



today's webinar:

Reducing Fear  
Around Breast  
Cancer Related  
Lymphedema –  
Knowledge is Power!

welcome

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EDUCATION SERIES**

BREAST  CANCER  
**EDUCATION**  
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## our mission:

To educate the community by providing support and information about breast cancer detection, diagnosis, treatment and survivorship.



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OCTOBER 5, 2024



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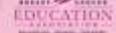


# Come join us!



**ENCOURAGE** detection **Educate** **CARE** COMFORT awareness  
Volunteer **ENGAGE** fight

# BCEA Honor Wall

<p>IN HONOR OF Teri Delebo</p>  	<p>IN HONOR OF Rauby Mariene Brown</p>  	<p>IN HONOR OF Barbara Kayall</p>  	<p>IN MEMORY OF Erin Remme</p>  	<p>IN HONOR OF Benita Robinson</p>  	<p>IN HONOR OF BCEA Volunteers</p>  	<p>IN HONOR OF Gaylynn Richards</p>  
<p>IN HONOR OF Kathy Klug</p> 	<p>IN HONOR OF Mallory Thomas</p> 	<p>IN MEMORY OF Mary Butterworth</p>  	<p>IN MEMORY OF Raleigh Kull</p>  	<p>IN MEMORY OF Jeanette Weber</p>  	<p>IN HONOR OF Nadia Janson</p>  	<p>IN MEMORY OF Lorraine Salomon</p>  
<p>IN HONOR OF Jan Marek</p>  	<p>IN HONOR OF Marie MinhHien Tran</p> 	<p>IN MEMORY OF Lisa Rosenthal</p>  	<p>IN MEMORY OF Mary Kay Ervin Talbot</p> 	<p>IN MEMORY OF Leslie Gottlieb</p>  	<p>IN HONOR OF Lois Joseph</p> 	<p>IN HONOR OF Ward Redman</p>  
<p>IN HONOR OF Nora Winther</p>  	<p>IN MEMORY OF Tanya Pekel</p> 	<p>IN MEMORY OF Judy Erdahl</p>  	<p>IN MEMORY OF Kim Cesarek</p>  	<p>IN MEMORY OF Kristina Ailara</p>  	<p>IN HONOR OF Ann Harris and Lois Joseph</p>  	<p>IN MEMORY OF Ivory Johnson</p>  
<p>IN HONOR OF Luella Williams</p>  	<p>IN MEMORY OF Evelyn, June, and Mary 3 Sisters from St. Pikel</p>  	<p>IN HONOR OF Robbie Langenfeld</p> 	<p>IN MEMORY OF Pam Jette</p>  	<p>IN MEMORY OF Rita Young</p>  	<p>IN MEMORY OF Christine Walthour</p>  	<p>IN MEMORY OF Deborah Ann Miller</p>  



SUPPORT  
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CELEBRATE  
*The survivors*

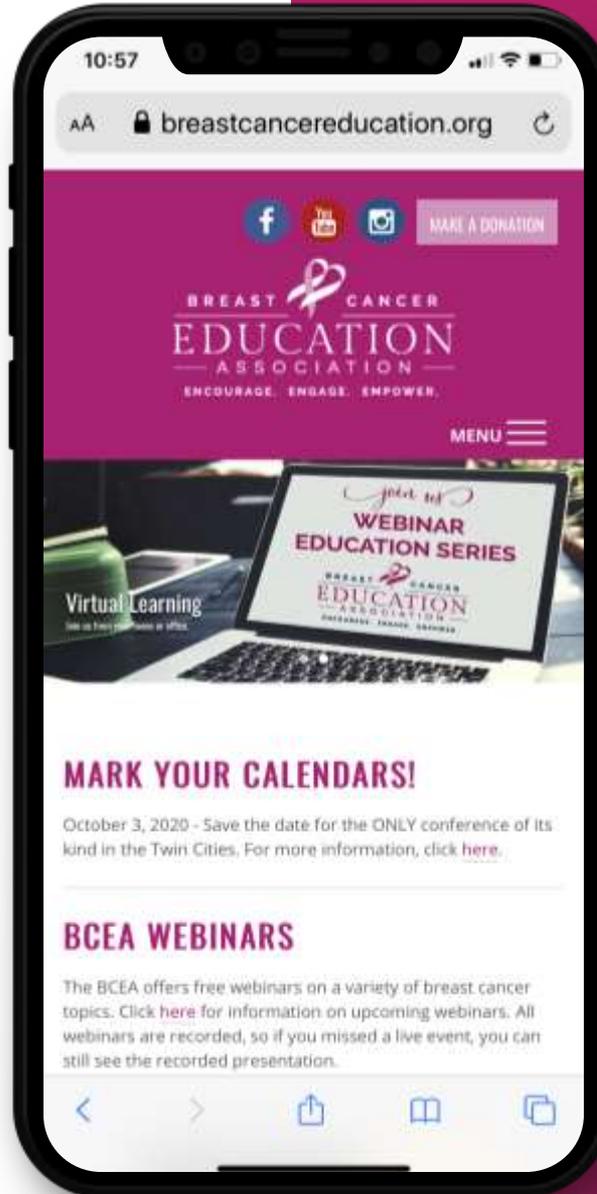
HONOR  
*The taken*



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For more information visit:  
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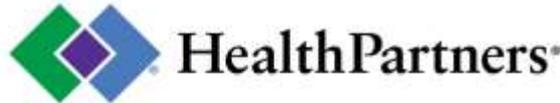
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## featured speaker

Ingrid Weddig, COTA/L, CLT, has been working in occupational therapy since 2000. In 2010, she started a scar management and breast cancer rehabilitation program. Her program involves assisting breast cancer patients with proper scar management techniques, swelling, range of motion, and eventually strengthening. She is also a certified Lymphedema therapist and can assist measuring patients for proper upper and lower extremity compression garments. Her goal is to assist breast cancer and lymphedema patients in making a full recovery.



The background of the slide features a blue-tinted image of a building facade. In the upper left, there is a large, stylized logo consisting of a circle with a vertical bar through it. To the right of this logo, the words "TWIN CITIES" and "ORTHOPEDICS" are written in a large, bold, sans-serif font, stacked vertically. The text is rendered in a lighter blue color, appearing to be part of the building's signage.

# TWIN CITIES ORTHOPEDICS

## **REDUCING FEAR AROUND BREAST CANCER RELATED LYMPHEDEMA. KNOWLEDGE IS POWER!**

Presented by: Ingrid Weddig COTA/L, CLT

4/23/2024



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## BREAST CANCER RELATED LYMPHEDEMA

- My history
- Learning Objectives:
  - Participant will understand what Lymphedema is and how the staging works.
  - Participant will have knowledge of how and when to contact a CLT for questions/concerns regarding Lymphedema
  - Participant will understand the treatment options that are available for Lymphedema.
  - Participant will learn how to access a local fitter for compression garments and understand the process.

# LYMPHEDEMA

Questions we will answer today:

- What is Lymphedema?
- Who is at risk?
- When is it likely to occur?
- Why does it happen?
- How do I reduce my risk?
- How is it treated?
- And other pearls.



# WHAT IS LYMPHEDEMA?

Lymphedema is a chronic condition that may occur after breast cancer surgery when 1 or more lymph nodes are removed. Lymphedema can occur months or years after treatment and has no cure, but steps can be taken to help keep it from starting and to reduce or relieve symptoms. Symptoms of lymphedema include swelling, aching, tingling, discomfort, fever, rash, tightness, and even profound swelling from the shoulder to the hand.

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# LYMPHEDEMA

Lymphedema is an abnormal accumulation of protein-rich fluid in the tissue which can result in large amounts of swelling of a body part and fibrosis (or hardening of the skin).

It only impacts the region of the body affected by the lymph nodes removal or damage.

Upper body for breast, head, and neck cancers.

Lower body for bladder, prostate, endometrial cancers (etc).

# LYMPHEDEMA

- How is Lymphedema Acquired and how rapidly does it occur at any time.
- Occurs most often within 3 years of a lymph node removal or damage BUT can occur at ANYTIME (usually after the 4-6 weeks of post surgical edema disappear). This is called Secondary lymphedema. Primary lymphedema is a condition one acquires at birth.
- Secondary lymphedema is most commonly reported in patients undergoing lymphadenectomy or radiation therapy for breast cancer. However, it may occur after any malignancy that affects lymphatic drainage.
- The overall risk after breast cancer is around 1 in 5 breast cancer survivors, can develop BrCA related lymphedema.
- Lymphedema usually occurs slowly and steadily.

# WHAT DOES THE LYMPHATIC SYSTEM DO?

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# WHAT DOES THE LYMPHATIC SYSTEM DO?

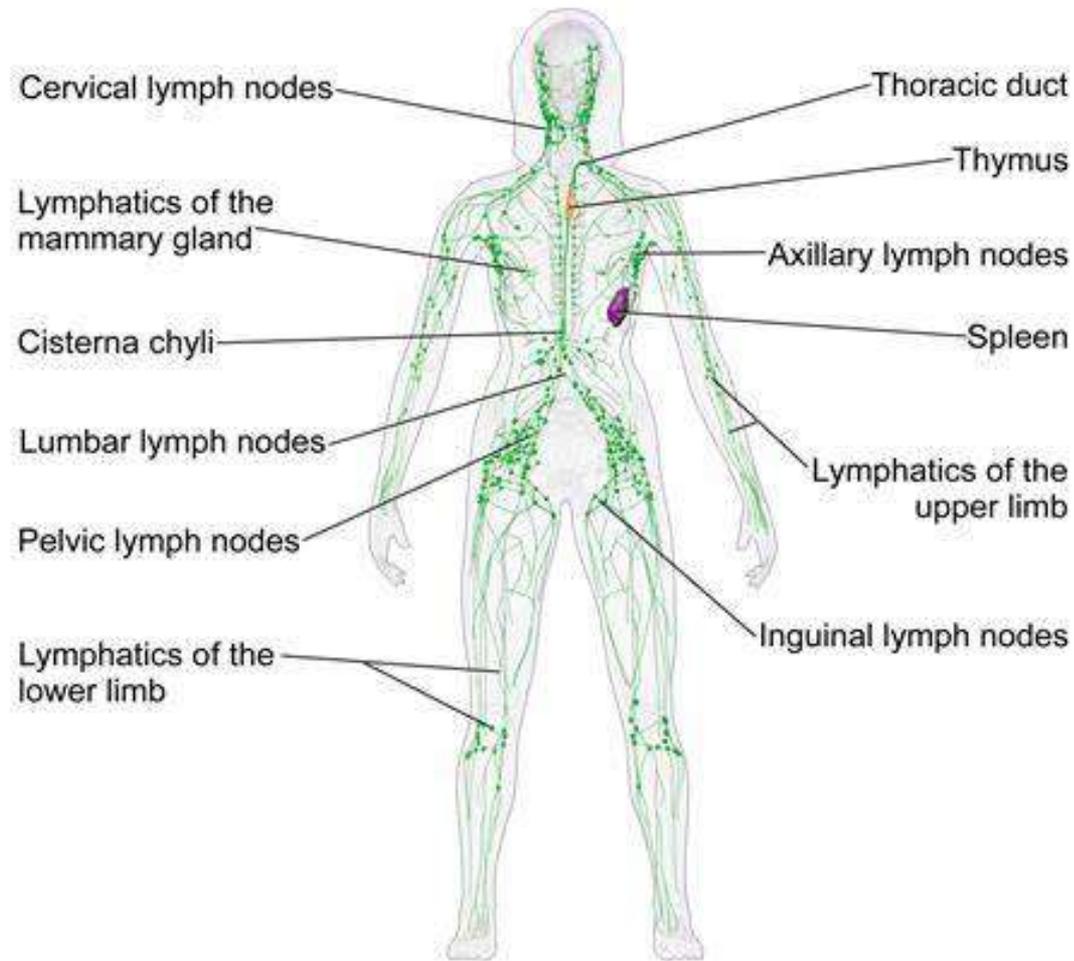
- Provides surveillance against cancer/infection (the garbage disposal of human body).
- Balances fluid and proteins in the circulatory system by transporting several liters of lymph fluid per day.
- Assists in fat digestion

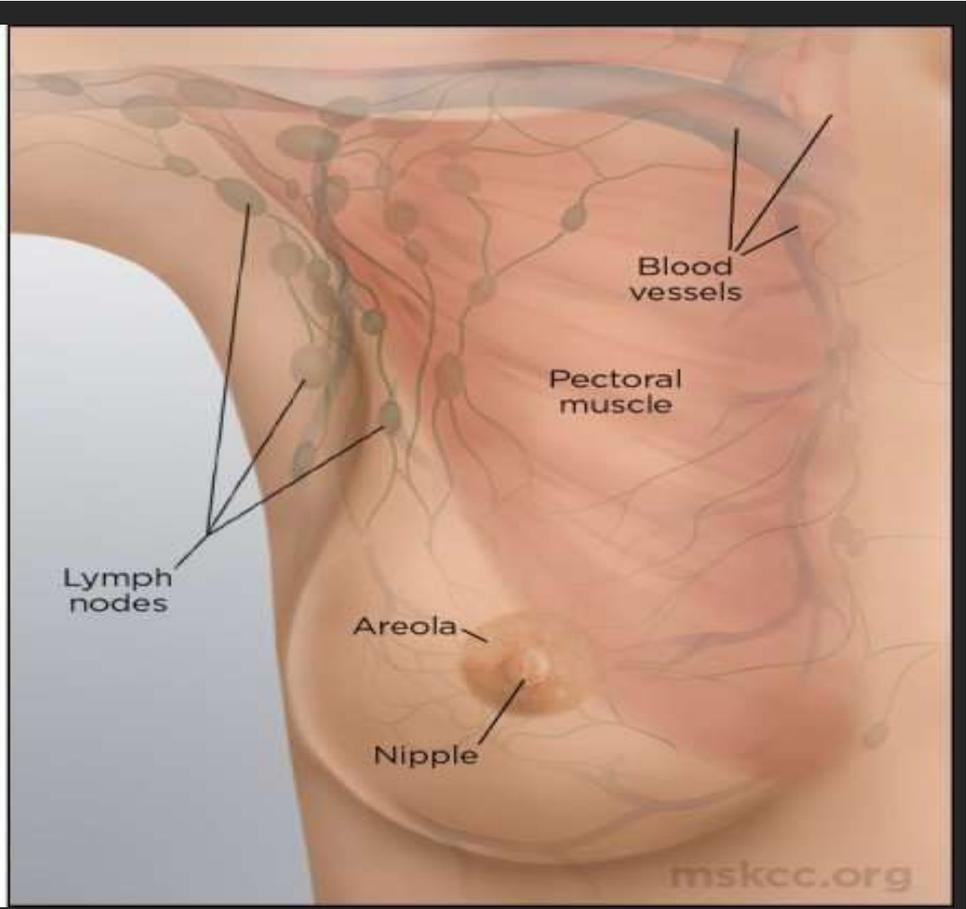
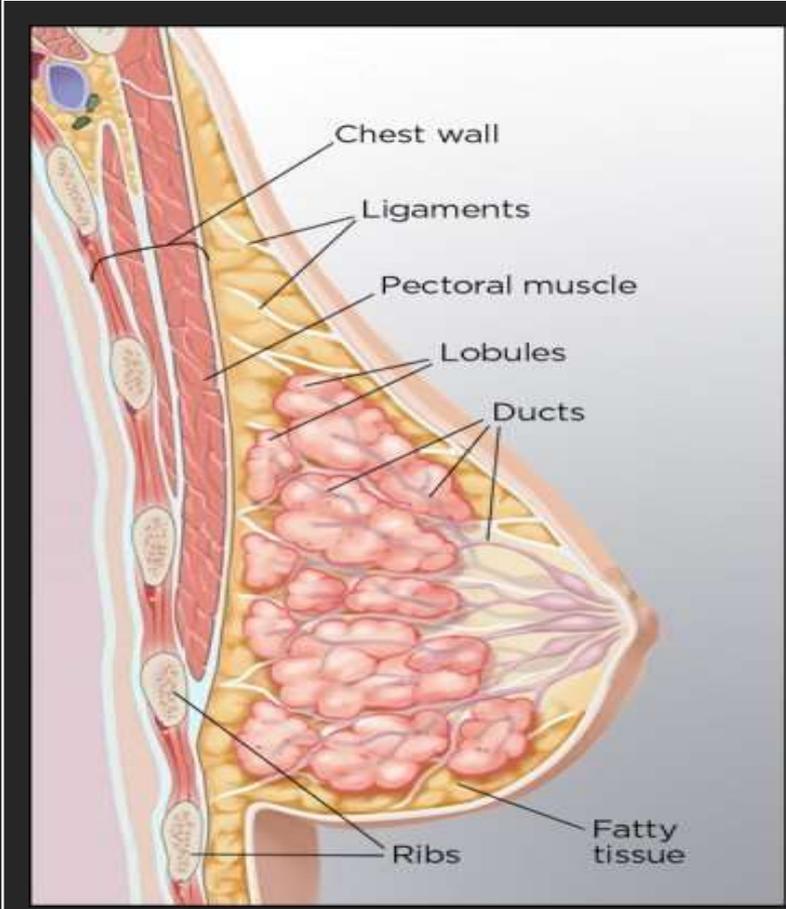
## ROLE OF THE LYMPHATIC SYSTEM:

- Transports proteins
- Removes excess water
- Absorbs fat molecules from the gut
- Removes cellular debris and foreign material (e.g. bacteria, viruses, cancer cells)

# LYMPHEDEMA

## The Lymphatic System





# **WHAT ARE THE CAUSES AND SYMPTOMS OF BREAST CANCER RELATED LYMPHEDEMA (BCRL)**

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## **What causes Breast Cancer Related Lymphedema?**

Lymphedema usually develops when lymph nodes or vessels are blocked, damaged, or removed. During breast cancer treatment a patient undergoes surgical procedures either a mastectomy or lumpectomy which may be combined with axillary lymph node dissection (ALND) or sentinel lymph node biopsy (SLNB) or dissection, radiation and chemotherapy.

The surgical procedures cause disruption of lymphatic flow whereas radiation treatment to axillary area, chest & breast causes scarring and blockage of lymph vessels as well as nodes. These changes increase the risk of BCRL. It can also be caused by spreading of breast cancer to axillary area and blocking the lymph nodes.

# BCRL BREAST CANCER RELATED LYMPHEDEMA

## What are the symptoms of Breast Cancer Related To Lymphedema (BCRL)?

- Feeling of fullness, heaviness or tightness in arm or armpit area. Pain / aching in the arm & shoulder region.
- Weakness in the arm on the side of surgery.
- Swelling of arm on the side where lymph nodes have been removed.
- Difficulty bending or moving joints such as the fingers, wrist, elbow or shoulder.
- Swelling that is most commonly located in the affected breast, or chest wall, over the collarbone (area of neck), underarm, along scar lines.
- Swelling of the back usually appears as extra rolls of fat/skin along the sides of breasts, fullness over the shoulder blades and fullness across the waistline on the affected side.
- If breast reconstruction has been done, the reconstructed breast appears too large, misshapen & uncomfortable during daily activities.
- Bra, clothing, jewelry & wrist watches don't fit as normal.
- Bra straps dig in shoulders or under breasts.
- Dryness or firmness of arm skin on affected side.

# STAGES OF LYMPHEDEMA

**Stage 0-Latent**, stable, nothing happening. Technically, once there is trauma or damage to lymph system and nodes are removed, one has lymphedema. It may increase or not.

## **Stage 1-** Spontaneously reversible

- At this stage, it is present during the day but goes away overnight.
- Pitting starts between stage 1 and 2 (pitting is when you push into the skin and it sinks, doesn't rise back up right away).

## **Stage 2-**Spontaneously irreversible.

- By this stage, it is still present after a night's rest, even if improved.

## **Stage 3:** Lymphostatic Elephantiasis

- Rare occurrence in cancer ( more in cardia/venous issues).

*Stage 1*



*Stage 2*

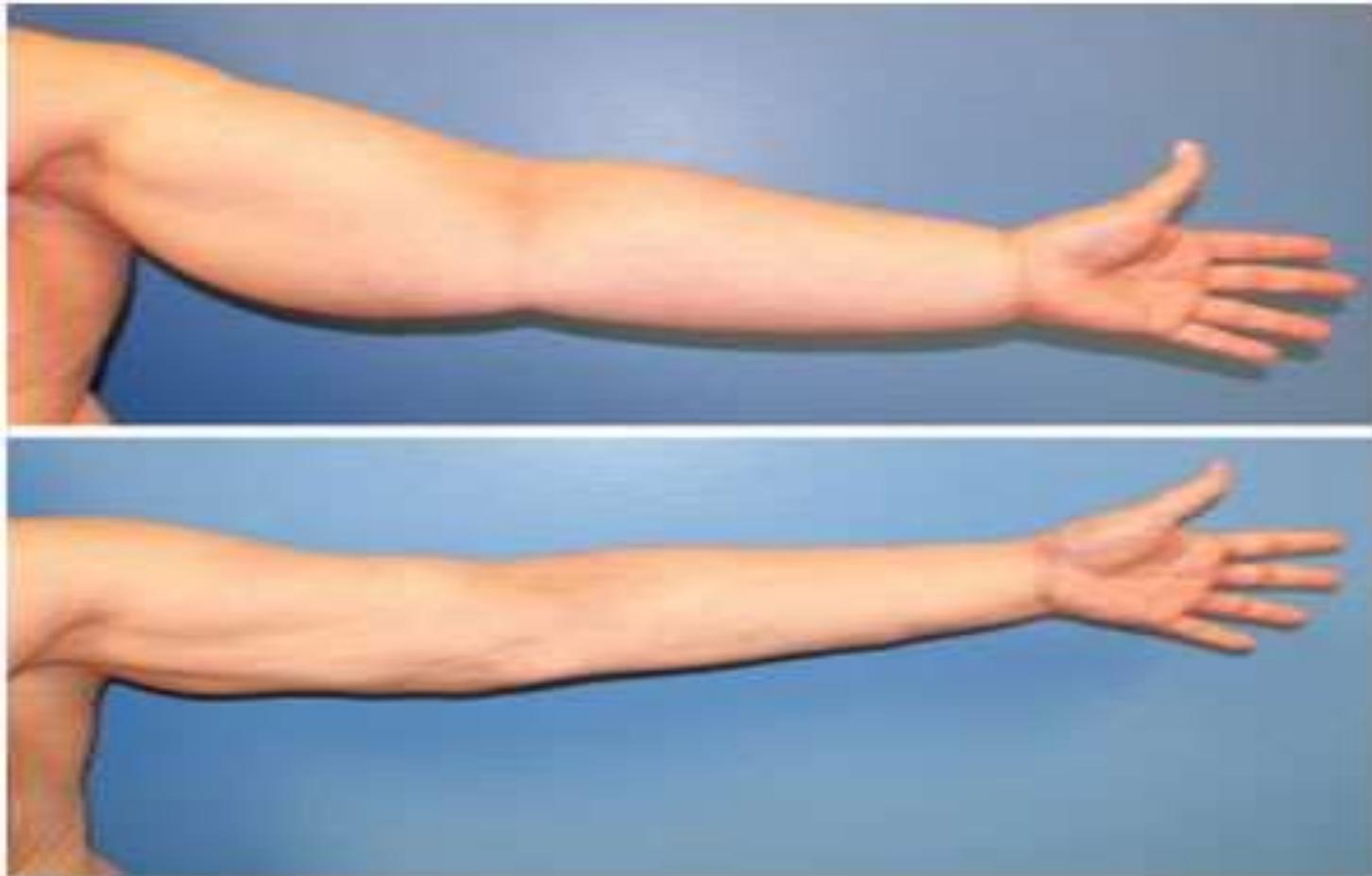


*Stage 3*



*Stage 4*





# WHAT CHANGES OCCUR WITH AN ALTERED LYMPH SYSTEM?

1. Excess Protein in the tissues
2. Accumulation of excess fluid in the limb
3. Decreased oxygenation
4. Slow tissue-healing time
5. Formation of fibrosis (hardening of the skin).



## HOW DOES LYMPHEDEMA FEEL?

Tightness or a heavy sensation in the limb

Achy

Pins and needles

Tenderness in the elbow

Not “unbearable” pain.

Not muscle soreness

# HOW DO I GET AN ORDER FOR LYMPHEDEMA THERAPY?

- If one of your MDs has not already given you an order for lymphedema therapy, even if you haven't had any issues, but you want a consult for education, **ask!**
- **Any** of your treating MD/PA/CNP can write an order for therapy. IF it was up to me, I would want every patient at the time of diagnosis get an order so you can be seen PRIOR to your surgeries or radiation. It is really helpful to have Pre therapy for education and baselines.
- At TCO those orders can be faxed to: 952-456-7928 or emailed to: [LymphScarTherapyScheduling@TCOmn.com](mailto:LymphScarTherapyScheduling@TCOmn.com)
- That is for any TCO location! Our patient service specialists will call once the order comes in to schedule you at your desired location, day, and time.

# WHAT DO LYMPHEDEMA THERAPISTS DO AT AN APPT?

- An evaluation may look like the following:
  1. A detailed history of each patient's cancer journey so we can come up with the best, individualized program.
  2. Measurements will be taken of each arm to get a baseline, chest, and truncal region just in case we need to track any increases in swelling.
  3. An assessment will be next for scars. Where are they and are they interfering with any lymphatic drainage of the arms, chest, and trunk.
  4. A range of motion assessment to the arms, shoulders, neck, and trunk. Exercise programs will be made based off these results.
  5. Skin assessment and any lymphedema treatments if necessary.
  6. Set up a schedule of future appointments.



## EDUCATION COMPONENTS FROM A LYMPHEDEMA THERAPIST.

# HOW CAN YOU REDUCE YOUR RISK OF DEVELOPING/WORSENING LYMPHEDEMA ?

- Lymphedema risk-reduction practices include:
  1. Skin care
  2. Activity and lifestyle
  3. Avoiding limb constriction
  4. Compression garments (if appropriate)
  5. Avoiding extremes of temperature



# SKIN CARE

- Avoid trauma/injury and reduce risk of infection.
- Keep the arm clean and dry
- Apply moisturizer daily to prevent chapping and chafing of skin
- Give 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 (shave arm pit or legs with electric razor).
- Wear gloves while doing activities that may cause skin injury
- If scratches /punctures to skin occur, wash with soap and water, apply antibiotics, and observe for signs of infection.
- If a rash, itching, redness, pain, increased skin temperature and swelling, fever, or flu-like symptoms occur, contact your physician immediately.

## ACTIVITY AND LIFESTYLE

- Maintain a healthy weight
- Monitor the limb during an activity or exercise and after for any changes in size, shape, tissue texture, soreness, heaviness, or firmness.
- Build up slowly the duration and intensity of any activity or exercise.
- Take frequent breaks during an activity or exercise routine to allow the leg or arm to recover.
- Researched goal is light cardio i.e.: walking or biking 3-5 days/week and light resistance training 2 days/week.
- There is a lot of research around a light program during chemo reducing the side effects by 35% and long term survival reducing pain and increasing quality of life.

# EXTREMES OF TEMPERATURE

- Avoid exposure to the extreme cold-which can be associated with rebound swelling or chaffing of skin
- Avoid prolonged (>15 min) exposure to heat, particularly hot tubs and saunas. If one has a stage 2-3 of lymphedema, I will even say avoid these two situations all together.
- Pools on the other hand are WONDERFUL for the lymphedema patient, as the heat is lower, and the pool provides natural compression and thus will naturally reduce swelling.
- Avoid immersing limb in water temperatures above 102 degrees.

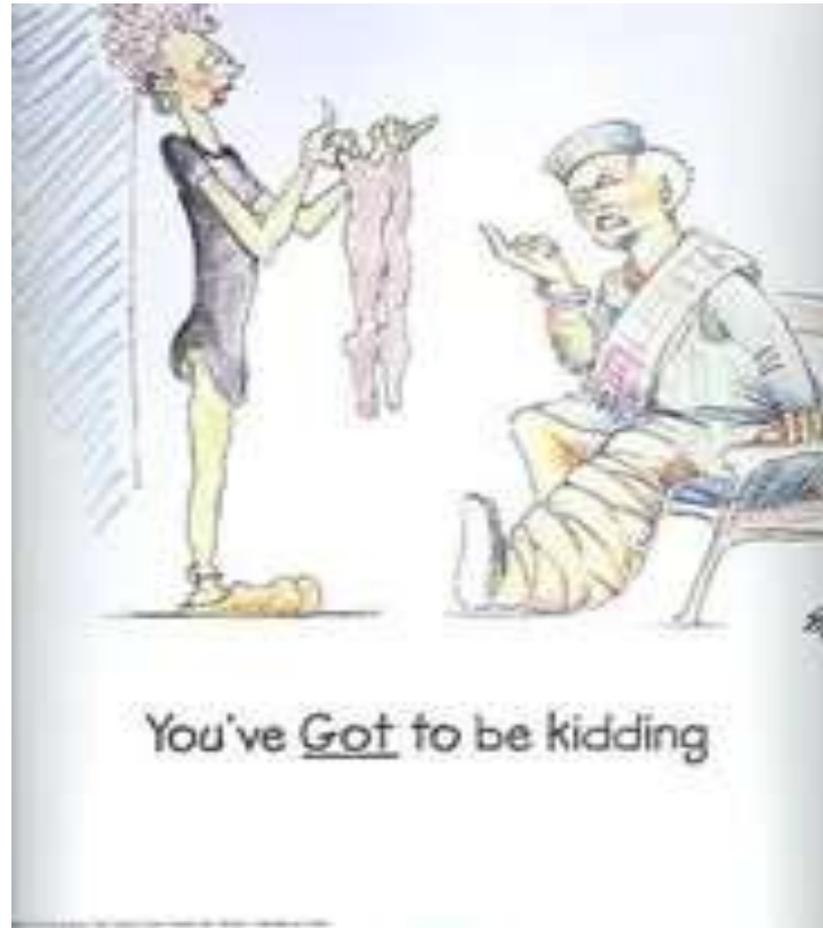
## **AVOID LIMB CONSTRICTION**

- If possible, never have your blood pressure taken on the arm at risk.
- Also avoid any vaccines, injections, shots, and IVs be taken from that arm.
- Wear loose fitting clothing and jewelry

# COMPRESSION GARMENTS

- Should be well-fitting.
- Wear compression always on a flight. Even if the lymphedema is at a stage 0.
- Support the affected limb during strenuous activity (e.g. weight lifting and outdoor tasks).

# COMPRESSION GARMENT HUMOR





## WHAT CAN YOU DO IF YOU DEVELOP LYMPHEDEMA?

- Get evaluated by your MD or a CLT (certified lymphedema therapist).
- Early treatment results in faster response to treatment, which decreases the length of therapy and can keep the lymphedema from staging up.
- It is important to find a CLT right when you start your cancer treatments if lymph nodes have been removed. They can get baseline measurements which can establish a plan of care. Then if lymphedema ever sets in, you have a starting point.



# WHAT DOES THERAPY CONSIST OF?

- Complete Decongestive therapy (CDT) is effective for lymphedema and other swelling disorders.

There are two phases:

## 1. Decongestion:

Meticulous skin care  
Manual lymph drainage  
Gradient compression bandaging  
Exercises  
Compression garments

## PHASE 2: MAINTENANCE

- Meticulous skin care
- Day: Compression garment
- Night: Gradient compression bandaging
- Self-manual lymph drainage
- Exercises
- Follow- up assessment with CLT

# MANUAL LYMPH DRAINAGE

- "stretching of the skin"
- Drains the congested areas
- Reduces the risk of infection
- Normalizes the size and pressure in  
The limb.
- Reduces pain/discomfort



# COMPRESSION THERAPY

Gradient compression  
Bandaging:

1. Decreases the filtration rate.
2. Prevents re-accumulation.
3. Softens fibrosis
4. Provides external counter-pressure during exercise.



*Fig. 3. Multilayered compression bandaging.*

# GARMENT MEASURING

- ARM (in inches and cm)
- Wrist circumference
- Forearm circumference
- Upper arm circumference

All garments have a chart usually of how to measure.

I always find a fitter in town to do the session and find the most appropriate garments, as they work with insurance companies. You will need an MD order for this.

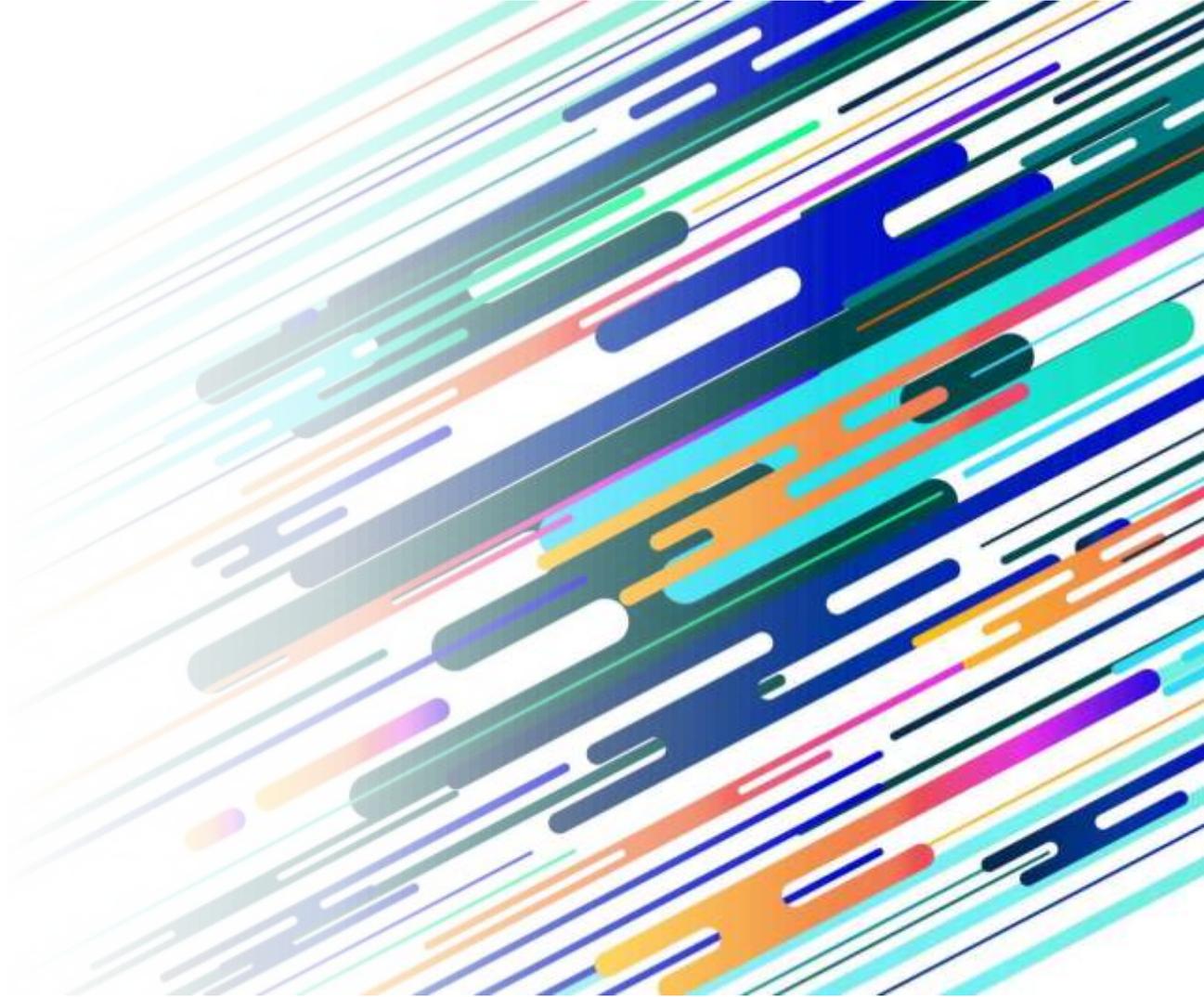


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## LYMPHEDEMA EXERCISES

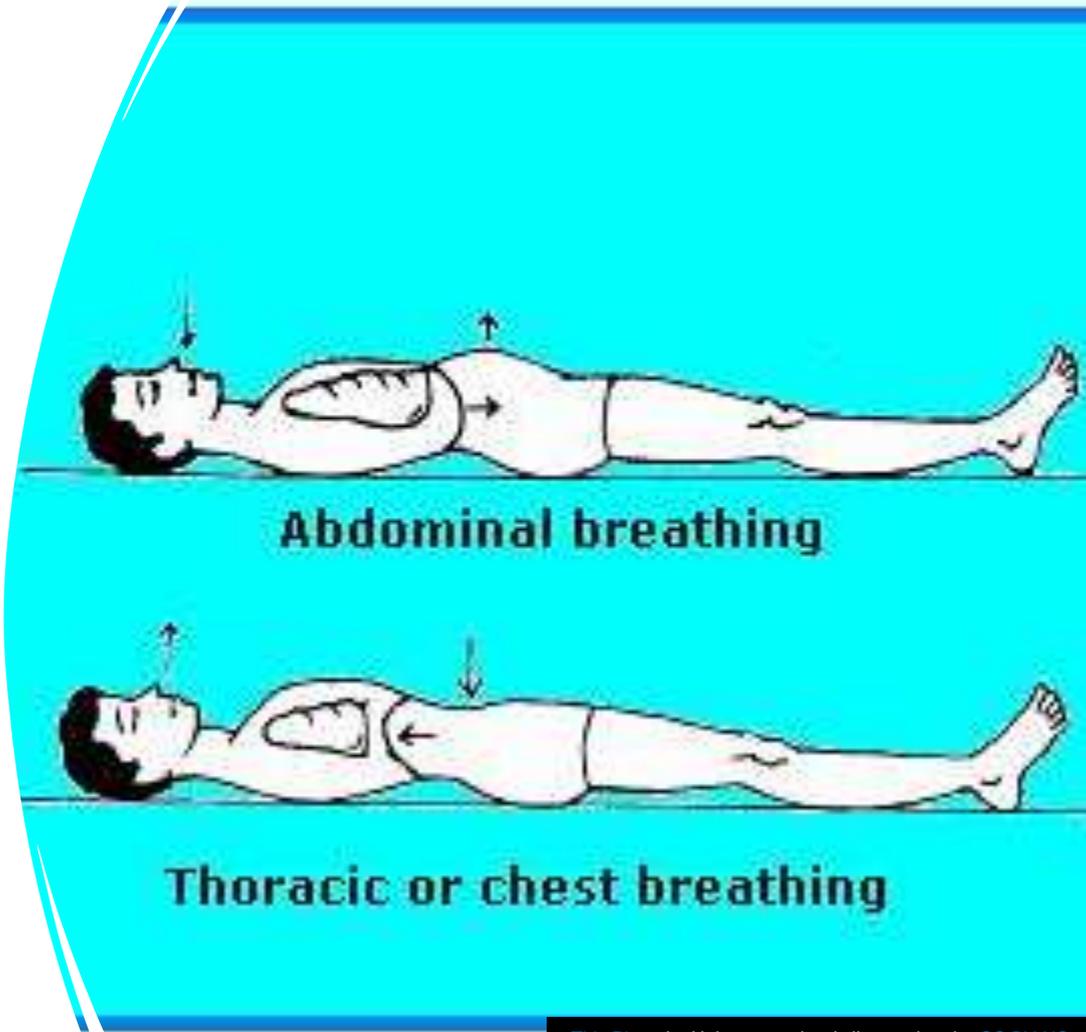
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- They improve range of motion, endurance, coordination, and strength, where possible. Exercise and manual therapy will provide the best results when completed together.
- Swimming, yoga, Tai Chi, Chi kung



# DIAPHRAGMATIC BREATHING

- Abdominal breathing  
Stimulates the transport of Lymph back to the heart  
Through the thoracic duct.
- Hand on belly, deep breathe  
In while the tummy pushes  
Your hand up. Blow air out sucking  
Tummy in.



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# 6 THINGS YOU MAY NOT KNOW ABOUT LYMPHEDEMA

**1** Lymphedema is chronic swelling caused by a build-up of fluid that occurs when the lymphatic system is either faulty or damaged.

Collapsed vessels blocking the normal flow of lymphatic fluid

**3** Most physicians in the United States are taught about the lymphatic system for 1 hour or less during their 4 years of medical school training.

**4** There is no known cure for lymphedema, but it can be effectively treated. Compression therapy is the most critical component of treatment. Without it, patients are at increased risk for complications and disability.

**5** Medicare, and many private insurance policies do NOT cover compression garments, wraps, or bandages — the supplies needed for compression therapy.

**6** The Lymphedema Treatment Act is a bill, currently in Congress, that aims to improve insurance coverage for compression supplies, allowing lymphedema patients to maintain a healthy and productive life.

**2** An estimated 3-5 million Americans suffer from lymphedema — including many that are undiagnosed or undertreated.

That is more than 40.8. Cancer, Fibrosis, Multiple Sclerosis, Muscular Dystrophy, and Parkinson's Disease combined!



40.8 million Americans suffer from lymphedema!

Swollen tissue due to buildup of lymphatic fluid

## Causes of Lymphatic Dysfunction

- A. Lymph node removal for cancer treatment
- B. Injury to lymphatic vessels due to trauma or infection
- C. Venous insufficiency, causing overload of lymphatic vessels
- D. Congenital malformation of lymphatics



Visit our website to learn more about lymphedema and how to support this bill.

[LymphedemaTreatmentAct.org](http://LymphedemaTreatmentAct.org)

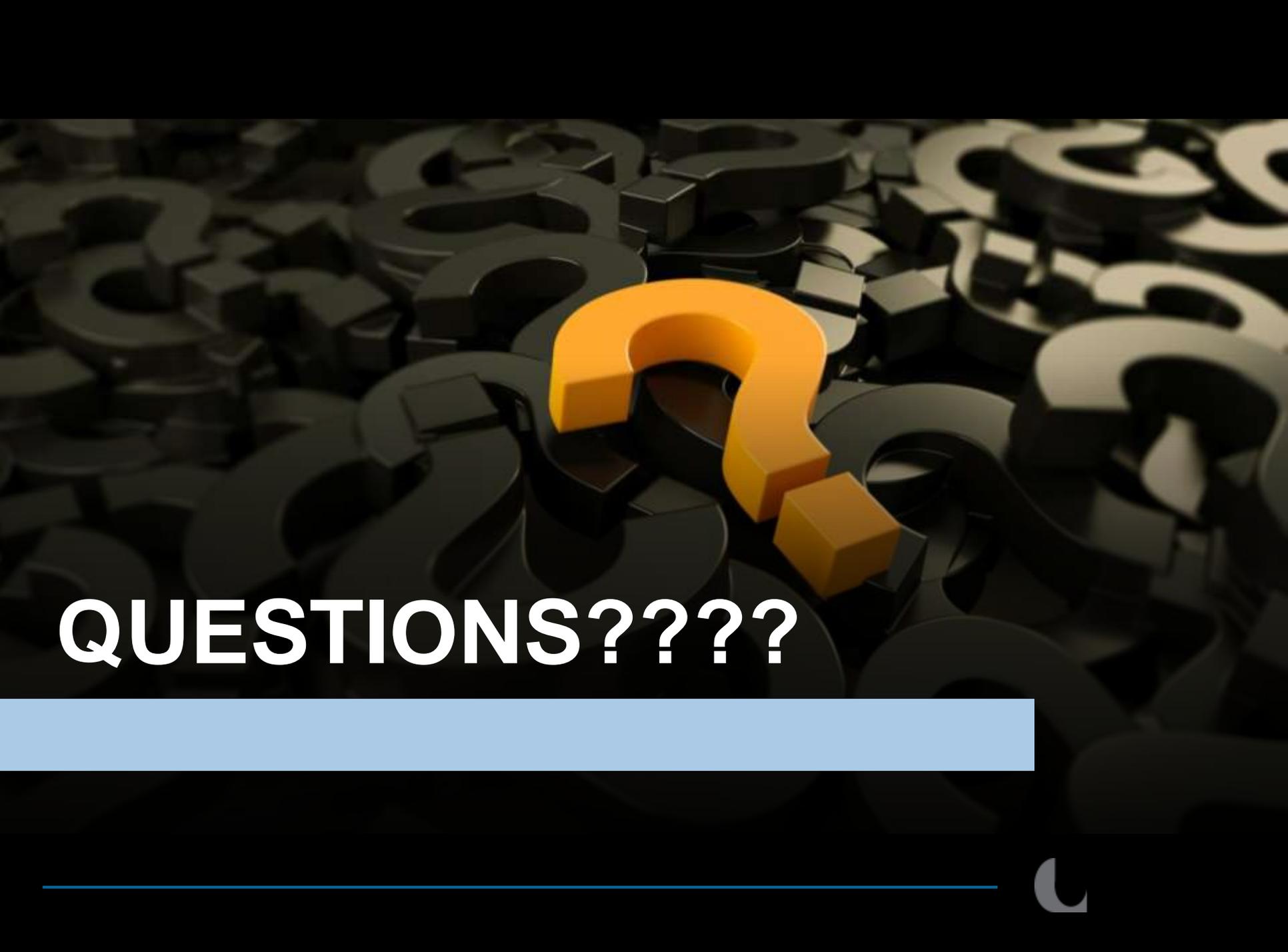
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## IN CONCLUSION

- General education of lymphedema gives one knowledge and not fear.
- If you or someone you know is diagnosed with cancer and has lymph nodes removed, please pass them along the info to find a lymphedema therapist (CLT). Then they can get on the right track right away. Many of times lymphedema increases because the MD and or the patient don't have any knowledge of lymphedema and too much time passes. We are trying to do better, so we can get the proper word out.
- [Ingrid Weddig COTA/L,CLT](#)
- [Ingridweddig@tcomn.com](mailto:Ingridweddig@tcomn.com)

## TWIN CITIES ORTHOPEDIC LYMPHEDEMA THERAPISTS AND LOCATIONS.

- **Please call 763-302-2570 or have an order for OT/PT faxed to: 952-456-7928 or email: [LymphScarTherapyScheduling@TCOmn.com](mailto:LymphScarTherapyScheduling@TCOmn.com)**
- Ingrid Weddig, COTA/L, CLT (Blaine, Brooklyn Park)
- Renata Braudy, PT ,MSPT, MA, OCS, CLT, PhD (Edina MN Drive)
- Amanda Tschida-Schirmers, OTR/L, CHT, CLT (Blaine)
- Sue Anderson, OTR/L, CHT, CLT (Eagan)
- Danni Stark, MSOT, OTR/L, CLT (Stillwater)
- Melissa Olson, OTR/L, CHT, CLT (Coon Rapids)
- Anna Morrison, OTR/L, CLT (Maple Grove)
- Kim Gustafson, OTD, OTR/L, CHT, CLT (Edina Crosstown)
- Mary Beth Schiffer, OTR/L, CLT (Edina Crosstown)
- Michele Jacobson, MS, OTR/L, CHT, CLT (Burnsville)
- Jennifer Brion, MOT, OTR/L, CLT (Edina -iHealth Pelvic Health Therapy location)
- Jordan Mills, OTD, OTR/L, CLT (Brooklyn Park, Plymouth)



**QUESTIONS????**



## LOOKING FOR MORE INFORMATION

- National lymphedema network  
[www.lymphnet.org](http://www.lymphnet.org)

American Cancer Society

[www.cancer.org](http://www.cancer.org)

[LymphedemaTreatmentAct.org](http://LymphedemaTreatmentAct.org)

thank you!

Thank you Ingrid Weddig  
and you for joining us today!

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webinars on our website. Please  
share with your family & friends.

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