

Steps to Prevent Upper Extremity Lymphedema

– Who is at Risk?

At risk is anyone who has had either a simple mastectomy, lumpectomy or modified radical mastectomy in combination with axillary 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 well 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 arm, hand, fingers, neck or chest wall. *(consult your physician immediately)*
2. Never allow an injection, IV or a blood drawing in the affected arm(s). Wear a lymphedema Alert bracelet *(call 1-800-541-3259 for information)*
3. Have blood pressure checked on the unaffected arm, or on the leg *(thigh)* if both are affected.
4. Keep the “at risk” arm spotlessly clean. Use lotion *(Eucerin or Lymphoderm)* after bathing. Thoroughly dry, gently, all creases and between fingers.
5. Avoid vigorous, repetitive movements against resistance with the affected arm, eg *(scrubbing, pushing, pulling)*
6. Avoid heavy lifting with the affected arm. Never carry heavy handbags or bags with over-the-shoulder straps.
7. Do not wear tight jewelry or elastic bands around affected finger, wrist or arm
8. Avoid extreme temperature changes when bathing, washing dishes (no sauna or hot tub). Protect the arm from the sun.
9. Avoid any type of trauma *(bruising, cuts, sunburn or other burns, sports injuries, insect bites, cat scratches)*
10. Wear gloves while doing housework, gardening or any type of work that could result in even a minor injury
11. When manicuring your nails, avoid cutting your cuticles. Inform your manicurist

to use only sterilized equipment and your own polish.

12. Exercise is important, but consult your lymphedema specialist. Do not overtire an arm at risk. If it starts to ache, lie down, elevate it and apply a gradient compression sleeve if you have one. *Recommended exercise – swimming, water aerobics, cycling, walking, light floor aerobics and yoga*
13. When travelling by air, patients with lymphedema, or those at risk, should wear a gradient compression sleeve. Additional gradient bandaging may be necessary on a long flight. Always increase your water intake when travelling.
14. Patients with large breasts should wear a lighter breast prosthesis so as not to put too much pressure on the lymph nodes above the collar bone. Soft padded shoulder straps may be needed to avoid added pressure on the shoulders. Wear a well-fitting bra, one that is comfortable and supportive.
15. Use an electric razor to remove hair making sure it is maintained properly and has newly replaced heads.
16. Patients with lymphedema should wear a well-fitted gradient compression sleeve during all waking hours. At least every 4-6 months, see your lymphedema specialist for follow-up care. If the sleeve is too loose, either the arm has reduced or the sleeve is no longer viable and must be replaced.
17. **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.
18. 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.

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.