Overview of Treatment for Lung Cancer in South East Scotland

Information for Patients

Introduction

This overview provides patients and their carers with a general guide to the standard approaches for treating lung cancer in South East Scotland. Each patient is, however, considered as an individual and the final management plan will only be recommended after careful consideration and a full discussion with the patient.

All new patients are presented at Multidisciplinary Meetings that take place at various hospitals throughout South East Scotland. At these meetings each person's case is presented, and an x−ray doctor reviews the x−rays and scans. All the disciplines that look after lung cancer are present at these meetings. These include cancer doctors, chest doctors, chest surgeons, palliative care specialists and specialist nurses. At these meetings the best treatment plan is decided upon and then discussed with the patient. Sometimes further information, such as another investigation or procedure is considered necessary to be able to advise on the best management plan.

Treatment of Non Small Cell Lung Cancer

The four treatment options used to treat non small cell lung cancer are:

- surgery
- radiotherapy
- chemotherapy and erlotinib (Tarceva)
- active supportive care

These treatment options can be used alone or, more commonly, in combination.

Surgery

Surgery is used to treat lung cancer when it is at an early stage. However, not everyone can have an operation. There are a number of reasons why a patient might not be suitable for removal of a lung cancer. These include:

- the lung cancer may be too advanced or have spread to other parts of the lung or body
- the lung cancer may be attached to a major organ, blood vessel or nerve from which it can not be separated.
- some patients suffer from chronic chest problems and their lung function may be too poor to be able to cope with the loss of part or the whole of the lung
- some patients may have other medical problems such as heart disease that makes the operation and anaesthetic too risky
Radiotherapy

Radiotherapy is treatment with beams of high energy x−rays directed from outside the body. Radiotherapy can be used to treat cancers that are not suitable for surgery, but have not spread outside the lung. High doses of radiotherapy can be given with the aim of curing cancer but lower doses can also be helpful in relieving symptoms such as cough, breathlessness or pain. Sometimes radiotherapy is given after surgery where there is a concern that not all the cancer has been removed. Radiotherapy can also be given to help with symptoms caused by cancer that has spread to other parts of the body (e.g., pain caused by cancer in the bones).

Chemotherapy and Erlotinib

Chemotherapy is a drug treatment that is usually given into a vein through a drip. Chemotherapy may be given before or after surgery, or before or during radiotherapy. There are often research studies available that involve surgery, radiotherapy and chemotherapy combinations and patients may be asked if they would like to participate in this research. Where the cancer has spread to a number of areas in the body, chemotherapy can be given to slow down the progress of the cancer, improve symptoms and quality of life. Erlotinib is a drug treatment, given in tablet form, which is suitable for certain patients. This can also slow down the process of a cancer. Not all patients, however are suitable for chemotherapy or erlotinib treatment. This is often the case in patients who are frail or not able to do much for themselves.

Active supportive care

Active supportive care is not one treatment but a package of care to improve symptoms and quality of life. The package will be tailored to an individual patient's needs and will vary from person to person, but may include:

- breathing exercises
- specialised equipment at home
- help with bathing
- financial support, such as Disability Living Allowance or Attendance Allowance
- practical help at home
- other drug treatments, such as painkillers and steroids.
- visits at home from a Marie Curie or Macmillan nurse and input from doctors who are experts in helping people's symptoms.

Patients are encouraged to discuss with their specialist nurse what active supportive care they might need.

Treatment of Small Cell Lung Cancer

The treatment options for small cell lung cancer are:

- chemotherapy
- radiotherapy
- active supportive care

Small cell lung cancer is treated with chemotherapy. In most cases this means between 4 and 6 courses of chemotherapy. When the disease has not spread outside the chest, radiotherapy is also given, either during or after chemotherapy. The radiotherapy is directed to the tumour and glands in the centre of the chest. A treatment called prophylactic cranial irradiation (PCI) is often recommended at the end of chemotherapy. This is radiotherapy to the head that is used to try and prevent the spread of cancer to the brain. As with non−small cell lung cancer, not all patients are suitable for chemotherapy, and for these patients a course of radiotherapy to the chest may be given to help with symptoms and improve quality of life.
Active supportive care

A package of care can be arranged to suit a patient's needs in the same way as described above in the section for non small cell lung cancer.

Research

There are clinical trials available for patients with both types of lung cancer in all areas of their treatment – surgery, radiotherapy, chemotherapy or active supportive care. Any patient who wishes to participate in research studies is encouraged to ask if there is a study for which they may be suitable. Suitable patients may also be approached by members of staff and asked if they would like to take part in clinical trials. However, it should be remembered that this is entirely voluntary and patients should feel free to decline to take part without this affecting their standard of care in any way.

Specialist Nursing Support

You may meet specialist nurses when you first visit the hospital or when a diagnosis has been obtained. Specialist Nurses and Oncology Nurse Specialists are nurses who are have a wide knowledge of your cancer and the treatments that can be given. The principal aim of these nurses is to provide information, advice and support to all patients diagnosed with lung cancer and their carers. They can answer any questions you might have about your illness, treatment and what might happen.

Remember

This information is only a general guide to how lung cancer is treated in South East Scotland and depending on the details of a given case, the approach taken may be different than described here. Any questions you may have should be directed to your health care team.

For more information on the diagnosis of lung cancer in South East Scotland, please see Overview of How Lung Cancer is Diagnosed in South East Scotland.