# Treating lung cancer with surgery



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You're about to have lung surgery. You may be worried or even anxious. This is perfectly normal. This fact sheet will help you understand the surgery better.

#### What does the surgery involve?

You could have one of the following operations:

**Pneumonectomy:** One or both lungs are completely removed. The procedure is done under general anesthesia. This means the doctor will put you completely to sleep.

**Lobectomy:** One or more lobes of a lung are completely removed. The left lung has 2 lobes and the right lung has 3 lobes. As with pneumonectomy, the procedure is performed under general anesthesia.

**Segmentectomy:** A lobe segment is removed. Each lobe can have 2 to 5 segments.

**Wedge resection:** A wedge-shaped piece is removed from the edge of the lung. This is the operation that removes the least amount of tissue.

#### How long will I be in the hospital?

The length of stay in the hospital varies from person to person. Generally, it's between 1 and 5 days. Some patients may be able to go home the same day as the operation, depending on their condition. Your health care team will tell you at a pre-op appointment how much time you should plan on.

# What should I do **BEFORE** the operation?

You should be fasting as of midnight the night before your operation.

- Don't drink or eat after midnight.
- Don't swallow water if you brush your teeth.
- You may, however, take any medication your doctor has authorized with a sip of water.

If you're taking any medications or natural health products, talk to your doctor. Some of them can't be taken before surgery.

#### Avoid alcohol and tobacco

Don't consume alcohol at least 24 hours before your surgery.

If you haven't already done so, quit smoking. To help you, your doctor may prescribe nicotine patches or other medications. Don't hesitate to discuss it with your doctor. There are health fact sheets to help you quit smoking. Refer to those that apply to your situation (see the Useful Resources at the end of this fact sheet).

#### What happens during the operation?

- > You'll be under general anesthesia. Before you're "put to sleep", you may be given an epidural (a small tube in the spine to inject pain medication).
- > Once you're asleep, the surgeon makes several small openings in your body or a single, larger one.
- > Then the surgeon removes the diseased lung or lobes.
- > The surgeon may place one or two tubes in the area being operated on. These are called "chest tubes". They allow fluids and air to escape.
- > The operation can take a few hours.

# What materials or devices will I have on me AFTER the operation?

There are different ones depending on the type of surgery. You could have:

- > 1 or 2 chest tubes. In most cases, these stay in place for 2 to 5 days. Your doctor decides when they will be removed. Sometimes it's possible to go home with this tube.
- > An IV solution. This is a liquid injected through a small tube usually placed in a vein in the arm. This fluid keeps you hydrated until you can eat or drink.
- > An arterial cannula. This is a small tube inserted into your wrist. It's used to measure your blood pressure continuously.
- > A bandage. Applied to your incision, it's usually removed 2 days after the operation. The incision is then left open to the air.
- > Stitches or staples. The incision can be closed with stitches made with a special thread that will disappear on its own. The incision can also be held together with metal staples (pins). These are usually removed 10 days after the operation.
- > An epidural. A small tube (catheter) is inserted into the spine in the middle of the back. Pain medication may be injected into this area to relieve your pain.

- > A bladder catheter. A small tube is inserted through your urinary tract to your bladder to allow urine to pass. This may make you feel like you constantly need to urinate even though you don't. This is normal. The catheter will be removed based on your doctor's assessment.
- > A heart monitor. If you spend time in intermediate care (1 day) during your hospital stay, electrodes connected to a device by small wires will be placed on your skin. This is done to continuously check that your heart is working properly.
- > An oxygen supply. You'll receive oxygen to help you breathe, either through a mask or through nozzles in your nostrils.

# What discomfort could I feel **AFTER** the operation?

The pain from the operation may last for several weeks, but it should gradually decrease. If you're in pain, you should take the pain medication prescribed by your doctor. It's important that you feel well enough to resume your activities after the operation. This will help you recover more quickly.

The operation will cause:

- pain in the shoulder for about 24 hours, and then under the breast
- coughing and spitting (bronchial congestion)
- shortness of breath

There could also be complications, such as:

- pneumonia
- blood clots in the veins (thrombophlebitis)
- irregular heart rhythm

# What precautions should I take **AFTER** the operation?

#### **Eating**

The doctor or nurse will tell you when you can start eating or drinking again. After that, you can gradually go back to eating normally, at your own pace.

#### Moving and exercising

It's important to start moving again as soon as possible to prevent complications: constipation, blockage of a vein by a blood clot, bed sores (injuries to the skin caused by constant pressure on the same spot), etc.

The day after your operation, a nurse or physiotherapist will help you sit in a chair. The physiotherapist will gradually recommend new exercises for you, and soon you'll be able to walk in the hallway.

The important thing isn't to move for a long period, but rather, to move often. The more you move, the sooner you'll recover.

For more details on getting out of bed after an operation, refer to the health fact sheet on this point (see the Useful Resources at the end of this fact sheet).

#### **Breathing exercises**

It's important to begin these exercises as soon as possible after surgery. The physiotherapist or nurse will advise you on the best way to do them.

For more details on these exercises, refer to the health fact sheet (see the Useful Resources at the end of this fact sheet).

#### Arm and shoulder exercises

If necessary, a physiotherapist will suggest exercises for your arm and shoulder on the operated side. These will help you keep your arm and shoulder supple and mobile, and reduce complications.



### What should I do when I **RETURN** home?

When you return home, you'll need to stay vigilant and follow certain recommendations, particularly regarding:

- your incision
- your pain management
- vour activities
- your hygiene (bath and shower)
- your diet
- driving
- your chest tube bandage

For more details on how to take care of yourself, refer to the health fact sheet that apply to your situation (see Useful Resources at the end of this fact sheet).



# What follow-up will I need after my operation?

When you leave the hospital, you'll be given a date for your next appointment with your surgeon. On that day, among other things, you'll have an X-ray to check the condition of your lung.

### Who can I contact for help or to ask questions?

If you have any questions, feel free to contact your nurse navigator, your research nurse, or the thoracic surgery secretary's office.

You can also call the Thoracic Surgery Clinic at **514 890-8404**.

Don't hesitate to ask your doctor any questions during your medical appointments. Write them down before your visit so you can remember them.



#### **USEFUL RESOURCES**

Health fact sheets

<u>Exercices respiratoires après une</u> <u>opération</u> (en français)

<u>Me lever et bouger après mon opération</u> (en français)

Self-care in the months after lung surgery

Canadian Cancer Society
Cancer Information Helpline:

- > 1888 939-3333
- > cancer.ca/en

Quebec Cancer Foundation Info-Cancer Hotline:

- > 1800 363-0063
- > fqc.qc.ca/en

Other health sheets published by the CHUM are available. Ask for those that might fit your situation.



You can also find them
on our website
chumontreal.qc.ca/fiches-sante

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The content of this document in no way replaces the recommendations and diagnoses made, or the treatment suggested by your health professional.

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