

Smoking away your life—lung cancer.

Among various cancer death rates, lung cancer always places the top of the list, for both male and female. Indeed, one fifth of the diagnosed cases are grouped under lung cancer. Around 3000 people died from lung cancer each year. The 50-60 years old are the most prevalent group of incidence.

Incidence and death rates have surged in Hong Kong. The rising smoking population remains to be the prime cause. Various studies reveal that it is ten times more often for a male smoker to get lung cancer. Meanwhile, second-hand smokers also have a 30 per cent higher chance of death than their fellows. When an individual ceases smoking, risks of getting lung cancer will definitely diminish. Air pollution, like Asbestos, tar smoke, dust from factories, chemical particles in the air and even smoke from cooking may increase chances of lung cancer.

Two main types of lung cancer are categorised by its size and appearance of the malignant cells: small-cell (roughly 12-25%) and non-small cell (75-88%) lung cancer (NSCLC). NSCLC is more common for males and related to smoking. Subtypes of NSCLC include squamous cell carcinoma, adenocarcinoma and large cell carcinoma. They can quickly spread to the brain, liver, bones and bone marrow.

For many patients, the cancer may have already spread beyond the original site by the time they have symptoms and seek medical attention. Symptoms are, for instance, chronic cough, coughing up blood (hemoptysis), wheezing, chest pain and shortness of breath (dyspnea).

Lung cancer treatments include: surgery, radiotherapy, chemotherapy and “target therapy” medication. All in all, surgery yields the greatest survival rate between 50%-70% five years after the treatment. But when the physical condition of the patient is not good enough to undergo surgery or in advanced disease, the other methods can help control the spread of the tumour.