Treatment Protocols for Lymphedema
Non-operative Treatments

The Role of Education in the Treatment Phase of Lymphedema Therapy

By,
Dr. Madeline Chatlain, OTR/L, CLT-LANA

For Submission to the
American Society of Lymphology
Consensus Document for the Diagnosis & Treatment of Lymphedema
2007 Conference, Kansas City, Missouri
Conventional Treatment with Complete Decongestive Therapy

The trend in the incidence of lymphedema is on the rise, yet so are the treatment options and educational materials available for both the clinician and the patient in prevention and treatment of lymphedema. When prevention fails, the gold standard for treating lymphedema is complete decongestive therapy (CDT). This four prong approach involves manual lymphatic drainage, application of short stretch compression bandages, lymphedema exercises and the instruction of skin protection techniques.

The Role of Education in Treatment with Complete Decongestive Therapy

One of the most overlooked aspects of CDT is the educational aspect: lymphedema is not a condition that resolves itself spontaneously or disappears following successful initial treatment; it is a lifelong process that must be treated aggressively, monitored and respected throughout one’s lifetime. I propose that we abandon the term ‘skin protection techniques’ in favor of the more all-encompassing term ‘education’. Teaching the patient skin protection techniques is far too narrow in scope to be of any practical benefit for the lymphedema patient. Our patients live in the real world, and require education in multifaceted aspects of their lives. Lymphedema education for our patients should begin the day they walk in through our door and should, in effect, never end.

Medical Model in Patient Education

As therapists, we should be preparing our patients for discharge with their initial evaluation. A synthesis of the medical model (also known as the bottom- up approach) and the client-centered model (also known as the top-down approach) is the best approach in achieving long term success with our patients. By providing a baseline understanding of the physiology and pathophysiology of lymphedema we are able to
communicate more effectively with our patients. When our patients understand the basic principles underlying their treatment protocol he or she is better able to grasp the seriousness of the condition which leads to improved compliancy. Additionally, secondary psychological benefits are derived from this education: now the patient has a feeling of mastery and control of their condition. No longer are they a passive ‘patient’ but they are an active ‘participant’ sharing an active and vital role in how they manage their lymphedema in their lifetime.

*The Top Down Approach in Lymphedema Education*

Before we can educate our lymphedema patients in effective strategies in dealing with important aspects of their daily lives, we first need to discover what occupations are important to them. There are various methods we can employ to assess our patients: ranging from in-depth standardized assessments to semi-structured interviews. Regardless of the choice of approach, once we have ascertained what occupations are important to our clients, we are able to integrate this information into each treatment session. The sooner the client’s wishes are known, the sooner the therapist can evaluate, plan and intervene with the lymphedema patient in a more focused and effective approach.

*Synthesis of Educational Approaches in Lymphedema*

In summation, to date, no formalized treatment plan exists for the lymphedema therapist to follow that encourages an integrated bottom-up/top-down model of educating the lymphedema patient during the treatment phase. It is incumbent on us, as health care providers to provide our patients not only with the most up-to-date medical information but to do so *in context* with our patients occupations.