

Position Statement of the National Lymphedema Network

By: NLN Medical Advisory Committee

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TOPIC: Summary of Lymphedema Risk Reduction Practices

Please refer to the complete Risk Reduction document for details.

I. Skin Care - Avoid trauma / injury to reduce infection risk

- · Keep extremity clean and dry.
- Apply moisturizer daily to prevent chapping/chafing of skin.
- Attention to nail care; do not cut cuticles.
- Protect exposed skin with sunscreen and insect repellent.
- · Use care with razors to avoid nicks and skin irritation.
- If possible, avoid punctures such as injections and blood draws.
- Wear gloves while doing activities that may cause skin injury (e.g. washing dishes, gardening, working with tools, using chemicals such as detergent).
- If scratches/punctures to skin occur, wash with soap and water, apply antibiotics, and observe for signs of infection (i.e. redness).
- If a rash, itching, redness, pain, increased skin temperature, increased swelling, fever or flu-like symptoms occur, contact your physician immediately for early treatment of possible infection.

II. Activity / Lifestyle

- Gradually build up the duration and intensity of any activity or exercise. Review the Exercise Position Paper.
- Take frequent rest periods during activity to allow for limb recovery.
- Monitor the extremity during and after activity for any change in size, shape, tissue, texture, soreness, heaviness or firmness.
- Maintain optimal weight. Obesity is known to be a major lymphedema risk factor.

III. Avoid Limb Constriction

- If possible, avoid having blood pressure taken on the at-risk extremity, especially repetitive pumping.
- · Wear non-constrictive jewelry and clothing.
- Avoid carrying a heavy bag or purse over the at risk or lymphedematous extremity.

IV. Compression Garments

- Should be well-fitting.
- Support the at-risk limb with a compression garment for strenuous activity (i.e. weight lifting, prolonged standing, and running) except in patients with open wounds or with poor circulation in the at-risk limb.
- Patients with lymphedema should consider wearing a well-fitting compression garment for air travel. The NLN cannot specifically recommend compression garments for prophylaxis in at-risk patients.

V. Extremes of Temperature

- Individuals should use common sense and proceed cautiously when using heat therapy. Observe if there is swelling in the at-risk limb or increased swelling in the lymphedematous limb and cease use of heat such as a hot tub or sauna.
- Avoid exposure to extreme cold, which can be associated with rebound swelling, or chapping of skin.
- Avoid prolonged (greater than 15 minutes) exposure to heat, particularly hot tubs and saunas.

VI. Additional Practices Specific to Lower Extremity Lymphedema

- Avoid prolonged standing, sitting or crossing legs to reduce stagnation of fluid in the dependent extremity.
- Wear proper, well-fitting footwear and hosiery.
- Support the at-risk limb with a compression garment for strenuous activity except in patients with open wounds or with poor circulation in the at-risk limb.

NOTE: Given that there is little evidence-based literature regarding many of these practices, the majority of the recommendations must at this time be based on the knowledge of pathophysiology and decades of clinical experience by experts in the field.

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