxide, a waste product.

The windpipe, or trachea, brings air down into the lungs. It splits into 2 tubes called bronchi (one tube is called a bronchus).

Different kinds of lung cancer

The main types of lung cancer\(^1\) are:

- **Small cell** lung cancer
- **Non-small cell** lung cancer

The treatment is different for each type. Your doctor can tell you more about which type you have.

**Here, we cover only non-small cell lung cancer.** Call us at 800-227-2345 or read *If You Have Small Cell Lung Cancer*\(^2\) to learn about small cell lung cancer.

Questions to ask the doctor
• Why do you think I have lung cancer?
• Is there a chance I don’t have cancer?
• Would you please write down the kind of cancer you think I might have?
• What will happen next?

How does the doctor know I have lung cancer?

The doctor asks you questions about your health and does a physical exam. If signs are pointing to lung cancer, more tests will be done.

Here are some of the tests you may need:

Chest x-ray: This is often the first test done to look for spots on your lungs. If a change is seen, you’ll need more tests.

CT scan: This is also called a CAT scan. It’s a special kind of x-ray that takes detailed pictures of your insides. CT scans can also be used to help do a biopsy (see below).

PET scan: In this test, you are given a type of sugar that can be seen inside your body with a special camera. If there’s cancer, the sugar shows up as “hot spots” where the cancer is found. It can help when your doctor thinks the cancer has spread, but doesn’t know where.

Bronchoscopy: A thin, lighted, flexible tube is passed through your mouth into the bronchi. The doctor can look through the tube to find tumors. The tube also can be used to do a biopsy.

Blood tests: Blood tests are not used to find lung cancer, but they are done to tell the doctor more about your health.

Lung biopsy

In a biopsy, the doctor takes out a small piece of tissue or fluid where the cancer seems to be. It’s checked for cancer cells. A biopsy is the best way to tell for sure if you have cancer.

There are many types of biopsies and ways to do them. Ask your doctor what kind you will need. Each type has reasons for and against doing them. The choice of which type will be used, depends on your case.
Questions to ask the doctor

- What tests will I need to have?
- Who will do these tests?
- Where will they be done?
- Who can explain them to me?
- How and when will I get the results?
- Who will explain the results to me?
- What do I need to do next?

How serious is my cancer?

If you have non-small cell lung cancer, the doctor will want to find out how far it has spread. This is called staging. You may have heard other people say that their cancer was “stage 2” or “stage 3.” Your doctor will want to find out the stage of your cancer to help decide what type of treatment is best for you.

The stage describes the spread of the cancer through the lung. It also tells if the cancer has spread to nearby organs or to organs farther away.

Your stage can be stage 1, 2, 3, or 4. The lower the number, the less the cancer has spread. A higher number, such as stage 4, means a more serious cancer that has spread outside your lungs. Be sure to ask the doctor about your cancer’s stage and what it means.

Questions to ask the doctor

- Do you know the stage of the cancer?
- If not, how and when will you find out the stage of the cancer?
- Would you explain to me what the stage means in my case?
- Based on the stage of the cancer, how long do you think I’ll live?
- What will happen next?

What kind of treatment will I need?

There are many ways to treat lung cancer.
Surgery and radiation are used to treat only the cancer. They do not affect the rest of the body.

Chemo drugs, targeted therapy, and immunotherapy go through the whole body. They can reach cancer cells almost anywhere in the body.

The treatment for lung cancer can include surgery, radiation, chemotherapy, targeted therapy, and immunotherapy. The treatment plan that’s best for you will depend on:

- The stage of the cancer
- The chance that a type of treatment will help
- Your age
- Other health problems you have
- Your feelings about the treatment and the side effects that may come with it

If you need more information about possible side effects of treatment, visit Managing Cancer-related Side Effects.

**Surgery**

If your cancer is in an early stage, your doctor may suggest surgery, along with other treatments. All or part of your lung may be taken out. If surgery can be done, it offers the best chance of a cure.

Sometimes, fluid collects in the chest and causes breathing problems. This fluid can be taken out by putting a small tube in the chest. After the fluid is drained out, a drug is put into the tube. This helps seal the space and keep fluid from building up again.

Most of the time, non-small cell lung cancer is treated with surgery and radiation. Chemo might be also be added.

**Side effects of surgery**

Any type of surgery can have some risks and side effects. Be sure to ask the doctor what you can expect. If you have problems, let your doctor know. Doctors who treat people with lung cancer should be able to help you with any problems that come up.

**Radiation treatment**

Radiation uses high-energy rays (like x-rays) to kill cancer cells. In non-small cell lung
cancer, it’s most often used after surgery. It can be given alone or along with chemo. Radiation can also be used to relieve symptoms such as pain, bleeding, trouble swallowing, or other problems that happen when the lung cancer has grown very large or has spread to other areas like the bones. It’s given in small doses every day for many weeks.

**Side effects of radiation treatments**

If your doctor suggests radiation as your treatment, talk about what side effects might happen. The most common side effects of radiation are:

- Skin changes where the radiation is given
- Feeling very tired (fatigue)

Most side effects get better after treatment ends. Some might last longer. Talk to your cancer care team about what you can expect.

**Chemo**

**Chemo** – the short word for chemotherapy – is the use of drugs to fight cancer. The drugs may be given into a vein or taken as pills. These drugs go into the blood and spread through the body. Chemo is often given to treat for non-small cell lung cancer.

Chemo is given in cycles or rounds. Each round of treatment is followed by a break. This gives the body time to recover. Most of the time, 2 or more chemo drugs are given. Treatment often lasts for many months.

**Side effects of chemo**

Chemo can make you feel very tired, sick to your stomach, and cause your hair to fall out. But these problems go away after treatment ends.

There are ways to treat most chemo side effects. If you have side effects, be sure to talk to your cancer care team so they can help.

**Targeted therapy**

**Targeted therapy** drugs may be used for lung cancers that have certain abnormal proteins. These drugs affect mainly cancer cells and not normal cells in the body. They may work even if other treatment doesn’t. They may cause different side effects than
Immunotherapy

Immunotherapy\textsuperscript{10} is treatment that either boosts your own immune system or uses man-made versions of parts of the immune system that attack the lung cancer cells. Many types of immunotherapy are used to treat lung cancer. These drugs may be given into a vein.

Side effects of immunotherapy

Immunotherapy can cause many different side effects depending on which drug is used. These drugs may make you feel tired, sick to your stomach, or cause a rash. Most of these problems go away after treatment ends.

There are ways to treat most of the side effects caused by immunotherapy. If you have side effects, talk to your cancer care team so they can help.

Clinical trials

Clinical trials are research studies that test new drugs or other treatments in people. They compare standard treatments with others that may be better.

Clinical trials are one way to get state-of-the-art cancer treatment. They are the only way for doctors to find better ways to treat cancer. If your doctor can find one that’s looking at the kind of cancer you have, it’s up to you whether to take part. And if you do sign up for a clinical trial, you can always stop at any time.

If you would like to learn more about clinical trials that might be right for you, start by asking your doctor if your clinic or hospital conducts clinical trials. See Clinical Trials\textsuperscript{11} to learn more.

What about other treatments that I hear about?

When you have cancer you might hear about other ways to treat the cancer or treat your symptoms. These may not always be standard medical treatments. These treatments may be vitamins, herbs, special diets, and other things. You may wonder about these treatments.

Some of these are known to help, but many have not been tested. Some have been shown not to help. A few have even been found to be harmful. Talk to your doctor about
anything you’re thinking about using, whether it’s a vitamin, a diet, or anything else.

Questions to ask the doctor

- What treatment do you think is best for me?
- What’s the goal of this treatment? Do you think it could cure the cancer?
- Will treatment include surgery? If so, who will do the surgery?
- What will the surgery be like?
- Will I need other types of treatment, too?
- What’s the goal of these treatments?
- What side effects could I have from these treatments?
- What can I do about side effects that I might have?
- Is there a clinical trial that might be right for me?
- What about special vitamins or diets that friends tell me about? How will I know if they are safe?
- What should I do to be ready for treatment?
- Is there anything I can do to help the treatment work better?
- What’s the next step?

What will happen after treatment?

You’ll be glad when treatment is over\textsuperscript{12}. But it’s hard not to worry about cancer coming back. Even when cancer never comes back, people still worry about it. For years after treatment ends, you will still need to see your cancer doctor. Be sure to go to all of these follow-up visits. You will have exams, blood tests, and maybe other tests to see if the cancer has come back.

For the first 2 to 3 years after treatment, you’ll have doctor visits and CT scans every 3 to 6 months. After that, you will most likely have a doctor visit and CT scan every 6 months.

Having cancer and dealing with treatment can be hard, but it can also be a time to look at your life in new ways. You might be thinking about how to improve your health. Call us or talk to your cancer care team to find out what you can do to feel better.

You can’t change the fact that you have cancer. What you can change is how you live the rest of your life – making healthy choices and feeling as well as you can.
Hyperlinks

1. www.cancer.org/cancer/lung-cancer/about/what-is.html
5. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects.html

Words to know

Biopsy (BY-op-see): taking out a small piece of tissue to see if there are cancer cells in it

Bronchoscopy (brong-KOS-kuh-pee): Use of a thin, lighted, flexible tube that’s passed through the mouth into the bronchi of the lungs. The doctor can look through the tube to find tumors or use it to take out a piece of tumor or fluid to test for cancer cells.

Bronchus (BRONG-kus), plural bronchi (BRONG-ki): In the lungs, the 2 main air passages leading from the windpipe or trachea. The bronchi are the tubes that allow air to move in and out of the lungs.

Metastasis (muh-TAS-tuh-sis): cancer cells that have spread from where they started to other places in the body

Trachea (TRAY-key-uh): the windpipe, or the main passage for air coming from the nose and mouth into the bronchi and lungs
How can I learn more?

We have a lot more information for you. You can find it online at www.cancer.org (http://www.cancer.org)\textsuperscript{13}. Or, you can call our toll-free number at 1-800-227-2345 to talk to one of our cancer information specialists.

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The American Cancer Society medical and editorial content team (www.cancer.org/cancer/acs-medical-content-and-news-staff.html)

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