

LVNG

WITH
LUNG
CANCER

UNDERSTANDING YOUR LUNG CANCER
DIAGNOSIS AND TREATMENT JOURNEY



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This brochure provides step-by-step guidance to help you after you've been diagnosed with lung cancer. You'll learn more about lung cancer, treatment options, and the importance of finding an oncologist.

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**THE FIRST STEP IN TAKING
CONTROL OF LUNG CANCER IS
KNOWING WHERE
TO START IN YOUR JOURNEY.**



GETTING STARTED AFTER DIAGNOSIS

It's normal to feel a range of emotions after being diagnosed with lung cancer. Coming to terms with the diagnosis isn't easy, but it's important to remain hopeful. There have been advancements made in lung cancer testing and treatments over the years.

If you are feeling overwhelmed about where to start, reading through this brochure may help.

WHY FINDING AN ONCOLOGIST NOW IS IMPORTANT

An oncologist will help get you started on the best possible treatment to be given with curative intent or keep your cancer from spreading. It's important to start looking for an oncologist right after diagnosis because it may take some time to find the right one for you.

You can also turn to [page 12](#) for tips on choosing the right oncologist.

FEELING SAFE AND SUPPORTED

After you've taken some time for yourself, you may want to share your feelings with loved ones. Accepting help from family and friends isn't always easy, but they will want to support you in any way they can. Don't be afraid to ask for help.

Even without the support of family and friends, you don't have to go through this alone. There are many groups and forums that serve the lung cancer community in different ways.

For more support from the lung cancer community and a list of cancer organizations, visit lvng.com/resources/partner-organizations.html



UNDERSTANDING LUNG CANCER AND TREATMENT

Lung cancer isn't the same for everyone. There are different types of lung cancer, and there are different stages of the disease too. Knowing your type and stage can help you start fighting cancer soon after being diagnosed.

If you haven't learned your type and stage, an oncologist can help since they specialize in treating cancer.

[See page 12 for tips on choosing the right oncologist.](#)

TYPES OF LUNG CANCER

There are 2 main types of lung cancer: non-small cell lung cancer (NSCLC) and small cell lung cancer (SCLC). The most common type is NSCLC, accounting for about 80% - 85% of all diagnoses, while 10% -15% are SCLC.

LUNG CANCER STAGES AND TREATMENT OPTIONS

Each stage of lung cancer is determined by the size of the tumor, where the cancer is located within the chest, and if/where it may have spread in the chest and/or throughout the body. Depending on the stage of your disease, an oncologist will recommend the best treatment options, including surgery, chemotherapy, radiation therapy, targeted therapy, or immunotherapy. And with recent advancements in treatment options, people are living longer than ever before.

[Learn about each stage of lung cancer and possible treatments on the next few pages.](#)



CONTINUED

UNDERSTANDING LUNG CANCER AND TREATMENT

NSCLC: UNDERSTANDING STAGE 0, STAGE 1, AND STAGE 2 FOR NSCLC

STAGE 0 – STAGE 1

For Stage 0, the cancer is in the lungs, has not grown into nearby tissues, and has not spread outside the lung. Stage 1 is when the cancer is in the lung as a small tumor and has not spread to the lymph nodes. Stage 1 is divided into 4 substages based on the size of the tumor.

STAGE 2

The cancer is in the lungs and may have spread to nearby lymph nodes on the same lung. Stage 2 is divided into 2 substages:

STAGE 2A

The tumor is between 4 cm to 5 cm in size and has not spread to the nearby lymph nodes on the same lung where the cancer first appeared.

STAGE 2B

The tumor is 5 cm or less in size and has spread to lymph nodes, near where the cancer appeared, or the tumor is 5 to 7 cm in size but has not spread to the lymph nodes.

TREATMENT FOR STAGES 0 – 2: SURGERY

Surgery is most commonly used with the goal of removing the tumor from the body. Depending on the size and location of the cancer, surgery may be used alone or in combination with other treatments such as chemotherapy or radiation therapy.

**UNDERSTANDING THE STAGE OF YOUR
LUNG CANCER IS AN IMPORTANT STEP IN
GETTING THE BEST TREATMENT FOR YOU.**

STEP 2

CONTINUED






UNDERSTANDING LUNG CANCER AND TREATMENT

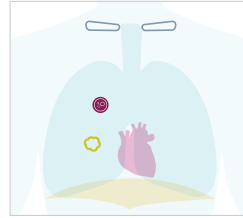
NSCLC: UNDERSTANDING STAGE 3 NSCLC

Stage 3 lung cancer is divided into 3 substages: 3A, 3B, and 3C. The substage is based on how big the cancer is, if it has spread in the chest, and where it has spread.

Here, you will learn more about the differences of each Stage 3 substage.

KEY

	primary tumor
	cancerous lymph nodes
	collarbone
	heart
	diaphragm

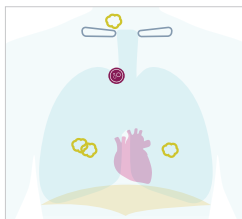


STAGE 3A

The primary tumor, also known as the original tumor, may have spread to lymph nodes on the same side of the chest as where it started. There may be multiple tumors of various sizes.

The cancer may also grow or spread into one or more of the following areas:

- Chest wall
- Nerves
- Blood vessels
- Other organs located in the chest

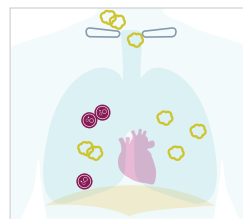


STAGE 3B

The primary tumor may have spread to the lymph nodes on the same side or opposite side of the chest from where it started, above the collarbone, or in the space between the lungs. There may be multiple tumors of various sizes.

The cancer may also grow or spread into one or more of the following areas:

- Chest wall
- Nerves
- Blood vessels
- Other organs located in the chest



STAGE 3C

The large primary tumor may have grown and spread to the lymph nodes on the opposite side of the chest from where it started, above the collarbone, or in the space between the lungs. There may be multiple tumors of various sizes.

The cancer has also grown or spread into one or more of the following areas:

- Chest wall
- Nerves
- Blood vessels
- Other organs located in the chest

Turn to the next page to learn about treatment options for Stage 3 NSCLC.

The graphics shown are simplified to help you better understand lung cancer and should not take the place of discussion with your treatment team to fully understand your cancer diagnosis.



CONTINUED

UNDERSTANDING LUNG CANCER AND TREATMENT

NSCLC: TREATMENT FOR STAGE 3 (NSCLC)

Over the past few years, there have been recent advancements in Stage 3 NSCLC treatments, and the goal is to try to shrink the cancer and help people live longer.¹ Depending on the tumor's size, location, and whether or not it has spread, an oncologist will determine the best treatment for you.

SURGERY

Surgery is used with the goal of removing the tumor from the body. It works best for solid tumors that are contained in one area. Surgery to remove some of the tumor can also be used to help other treatments work better or to help relieve symptoms, like pain or pressure.

CHEMOTHERAPY

Chemotherapy works by attacking all fast-growing cells to get at cancer cells. It is given as an infusion into the bloodstream, and because blood travels throughout the body, it enables the treatment to travel in the body where the cancer has spread. Although chemotherapy is often given through an infusion, it can also be given in other ways.

RADIATION THERAPY

Radiation therapy works by targeting DNA in cancer cells to keep them from growing. It is given through a machine that aims radiation at cancer from outside the body. It can feel similar to getting an x-ray—it is painless and lasts only a few minutes.

CHEMORADIATION THERAPY

If surgery is not an option and you are in fairly good health, treating with a combination of chemotherapy and radiation therapy given at the same time may be recommended.¹ This is known as concurrent chemoradiation.¹ **Concurrent chemoradiation is given for 6 to 7 weeks, but depending on how you receive it, it could be longer or shorter.¹ It has also been proven to have certain advantages.¹**

A clinical study showed it has significant benefits over receiving them one at a time. Here are some of the advantages:

- Cancer may shrink after treatment
- Your chances of living longer may increase
- Cancer may disappear after treatment

When starting any new treatment, it's normal to think about side effects. That's why it's important to ask your treatment team what to expect and make sure to talk to them if you have any side effects. If you do experience side effects from treatment, talking to your treatment team is the best way to find out how to manage them. Even if you aren't sure what you are experiencing is a side effect of the treatment, it may be helpful to write it down and ask your treatment team at your next appointment. If you're experiencing pain or other side effects, ask your treatment team if you're eligible for palliative care. A palliative care team may be able to help provide relief from side effects. Your doctor will determine if receiving chemotherapy and radiation therapy at the same time is right for you and how long you will receive it.



CONTINUED

UNDERSTANDING LUNG CANCER AND TREATMENT

IMMUNOTHERAPY

For some people with unresectable Stage 3 NSCLC, immunotherapy may also be used as a treatment option. Immunotherapy isn't chemotherapy or radiation therapy. It uses the body's own immune system to slow or stop cancer growth. It may also affect normal, healthy cells. Immunotherapy is given through an infusion.

The guideline-recommended treatment for unresectable Stage III NSCLC is usually a combination of chemotherapy and radiation, called chemoradiation therapy (CRT) followed by immunotherapy, if appropriate.

WHAT TO ASK YOUR ONCOLOGIST

Here are some questions you may want to ask your oncologist about Stage 3 lung cancer and treatment:

- Is receiving chemotherapy and radiation therapy at the same time right for me? If not, what is?
- What's next after chemoradiation therapy?
- What's the best way to manage the side effects of chemoradiation therapy?
- Do you have any resources that could help me?

**IMMUNOTHERAPY ISN'T CHEMOTHERAPY
OR RADIATION THERAPY. IT USES THE
BODY'S OWN IMMUNE SYSTEM TO SLOW
OR STOP CANCER GROWTH. IT MAY ALSO
AFFECT NORMAL, HEALTHY CELLS.**



CONTINUED

UNDERSTANDING LUNG CANCER AND TREATMENT

NSCLC: UNDERSTANDING STAGE 4 NSCLC

Stage 4 lung cancer is when it has spread to both lungs, to fluid in the areas around the lungs or heart, or to another part of the body, such as the liver or other organs.

STAGE 4 HAS TWO SUBTYPES:

STAGE 4A

Cancer may have spread within the chest and/or to distant parts of the body as a single tumor.

STAGE 4B

Cancer may have spread to distant parts of the body as multiple tumors.

TREATMENT OPTIONS FOR STAGE 4

Stage 4 lung cancer usually cannot be removed by surgery, but there are other forms of treatment that may work well. There have been great treatment advances over the past few years.¹ The most common treatments for Stage 4 lung cancer are chemotherapy, radiation therapy, immunotherapy, and targeted therapy. You can learn more about chemotherapy, radiation therapy, and immunotherapy on pages 7 and 8.

- Targeted therapies work on specific cancer genes, proteins, or tissue environments to block the growth and spread of cancer cells. Testing for biomarkers may have to be performed before receiving this treatment. A biomarker can be used to help make decisions about treatment.

WHAT TO ASK YOUR ONCOLOGIST

Here are some questions you may want to ask your oncologist about Stage 4 lung cancer and treatment:

- Will you perform biomarker testing?
 - What are my treatment options?
-

UNDERSTANDING LUNG CANCER AND TREATMENT

SCLC: UNDERSTANDING SMALL CELL LUNG CANCER

SCLC differs from NSCLC in several ways including where the cancer begins, how the cancer cells look, and the way the cancer progresses:

- Usually begins in the major airways in the center of the chest that leads to the lungs
- Grows and spreads more aggressively than NSCLC
- Common to have already spread at the time of diagnosis

NORMAL CELLS VS SCLC CELLS



Normal,
healthy cell



Cells of small cell
lung cancer

Small cell lung cancer is sometimes called “oat-cell cancer” and can be treated with a single radiation field because the cells are oval-shaped and smaller than healthy cells.

THERE ARE 2 STAGES OF SCLC:



Limited-stage small cell lung cancer (LS-SCLC)

Means that cancer is located in one lung or is confined to one side of the chest.



Extensive-stage small cell lung cancer (ES-SCLC)

Means that cancer has spread from one lung to the other, to lymph nodes on the other side of the chest, or to other parts of the body.



CONTINUED

UNDERSTANDING LUNG CANCER AND TREATMENT

SCLC: TREATMENT OPTIONS FOR SCLC

Here are some treatment options that your oncologist may suggest based on whether you have limited-stage or extensive-stage SCLC:

SURGERY **Limited-Stage Treatment**

Though rare, surgery may be an option for early stage SCLC, and is usually followed by additional treatment.

CHEMOTHERAPY

Limited-stage and extensive-stage treatment Chemotherapy works by attacking all fast-growing cells to get at cancer cells. It is often given as an infusion into the bloodstream, and because blood travels throughout the body, it enables the treatment to travel in the body where the cancer has spread. Since chemotherapy can destroy fast-growing cells, healthy cells may be affected.

For people with **limited-stage SCLC**, chemotherapy is often given with radiation therapy. This is known as chemoradiation.

For people with **extensive-stage SCLC**, the main treatment is usually chemotherapy given with or without immunotherapy. Sometimes radiation therapy is included as well.

RADIATION THERAPY

Limited-stage and extensive-stage treatment Radiation therapy works by targeting DNA in cancer cells to keep them from growing. It is given through a machine that aims radiation at cancer from outside the body.

For people with **limited-stage SCLC**, radiation is often given at the same time as chemotherapy.

For people with **extensive-stage SCLC**, radiation can be given after chemotherapy has finished. This may also be done for people in the limited stage who can't tolerate both treatments at once.

IMMUNOTHERAPY **EXTENSIVE-STAGE TREATMENT**

Immunotherapy is a type of cancer treatment that works with the immune system to find and attack cancer. Immunotherapy may attack healthy cells.

For people with extensive stage SCLC, chemotherapy, along with an immunotherapy, can be the first treatment. Once the initial treatment is complete, immunotherapy can be continued alone as maintenance therapy.

PALLIATIVE CARE **EXTENSIVE-STAGE TREATMENT**

Palliative or supportive care is provided by a team of doctors, nurses, social workers and others. They help to relieve symptoms and improve the quality of life for the patient and their loved ones.

When starting any new treatment, it's normal to think about side effects. That's why it's important to ask your treatment team what to expect and make sure to talk to them if you have any side effects. If you do experience side effects from treatment, talking to your treatment team is the best way to find out how to manage them. Even if you aren't sure what you are experiencing is a side effect of treatment, it may be helpful to write it down and ask your treatment team at your next appointment. If you're experiencing pain or other side effects, ask your treatment team if you're eligible for palliative care. A palliative care team may be able to help provide relief from side effects.



FINDING AN ONCOLOGIST

It's important to find an oncologist immediately so you can get a more detailed understanding of your diagnosis, including the type, stage, and treatment options. This will help you start fighting your lung cancer as powerfully as possible.

HOW DO I CHOOSE THE RIGHT ONCOLOGIST?

Here are some things to consider:

Location: Where does this oncologist practice? Are they close enough to make my visits convenient? If my preferred oncologist is further away, am I able to coordinate travel to their cancer center?

Reputation: What do other people think about this oncologist or cancer center? Is there someone I could talk to about their experience? Do they receive positive feedback from patients?

Communication: Would I be able to ask this oncologist questions, discuss concerns, and be honest?

Relationship: What do I need from my oncologist to create a good relationship? Do I need to meet with other oncologists to ensure this one is right for me?

TO HELP FIND RESOURCES AND
ADVOCACY GROUPS THAT MAY ASSIST YOU
BEFORE, DURING, AND AFTER TREATMENT,
VISIT THE FOLLOWING SITES:

LVNG.com

Lungevity.org

Go2Foundation.org

CancerCare.org

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LOOKING FOR MORE INFORMATION
ABOUT LUNG CANCER

VISIT: [LVNG.COM](https://www.lvng.com)

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