The Scope of the Problem

2005 Data

172,600 new cases
93,000 men
79,600 women
163,500 deaths
U.S. Death Rates in 2000

- Colon
- Breast/Prost
- Lung
- Leukemia

Rate/100,000

Men
Women
Why Consider Surgery?

- Successful therapy for lung cancer since the 1940s
- Best therapy for early stage non-small cell lung cancer
- Benefits patients with advanced cancer as part of multimodality therapy
Myths About Surgery

• If you expose a tumor to the air it will spread
• The risks of lung cancer surgery are high
• People are permanently in pain after surgery
• After lung resection, people can’t resume their normal lifestyle
Who is a Candidate for Surgery?

- Non-small cell lung cancer
- Early stage cancer
- Adequate lung function
- No medical problems that would prevent safe surgery
The Surgical Experience

• Initial evaluation in outpatient clinic
• Preoperative visits
• Admit to the hospital the day of surgery
• General anesthesia
• Bronchoscopy
• Thoracoscopy or thoracotomy
• ICU stay one night
• Discharge 4-6 days postoperatively
Short-term Results

• Complications
  – Heart attack <1%
  – Wound infection <2%
  – Pneumonia <10%
  – Death <1%

• Hospital stay 5 days

• Return to full activity 6 weeks
Long-term Results

- Supplemental oxygen <1%
- Chronic pain <1%
- Return to normal lifestyle 90%
- Would do it again 95%
Summary

• Surgery is appropriate for some patients with lung cancer
• Resection is the best therapy for patients with the earliest stages of lung cancer
• Short-term results are favorable
• Long-term results depend on tumor stage
• Surgery can be used in conjunction with radiation therapy and/or chemotherapy