

FAQs for Those at Risk of Lymphedema

Do I need to be fitted for a compression garment? Not unless you have signs of active lymphedema. You will be referred to a specialist for proper fitting and recommendations.

Is it safe to have my blood pressure taken on the same side that I had a lumpectomy or mastectomy?

Yes. While many patients feel more comfortable having their blood pressure taken on the non-affected limb, this is not necessary. It is also not necessary to have blood pressure taken manually.

Is it safe to get a flu shot or have blood taken on the same side as my lumpectomy or mastectomy? Yes. Sterile needle sticks are safe. While many patients feel more comfortable on the non-surgical arm, this is not necessary.

Do I need to wear a compression garment when exercising, walking the dog, gardening, or going to the grocery store?

No. Start exercising slowly as directed by your medical team, who will provide appropriate post-surgical recommendations. Then, progress slowly with all physical activity including exercises such as lifting weights or activities such as house or yard work in the first few months after surgery. It is not necessary to avoid physical tasks. It is recommended to progress your time, intensity and duration of physical activity in moderation and strive to reach a lifestyle of consistent exercise to reduce your risk of lymphedema throughout your lifetime. If you notice symptoms, contact your medical team.

FAQs for Those at Risk of Lymphedema (continued)

Is it safe to fly in an airplane or take a roadtrip? Yes. It is strongly recommended that you get help when carrying heavy bags, lifting baggage overhead and performing new or more challenging tasks to avoid trauma to your arm. Use wheeled luggage and check your bags when you are able.

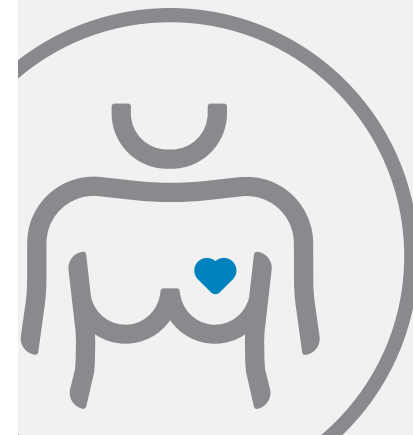
Do I need to wear a compression garment when flying or on road trips?

No. During travel it is important to keep active and maintain good posture to assist the lymphatic system. Keep your lymphatic system active by making a fist or pumping your hands while elevated above the heart. Take your arms through their full range of motion and take walks in the airport or at rest stops as you are able.

These recommendations are based on the latest clinical evidence in 2021. Our goal is to provide you the best clinical care and lifestyle recommendations to reduce your risk of lymphedema while participating in the activities you enjoy. While these recommendations may differ from things you may have heard in the past, many of those represent general opinions that have been proven untrue with modern science. Anyone affected by breast cancer in their lifetime (current or past) should follow the latest evidence based recommendations.



Breast Cancer Related Lymphedema



Breast Cancer Related Lymphedema

The lymphatic nodes in the axilla (armpit) drain the breast tissue. It is common for some of these nodes to be removed during surgery to check for cancer cells. Checking lymph nodes helps your medical team appropriately stage and treat your cancer.



Removal of these lymph nodes (**shown in green**) combined with common treatments such as radiation and chemotherapy can affect the normal flow of the lymphatic system.

The lymphatic system stimulates the immune response and carries waste from your body through vessels and nodes alongside nerves and blood vessels.

There are **500-700** lymph nodes in your body and between **30-50** in each axilla/armpit region. When the lymphatic system is damaged, lymphatic fluid can build up in the regions near the affected part of the system. This most often develops in the arm and hand but also may be present in the breast or trunk of the body.

Who is at risk?

Anyone who has had a mastectomy or lumpectomy in combination with axillary lymph node surgery, such as a sentinel node biopsy or axillary dissection is at risk. Treatments such as radiation therapy also increase your risk. Other risk factors include Taxane based chemotherapy (Taxol, Taxotere), symptomatic seromas and multiple breast surgeries. More lymph nodes removed in combination with increased trauma to the axilla increases your overall risk of lymphedema.

Some modifiable risk factors increase your risk of lymphedema such as obesity, smoking, sedentary behavior and poor shoulder range of motion. Lifestyle changes are beneficial to reduce your overall risk of lymphedema and these benefits extend throughout your lifetime.

Your risk is **1-2%** with sentinel node biopsy and **10-30%** with axillary node dissection plus/minus radiation.

Lymphedema can occur immediately after surgery, within a few months or years, or sometimes many years after cancer therapy. The highest risk is in the first 3 years, but the overall risk is lifelong.



Even though you may be at risk, there are many prevention strategies that help to reduce your chances of getting lymphedema.

- Keep your skin, nails and cuticles clean and moisturized to avoid skin cracking.
- Try to avoid cuts and scrapes in the affected limb by wearing long sleeves or gloves while doing activities such as yardwork. Use antibiotic cream and cover any open wounds with a Band-Aid to reduce the risk of infection.
- Wear SPF 30 sunscreen daily.
- Exercise: Incorporate mobility exercises, strengthening and cardiovascular exercises into your life.
 - Good posture, strong muscles and mobility improves lymphatic flow.
 - Slow and progressive strengthening exercises have been shown to reduce your risk of lymphedema.
 - Ask for a referral to physical or occupational therapy if you have reduced arm range of motion which can reduce lymphatic flow.
- Achieve or maintain a healthy body weight and body composition levels.
- Reduce or eliminate smoking (tobacco and vaping).
- Contact your surgeon or oncologist immediately if you have unusual swelling, pain, heaviness, or tightness in your clothes or jewelry.