



Breast Cancer-Related Lymphedema: What you need to know

Jen Dalke RMT CLT-LANA
Certified Lymphedema Therapist
WRHA Breast Health Centre



Learning objectives

- Define breast cancer related lymphedema
- Recognize signs and symptoms of lymphedema
- Educate patients about risk reduction and precautions
- Describe lymphedema treatment and its management
- Identify the referral process to the WRHA Breast Health Centre Lymphedema Program



Disclosure

- Faculty: Jen Dalke
- Relationships with commercial interests:
 - None



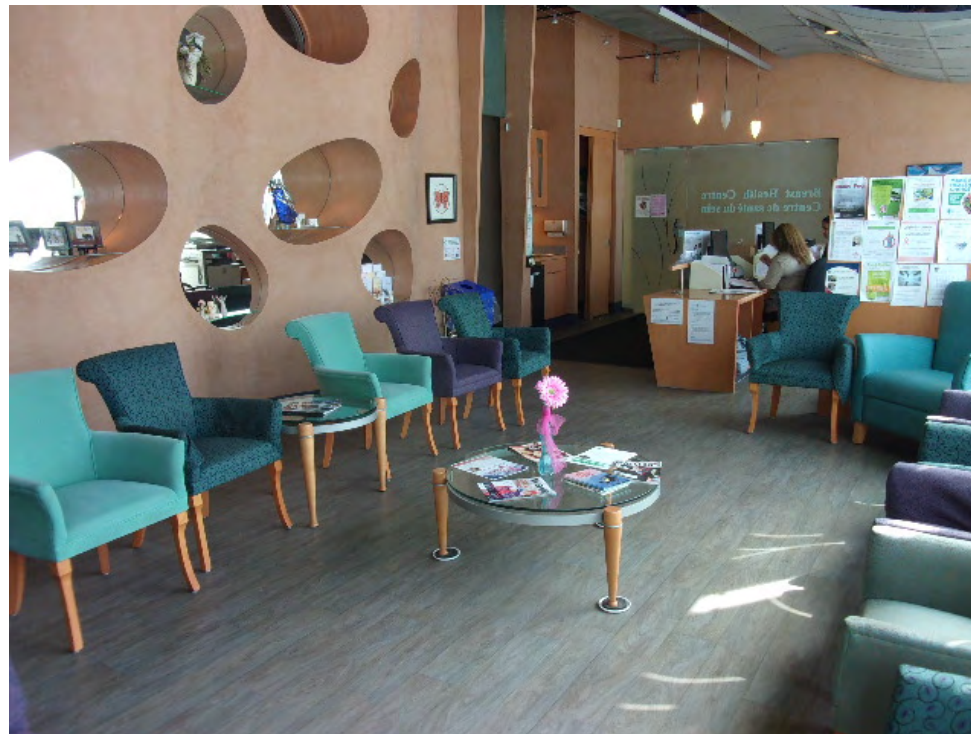
Mitigating potential bias

- Not applicable



Winnipeg Regional Health Authority Breast Health Centre

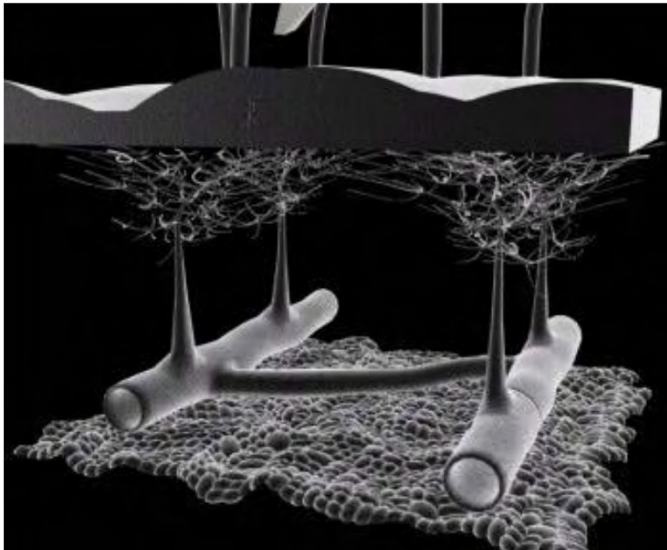
- Multi-disciplinary clinic
- Lymphedema program
 - 2 Certified Lymphedema Therapists



Normal lymph system

Lymph vessels occur throughout body except:

- brain and spinal cord
- eye socket and joint spaces
- nails and hair
- bone



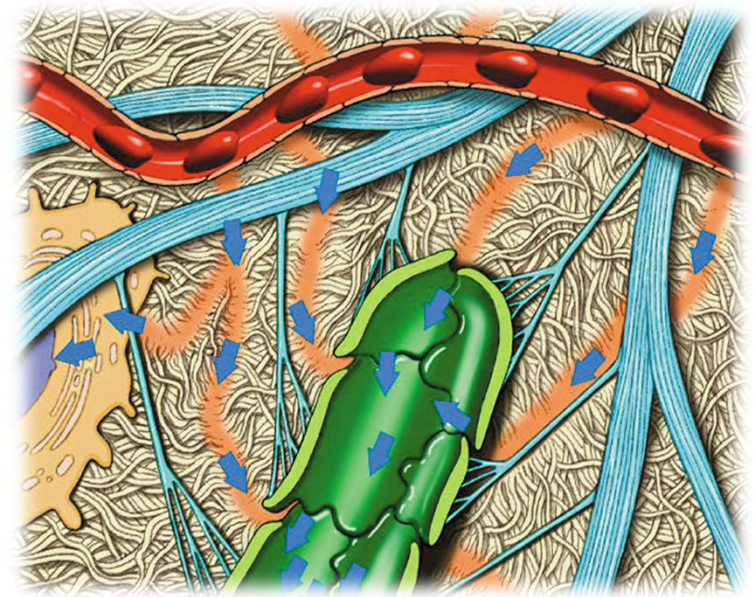
Courtesy Flinders University, Vital Essence



Healthy lymph system

Lymph vessel system:

- **is essential to maintain good health**
- removes excess fluid
- transports wastes and dead cells
- transports proteins and some fats from the intestines
- essential to immune system



Impaired lymph system

Three major ways for lymph system to become impaired:

- Trauma
- Blockage
- Absence or dysplasia



What is lymphedema? (lim-fa-DEE-ma)

- It is a chronic, progressive, protein rich swelling of a body part
- Different than “edema”
 - Post surgical, traumatic, heart/kidney dysfunction, palliative
- Primary and secondary
- Stages 0-3



Breast cancer-related lymphedema

Main causes

- **Surgery:**
 - Lymph node dissection
- **Trauma:**
 - Radiation
- **Blockage:**
 - Tumour: benign or malignant, blocking or pressing on lymph vessels



Breast cancer related lymphedema

- Most common type in Western countries:
 - Post cancer intervention
- Incidence varies depending on damage to lymph system
- Can develop months or years after cancer surgery/treatment



Development of lymphedema

- **Latent phase:**

- No visible edema
- Altered sensations
- Slow accumulation
- Changes in tissues
- Sometimes called

“Stage Zero”



Development of lymphedema

- **Stage 1:**

- Visible edema
- Pitting: indentation
- Reversible
- Changes in tissues



Development of lymphedema

- **Stage 2**

- Visible edema
- Pitting harder to refill
- Changes in tissues
- Not reversible



Development of lymphedema

- **Stage 3**

- Hardened edema
- Non pitting
- Sclerotic changes in tissues
- Thick hard skin



Management of lymphedema

- Lack of knowledge
- Lack of consensus
- Delayed diagnosis
- Resources for health coverage limited



Management of lymphedema

- Treatment options limited
- Pneumatic compression
- Compression garments only
- Compression bandaging only
- Limited availability of therapy
- Lack of trained therapists



Management of lymphedema

Combined Decongestive Therapy (CDT) is treatment of choice:

- Manual Lymph Drainage (MLD)
- Compression bandaging
- Exercises
- Skin care



Management of lymphedema

- Combined Decongestive Therapy



Results of CDT: Dr. Vodder trained lymphedema therapist



Courtesy: Carol Armstrong, RMT



Results of CDT: Dr. Vodder trained lymphedema therapist



Courtesy: Patti Loeb, RN



Patient self-management

Overall treatment plan needs to consider whole patient and not just the swollen limb.



Patient self-management

- Lymphatic system
- Trigger factors
- Prevention of infection
- Rationale for decongestive therapy
- Lifestyle changes
- Diet
- Psychological aspects
- Sources of support
- Importance of compliance
- Involvement of patient and partner(family) in self-care



Patient self-management

- Whenever possible use a not-at-risk limb for blood pressure, blood tests and IV therapy
- Practice good skin care
 - Use lotion, sunscreen, insect repellent and gloves
- Reduce risk of infection
- Exercise regularly
 - Gradually build up duration/intensity of exercise
- Aim for a healthy body weight
- Avoid high temperatures
 - Hot tubs, saunas, steam rooms



About the lymphedema program at Breast Health Centre

- Provides treatment and management of upper body lymphedema as a result of breast problems and/or breast cancer.
- A physician's referral is required for new patients or for returning patients that haven't been seen for more than one year.
- A differential diagnosis is important to rule out cancer recurrence, DVT, infection etc. before lymphedema treatment begins.



About the lymphedema program at BHC

- Patients are seen for an initial assessment and to determine how many appointments will be required before they can manage their care independently at home.
- Patients return for 3, 6 and 12 month follow ups.
 - Help and advice is available as needed.
- Referral forms and all our information can be found on our website: www.wrha.mb.ca/bhc



If patients are not able to visit the Breast Health Centre...

- Access Telehealth for appointments
- Brandon RHA – Rehab department
 - 1 Lymphedema therapist that treats ALL forms of lymphedema
 - Lymphedema therapy provided at no cost to patients
- Private Certified Lymphedema Therapists throughout Manitoba
 - Patients pay for lymphedema therapy and supplies
 - May be covered through extended health benefit plans



If patients are not able to visit the Breast Health Centre...

- Some health care professionals are trained in the Coban compression wrapping method
- Pneumatic compression pumps



In summary

- Lymphedema
 - can not be prevented or cured
 - can develop at any time
- Early diagnosis/treatment is vital
- Patients need to watch for signs and symptoms
- Lymphedema is treatable and manageable



Questions?

