



肺癌：中文（繁體香港）

Lung cancer: Chinese (Traditional Hong Kong)

本資訊說明肺癌及其治療方法。

本資訊涵蓋原發性肺癌，即起源於肺部的癌症。但不包括繼發性肺癌，即起源於身體其他部位並擴散至肺部的癌症。

如對本資訊有任何疑問，請向您接受治療的醫院醫生或護士查詢。

您亦可於每週 7 日、上午 8 時至晚上 8 時，致電免費電話 **0808 808 00 00** 聯絡麥克米倫癌症援助機構（Macmillan Cancer Support）。我們有傳譯員，所以您可以使用您自己的母語與我們溝通。當您致電我們時，請以英文告訴我們您所需要的語言。

如需更多本語言或其他語言的癌症資訊，請瀏覽 macmillan.org.uk/translations

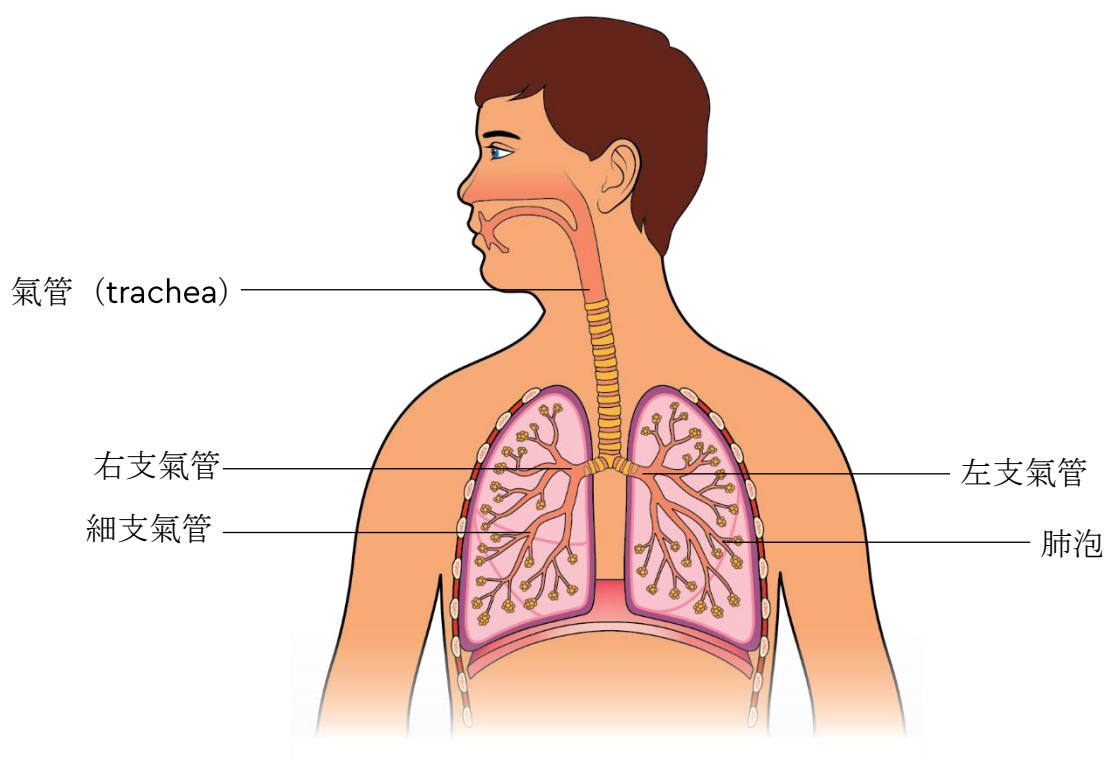
本資訊主要介紹：

- 肺部
- 肺癌
- 肺癌的分期
- 如何規劃治療
- 與您的醫療團隊溝通
- 肺癌的治療
- 其他治療方法
- 控制症狀
- 治療後
- 您的感受
- 獲得合適的護理和支援
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- 參考文獻與致謝

肺部

肺部是我們呼吸的器官。人體有兩個肺部 – 分別位於身體的左右兩側。肺部分為稱為肺葉的區域。右肺有三個肺葉，左肺有兩個肺葉。

吸氣時，空氣經由鼻腔或口腔通過氣管傳送至肺部。此處有時也稱作「氣管（trachea）」。氣管分為兩條支管，分別通向左右肺。這些氣道稱為右支氣管和左支氣管。支氣管再細分為稱為細支氣管的更小氣道。在細支氣管的末端有數以百萬計的小氣囊，稱為肺泡。肺泡是我們呼吸的空氣中的氧氣進入血液的地方。



肺癌

身體的所有部分都是由微小的細胞組成。當肺部細胞不受控地生長並形成稱為腫瘤的腫塊時，即為肺癌。

肺癌主要分為兩大類：

- **非小細胞肺癌** – 最常見的肺癌類型。主要分為腺癌、鱗狀細胞癌及大細胞癌三種。
- **小細胞肺癌** – 約佔所有肺癌的 10% 至 15%。

大多數肺癌是由吸煙引致的。然而，約 15% 的肺癌患者從未吸煙。

如果您吸煙，醫生通常會建議您戒煙。戒煙可帶來以下好處：

- 使治療效果更佳
- 減少副作用
- 改善長期健康狀況。

醫生或醫院可提供支援及建議，協助您戒煙。

肺癌並不具傳染性，無法傳染他人。

肺癌的分期

癌症的分期描述腫瘤的大小及是否已擴散。

有時癌細胞可透過血液或淋巴系統擴散至其他身體部位。淋巴系統有助保護我們免受感染及疾病侵害。淋巴系統由稱為淋巴管的細小管道組成。這些淋巴管連接至遍佈全身的小型淋巴結群。若癌細胞擴散至肺外，最常見的擴散部位為胸腔鄰近的淋巴結。

醫生了解您的肺癌分期後，方可為您制定最佳治療方案。

肺癌分為四期：

- **第一期** – 腫瘤體積較小，僅限於肺部。
- **第二期或第三期** – 肺部腫瘤體積增大。可能已擴散至鄰近淋巴結、肺部其他區域或肺周圍組織。
- **第四期** – 腫瘤進一步擴散，例如至對側肺部或身體其他部位。

若罹患小細胞肺癌，醫生或使用另一種分期方法。這個系統會將肺癌分為兩期 - 有限疾病和廣泛疾病。醫生會向您解釋此分期方法。

如何規劃治療

癌症治療團隊將召開會議，商討最適合您的治療方案。隨後，他們會與您討論治療計劃。治療方式將考慮以下因素：

- 您患有的癌症類型
- 癌症的分期
- 肺癌細胞檢測結果
- 您的整體健康狀況
- 您的日常生活能力
- 您的治療偏好
- 肺癌治療指引。

與您的醫療團隊溝通

與癌症醫生或護士討論治療計劃十分重要。您的醫院可以為您安排傳譯員。若需傳譯服務，請告知護士。您或許也可以帶一位能講您的語言和英語的人陪同。

討論後，醫生會要求您簽署同意書，以確認您已了解並同意治療內容。此程序稱為知情同意。未獲您同意，將不會為您進行任何治療。

治療相關可詢問事項

以下是可向醫療團隊提出的問題：

- 我的治療目標為何？
- 我可以使用哪些治療方法？
- 每次治療會帶來哪些益處、風險及副作用？
- 治療會對我的日常生活產生何種影響？
- 我可以向誰傾訴我的感受？

肺癌的治療

肺癌的治療方法包括：

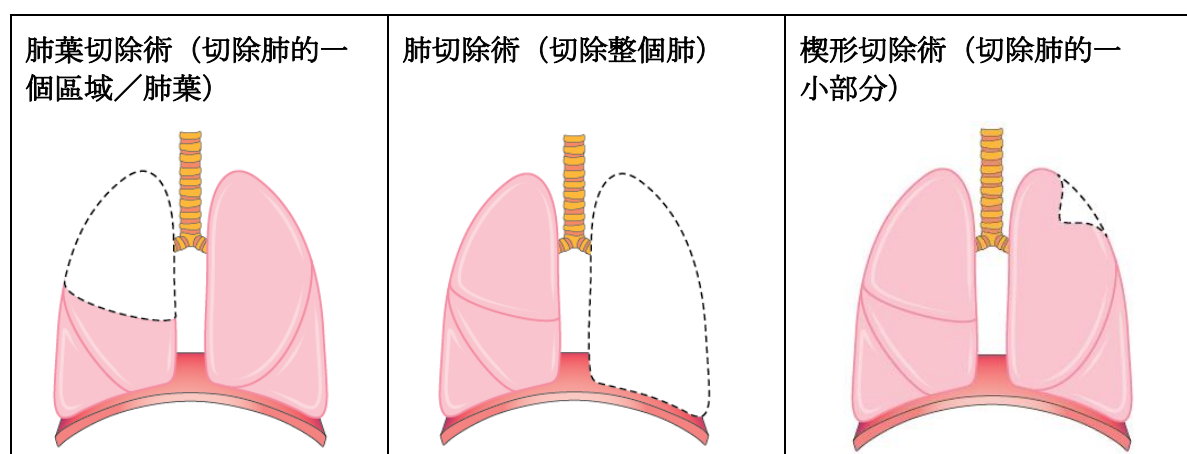
- 手術 (Operation/Surgery)
- 化療 (Chemotherapy)
- 放射治療 (Radiotherapy)
- 標靶治療 (Targeted therapy)
- 免疫療法 (Immunotherapy)。

您可能會接受多種類型的治療。

手術

部分病人可透過手術切除腫瘤。是否能進行手術取決於癌症的類型、分期，以及您的整體健康狀況。小細胞肺癌很少會使用手術治療。

肺癌手術屬重大手術，您需要具備足夠體力才能承受。在進行手術之前，您需要接受多項檢測以確認您的肺部功能情況。常見的三種肺癌切除手術如下：



如癌細胞已擴散至相鄰兩肺葉，外科醫生或需切除兩個肺葉。此手術有時稱為雙葉切除術 (Bilobectomy)。

我們網站有更多繁體中文版本的手術資訊。請瀏覽：macmillan.org.uk/translations

化療

使用藥物摧毀癌細胞。化療可用於非小細胞肺癌及小細胞肺癌。

對於小細胞肺癌，化療往往是首選治療。

對於非小細胞肺癌，化療可在以下情況下使用：

- 手術前或手術後。
- 與放射治療合用 – 即化放療（Chemoradiation）。適用於無法或不願意接受手術的病人。
- 放射治療前或放射治療後。
- 與手術前的免疫療法藥物合用。
- 適用於較晚期病例，與標靶或免疫療法藥物同時、之前或之後使用。
- 幫助舒緩症狀。

化療通常分多個療程進行，各療程之間設有休息期。治療通常以靜脈點滴或注射方式進行。您的醫生會告訴您需要多少個療程以及治療過程需要多長時間。您可能需要幾個月才能完成您的化療過程。

如果效果良好，有些患有非小細胞肺癌的人會繼續接受化療。這稱為維持治療。

化療藥物可能會引發令您不適的副作用，而不同藥物會引發不同的副作用。

包括：

- 感染風險增加
- 感覺疲憊
- 感覺噁心或想吐
- 口腔潰瘍
- 脫髮。

如果您在接受化療期間，同時還接受放射治療，則副作用可能會更加嚴重。

醫生會向您說明可能出現的副作用及其管理方法。大部份的副作用都可以用藥物來控制。化療結束後，多數副作用會逐漸消失。

我們網站有更多繁體中文版本的化療資訊。請瀏覽：macmillan.org.uk/translations

放射治療

利用高能射線摧毀癌細胞。放射治療可用於非小細胞肺癌及小細胞肺癌。

放射治療可在以下情況下使用：

- 單獨使用，以取代手術
- 術後使用 – 適用於非小細胞肺癌患者
- 與化療合用 – 即化放療
- 化療前或化療後
- 頭部放射治療，用於防止肺癌細胞擴散至腦部出現繼發性癌症 – 適用於小細胞肺癌患者
- 協助舒緩症狀。

體外放射治療由放射治療機進行。該機器會將高能量射線對準需要治療的身體部位。

外部放射治療有不同的類型，取決於您接受的是非小細胞肺癌還是小細胞肺癌治療。您的癌症醫生將告訴您接受哪種放射治療。

很多人會在門診接受放射治療。這意味著，您到醫院接受治療並且在當天可以回家。

放射治療可能引起一些副作用。包括：

- 吞嚥困難
- 疲倦
- 皮膚變化
- 呼吸急促及咳嗽。

醫護團隊會向您說明副作用，使您有所預期。

我們網站有更多繁體中文版本的放射治療資訊。

請瀏覽 macmillan.org.uk/translations

標靶治療

標靶藥物可用於治療部分非小細胞肺癌。您需要先進行癌細胞檢測，以篩選最適合您的藥物。肺癌有不同類型的標靶治療。它們的運作方式略有不同

標靶藥物可在以下情況使用：

- 單獨使用
- 化療後或與化療合用
- 手術後使用。

您會以藥片或膠囊的方式服用這些藥物。若某種藥物有可能對您最有效，則可以作為首選治療。

副作用因藥物種類而異。醫護團隊會向您說明並提供管理建議。

免疫療法

免疫療法藥物可以幫助您的免疫系統發現並攻擊癌細胞。它們通常用於治療非小細胞肺癌。免疫治療藥物有多種類型。您可能需要接受癌細胞測試，以了解這些藥物的療效如何。藥物以靜脈滴注方式給藥。免疫療法可在以下情況使用：

- 單獨使用
- 與化療合用
- 與標靶藥物或其他免疫療法藥物合用
- 術後使用，或有時會在術前與化療合用。

不同免疫療法藥物可能引發不同副作用。在治療開始前，癌症團隊會向您提供可能出現的副作用資訊。遵從醫生關於副作用的建議極為重要。

其他治療方法

其他一些治療方法也可以用於治療肺癌或控制症狀。

射頻消融術（RFA）：利用熱能摧毀癌細胞。醫生將針插入腫瘤並通過電流來破壞癌細胞。微波消融術：與射頻消融相似，但採用微波能量。

光動力療法（PDT）使用雷射或其他光源來破壞癌細胞。首先，您會接受具光敏性的藥物。一天或幾天後，醫生會將一根管子插入你的氣管，並用光照射您肺部的腫瘤。光線使光敏藥物活化並摧毀癌細胞。

控制症狀

如果癌症發展到晚期，您可能會出現呼吸困難、咳嗽、疼痛或積液等症狀。有很多方法可以控制您可能出現的任何症狀。您的醫生可以向您提供不同的藥物，幫助舒緩症狀。如果您的症狀沒有改善，請務必告訴您的醫生。

呼吸道阻塞

有時肺癌會導致氣道阻塞或變得狹窄。

這可以引致呼吸急促。有多種不同治療方法可以幫助緩解呼吸道阻塞：

- 冷凍消融術（Cryosurgery）利用極低溫凍結並破壞癌細胞。
- 有些治療方法使用電流來破壞癌細胞。
- 雷射治療可縮小腫瘤，防止其阻塞氣道。
- 可以在呼吸道中放入一根稱為支架的小管子來保持呼吸道開放。

液體積聚

有時肺部包膜層會積聚液體。若發生此情況，醫生可置入導管以引流積液。

治療後

完成治療後，您將會定期進行檢查，並可能需要進行一些測試。初期覆診間隔為數月一次，而經過一段時間後次數將減少。

若您於覆診之間察覺到新症狀，請盡快告知您的全科醫生或癌症治療團隊。

您的感受

當您獲悉患上癌症時，您可能會感到不知所措，您可能出現很多不同的情緒。感受並無對錯之分。有多種方式可協助您應對。與親朋好友交談可能會有所幫助。或者向您的醫生或護士尋求協助。

獲得合適的護理和支援

如果您患有癌症並且不會說英語，您可能會擔心會影響您的癌症治療和護理。但是您的醫療團隊應該可以為您提供能滿足您需要的護理、支援和資訊。

我們明白，有時人們在獲取適切支援方面或會面對額外挑戰。例如，若您有工作或家庭，亦可能有金錢及交通費用方面的憂慮。所有這些事情都會讓人感到壓力和難以應對。

麥克米倫（Macmillan）能夠如何幫助您

在麥克米倫（Macmillan），我們知道癌症確診後會如何影響您的各方面生活，我們隨時為您提供支援。

麥克米倫（Macmillan）支援熱線

我們提供傳譯服務，所以您可以用自己的語言與我們溝通。您只需用英語告訴我們您希望使用哪種語言即可。

我們的熱線專業顧問可協助解答醫療問題，亦可傾聽您的心聲。我們亦可與您討論經濟憂慮，並推薦其他可提供幫助的有用機構。此免費且保密之熱線服務時間為每星期七天，每日上午 8 時至晚上 8 時。請致電 **0808 808 00 00** 聯絡我們。

麥克米倫（Macmillan）網站

我們的網站有很多關於癌症的英文資訊。另可於 macmillan.org.uk/translations 查閱其他語言之更多資訊。

我們亦可視需要為您安排專屬翻譯服務。如需協助，請發電子郵件至 informationproductionteam@macmillan.org.uk 告知您的需求。

資訊中心

我們的資訊和支援中心設在醫院、圖書館和流動中心。歡迎親臨中心索取所需資訊，並與工作人員面談。

請瀏覽 macmillan.org.uk/informationcentres 查找離您最近之中心，或致電 **0808 808 00 00**。

本地支援團體

您可以在支援團體中與其他受癌症影響的人交流。請瀏覽 macmillan.org.uk/supportgroups 查閱您所在地區之支援團體資訊，或致電 **0808 808 00 00**。

麥克米倫（Macmillan）網上社群

您亦可在 macmillan.org.uk/community 與其他受癌症影響人士在網上交流。

您可以在任何時間訪問該網站，無論白天或晚上。您可分享經驗、提出問題，或瀏覽他人貼文。

更多繁體中文資訊

我們提供更多有關下列主題的繁體中文資訊：

癌症的徵兆與症狀

- 徵兆及症狀卡

若您被診斷患有癌症

- 英國的癌症護理
- 難民和尋求庇護人士的醫療保健
- 若您被診斷患有癌症

癌症類型

- 腸癌
- 乳癌
- 子宮頸癌
- 肺癌
- 前列腺癌

癌症治療

- 化療
- 放射治療
- 敗血症和癌症
- 癌症治療的副作用
- 手術

與癌症共處

- 患癌症時如何申領福利
- 飲食問題與癌症
- 健康飲食
- 當您患有癌症時可在費用方面獲得的幫助
- LGBTQ+ 人士與癌症
- 疲憊（疲勞）與癌症

生命末期

- 生命末期

欲查閱該資訊，請瀏覽 macmillan.org.uk/translations

參考文獻與致謝

本資訊由麥克米倫癌症援助機構（Macmillan Cancer Support）癌症資訊開發團隊編寫和編輯。由翻譯公司提供繁體中文的翻譯版本。

所包含的資訊是根據我們網站上的英文版肺癌內容撰寫。

本資訊經有關專家審查，並獲得我們的首席醫療編輯 David Gilligan（腫瘤學顧問）的批准。

同時感謝審閱本資訊的癌症患者。

我們所有資訊的依據都是來自最佳的證據。如欲了解更多有關資料來源之資訊，請聯絡 informationproductionteam@macmillan.org.uk

內容審閱日期：2025 年

預定下次審閱日期：2028 年

MAC15137_Chinese Hong Kong_E04

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Lung cancer: English

This information is about lung cancer and treatments for lung cancer.

This information is about primary lung cancer, which is cancer that starts in the lung. It does not cover secondary lung cancer, which is cancer that starts somewhere else in the body and spreads to the lungs.

If you have any questions about this information, ask your doctor or nurse at the hospital where you are having treatment.

You can also call Macmillan Cancer Support on freephone 0808 808 00 00, 7 days a week, 8am to 8pm. We have interpreters, so you can speak to us in your own language. When you call us, please tell us in English which language you need.

There is more cancer information in this language and other languages at macmillan.org.uk/translations

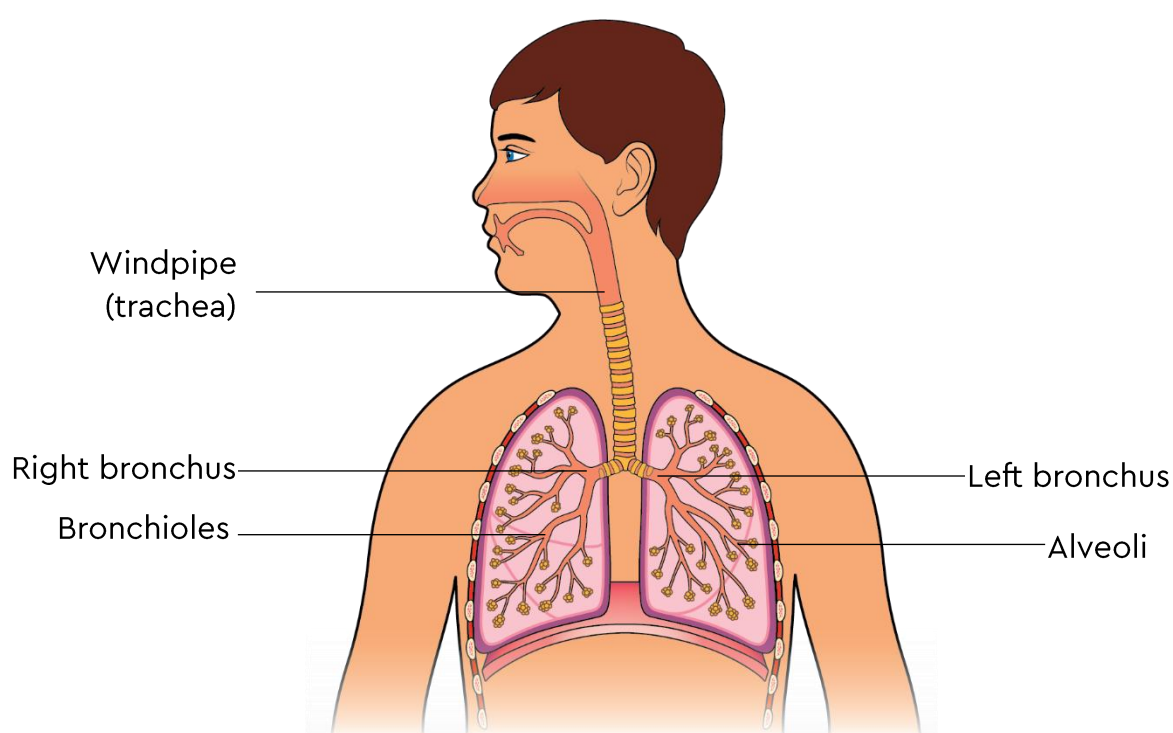
This information is about:

- The lungs
- Lung cancer
- Stages of lung cancer
- How treatment is planned
- Talking to your healthcare team
- Treatments for lung cancer
- Other treatments
- Controlling symptoms
- After treatment
- Your feelings
- Getting the right care and support for you
- How Macmillan can help you
- More information in your language
- References and thanks

The lungs

The lungs are the parts of the body that we use to breathe. We have 2 lungs – one on the right side of our body and one on the left side. The lungs are divided into areas called lobes. The right lung has 3 lobes, and the left lung has 2 lobes.

When we breathe in, air passes from our nose or mouth through to the windpipe. This is sometimes called the trachea. It divides into two tubes, one going to each lung. These are called the right bronchus and left bronchus. They divide into smaller tubes called bronchioles. At the end of the bronchioles are millions of tiny air sacs called alveoli. This is where oxygen from the air we breathe goes into the blood.



Lung cancer

All parts of the body are made up of tiny cells. Lung cancer happens when cells in the lung grow in an uncontrolled way and form a lump called a tumour.

There are 2 main types of lung cancer:

- **non-small cell lung cancer** – this is the most common lung cancer. There are 3 main types: adenocarcinoma, squamous cell carcinoma, and large cell lung cancer.
- **small cell lung cancer** – about 10 to 15 in 100 (10% to 15%) of lung cancers are small cell lung cancers.

Most lung cancers are caused by smoking cigarettes. But about 15 in 100 (15%) people who get lung cancer have never smoked.

If you smoke, your doctor will usually advise you to stop smoking. This can:

- make your treatment work better
- reduce side effects
- improve your long-term health.

Your doctor or hospital can offer you support and advice to help you to stop smoking.

Lung cancer is not infectious and cannot be passed on to other people.

Stages of lung cancer

The stage of a cancer describes how big it is and whether it has spread.

Sometimes, cancer cells can spread to other parts of the body through the blood or lymphatic system. The lymphatic system helps protect us from infection and disease. It is made up of fine tubes called lymphatic vessels. These vessels connect to groups of small lymph nodes throughout the body. If cancer cells spread outside the lungs, they are most likely to go to lymph nodes nearby in the chest.

Your doctor can plan the best treatment for you when they know the stage of cancer you have.

Lung cancer is divided into four stages:

- **Stage 1** – the cancer is small and only in the lung.
- **Stage 2 or 3** – the cancer in the lung is bigger. It may have spread to nearby lymph nodes, other parts of the lung and areas around the lung.
- **Stage 4** – the cancer has spread further, for example, to the other lung or to other parts of the body.

If you have small cell lung cancer, your doctors might use a different staging system. This divides lung cancer into two stages – limited disease and extensive disease. Your doctor will explain this system to you.

How treatment is planned

Your cancer team will meet to plan the best treatment for you. They will then talk to you about the treatment plan. The treatment you have will depend on:

- the type of lung cancer you have
- the stage of the cancer
- the results of tests done on the lung cancer cells
- your general health
- how able you are to do day-to-day things
- your treatment preferences
- lung cancer treatment guidelines.

Talking to your healthcare team

It is important to talk about the treatment plan with your cancer doctor or nurse. Your hospital can arrange an interpreter for you. Let your nurse know if you need one. You may also want to take someone with you who can speak your language and English.

After talking with you, your doctor will ask you to sign a form to show that you understand what the treatment means and that you agree to having it. This is called giving your consent. You will not be given treatment unless you have agreed to it.

Questions to ask about your treatment

Here are some questions you might want to ask your healthcare team about your treatment:

- What is the aim of my treatment?
- Which treatments are available?
- What are the benefits, risks and side effects of each treatment?
- How will the treatment affect my daily life?
- Who can I talk to about how I am feeling?

Treatments for lung cancer

Treatments for lung cancer include:

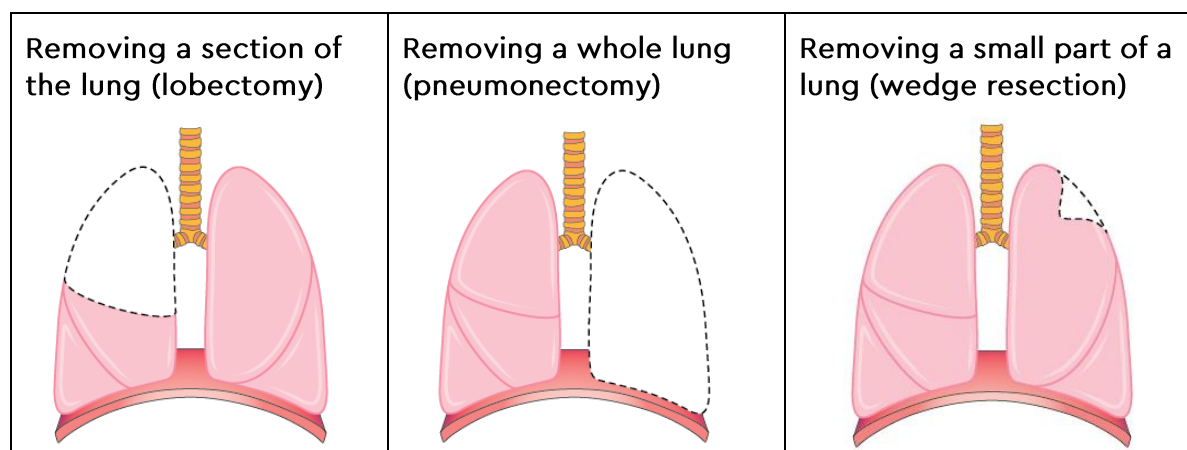
- an operation (surgery)
- chemotherapy
- radiotherapy
- targeted therapy
- immunotherapy.

You may have more than one type of treatment.

Surgery

Some people will be able to have surgery to remove the cancer. This depends on the type and stage of the cancer, and your general health. Surgery is rarely used to treat small cell lung cancer.

Lung cancer surgery is a big operation, and you need to be well enough to cope with it. Before surgery, you will have tests to check how well your lungs are working. The three main operations to remove lung cancer are shown below.



If the cancer has spread to 2 lobes next to each other, the surgeon may remove 2 lobes. This is sometimes called a bilobectomy.

We have more information in your language about surgery in your language. Visit [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

Chemotherapy

Chemotherapy uses drugs to destroy cancer cells. It is used to treat both non-small cell lung cancer and small cell lung cancer. It is often the first treatment for small cell lung cancer.

For non-small cell lung cancer, chemotherapy may be given:

- Before or after surgery.
- Together with radiotherapy – this is called chemoradiation. This may be used for people who cannot have or do not want to have surgery.
- Before or after radiotherapy.
- With an immunotherapy drug before surgery.
- With, or before or after a targeted or immunotherapy drug, to people with a more advanced cancer.
- To help relieve symptoms.

Chemotherapy is usually given as several sessions of treatment, with rest periods in between the sessions. The treatment is usually given into a vein by a drip or injection. Your doctor will tell you how many treatment sessions you will need and how long it will take. It may take several months to complete your course of chemotherapy.

Some people with non-small cell lung cancer continue with chemotherapy if it is working well. This is sometimes called maintenance treatment.

Chemotherapy drugs can cause side effects that make you feel unwell. Different drugs can cause different side effects.

These include:

- bigger risk of infection
- feeling tired
- feeling sick or being sick
- a sore mouth
- hair loss.

If you have chemotherapy with radiotherapy the side effects can be worse. Your doctor can talk to you about the side effects you may have, and how to manage them. Most side effects can be controlled with drugs. Most side effects go away when chemotherapy is over.

We have more information about chemotherapy in your language on our website. Visit [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

Radiotherapy

Radiotherapy uses high-energy rays called radiation to destroy cancer cells. It can be used to treat both non-small cell lung cancer and small cell lung cancer.

Radiotherapy may be given:

- on its own instead of surgery
- after surgery – this is for people with non-small cell lung cancer
- with chemotherapy – this is called chemoradiation
- before or after chemotherapy
- to the head, to stop any lung cancer cells that have spread from growing into a secondary cancer in the brain – this is for people with small cell lung cancer
- to help relieve symptoms.

External beam radiotherapy is given from a radiotherapy machine. It aims high-energy rays at the area of the body being treated.

There are different types of external beam radiotherapy, depending on if you are being treated for non-small cell lung cancer or small cell lung cancer. Your cancer doctor will tell you more about the type of radiotherapy you are having.

Many people have radiotherapy as an outpatient. This means you come to hospital for treatment and then go home again that day.

Radiotherapy can have some side effects. These include:

- difficulty swallowing
- tiredness
- skin changes
- breathlessness and a cough.

Your healthcare team will explain the side effects so you know what to expect.

We have more information about radiotherapy in your language.

Visit [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

Targeted therapy

Targeted therapy drugs may be used to treat some non-small cell lung cancers. You will have tests on the cancer cells to check which cancer drugs are more likely to work for you. There are different types of targeted therapy for lung cancer. They work in slightly different ways

You may have a targeted therapy drug:

- on its own
- after or with chemotherapy
- after lung cancer surgery.

You take them as tablets or capsules. If a drug is likely to work well for you, it may be given as your first treatment. Side effects depend on the type of drug you have. Your healthcare team can explain more about side effects and how to manage them.

Immunotherapy

Immunotherapy drugs help your immune system to find and attack cancer cells. They are usually used to treat non-small cell lung cancer. There are different types of immunotherapy drug. You may have tests on the cancer cells to see how likely these drugs are to be helpful. The drugs are given into a vein through a drip. Immunotherapy may be given:

- on its own
- with chemotherapy
- with a targeted therapy drug or another immunotherapy drug
- after lung cancer surgery or sometimes with chemotherapy before surgery.

Different immunotherapy drugs can cause different side effects. Your cancer team will give you information about possible side effects before you start treatment. It is very important to follow your doctor's advice about side effects.

Other treatments

Other treatments can also be used to treat lung cancer or to control symptoms.

Radiofrequency ablation (RFA) uses heat to destroy cancer cells. The doctor puts a needle into the tumour and passes an electrical current through it to destroy the cancer cells. Microwave ablation is similar to RFA but uses microwave energy.

Photodynamic therapy (PDT) uses laser or other light sources to destroy cancer cells. First, you are given a drug that is sensitive to light. After a day or a few days, the doctor passes a tube down your windpipe and shines a light onto the tumour in your lung. The light makes the light sensitive drug destroy the cancer cells.

Controlling symptoms

If the cancer is advanced, you may have symptoms such as breathlessness, cough, pain or a build-up of fluid. There are lots of ways to control any symptoms you may have. Your doctor can give you different drugs or medicines to help with symptoms. Always tell your doctor if symptoms do not improve.

Blocked airway

Sometimes, lung cancer can cause a blockage or narrowing of the airways. This can cause breathlessness. Different treatments can be used to help a blocked airway:

- Cryosurgery uses very cold temperatures to freeze and destroy cancer cells.
- Some treatments use an electrical current to destroy cancer cells.
- Laser therapy can shrink the cancer and prevent it from blocking the airways.
- A small tube called a stent can be put into the airway to keep it open.

A build-up of fluid

Sometimes fluid can build up in the layers that cover the lung. If this happens, your doctors can put a tube in to drain the fluid.

After treatment

After your treatment has finished, you will have regular check-ups and may also have tests. At first they will be every few months, but over time you will have them less often.

If you notice any new symptoms between check-ups, tell your GP or cancer team as soon as possible.

Your feelings

You may feel overwhelmed when you are told you have cancer. You may have many different emotions. There is no right or wrong way to feel. There are many ways to cope with this. Talking to a close friend or relative may help. Your doctor or nurse can help too.

Getting the right care and support for you

If you have cancer and do not speak English, you may be worried that this will affect your cancer treatment and care. But your healthcare team should offer you care, support and information that meets your needs.

We know that sometimes people may have extra challenges in getting the right support. For example, if you work or have a family you might also have worries about money and transport costs. All of this can be stressful and hard to cope with.

How Macmillan can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we are here to support you.

Macmillan Support Line

We have interpreters, so you can speak to us in your language. Just tell us, in English, the language you want to use.

Our expert advisers on the Macmillan Support Line can help with medical questions or be there to listen if you need someone to talk to. We can also talk to you about your money worries and recommend other useful organisations that can help. The free, confidential phone line is open 7 days a week, 8am to 8pm. Call us on 0808 808 00 00.

Macmillan website

Our website has lots of information in English about cancer. There is also more information in other languages at [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

We may also be able to arrange translations just for you. Email informationproductionteam@macmillan.org.uk to tell us what you need.

Information centres

Our information and support centres are based in hospitals, libraries and mobile centres. Visit one to get the information you need and speak with someone face to face. Find your nearest centre at [macmillan.org.uk/informationcentres](https://www.macmillan.org.uk/informationcentres) or call us on 0808 808 00 00.

Local support groups

At a support group, you can talk to other people affected by cancer. Find out about support groups in your area at macmillan.org.uk/supportgroups or call us on 0808 808 00 00.

Macmillan Online Community

You can also talk to other people affected by cancer online at macmillan.org.uk/community

You can access it at any time of day or night. You can share your experiences, ask questions, or just read through people's posts.

More information in your language

We have information in your language about these topics:

Signs and symptoms of cancer

- Signs and symptoms cards

If you are diagnosed with cancer

- Cancer care in the UK
- Healthcare for refugees and people seeking asylum
- If you are diagnosed with cancer

Types of cancer

- Bowel cancer
- Breast cancer
- Cervical cancer
- Lung cancer
- Prostate cancer

Treatment for cancer

- Chemotherapy
- Radiotherapy
- Sepsis and cancer
- Side effects of cancer treatment
- Surgery

Living with cancer

- Claiming benefits when you have cancer
- Eating problems and cancer
- Healthy eating
- Help with costs when you have cancer
- LGBTQ+ people and cancer
- Tiredness (fatigue) and cancer

End of life

- End of life

To see this information, go to macmillan.org.uk/translations

References and thanks

This information has been written and edited by Macmillan Cancer Support's Cancer Information Development team. It has been translated into this language by a translation company.

The information included is based on our lung cancer content available in English on our website.

This information has been reviewed by relevant experts and approved by Senior Medical Editor Dr David Gilligan, Consultant Clinical Oncologist.

Thanks also to the people affected by cancer who reviewed this information.

All our information is based on the best evidence available. For more information about the sources we use, please contact us at informationproductionteam@macmillan.org.uk

Content reviewed: 2025

Next planned review: 2028

MAC15137_English_E04

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