

Minimally invasive & robotic surgery

- **Video-assisted thoracoscopic surgery (VATS):** Minimally invasive procedures used to treat chest conditions, including lung, oesophageal, and mediastinal tumours.
- **Robotic lobectomy (lung cancer)**
- **Robotic oesophagectomy**
- **Robotic thymectomy**
- **Benign Mediastinal and Thoracic Tumours**

Robotic surgery uses small incisions, a high-definition camera and a complex robotic system to operate on organs in your chest. This allows surgeons to remove certain tumours without opening the thoracic cavity.



Faster recovery



Less pain



Fewer visible scars



Lower risk of complications



Shorter hospitalisation

Comprehensive cancer management

- Radiation therapy uses high-powered X-rays or other forms of energy to shrink or destroy tumours.
- Chemotherapy uses drugs to treat cancer cells.
- Targeted therapy, targets proteins and enzymes that allow cancer cells to grow and divide.
- Immunotherapy, which harnesses your body's own immune system to fight cancer.



COMPREHENSIVE CARE FOR THORACIC CANCER

Early detection can save lives. If you or a loved one are experiencing symptoms, consult our thoracic expert today.

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Understanding Thoracic Cancer

Symptoms, Causes and Treatment

Thoracic cancer refers to any cancer that originates in the thoracic cavity area, including the lungs, oesophagus, chest wall and mediastinum. This cancer can severely impact health, quality of life, and daily activities. Early detection and advanced treatment options play a crucial role in improving patient outcomes.

Types of thoracic cancer



Lung cancer: Abnormal cell growth in the lungs

- Non-small cell lung cancer (adenocarcinoma, large cell carcinoma, squamous cell carcinoma)
- Small cell lung cancer



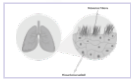
Oesophageal cancer: Affects the foodpipe that carries food and liquids to the stomach.



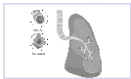
Thymoma & mediastinal tumours: Rare cancers affecting the thymus gland and surrounding tissues.



Metastasis to lung: Cancers that spread to the lungs from other parts of the body.



Pleural cancer (mesothelioma): Affects the lining of the lungs & thoracic cavity.



Tracheal & bronchial tumours: Tumours affecting the trachea and airway.

Symptoms to watch for

The symptoms of thoracic cancer vary depending on the type and stage of the cancer, but some common signs include:



Persistent cough, sometimes with blood or mucus



Pain or tightness in your chest or throat



Unexplained weight loss and loss of appetite



Difficulty in swallowing



Shortness of breath



Change in voice



Fatigue, fever or night sweats

Causes of thoracic cancer

The exact causes of thoracic cancer are unclear, but several risk factors increase its likelihood:

- Smoking** – The leading cause of lung and oesophageal cancer.
- Exposure to secondhand smoke** – Increases the risk even for non-smokers.
- Air pollution** – Prolonged exposure to pollutants can contribute to lung cancer.
- Workplace hazards** – Contact with asbestos, chemicals, or radiation.
- Genetic factors** – A family history of thoracic cancer may increase susceptibility.

Diagnosing thoracic cancer

If cancer is suspected, the following tests may be recommended:



• **Chest X-ray:** Helps detect large tumours, fluid build-up, or thickened lung tissue, though smaller tumours may not be visible.



• **Bronchoscopy:** A thin tube with a video camera (bronchoscope) is inserted through the nose into the airways to examine the trachea (windpipe) and airways to collect tissue samples for biopsy.



• **CT scan:** Uses X-rays to create multi-dimensional images of the chest, commonly used to diagnose lung, thymic cancers and oesophageal cancers.



• **Lung biopsy:** Confirms the presence of cancer by extracting a sample of tissue or fluid using a needle, bronchoscope, or minimally invasive surgery.



• **PET scan:** Uses a radioactive tracer (like FDG, a type of glucose) that is injected into the bloodstream. It detects the tracer's activity and creates images, highlighting areas of increased activity, which can indicate cancer and also for cancer staging.



• **MRI:** Determines whether cancer has spread to the brain, chest wall, bones, spine or other organs.



• **Upper GI endoscopy:** Upper endoscopy can be used to detect oesophageal lesion and collect biopsy samples from the oesophagus.

Thoracic cancer treatments at KD Hospital

Our multidisciplinary team offers personalised treatment strategies, including:

Thoracic surgery



Lobectomy: Removes one or more lobes of your lungs. The most appropriate treatment for carcinoma lung.



Segmentectomy & wedge resection: Lung-preserving surgeries for early-stage lung cancer.



Chest wall resection and reconstruction: Surgical treatment for tumours involving the chest wall.



Tracheal & bronchial surgeries: Procedures to manage airway tumours and stenosis.



Pleurectomy & decortication: Surgical management of mesothelioma and pleural diseases.



Extrapleural pneumonectomy: Complete removal of a lung for advanced lung cancer.



Oesophagectomy: Surgery to remove all or part of the oesophagus to treat oesophageal cancer.