

Surgery remans an option for advanced lung cancer

27 July 2009

In recent years, oncologists have debated whether radiation, while a second group of 194 patients patients with a certain type of advanced lung cancer would benefit from surgery.

Now a major study published in the journal The Lancet has found that surgery after standard chemotherapy and radiation can be an option for patients. Surgery significantly prolongs survival without progression of the lung cancer, but does not dramatically improve overall survival compared to a control group treated with conventional chemotherapy and radiation alone.

The patients who did appear to have a major benefit from surgery were those in whom a section of the lung (lobe) was removed, rather than the entire lung, lead author Dr. Kathy Albain and colleagues reported. Albain is a lung and breast cancer specialist at Loyola University Health System's Cardinal Bernardin Cancer Center.

"This the first study conducted in this group of patients where the only difference in the two groups of patients was the use of surgery," Albain said.

In an accompanying editorial, German researcher Dr. Wilfried Eberhardt and colleagues wrote that as a result of the new study, "We now have clear arguments in favor of surgery in well-selected patient subsets."

The study included patients with non-small cell cancer, which accounts for about 80 percent of all lung cancers. Patients had stage 3 cancer, in which the cancer had spread to lymph nodes in the center of the chest. This type of stage 3 cancer accounts for about 30 percent of all non-small cell lung cancer cases. Patients were treated at multiple academic and community hospitals in the United States and Canada.

One group of 202 patients was randomly assigned to receive surgery plus chemotherapy and

received just chemotherapy and radiation.

Median overall survival was similar between the two groups: 23.6 months in the surgery group and 22.2 months in the non-surgery group. After five years, 37 patients in the surgical group and 24 patients in the non-surgery group were still alive. The median length of time it took before the cancer began to progress again after treatment was 12.8 months in the surgery group and 10.5 months in the non-surgery group.

"Another important finding of our study is that both groups of patients lived longer than previously reporter for this stage of the disease," Albain said. "This highlights the importance of multidisciplinary evaluation and treatment -- which all patients deserve."

Source: Loyola University



APA citation: Surgery remans an option for advanced lung cancer (2009, July 27) retrieved 5 May 2021 from <u>https://medicalxpress.com/news/2009-07-surgery-remans-option-advanced-lung.html</u>

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