BREAST OEDEMA

Breast swelling following treatment for breast cancer

This fact sheet gives information about swelling (oedema) of the breast following breast cancer treatment. It explains why breast oedema develops, how it is recognised and gives information on how it can be managed.

Although some swelling is normal after surgery, this usually disappears after a few weeks. Sometimes, the swelling can be more persistent. It may affect the breast, if you have not had a mastectomy, or any area on the affected side of the body such as the armpit (axilla), chest wall or back and this is sometimes called trunk oedema. Breast and trunk oedema can develop with or without arm swelling.

Any type of persistent swelling (often called lymphoedema) is due to an imbalance between the amount of fluid that moves into the tissues of the body from the blood, and the ability of the lymphatic system to freely drain this away. Swelling can be triggered by surgery or radiotherapy that affects the lymphatic drainage pathways.

It is thought that some people may be more ‘at risk’ of breast and trunk oedema if they have:

- Removal of lymph nodes from the armpit (axillary node dissection)
- Radiotherapy to the breast
- A bra cup size of ‘C’ or more
- Lack of support to the breast so it hangs down, allowing fluid to collect
- A collection of fluid (seroma) that requires drainage after surgery
- Wound infections after surgery
- A high body mass index (i.e. being overweight)
- A tendency to retain fluid (e.g. puffy ankles)
How do I know if I have breast or trunk oedema?
You may notice that your breast feels heavier or hard (fibrotic) in places and the skin can feel warm to the touch. You may see indentations on your skin from your bra or clothing and your breast may look different in colour or shape. The area may already feel sensitive or numb due to the effect of surgery on the nerves. If there is swelling in the breast or trunk, this can cause other changes in sensation, discomfort or pain. Arm lymphoedema can be measured but breast and trunk oedema are often harder to detect and may not be easily recognised.

Your feelings about breast oedema
It is important to remember that breast and trunk oedema can be improved and may resolve completely in some cases. However, some people with swelling of the breast feel anxious, depressed, frustrated or worried that their cancer has returned. Breast or trunk oedema can affect your quality of life and may cause discomfort or prevent certain activities. You may feel embarrassed or self-conscious about having close contact with others, or it may affect your sex life, especially if the swollen area is uncomfortable.

Support from family members, partners and friends is important, and it can help to share your thoughts and worries with those close to you. Health care professionals such as your breast care nurse and lymphoedema practitioner can also offer support and advice, or if you are feeling very low or depressed you may wish to talk to a trained counsellor. Starting treatment, and learning about the different ways of managing the swelling, can often help you to feel more in control of the situation and help you feel more positive.

What can I do if I have breast swelling?
Early treatment is recommended to help prevent hardening of the tissues and can reduce the risk of infection (cellulitis).

If you think you have breast oedema, consult your GP or breast care nurse and ask them to refer you as soon as possible to a lymphoedema clinic. It is important to exclude other factors such as infection that can also cause swelling. If infection is present in the swollen breast, you may need immediate antibiotic treatment.

For more information see the LSN fact sheet ‘What is cellulitis?’

How is breast oedema managed?
Breast oedema can be successfully managed using a combination of approaches. You may require treatment such as Manual Lymphatic Drainage (MLD) massage from a lymphoedema practitioner who is suitably qualified. A lymphoedema practitioner will also give you advice on what you can do to improve the swelling yourself, such as:

■ Taking care of your skin
■ Wearing a well-fitting bra or compression body garment that supports the breast
Taking regular exercise
- Doing regular self-massage similar to manual lymphatic drainage
- Trying to reduce your weight, if necessary, as weight loss can improve lymphoedema in some people

Skin care
Keeping the skin in good condition is very important. Carefully wash and moisturise the area daily. You should use a soap-substitute such as aqueous cream if the skin is very dry. Always gently pat dry rather than rubbing over the swollen area and apply a bland moisturiser after washing.
If you are having radiotherapy, follow the skin care advice from your radiotherapy department.

For more detailed information see the LSN fact sheet ‘Skin Care For People With Lymphoedema’.

Compression garments and/or bra
You may feel reluctant to wear a bra or compression garment if the area is sensitive or sore. However, a well-fitting bra is very important in supporting the swollen area and allowing the fluid to drain out of the breast. You should make sure that the chest measurement and the cup size are correct and a wider shoulder strap is recommended. Your breast care nurse may be able to help with bra fitting, or give you contact details of specialist bra fitting services, which are not always available in large department stores.

Your lymphoedema practitioner may provide you with a compression vest or bra (sometimes custom-made) and may advise you to wear this garment (or a sleep bra) at night to stop the fluid accumulating. If you gain or lose weight, you may need to be refitted with a new bra.

If the breast tissues have become hard, your lymphoedema practitioner may provide you with small foam pads to insert in your bra to provide a massaging effect that can help to soften these areas.

Exercise and movement
Research has shown the good effects of exercise and movement following breast cancer treatment. Swimming is particularly helpful for people with breast and trunk oedema as it encourages lymph drainage and also helps to improve shoulder movement. Indeed, any exercise in the water will help even if you cannot swim.

The exercises that you were given after surgery can be continued and you should try to use your arm and shoulder as normally as possible. Ask your lymphoedema practitioner or physiotherapist for further advice on appropriate exercise.

For more information see the LSN fact sheet ‘Recreational Exercise With Lymphoedema’.
Manual Lymphatic Drainage (MLD) massage and self-massage
This is one of the main treatments for breast and trunk oedema and is used to reduce swelling and soften the tissues. It is a very gentle form of massage that allows fluid to be redirected towards healthy areas. Treatment starts on the healthy unaffected areas and then includes the swollen area, always massaging towards the unaffected side.

A lymphoedema therapist who is trained in MLD (such as the Vodder, Casley-Smith, Földi and LeDuc methods) can provide treatments. You can also ask them to teach you self-massage techniques that you can use each day, perhaps with help from a family member, carer or friend. Many people find that regular self-massage can help to control breast oedema very well.

MLD treatment is usually given regularly (sometimes daily) over a 2–3 week period and may be repeated at intervals. Some NHS lymphoedema clinics provide MLD treatment and it is also available from private MLD therapists in some areas.

If you experience difficulties in accessing an MLD therapist, contact the LSN for more information.

Kinesio tape
A tape that was originally used for sports injuries is sometimes used for breast and trunk oedema. Although there has been no published research into this treatment, it is proving successful for many people with lymphoedema. The tape is similar to a lightweight sticking plaster but is cut and applied in ways that gently lift the skin and encourage fluid to move through the tissues, away from the swollen area. It is comfortable and can be left in place for several days, although a patch test should be carried out initially to ensure you are not allergic to the material. The tape is not available on prescription but may be available from your lymphoedema clinic.

Remember, early treatment is advised to help resolve breast oedema. Although breast oedema can be a problem for some people, it does respond well to treatment and can often be successfully managed using various self-help methods.

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LSN Trustees
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LYMPHOEDEMA IS THE SWELLING OF THE LIMBS AND BODY DUE TO THE ACCUMULATION OF LYMPH.

Lymphoedema is not well-documented and is far more common than the medical profession generally realises.

The Lymphatic System

Lymph is a colourless fluid which forms in the body. It normally drains back into the blood circulation through a network of vessels and nodes. Lymph nodes act as filter stations. They play an important part in the body’s defence against infection by removing excess protein, dead or abnormal cells and bacteria.

Why does lymphoedema occur?

If the drainage routes through the lymphatic system become blocked or damaged, lymph accumulates in the tissues and swelling (oedema) occurs. Unlike other oedemas, lymphoedema can lead to changes in the tissues such as fibrosis (hardness) and an increased risk of infection. The swelling becomes even more difficult to control.

Primary Lymphoedema is usually determined from birth and may be due to underdevelopment of the lymphatic system. It can affect infants or children and men or women at any age.

Secondary Lymphoedema can occur in the treatment of cancer following surgery or radiotherapy. It can also occur as a result of infection, severe injury, burns or any other trauma.

EARLY DIAGNOSIS AND EARLY TREATMENT ARE VITAL TO CONTROL LYMPHOEDEMA.

Become a member of the LSN – see next page.
The LSN is a registered charity founded in 1991. It provides vital information and support for people with lymphoedema, while working towards the availability of better national resources for lymphoedema treatment.

The LSN provides its members with:
- A telephone Information and Support line.
- Quarterly newsletters.
- Current information on lymphoedema, research and treatment.
- Fact sheets.
- Website.
- Self-help videos/DVDs.

The LSN relies solely on membership subscriptions and donations. Please help us to continue our vital work by becoming a member and/or making a donation.

APPLICATION FOR MEMBERSHIP

Mr, Mrs, Miss, Ms. SURNAME ____________________________________________
First names______________________________________________________________
Address ________________________________________________________________
______________________________________________________________________
________________________________________Post Code______________________
Telephone (Home) ______________________________________________________
(Work) ______________________________________________________

☐ I have Lymphoedema
☐ I am a Health Care Professional
☐ Other (please specify) ______________________________________________

I would like to join the LSN and enclose a cheque made payable to the LSN for ________________

☐ Annual UK subscription £15.00
☐ Annual overseas subscription £30.00
☐ Donation to support the work of the LSN of __________

Total __________

Please send to:
The Lymphoedema Support Network
St Luke’s Crypt, Sydney Street, London SW3 6NH
Fact sheets available:

Coping following a mastectomy/lumpectomy
The management of cellulitis in lymphoedema
Prevention of upper limb lymphoedema
Recreational exercise with lymphoedema
Manual Lymphatic Drainage Therapy
Skin care for people with lymphoedema
The use of compression garments in lymphoedema management
Holidays and travel
Prevention of lower limb lymphoedema

For information and help, please contact

The Lymphoedema Support Network
St Luke’s Crypt, Sydney Street, London SW3 6NH

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THE LYMPHOEDEMA SUPPORT NETWORK

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