

Lymphedema

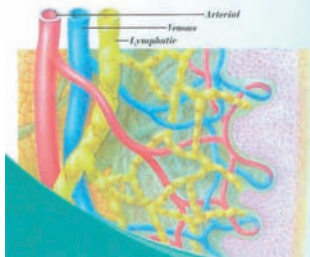
By Mary Weinstein, CFA

The National Lymphedema Network defines Lymphedema as “an accumulation of lymphatic fluid in the interstitial tissue that causes swelling, most often in the arms, legs, or both.”

Lymphedema can develop when lymphatic vessels are missing or impaired or when lymph vessels are damaged or lymph nodes are removed.

When the impairment becomes so great that the lymphatic fluid exceeds the lymphatic transport capacity, an abnormal amount of protein fluid collects in the tissues of the affected area.

Should this be left untreated, this stagnant, protein-rich fluid not only causes tissue channels to increase in size and number, but also reduces oxygen availability in the transport system, interferes with wound healing and provides a culture medium for bacteria that can result in lymphangitis (infections).



Primary Lymphedema

Primary lymphedema can affect from one to as many as four limbs, can be present at birth, develop at the onset of puberty or adulthood from all unknown causes, or associated with vascular anomalies such as hemangioma and lymphangioma.

Secondary Lymphedema

Secondary lymphedema, or acquired lymphedema, can develop as a result of surgery, radiation, infection, or trauma. Specific surgeries, such as surgery for melanoma or breast, gynecological, head and neck, prostate or testicular, bladder or colon cancer, all of which currently require removal of the lymph nodes, put patients at risk of developing secondary lymphedema. If lymph nodes are removed, there is always a risk of developing lymphedema. Secondary lymphedema can develop immediately post-operatively or weeks, months, even years later. It can also develop when chemotherapy is wisely administered to the already affected area often after repeated aspirations of a seroma in the axilla, around the breast incision, or groin area. This often causes infection and subsequently lymphedema.

Aircraft flight has also been linked to the onset of lymphedema in patients' post-cancer surgery.

Tip of the Month

“Understand the difference between EDEMA and LYMPHEDEMA”

Signs and symptoms of Lymphedema

Stage 1 (spontaneously reversible)

- ✓ skin feeling tight
- ✓ decrease in flexibility in hand, ankle, wrist
- ✓ difficulty fitting into clothing
- ✓ ring or wrist watch tightness
- ✓ tissue “pitting” (tissue indents and holds indentation)
- ✓ upon waking in the morning, limbs appear almost normal in size

Stage 2 (spontaneously irreversible)

- ✓ tissue has a spongy consistency and is non-pitting
- ✓ fibrosis found in stage 2
- ✓ hardening of the limbs and increase in size

Stage 3 (lymphostatic elephantiasis)

- ✓ at this stage, swelling is irreversible and usually the limbs are very large
- ✓ tissue is hard, fibrotic and unresponsive.
- ✓ when lymphedema remains untreated, protein-rich fluid continues to accumulate, leading to an increase of swelling and a hardening of fibrosis of the tissue.
- ✓ lymphangitis (Infection)

Signs & symptoms

- ✓ rash, red blotchy skin, itching of the affected area, discoloration, increase of swelling and/or temperature of the skin, heavy sensation in the limb, pain, and in many cases sudden onset of high fever and chills.
- ✓ the antibiotics of choice for these types of lymphatic infections are those in the penicillin family.

Note: always carry antibiotics or a prescription with you when traveling.

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