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**Title:** Mortality in asymptomatic vs. symptomatic patients surgically treated for non-small cell lung cancer (NSCLC)

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**Body:** Introduction Compared to incidentally found lung cancer, the presence of symptoms (eg. cough, haemoptysis, pain, weight loss) at diagnosis is associated with a 50% reduction in median survival. In surgically treated patients, it is unknown whether presence of symptoms has prognostic significance. Aim We wanted to ascertain if symptoms at time of NSCLC diagnosis lowered 12-months mortality after surgery. Methods Retrospective analysis of all patients with localised NSCLC referred from our department between 2009-2011 for intended curative surgery Data on age, sex, tobacco pack years, Charlson's index of co-morbidity, FEV1, former malignancy, symptoms at time of diagnosis, pre- and post-surgical TNM stage, and 12-months mortality post-surgery were recorded. Results 130 patients were included: 51 (39%) asymptomatic and 79 symptomatic at NSCLC diagnosis with no differences concerning age, sex, tobacco pack years, or FEV1. Former malignancy was significantly more prevalent among asymptomatic than symptomatic subjects (33 % vs. 11%), with insignificant differences in prevalence of other co-morbidities or in post-surgical TNM (82% vs 85% in stages IA-IIIB). 12-months mortality was insignificantly higher in asymptomatic than symptomatic subjects (23% vs. 12%), and in patients with former malignancy compared to patients with no former cancer (17% vs. 16%). Discussion Symptoms at diagnosis per se appear unrelated to mortality in patients with NSCLC referred for surgery. Asymptomatic patients were more likely to have had prior malignancy. This suggests that incidentally found NSCLC was more likely when other medical conditions required thoracic imaging.