Clinical and epidemiological profile of patients with lung cancer hospitalized in a university hospital in Recife-PE

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1 INTRODUCTION

Cancer is the disorderly growth of cells, which leads to the emergence of a tumor. Parkin (2001) says that lung cancer is the most common cancer in the world and also the leading cause of death from malignant neoplasm.

According to the Instituto Nacional do Câncer (2011) the pattern of occurrence of this neoplasm is determined by a past of great exposure to smoking. In most populations, tobacco-related lung cancer accounts for 80% or more of lung cancer cases. Compared with non-smokers, smokers are about 20 to 30 times more likely to develop lung cancer. In general, incidence rates in a given country reflect cigarette consumption in that country.

In Brazil, the most incidence types of cancer in the world were lung (1.8 million), breast (1.7 million), intestine (1.4 million), and prostate (1.1 million) (INCA, 2015).

Lung cancer is the first type of cancer with the highest incidence in men and the fourth type of cancer with the highest incidence in women in the country (INCA, 2015). Scalan, Wilkins, and Staller (2000) state that when smoking is stopped there is a progressive decline in the risk of lung cancer, and after 15 years of abstinence this risk can be equated to that of non-smokers.

According to Moreira et al. (2001) at the time of diagnosis, only 15 to 20% of patients with bronchial carcinoma have localized disease: in approximately 25% of cases the neoplasm is also found in regional lymph nodes, and in 55% or more of the times the tumor is already present. with distant metastases. Moreira

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et al. (2001), also point out that lung cancer has its highest incidence peak in males, currently in the order of 4:1, in individuals around 60 years old.

This study, after exposing the current problem, proposes to know the clinical and epidemiological profile of patients treated with a diagnosis of lung cancer in the pulmonology clinic of a University Hospital located in the city of Recife-PE. It is based on the survey of the epidemiological and clinical aspects of the patients, to better direct the care provided by the professionals to them, emphasizing the relevant aspects in the provision of Nursing care, making them more humanized and individualized.

It is also expected to contribute to the awareness of nurses regarding the risks of the disease and how it can be prevented since they are multiplying agents of education and the health of the population.

2 METHODOLOGY:

This study was developed within an approach focused on quantitative analysis of the retrospective type, developed in the file of medical records of the Hospital Universitário Oswaldo Cruz (HUOC) in Recife-PE through the analysis of the medical records. The population addressed consisted of patients with lung cancer hospitalized at the HUOC, where the sample was extracted from the book of records of the pulmonology inpatient unit, of patients, hospitalized in the year 2011.

3 CONCLUSION

Through this research, it was possible to expand knowledge about the clinical and epidemiological profile of patients diagnosed with lung cancer admitted to a clinic specialized in pulmonology at the institution under study.

A total of 489 medical records of hospitalized patients with pulmonary pathologies were analyzed. Of these, 427 corresponded to other lung diseases and 59 (12%) were diagnosed with lung cancer.

The study demonstrated that the highest incidence of lung cancer was in individuals over 60 years of age, data comparable to a study carried out by Lorenzoni et al. (2001), with patients with lung cancer, where their average was 60.8 years. These data reinforce the incidence of lung cancer in elderly individuals, where the functional decrease and cellular deterioration inherent to aging justify the propensity to develop the disease. Regarding the most characteristic signs and symptoms, cough (61%), dyspnea (58%), weight loss (39%), and chest pain (25%) were found. As for the less expressive symptoms, fever (8%) and hemoptysis (2%) were found.

We confirmed through the data collected that, as mentioned in the literature, smoking is directly related to lung cancer, 44% of the patients surveyed were smokers and 42% were former smokers, while only 5% were non-smokers. The risk of lung cancer in the population of smokers is seventeen times greater in men and eleven times greater in women when compared with non-smokers (UEHARA 1998).

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The most common histological type was adenocarcinoma with 58% of cases. It was found that 36% of the analyzed patients already had metastases, confirming the severity of the disease and the influence of potentially carcinogenic smoking on the evolution of cancer.

This type of cancer is usually detected in advanced stages since symptoms in the early stages of the disease are not common. Thus, lung cancer remains a highly lethal disease, with a mortality/incidence ratio of approximately 86% (INCA, 2011).

It was observed that the most used treatment in patients was chemotherapy/radiotherapy corresponding to 41% of cases, but surgical treatment remains the therapeutic option related to better survival in correctly staged patients.

It is hoped that the present study will be able to expand the information on the subject and that it will contribute as an instrument for the development of actions in the control of lung cancer, the fight against smoking, and the health care of patients affected by the disease, always aiming at improvement assistance provided by the professionals involved.

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