



# Breast Cancer Patient Education: Secondary Lymphedema Key Messages for Health Professionals<sup>1</sup>

Following treatment for breast cancer, patients may experience major, long-lasting complications related to upper extremity function. Secondary lymphedema is one of the most feared and difficult complications that can develop during treatment or many years, even decades, later. It can cause discomfort, functional limitations, disfigurement, psychological distress, and an elevated risk of recurrent infections resulting in a significant negative effect on quality of life.

With early detection and effective treatment, secondary lymphedema can be reversed or, in the later stages, stabilized and maintained.

A Canadian study (2005)<sup>2</sup> found that breast cancer patients feel that they do not receive sufficient information about the risk of this condition.

## THE EVIDENCE: SECONDARY LYMPHEDEMA RISK REDUCTION

Recent evidence suggests that the incidence of secondary lymphedema related to breast cancer can be reduced with the following measures:

- Pre-operative patient education to raise awareness about secondary lymphedema
- A pre-operative baseline assessment of the patient's upper extremity girth and shoulder function by a certified lymphedema physiotherapist, with post-operative monitoring
- Patient education on self-care risk reduction strategies
- Regular and moderate exercise during and after breast cancer treatment
- Avoidance of using the affected side for injections, blood work or blood pressure monitoring in an effort to reduce the risk of constriction and infection. If bilateral surgery has been done, consult the medical team in advance about using a lower limb for injections etc.

1 Based on the evidence-based findings of the Lymphedema: Take Control project.

2 Thomas-MacLean R, Miedema B, Tatemichi SR. Breast cancer-related lymphedema: women's experiences with an underestimated condition. Canadian Family Physician 2005; 51:246-7



# THE KEY MESSAGES: SECONDARY LYMPHEDEMA RISK REDUCTION

- Enable informed decision-making. Inform your patients about the risk and incidence of secondary lymphedema related to breast cancer. Axillary node dissection and radiation therapy continue to be significant risk factors for secondary lymphedema. Although the incidence rates are lower with sentinel node biopsy it remains a risk factor in the development of secondary lymphedema.
- An ounce of prevention is worth a pound of cure. Encourage your patients to have a pre-op assessment with a certified lymphedema physiotherapist. This provides baseline upper extremity measurements of girth and range of motion, allowing the patient to be monitored post-operatively.
- The earlier the diagnosis the better the prognosis. Encourage your patients to take control of their health and well-being by learning about the early signs and symptoms of secondary lymphedema while adopting - and maintaining - some simple lymphedema risk reduction strategies.
- Inform your patients about the role of regular moderate exercise in secondary lymphedema risk reduction. Encourage your patients to:
  - Do deep breathing and gentle arm stretching of the affected side(s) at home each day for the first two weeks after surgery, as this helps to improve shoulder range of motion and to reduce the risk of secondary lymphedema
  - Seek the advice of a certified lymphedema physiotherapist for monitoring of secondary lymphedema and assistance with regaining shoulder range of motion and functional recovery
  - Use and exercise the treated side but not to overload it (e.g. avoid carrying a heavy purse, shopping bags or suitcase on the affected side)
  - Get physically active and maintain a healthy body weight for life  
High BMI = 25+ in people under 60 years and 27+ in people over 60

Effective patient education on secondary lymphedema risk reduction and management is a shared responsibility. Take the opportunity to raise awareness about secondary lymphedema by empowering your patients to take control of their health and well-being.

LYMPHEDEMA

