



The Dudley Group
NHS Foundation Trust

Virtual Pulmonary Nodule Clinic

Lung Service

Patient Information Leaflet

What is a pulmonary nodule?

A pulmonary nodule is a round shadow in the lung, seen on a chest X-ray or computed tomography (CT) scan, measuring less than three centimetres in diameter. It does not usually cause any symptoms.

Why do pulmonary nodules occur?

Pulmonary nodules are very common. The vast majority (over 95 per cent) are benign (not cancer).

Approximately one in four elderly people who are current or ex-smokers have nodules visible on a CT scan.

People who have never smoked may also have nodules that can be seen on a CT scan.

They may be due to an ongoing lung infection or scarring from previous infections, such as tuberculosis (TB). They also occur in inflammatory conditions, such as rheumatoid arthritis.

However, in a small proportion of people, a nodule indicates an early lung cancer, or occasionally a cancer that has spread from elsewhere in the body.

How are pulmonary nodules diagnosed?

Most pulmonary nodules are too small to be seen on a chest X-ray and are usually picked up by chance on a CT scan. They are often unrelated to the reason the CT scan was performed in the first place.

It is often unclear what the cause of a nodule is from the CT scan alone. It may not be possible to take a biopsy (a sample of tissue from the nodule) if the nodule is too small (less than a centimetre). In that case, the recommended advice is to monitor the nodule by repeating the CT scan after a defined interval - a few months - to see if it gets bigger.

Pulmonary nodules grow slowly, so there is no point in having X-rays or scans any more frequently than this. Benign nodules grow very slowly and sometimes do not grow at all. Cancerous nodules will eventually grow, sometimes very slowly.

If the nodule looks bigger or different in any way, your consultant may organise further tests, which will be explained to you.

What happens next?

Your consultant will discuss your case at a team meeting with other specialist doctors and nurses to decide on the best treatment plan for you. Following this, a repeat CT scan will be arranged. You may need to have several CT scans over a period of about two years, according to nationally agreed protocols, which we have followed closely for many years.

After each CT scan you will receive a telephone call to discuss the results, and confirmation of this conversation by letter. If you have any new or worsening symptoms between your scans, such as chest pain, shortness of breath, or repeated chest infections, you should let your nurse specialist know, as it may be necessary to bring forward your appointment.

Who should I contact if I have any questions?

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

The lung nurse specialist team on 01384 456111 ext. 2752 (9am to 5pm, Monday to Friday)

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be printed or downloaded from:

<http://dgft.nhs.uk/services-and-wards/respiratory-medicine/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

ਇਹ ਪਰਚਾ ਵੱਡੇ ਅੱਖਰਾਂ، ਬੋਲ ਕੇ ਰੀਕਾਰਡ ਕੀਤਾ ਹੋਇਆ ਅਤੇ ਦੂਸਰੀਆਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਵੀ ਪ੍ਰਾਪਤ ਹੋ ਸਕਦਾ ਹੈ, 0800 073 0510 ਤੇ ਫੋਨ ਕਰੋ ਜੀ।

Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru vă rugăm sunați la 0800 073 0510.

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