

## THE CONTRIBUTION OF HEALTH PROMOTING HOSPITALS AND HEALTH SERVICES TO HEALTH EQUITY

# Small Cell Lung Cancer Presenting with Symptoms of Myasthenia Gravis Chia-Hsuan, YU<sup>1</sup>; Yi-Chun, Chen<sup>2</sup>

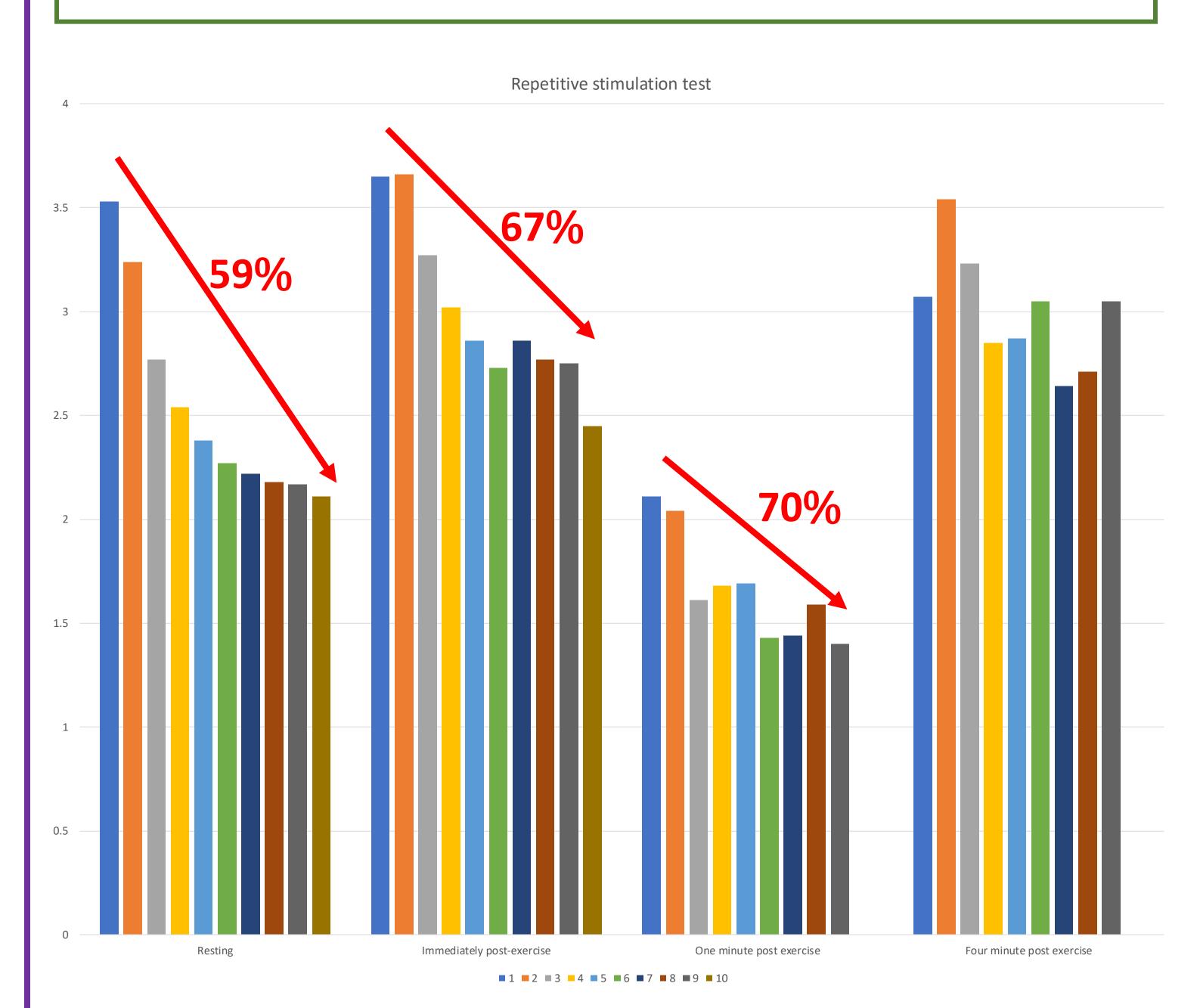
- 1 RN, Department of Nursing, National Taiwan University Hospital
- 2 RN, Department of Nursing, National Taiwan University Hospital

### Background and objective

Lambert-Easton myasthenic syndrome (LEMS) is a rare neuromuscular disorder that mostly affects who over the age of forty. Most are caused by autoimmune diseases or tumors, and 60% of them are related to small cell lung cancer. It attacks the neuromuscular junction, resulting in reduced release of vinylcholine, leading to symptoms such as diplopia, autonomic nervous system dysfunction (such as dry mouth, difficulty urinating, etc.), weakened tendon reflexes, and dysphagia. The main treatments include: steroids, oral immunosuppressants, intravenous immune globulin, plasma exchange, etc.

#### Methods/intervention

The case involves a 60-year-old male employed in China. In September 2022, he was admitted to the hospital due to neck ptosis and exertional dyspnea. Diagnosis revealed carotid artery stenosis, for which he underwent balloon angioplasty. However, he continued to experience symptoms like dysphagia and dysarthria, prompting his return to Taiwan. Following examination at our hospital, Myasthenia Gravis (MG) was suspected. He underwent double-filtered plasma exchange and repetitive stimulation tests, which indicated over a 100% increase under 30Hz stimulation.



Blood tests for anti-AchR and anti-MuSK were negative, strongly suggesting LEMS. Concurrently, CT scans revealed swollen right lower paratracheal and hilar lymph nodes. A subsequent ultrasound of the right cervical lymph node indicated neuroendocrine carcinoma, indicative of metastatic Small Cell Lung Cancer (SCLC). The final diagnosis confirmed small cell lung cancer, for which the patient underwent concurrent chemoradiotherapy (CCRT). Following treatment, the patient regained mobility without requiring a wheelchair. Nursing interventions focused on respiratory management, prevention of aspiration pneumonia, fall prevention, and addressing psychological distress such as anxiety or feelings of powerlessness.

#### Results

Following LEMS diagnosis, regular follow-up CT scans are recommended to facilitate early detection of cancer and prompt initiation of tumor-related treatments to alleviate discomfort.