

## Patient information

# **Pulmonary Nodules**

Aintree Hospital Site, Respiratory Department

### What is a Pulmonary Nodule?

- A pulmonary nodule is an area of roundish shadowing usually one centimetre (approximately 1/3rd inch) or smaller in the lung.
- It does not usually cause any symptoms but can be seen on a CT scan (Computed Tomography) and sometimes on a chest X-ray.

#### Why do Pulmonary Nodules occur?

- Pulmonary nodules are very common. Approximately one in four (25%) of older people who smoke or who are ex-smokers have nodules on a CT scan.
- People who have never smoked may also have nodules on a CT scan.
- Most nodules are benign (non-cancerous) and maybe caused by scarring from previous lung infections.
- They are very common in people who have had TB (Tuberculosis) and can occur in people who have other conditions such as Rheumatoid Arthritis.
- In a small number of people the nodule could be a very early lung cancer or occasionally a secondary cancer that has spread from elsewhere in the body.

#### **Diagnosing Pulmonary Nodules**

- Nodules are sometimes found on a chest X-ray but in most cases they are too small and are only seen when the person has a CT scan.
- Pulmonary nodules are often found when the person is having a CT scan for another reason.
- It is not always possible to know what the cause of a nodule is from the CT scan alone.
- Because nodules are small a biopsy (a test performed to get a piece of the nodule) may not be possible. Instead, we monitor the size of the nodule by repeating the CT scan after a certain amount of time to see whether it grows.

- Benign (non-cancerous) nodules grow very slowly or may not grow at all. On the other hand, malignant (cancerous) nodules will eventually grow, though this can happen slowly.
- We can check if the nodule is changing by repeating a chest X-ray or CT scan over a period of months or years.
- Because nodules can change very slowly there is no point in doing chest X-rays or CT scans any sooner than this.
- If the nodule grows or changes in any way then your Chest Specialist (Doctor) may arrange for you to have further tests.

#### What happens next?

- Your Chest Specialist may discuss your information at a team meeting with other specialist doctors and nurses.
- A repeat chest X-ray or CT scan will be arranged. This is usually done three months after your first chest X-ray or CT scan, but it could be 6-12 months in some cases. Some nodules require no further CT scans.

It may be necessary to have a number of CT scans over a number of years.

#### This will depend on the results of your scans and other factors including:

- if you smoke
- your general health.

In some cases you may have another type of scan arranged called a PET-CT.

Your Chest Specialist will either write to you or see you in clinic to inform you of the result of your scan.

Alternatively the clinical support worker may contact you via telephone to inform you of results and future plans.

If you have had several scans and your nodule is not changing your doctor will decide when your nodule is stable.

At this point you will not need any more scans. They will either write to you or see you in clinic to let you know this.

If you have any of the following symptoms between your scans, then you should contact your GP who may wish to contact your Chest Specialist to see you sooner.

- Pain in your chest.
- Shortness of breath.
- Repeated chest infections.
- Coughing up blood.

#### **Feedback**

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

#### **Further information**

If you have any questions or worries about your condition please contact

Tel:151 529 2916

**Author: Respiratory Department Aintree Hospital** 

Review date: June 2025

All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

يمكن توفير جميع المعلومات المتعلقة بالمرضى الموافق عليهم من قبل انتمان المستشفى عند الطلب بصيغ أخرى، بما في ذلك لغات أخرى وبطرقة سهل قراءتها وبالحروف الطباعية الكبيرة وبالصوت وبطريقة برايل للمكفوفين وبطريقة مون والكترونيا.

所有經信托基金批准的患者資訊均可以其它格式提供,包括其它語言、 易讀閱讀軟件、大字

體、音頻、盲文、穆恩體(Moon)盲文和電子格式,敬請索取。

در صورت تمایل میتوانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

ز انیاریی پیّو هندیدار به و نهخو شانه ی له لایه ن تراسته و ه پهسهند کر اون، ئهگهر داو ا بکریّت له فوّر ماته کانی تردا بریتی له زمانه کانی تر ، ئیزی رید (هاسان خویندنه وه)، چاپی گهوره، شریتی دهنگ، هیّلی موون و ئهلیّکتروّنیکی همیه.

所有经信托基金批准的患者信息均可以其它格式提供,包括其它语言、 易读阅读软件、大字体、音频、盲文、穆恩体(Moon)盲文和电子格式, 敬请索取。

Dhammaan warbixinta bukaanleyda ee Ururka ee la oggol yahay waxaa marka la codsado lagu heli karaa nuskhado kale, sida luqado kale, akhris fudud, far waaweyn, dhegeysi, farta braille ee dadka indhaha la', Moon iyo nidaam eletaroonig ah.

Ref: 1121 V6