

# Steps to Prevent Lower Extremity Lymphedema

## – Who is at Risk?

At risk is anyone who has had gynecological, melanoma, prostate, kidney, bladder or colon cancer in combination with inguinal node dissection and, often, radiation therapy. Lymphedema can occur immediately postoperatively, within a few months, a couple years or several years after cancer therapy.

With proper education and care, lymphedema can be avoided or, if it develops, kept under control.

---

*The following instructions should be reviewed carefully pre-operatively and discussed with your physician or lymphedema specialist.*

---

1. Absolutely do not ignore any slight increase of swelling in the toes, foot, ankle, leg, abdomen or genitals (*consult your physician immediately*).
2. Never allow an injection, IV or a blood drawing in the affected leg(s). Wear a lymphedema alert necklace (*call 1-800-541-3259 for information*).
3. Keep the “at risk” leg spotlessly clean. Use lotion (*Eucerin or Lymphoderm*) after bathing. Thoroughly dry, gently, any creases and between the toes.
4. Avoid vigorous, repetitive movements against resistance with the affected leg.
5. Do not wear socks, stockings or undergarments with tight elastic bands.
6. Avoid extreme temperature changes when bathing, washing dishes (no sauna or hot tub). Protect the leg from the sun.
7. Avoid any type of trauma (*bruising, cuts, sunburn or other burns, sports injuries, insect bites, cat scratches*).
8. When manicuring your nails, avoid cutting your cuticles. Inform your pedicurist to use only sterilized equipment and your own nail polish.
9. Exercise is important, but consult your lymphedema specialist. Do not overtire a leg at risk. If it starts to ache, lie down, elevate it and apply a gradient compression stocking if you have one. *Recommended exercise – swimming, water aerobics, cycling, walking, light floor aerobics and yoga*
10. When travelling by air, patients with lymphedema, or those at risk, should wear a gradient compression stocking. Additional gradient bandaging may be necessary on a long flight. Always increase your water intake when travelling.

11. Use an electric razor to remove hair making sure it is maintained properly and has newly replaced heads.
12. Patients with lymphedema should wear a well-fitted gradient compression stocking during all waking hours. At least every 4-6 months, see your lymphedema specialist for follow-up care. If the stocking is too loose, either the leg has reduced or the stocking is no longer viable and must be replaced.
13. **WARNING** – if you notice a rash, itching, redness, pain, increase of temperature or fever, consult your physician immediately. These might be signs of an impending infection and could be the beginning or worsening of lymphedema.
14. Maintain your ideal weight with a well-balanced, low sodium, high fiber diet. Avoid smoking and alcohol. Your diet should contain easily digested protein such as fish, poultry or tofu.  
Lymphedema is a high-protein edema but eating too little protein will not reduce the protein element in the lymph fluid. Rather, this may weaken the connective tissue and worsen the condition.
15. Always wear closed toe shoes ( high tops or well-fitted boots) - *no sandals, slippers, or going barefoot.*
16. See a podiatrist once a year to check and treat for fungus, ingrown toenails, calluses, pressure areas, athlete's foot.
17. Wear clean socks & hosiery at all times
18. Use talcum powder on feet, especially if you perspire a great deal. Be sure to wear rubber gloves when pulling on stockings. Talcum behind the knee often helps to prevent rubbing and irritation.

***Prevention is not a cure. If you are a cancer and/or lymphedema patient, it is important that you stay in control of your ongoing cancer & lymphedema checkups and continued maintenance.***