Topic: Lung Cancer	
Epidemiology	Average age at diagnosis is 70. Men are diagnosed more often than females.
Etiology	Tobacco (cigarette smoking) is the most common cause of lung cancer. Other causes include radon, occupational hazards, cannabis, diet and other causes (pesticides, air pollution and genetics).
Prevention	
1. Primary	Tobacco prevention
2. Secondary	Smoking cessation
3. Tertiary	Chemoprevention (has been curative in some cases?)
Screening and early detection	Chest X-ray, sputum cytology, bronchoscopy.
Pathophysiology	Cancer cells originate in lung tissue and spread through the lymphatic system to distal sites. About 50% of cancers begin in the central chest. Often because lymph nodes are blocked, a patient may develop malignant accumulation of malignant pleural fluid.
Clinical Manifestations	Hemoptysis Dyspnea Hoarseness Atelectasis Pneumonia
Assessment	Monitor for lung sounds, vitals Check for cognitive status – the brain is a common site of metastasis. Liver, bone and adrenal gland metastasis also are common.
Staging	Staging is done using the TNM classification where T stands for tumor, N stands for node involvement and M stands for metastasis. For non-small cell lung cancer (NSCLC) the following stages are helpful to know:

	Stage 0 – early stage, cancer is on top of the lung. Stage I – cancer is in the lung but has not spread outside of the lung. Stage II – the tumors have grown larger and may be in the lymph nodes but have not spread to distant sites in the body. Stage III – the tumor may be large and have significant spread to other parts of the body. It is likely that it is hard to remove surgically. Stage IV – most advanced cancer form, with significant metastasis. Small cell lung cancer is described using two stages: limited and extensive. Limited stage lung cancer is only in one lung or in the nearby tissue. Extensive stage lung cancer has spread to tissue outside of the originally affected lung like the opposite lung or distant organs.
Treatment/Nursing Care	Treatment is determined by stage: Surgery, radiation and chemo are all used in the treatment of lung cancer. Either individually or in combination.
Symptom and supportive care	Nurses should pay attention to the following issues that may need supportive care for patients with a diagnosis of lung cancer: *Pain *Fatigue *Cough *Dyspnea Metastasis management (brain, bone, spine) SVC Hemoptysis Fistula Pleural effusion VTE Depression Fatigue Anorexia

	Insomnia

Reference:
Knoop, T. (2018). Lung cancer. In Yarbro, C. H., Wujcik, D., & In Gobel, B. H. (Eds.) *Cancer nursing: Principles and practice* (8th ed.). Jones & Bartlett Learning.