

Primary lung cancer



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Lung cancer, a disease caused by excessive growth of the lungs' cells is called a tumor. This transformation in cells is uncontrollable and rapid. Tumors tend to use up the supply of oxygen, nutrients and other substances meant for the normal cells which start to disintegrate. In addition, the tumor also invades the healthy tissues around it. Primary lung cancers start off in the lung's tissues and are divided into two categories; small cell and non-small cell lung cancer. Although, it can be impossible at times to differentiate between metastatic lesion and primary lung cancer. It is vastly important to distinguish between SCLC and NSCLC through their histology as the treatment differs (" Types of," 2009).

Although, SCLC grows and spreads quickly to other areas of the lung, it is also more responsive to treatment. SCLC accounts for 20 % of all lung cancers (" Types of," 2009). Exposure to radon, asbestos and uranium increases the risk of SCLC along with cigarette smoke. Small cell lung cancer is divided into two stages; namely, limited and extensive. Limited stage accounts for the presence of cancer in lymph nodes and in between the tissues present in one lung. While in the latter stage, cancer has spread to other organs of the body.

The symptoms increase as the cancer advances: from coughing to swelling of hands and face, fatigue and even paralysis. Diagnosis is done through CT scan, chest x-ray, sputum cytology, bronchoscopy, etc. Radiation therapy and chemotherapy play a major role in combating SCLC whereas; surgery plays little or no role. This is because in about 70% of the patients, the tumor has already spread to other organs (" Small-Cell," 2009). Moreover, the survival time is about two years in the extensive stage. Though, there are cases where early diagnosis of SCLC has benefitted from surgical removal of

the tumor.

Non-small cell lung cancer (NSCLC) has many different types based on their histology; which makes up about 75% of all lung cancers. The reason behind this is that any non-small cell tumor is included in this category as of their similar treatment. The three most common include: adenocarcinoma (35%-40% prevalence), squamous cell carcinoma (25%-30% prevalence) and large-cell carcinoma (10%-15% prevalence) (" Non-Small," 2009). Generally, the cause are similar to SCLC but also includes exposure to diesel exhaust, cadmium, copper, beryllium and others. The symptoms are due to primary tumors and are similar to SCLC with a few exceptions. Laser therapy is also done along with chemo and radiation therapy. Surgery is done after assurance that the lungs are strong enough.

Staging is essential in NSCLC because it determines which treatment will be most beneficial for the removal of the tumor. The stages in NSCLC are four; which are determined by size, lymph node and metastatic involvement. Hence, total number of stages is seven (IA, IIA, IIB etc) where the earliest stage (IA) is limited to the lung and the last stage (IV) has vastly spread. Many lung cancers show up two years after treatment and NSCLC has a minimum survival rate of five years. Treatments of lung cancer and the cancer itself bring about many complications.

References

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