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New Developments in the Diagnosis and Treatment of Lung Cancer by Respiratory Medicine Physicians

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Abstract: With the continuous advancement of medical technology, the diagnosis and treatment methods for lung cancer are constantly evolving. This article aims to explore the new developments in the field of lung cancer diagnosis and treatment by respiratory medicine physicians, including innovations in diagnostic techniques, breakthroughs in treatment methods, and optimization of multidisciplinary collaboration models, in order to provide strong support for improving the survival rate and quality of life of lung cancer patients. **Keywords:**Lung cancer; Respiratory medicine; Advances in diagnosis and treatment; Diagnostic techniques; Treatment methods

Introduction: Lung cancer, as the leading cause of cancer incidence and mortality worldwide, the development of diagnostic and treatment technologies is of great significance for improving the survival rate and quality of life of patients. In recent years, with the deepening of medical research and the accumulation of clinical experience, respiratory medicine physicians have made significant achievements and breakthroughs in the diagnosis and treatment of lung cancer.

1. Innovations in Lung Cancer Diagnosis Techniques by Respiratory Medicine Physicians

1.1 Low-Dose Spiral CT Screening

With the continuous development of medical technology, significant innovations have been made by respiratory medicine physicians in the field of lung cancer diagnosis. Among them, the emergence of low-dose spiral CT screening technology provides a powerful tool for the early detection of lung cancer. Low-dose spiral CT is an advanced imaging diagnostic technique that can significantly reduce the radiation dose to patients while ensuring image quality. This screening method has high sensitivity and specificity, accurately detecting lung nodules and early lung cancer lesions. The advantages of low-dose spiral CT screening are mainly reflected in several aspects: firstly, it greatly increases the early detection rate of lung cancer. Through low-dose spiral CT screening, physicians can timely detect lung nodules and early lung cancer, providing patients with earlier and more effective treatment opportunities. Secondly, low-dose spiral CT screening helps to reduce misdiagnosis rates. Traditional X-ray examinations have a low detection rate for small nodules, leading to missed diagnoses or misdiagnoses. Low-dose spiral CT can more accurately determine the nature of nodules, reducing the occurrence of misdiagnosis. Additionally, lowdose spiral CT screening has the advantages of simple

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operation and high safety, making it more accessible to patients for examination. However, low-dose spiral CT screening also has certain limitations. For example, it has a higher detection rate for some benign nodules, which may lead to unnecessary further examinations and psychological burden. Therefore, when applying low-dose spiral CT screening, respiratory medicine physicians need to combine the patient's clinical manifestations and other test results for comprehensive judgment to ensure diagnostic accuracy.

1.2 Circulating Tumor Cell (CTC) Detection

In recent years, with the deepening of molecular biology and oncology research, circulating tumor cell (CTC) detection, as an emerging lung cancer diagnostic technology, has gradually attracted the attention of respiratory medicine physicians. CTC detection is a method of extracting peripheral blood from patients, using advanced molecular biology techniques to isolate and identify circulating tumor cells from the blood. It can not only real-time monitor the status of tumor cells in a non-invasive manner but also has important significance in predicting disease progression, evaluating treatment efficacy, and determining prognosis. In the diagnosis of lung cancer, the application value of CTC detection is mainly reflected in several aspects. Firstly, it provides a non-invasive tumor burden assessment method for clinical practice. Traditional tumor burden assessments for lung cancer often rely on imaging examinations and tissue biopsies, while CTC detection can indirectly reflect the size of tumor burden by detecting the quantity and activity of circulating tumor cells in the blood, providing references for clinical decisions. Secondly, CTC detection can be used to monitor disease progression and recurrence of lung cancer. By dynamically monitoring the quantity of CTCs during treatment, physicians can timely detect disease recurrence or metastasis, adjust treatment plans, and improve treatment efficacy. Additionally, CTC detection can also be used to evaluate the prognosis of lung cancer patients. Studies have shown that the quantity of CTCs is closely related to the survival rate and prognosis of patients. Therefore, CTC detection can predict the prognosis of patients, providing a basis for personalized treatment.

1.3 Gene Testing and Molecular Typing

Gene testing and molecular typing are significant

breakthroughs in the modern field of lung cancer diagnosis and treatment, providing respiratory medicine physicians with unprecedented tools to understand the biological characteristics of lung cancer, thereby guiding personalized treatment and predicting patient prognosis. Through gene sequencing technology, physicians can accurately analyze gene mutations, gene expression profiles, and related molecular markers in tumor tissues of lung cancer patients, thus determining the molecular typing of lung cancer. The application of gene testing not only helps with precise diagnosis but also, more importantly, provides a basis for personalized treatment of lung cancer. According to different molecular types, patients can receive drug treatments targeted at specific gene mutations, such as tyrosine kinase inhibitors targeting EGFR mutations or ALK inhibitors targeting ALK rearrangements. This treatment strategy significantly improves treatment efficacy, reduces unnecessary side effects, and prolongs patient survival. Gene testing also helps predict patient prognosis. Some specific gene mutations are closely related to the malignancy, metastasis risk, and recurrence possibility of lung cancer. By detecting these gene mutations, physicians can more accurately assess patient prognosis, thereby formulating more reasonable treatment plans and follow-up strategies.

2. Breakthroughs in Lung Cancer Treatment Methods by Respiratory Medicine Physicians

2.1 Immunotherapy

Immunotherapy, as a significant breakthrough in the field of lung cancer treatment in recent years, has become an important tool for respiratory medicine physicians in treating lung cancer. The core concept of immunotherapy is to activate the patient's immune system to attack tumor cells, thereby achieving therapeutic goals. Among them, the application of PD-1/PD-L1 inhibitors is particularly noteworthy. PD-1 (programmed cell death protein 1) and PD-L1 (programmed death-ligand 1) are important regulatory molecules in the immune system, which inhibit the activity of T cells to prevent excessive immune responses. However, tumor cells can exploit this mechanism to evade attacks from the immune system. The function of PD-1/PD-L1 inhibitors is to block this pathway and reactivate the ability of T cells to attack tumor cells. In the treatment of lung cancer, PD-1/ PD-L1 inhibitors have achieved remarkable efficacy. Multiple clinical trials have shown that these drugs can significantly improve the survival rate and quality of life of patients with advanced non-small cell lung cancer. They can be used alone or in combination with traditional chemotherapy or radiotherapy to further improve treatment effectiveness. In addition to PD-1/ PD-L1 inhibitors, immunotherapy also includes various other strategies, such as CAR-T cell therapy, tumor vaccines, etc. These emerging treatment methods provide more treatment options for lung cancer patients and bring more challenges and opportunities to respiratory medicine physicians.

2.2 Precision Radiotherapy

Precision radiotherapy is a crucial technique in the treatment of lung cancer. Respiratory medicine physicians deliver radiation precisely to tumor tissues through accurate positioning and highdose focusing, achieving efficient and safe tumor treatment. Compared to traditional radiotherapy methods, precision radiotherapy has many significant advantages and has been widely validated and applied in practice. One of the most significant advantages of precision radiotherapy is the improvement in local tumor control. Through advanced imaging technology and computer-assisted planning systems, physicians can accurately delineate tumor target areas, ensuring highly concentrated radiation doses to maximize tumor cell killing and reduce the risk of tumor recurrence. Additionally, precision radiotherapy reduces damage to normal tissues. By precisely adjusting the radiation dose and irradiation angle, physicians can minimize the damage of radiation to normal tissues, thereby reducing the side effects and complications of radiotherapy. In practical experience, the application of precision radiotherapy has achieved significant results. Many clinical studies have shown that precision radiotherapy plays a positive role in improving the survival rate and quality of life of lung cancer patients. For example, for early-stage non-small cell lung cancer patients, precision radiotherapy can be an alternative treatment option to surgery, achieving treatment effects comparable to surgery while avoiding the trauma and risks associated with surgery. For advanced lung cancer patients, precision radiotherapy can be combined with chemotherapy or immunotherapy to improve treatment effectiveness and alleviate symptoms.

2.3 Comprehensive Treatment

Comprehensive treatment refers to the integration of various treatment methods and interdisciplinary expertise to form a comprehensive and personalized treatment plan for lung cancer patients. In the strategy of comprehensive treatment, respiratory medicine physicians need to closely collaborate with doctors from other relevant departments to jointly develop treatment plans. Surgery is the preferred treatment method for early-stage lung cancer, as it can directly remove tumor tissues and reduce tumor burden. However, surgery is not suitable for all lung cancer patients. For mid-to-late-stage patients or those with poor physical conditions, chemotherapy and radiotherapy become important treatment methods. Chemotherapy kills tumor cells and inhibits tumor growth and spread through drugs, while radiotherapy uses radiation to kill tumor cells and precisely target local tumors. In comprehensive treatment, surgery, chemotherapy, and radiotherapy are not isolated but complementary and mutually reinforcing. For example, neoadjuvant chemotherapy before surgery can reduce tumor volume and increase the resection rate of surgery; adjuvant chemotherapy and radiotherapy after surgery can kill residual tumor cells and reduce the risk of recurrence. In addition, immunotherapy plays an increasingly important role in comprehensive treatment, providing more treatment options for lung cancer patients when combined with surgery, chemotherapy, radiotherapy, and other methods. In the practice of comprehensive treatment, respiratory medicine physicians need to follow the principles of individualization, precision, and continuity. Individualization means developing treatment plans tailored to the specific conditions and needs of patients; precision emphasizes the accuracy of treatment methods and maximization of effectiveness; continuity focuses on the physical and psychological needs of patients throughout the entire treatment process, ensuring the safety and effectiveness of treatment.

3. New Advances in Respiratory Medicine Physicians' Contribution to Improving the Quality of Life in Lung Cancer Patients

3.1 New Concepts and Methods in Lung Cancer Rehabilitation and Quality of Life Improvement In recent years, with the shift in medical paradigms, respiratory medicine physicians have increasingly focused on the quality of life of lung cancer patients, considering it as one of the important indicators for evaluating treatment efficacy. Against this backdrop, new concepts and methods for lung cancer rehabilitation and quality of life improvement have emerged, bringing more hope to lung cancer patients. In terms of new concepts, respiratory medicine physicians have begun to emphasize the overall rehabilitation of patients rather than just disease control. They recognize that lung cancer is not only a physiological problem but also a comprehensive issue involving psychological, social, and environmental aspects. Therefore, they emphasize interdisciplinary cooperation, integrating resources from medical, psychological, nutritional, and rehabilitation fields to provide comprehensive rehabilitation support for lung cancer patients. In terms of methods, respiratory medicine physicians actively explore and implement various new treatment methods and technologies aimed at improving the quality of life of lung cancer patients. For example, by optimizing chemotherapy regimens and radiotherapy techniques, they reduce treatment-related side effects and complications, and improve patients' physical function and immunity. At the same time, they also focus on psychological rehabilitation and social support for patients, offering various measures such as psychological counseling, social activities, and rehabilitation training to help patients regain confidence and courage to reintegrate into society.

3.2 The Application of Comprehensive Treatments such as Psychological Support and Nutritional **Guidance in Lung Cancer Diagnosis and Treatment** Psychological support, nutritional guidance, and other comprehensive treatments play a crucial role in the diagnosis and treatment of lung cancer. These adjunctive treatment methods not only help improve patients' quality of life but also enhance treatment effects to some extent, thereby helping lung cancer patients better cope with the disease. Firstly, psychological support is crucial for lung cancer patients. Due to the long course of the disease and the pain of treatment, patients often experience anxiety, depression, and other emotions. At this time, psychological support is particularly important. Professionals such as doctors, nurses, and psychologists can help patients relieve psychological pressure and enhance confidence in overcoming the disease through communication, providing psychological counseling services, and organizing patient communication meetings. Family support is also an important part of psychological support, as the care, companionship, and encouragement from family members are invaluable to patients. Secondly, nutritional guidance is also an essential part of comprehensive treatment for lung cancer. Lung cancer patients often experience poor appetite and malnutrition due to the disease itself or the side effects of treatment. Nutritional guidance can help patients develop personalized dietary plans to ensure adequate intake of calories and nutrients, thereby maintaining normal bodily functions.

Conclusion

The new advances in respiratory medicine physicians' contribution to lung cancer diagnosis and treatment not only demonstrate the rapid development of medicine but also highlight doctors' profound concern for the quality of life of patients. With the rapid advancement of technology, new diagnostic and treatment methods and techniques continue to emerge, making the diagnosis of lung cancer more precise and treatment more personalized and efficient. From the widespread application of precise radiotherapy to the in-depth exploration of comprehensive treatment, and to the increasing emphasis on non-pharmacological treatment methods such as psychological support and nutritional guidance, every step of progress reflects the comprehensive care provided by respiratory medicine physicians to lung cancer patients.

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