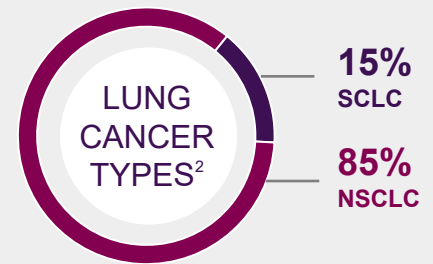


SMALL CELL LUNG CANCER (SCLC)

Globally, lung cancer is the **second most common form of cancer** and accounts for nearly **1 in 5** cancer deaths.¹ Lung cancer is broadly split into two types: **non-small cell (NSCLC)** and **small cell (SCLC)**.²



SCLC VS. NSCLC: WHAT'S THE DIFFERENCE?



SIZE SCLC cells are **small and oval**, compared to larger NSCLC cells³



SCLC cancer cells



NSCLC cancer cells



GROWTH Typically, SCLC is more **aggressive** and **fast-growing** than NSCLC, and spreads more rapidly to other parts of the body⁴

<5%

of SCLC patients have a lung tumour that may be surgically removed⁵



PROGNOSIS SCLC is associated with a **poorer prognosis** than NSCLC⁶

Survival rate five years after diagnosis:⁷

SCLC
7%

NSCLC
25%



STAGING NSCLC and SCLC are divided into stages according to the severity of disease. In addition to the traditional four stages, SCLC is divided into two groups which can help determine the treatment approach: ^{4,8,9}

LIMITED STAGE (Stages I-III)

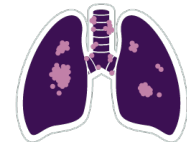
Cancer is localised to one lung and can be treated with local radiation therapy.



Accounts for **one-third** of patients

EXTENSIVE STAGE (Stage IV)

Cancer has spread to both lungs or body; can rarely be treated with radiation therapy as an initial treatment.



Accounts for **two-thirds** of patients



TREATMENT Compared to NSCLC, there are fewer treatment options for patients with SCLC:⁶

Surgery is only possible in the very early stages¹⁰

Standard of care for advanced disease includes chemotherapy, sometimes followed by radiation, but most patients' cancer returns after treatment^{10,11}

The introduction of immunotherapy to a chemotherapy combination may provide a **valuable option to patients**. Clinical trials are also investigating targeted agents and other combination approaches^{6,10,11}

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