Lymphedema is the abnormal collection of protein rich fluid in the interstitial spaces due to a defect in the lymphatic system vessel tumor or cyst condition. It usually predisposes patients to chronic life long condition. Patients state there is a lack of understanding of Lymphedema by health care professionals, leading to delayed diagnosis and possible delay in treatment. Patients often state that traditional worship groups used in the treatment phase of Lymphedema were often bulky and restrictive. This often prompted non compliance and lack of commitment to treatment. This delay further impacts the patient’s quality of life.

- Lymphedema is the abnormal collection of protein rich fluid in the interstitial spaces due to a defect in the lymphatic drainage system. It usually predisposes patients to chronic edema, infections, cellulitis and lymphangitis.
- Two classifications: Primary lymphedema, which is due to abnormalities in the lymphatic system and Secondary lymphedema, which is due to an acquired dysfunction of a normal lymphatic system.
- Lymphedema is a progressive, deforming condition that is both physically and psychologically debilitating. Changes in physical appearance and function can lead to physical, psychological, social, spiritual and emotional quality of life issues.

**INTRODUCTION**

<table>
<thead>
<tr>
<th>Patient #1: Lymphangiomatosis</th>
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</thead>
<tbody>
<tr>
<td>Lymphatic system vessel tumor or cyst condition</td>
</tr>
<tr>
<td>26 year-old male with extensive lymphatic malformation involving the left leg, retro peritoneum, penis, scrotum, flank and leg</td>
</tr>
<tr>
<td>Age of onset was 17</td>
</tr>
<tr>
<td>He had persistent swelling of the left leg, scrotum, and abdomen with drainage from lymphatic varices in the groin and scrotal region</td>
</tr>
<tr>
<td>Used abdominal pads and adult pull ups to absorb the drainage</td>
</tr>
<tr>
<td>Traditionally used compression shorts and thigh high stockings</td>
</tr>
<tr>
<td>Recurrent cellulitis</td>
</tr>
<tr>
<td>Difficult ambulating as his scrotum had enlarged to the point that he had to physically carry and support it when walking</td>
</tr>
</tbody>
</table>

**METHOD**

- After acute cellulitis had settled, approximately 4 days into antibiotic treatment, started scrotal wrapping with 2 layer cohesive compression bandage (light version)
- Wrapped only scrotum and flank for the first 2 days. Calcium alginate to absorb lymphatic fluid
- Scrotal bandage changed daily
- On day 3, both scrotum and left leg (irregular version on the leg) were wrapped
- Nutritional consult. Patient started on a high protein diet to aid with absorption

**RESULTS**

- 48 hours after wrapping, noted reduction in the size of scrotum
- Cyst stopped draining
- No longer required the pull ups or abdominal pads
- Patient’s mobility improved
- Difficult to track measurements as no universal standardization in measuring scrotum. Relied on photos and patients account of improvement
- Patient fitted for compression biker shorts and class 3 compression thigh high stocking
- Patient taught self bandaging and encouraged to use calcium alginate if any drainage developed
- To be followed by long term community health nurse, wound care team and nutritionist

**Patient #2: Breast edema**

<table>
<thead>
<tr>
<th>52 year old female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ductal cancer right breast</td>
</tr>
</tbody>
</table>
- Partial mastectomy right breast with sentinel node biopsy |
- Treated with adjuvant chemotherapy and radiation therapy |
- Developed post radiation Lymphedema of right breast

**METHOD**

- Treated with 3 weeks of manual lymph drainage and 2 layer cohesive compression bandage (light version)

**RESULTS**

- Patient was agreeable to treatment plan
- Patient verbalized the 2 layer cohesive compression bandage was comfortable and non restrictive
- Continued her activities of daily living during treatment phase
- Redness decreased, breast tissue softened, fibrosis broken down
- Some changes in breast were post radiation skin changes that were permanent
- Fitted with a compression bra for daily compression and sports bra and supportive bra for maintenance
- Difficult to track measurements as no universal standardization in measuring breast. Relied on photos and patients account of improvement

**CONCLUSION**

- Both patients noted an improvement in the overall appearance of the affected areas following the removal of the 2 layer compression bandage
- Both patients stated decreased heaviness of the affected area
- Both patients stated the 2 layer compression bandages were comfortable
- Cellulitis was decreased, fibrosis decreased, skin color improved
- Patients stated their quality of life improved, i.e. improved independence in management and confidence in the appearance

**CHALLENGE**

- Need for universal tool for measuring scrotum and breast

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**IMPROVING QUALITY OF LIFE**

**Patients living with both Primary and Secondary Lymphedema**

**Dr. H. Bliss Murphy, Eastern Health Cancer Centre, NL**

**JEAN ANN RYAN RBN BN CDT**

**LYMPHEDema**

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