With the resources, commitment and expertise to set standards in lung cancer prevention, detection, treatment and research, the UCLA Lung Cancer Program is recognized as a national leader. UCLA’s program is distinguished by its multidisciplinary approach and the wealth of experience accumulated as a busy center of care and innovation.

Designated in 1977 by the National Cancer Institute (NCI) as one of seven institutions to participate in the Lung Cancer Study Group, UCLA today continues its leadership role as an NCI Specialized Program of Research Excellence (SPORE) in lung cancer. The NCI has also designated UCLA’s Jonsson Comprehensive Cancer Center one of an elite group of Comprehensive Cancer Centers, and U.S. News & World Report has ranked UCLA Medical Center among the nation’s top hospitals in each of the 18 years it has published its rankings.
Surgical Treatment

The UCLA Lung Cancer Program offers the most complete range of surgical procedures for patients with lung cancer – even for those who are not candidates for tumor resection.

UCLA thoracic surgeons can determine cancer staging by performing a cervical mediastinoscopy to biopsy lymph nodes in the mediastinum. This procedure is the most accurate way to stage lung cancer and complements standard radiologic testing. Mediastinoscopy can help physicians determine if the tumor is resectable and if the patient would benefit from chemotherapy prior to tumor resection.

Minimally invasive thoracoscopic procedures including video-assisted thoracic surgery (VATS) and thoracoscopic lobectomy are among the available treatment options. These procedures produce less trauma and result in shorter hospital stays, quicker recoveries and less postoperative pain. UCLA also is in the forefront of robotic surgical technology in collaboration with the UCLA Center for Advanced Surgical and Interventional Technology (CASIT). Robotic assistance aids in visualization, increases precision and results in fewer traumas to surrounding tissue.

Complex lung cancer cases often require an open procedure called a thoracotomy. UCLA surgeons are experienced in airway operations, tracheal resections, sleeve lobectomies, and chest wall resections, among other procedures. For patients with unresectable tumors, palliative procedures with airway laser treatment and stenting can improve breathing function and quality of life.

Non-surgical Treatments

Interventional radiologists provide other treatment options for patients with poor lung function who are not candidates for resection. Patients with underlying lung disease including emphysema and COPD (chronic obstructive pulmonary disease) who do not have sufficient lung function to undergo surgical resection can be treated with radiofrequency ablation to destroy tumor cells with minimal collateral damage to the surrounding normal lung tissue.

Radiation-based therapies also offer treatment options for patients whose underlying conditions make them poor candidates for resection. UCLA offers advanced radiation oncology therapies that allow physicians to target cancer locations more selectively than conventional external beam radiation. Body radiosurgery or stereotactic radiosurgery and intensity-modulated radiation therapy (IMRT) allow physicians to deliver a lethal dose of radiation to cancerous cells while exposing neighboring healthy tissue to much lower doses of radiation.
Medical Oncology

Program physicians in thoracic medical oncology are specialized in treating lung cancer patients at all stages with the use of the latest chemotherapeutic agents and targeted therapies. Although chemotherapy has traditionally been used in patients with advanced cancers who are not candidates for surgery, UCLA now uses standard chemotherapy and new drugs to treat patients after surgery for early-stage lung cancer to kill remaining undetected cancer cells that may be present in nearby tissues or elsewhere in the body.

In more advanced lung cancer, the role of mediastinoscopy in identifying patients for induction chemotherapy has been instrumental in appropriate treatment planning. In some cases, the lung cancer can be completely eliminated without surgical resection.

The UCLA Lung Cancer Program also offers qualifying patients the opportunity to participate in clinical trials of the newest investigational drugs. In patients with inoperable cancer who have exhausted standard chemotherapy, these clinical trials may provide further treatment options not available elsewhere in the community. These new treatments are generally available only at major medical centers actively involved in cutting-edge research. These investigational drugs may improve symptoms and quality of life, and may also prolong survival.

Clinical Research

As one of only seven NCI-designated Specialized Programs of Research Excellence (SPORE) in lung cancer, UCLA is advancing the frontiers of lung cancer treatment in targeted therapy, immunotherapy and chemoprevention. Patients who have failed to respond to other medical treatments can often find new options at UCLA with leading-edge investigational therapies.

Related Services

The Lung Cancer Program is part of a range of services available to lung cancer patients at UCLA. Other services include a lung cancer support group to help patients cope with the stress of lung cancer diagnosis and treatment, a pulmonary rehabilitation program to help improve the lives of patients with marginal lung function, and a smoking cessation program.
UCLA Lung Cancer Program

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