

LUNG CANCER AND CLINICAL STUDIES: AN OBSERVATIONAL SURVEY

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Introduction: Lung cancer is one of the leading causes of cancer mortality worldwide. Although advances in treatment are significant, survival rates remain low, especially in advanced stages. Observational studies allow us to understand how the disease behaves in real clinical settings, helping to formulate public policies and therapeutic improvements. **Objectives:** Analyze clinical and epidemiological data of patients with lung cancer treated at a hospital institution, observing demographic characteristics, histological types, treatments, risk factors and clinical outcomes. **Methods:** Retrospective observational study carried out between 2018 and 2022, with 356 patients diagnosed with lung cancer. Variables such as age, sex, smoking, histological type, staging, treatment and survival were analyzed. CAAE: 84606024.9.0000.5173, Opinion Number: 7.331.126. **Results:** The results demonstrate the clinical and epidemiological profile of lung cancer patients, highlighting characteristics that are relevant to understanding the disease in real-world contexts. The men predominate (62%), most of whom are smokers (81%), reinforcing the strong link between smoking and the development of lung cancer, especially non-small cell lung cancer (NSCLC), which accounted for 78% of cases — with adenocarcinoma being the most common subtype (61%). The fact that more than half of the diagnoses occurred at stage IV (54%) points to a pattern of late detection, which limits therapeutic options and reduces survival. In terms of treatment, most patients underwent chemotherapy and/or radiotherapy (65%), with smaller proportions receiving immunotherapy (28), surgery (22%) or targeted therapy (12%). These data reflect both the severity of the cases and possible barriers to access to more advanced technologies, especially in the public health system, where inequality in access to modern therapies stands out as a limiting factor. The median survival of 14.8 months, with better outcomes (up to 30 months) in patients with early-stage NSCLC, reinforces the importance of early diagnosis and timely access to effective treatments. **Conclusion:** This observational study reinforces the importance of early diagnosis and access to modern therapies in the treatment of lung cancer. Despite advances, most cases are still diagnosed late, especially among smokers. There is an urgent need to expand access to molecular tests and personalized treatments, in addition to strengthening prevention and screening programs for the disease.

Keywords: Clinical Epidemiology; Clinical Study; Lung Neoplasms.