

## **LYMPHEDEMA**

#### What to look for

See your doctor if you have:

- Swelling in the arm or hand
- Feeling of tightness, heaviness or fullness in the arm or hand (you may notice rings or watches feel tight)
- Feeling of tightness in the skin or a thickening of the skin
- Pain or redness in the arm or hand

When caught early, treatment can reduce some signs and symptoms and stop them from getting worse.

## **Emotional** support

Lymphedema may

impact your daily life and emotional well-being. Getting support can help. You may want to connect with others in a support group or consider one-on-one counseling. Our Patient Care Center (1-877-465-6636) can provide you with support and resources. Our Support section also has information on ways to get social support.

### Lymph and lymph nodes

Lymph is a milky fluid that contains white blood cells. Lymph from tissues and organs drains into lymph vessels that run through the body. These vessels carry the lymph to the lymph nodes where it's filtered. Lymph nodes are found throughout the body. The lymph nodes under the arm are called axillary lymph nodes. These may be removed during breast cancer surgery to check for cancer cells.

### What is lymphedema?

When axillary lymph nodes are removed or treated with radiation, lymph vessels can become blocked. This may keep lymph fluid from leaving the area, which can cause swelling known as lymphedema. The fluid can build up in the arm or other areas such as the hand, chest or back causing them to swell.

To see a 3D interactive model of lymphedema in the arm, please visit the Lymphedema page on komen.org.

Lymphedema can occur soon after surgery or years after treatment.



Image courtesy of Stanley G. Rockson, MD, Allan and Tina Neill Professor of Lymphatic Research and Medicine, Stanford School of Medicine.

The most common way to check for lymphedema is for your doctor to measure your upper and lower arm widths. This should be done before surgery to compare with measures done later. Some studies show checking for it within the first 3 months after surgery may lead to earlier diagnosis.

#### Who's at risk?

Modern surgery removes fewer axillary lymph nodes than it used to, so, lymphedema is less common now. And the cases that do occur are less severe in terms of the impact on arm movement and the way the arm looks.

It's not clear why some people get lymphedema and others don't. Things that increase risk include:

- Having axillary lymph nodes removed (the more nodes removed, the greater the risk)
- Radiation to the axillary lymph node area
- Having axillary lymph nodes removed plus radiation to the axillary lymph node area
- Having many axillary lymph nodes with cancer
- Infections in the area after breast surgery
- Being overweight

This fact sheet is intended to be a brief overview. For more information, visit komen.org or call Susan G. Komen's Breast Care Helpline at 1-877 GO KOMEN (1-877-465-6636) Monday through Friday, 9 a.m. to 10 p.m. ET, or email at helpline@komen.org. Se habla español.



## **LYMPHEDEMA**

#### Resources

Susan G. Komen®

1-877 GO KOMEN (1-877-465-6636) komen.org

Lymphatic Education & Research Network

516-625-9675

lymphaticnetwork.org

National Lymphedema Network

1-800-541-3259 lymphnet.org

## Related online resources

- Questions to Ask Your Doctor: Lymphedema
- Axillary Lymph Nodes
- Breast Cancer Surgery
- Support After a Breast Cancer Diagnosis

# Treatments for lymphedema

For many, lymphedema will not go away completely. Treatment can improve movement and reduce pain and swelling though.

Standard treatment includes complex decongestive therapy. This approach aims to decrease swelling and infection through a mix of:

- Skin and nail care
- Compression bandages or sleeves (these apply pressure around the arm and help push lymph fluid out of the arm)
- Exercises (like closing and opening a fist)
- Manual lymphatic drainage (a special type of massage)
- Physical therapy

Other treatments may include:

- Exercise (such as moderate weightlifting)
- Use of a compression device (a pump connected to a sleeve that inflates and deflates to apply pressure to the arm)
- Surgery

Before doing any of these, talk with your doctor. You might also want to check your insurance plan to see if these treatments are covered.



# Tips that may reduce your risk

While we don't know how to prevent lymphedema, injury or infection to the arm may trigger it. Try to take steps to reduce your risk. The tips below haven't been proven in studies, but they may work for some people.

- Contact your doctor to treat infections of the at-risk arm and hand right away.
- Wear gloves when doing house or garden work.
- Keep skin clean and moisturized.
- Avoid sunburn and excess heat from saunas, hot baths, tanning and other sources.
- Don't cut your nail cuticles. Use a cuticle stick to push your cuticles back when they're soft (such as after a bath).
- Use insect spray when outdoors.
- Avoid injuries, scratches and bruises to the at-risk arm.

This content provided by Susan G. Komen® is designed for educational purposes only and is not exhaustive. Please consult with your personal physician.