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## 18 Steps to Prevention for Upper Extremities

*For the patient who is at risk of developing lymphedema, and for the patient who has developed lymphedema.*

**Who is at Risk?** Anyone who has had a simple mastectomy, lumpectomy or modified radical mastectomy combination with axillary node dissection and, often, radiation therapy is at risk. Lymphedema can occur immediately postoperatively, within a few months, a couple of years, or 20 years or more after cancer therapy. With proper education and care, lymphedema can be avoided or, if it develops, kept well under control.

The following instructions should be reviewed carefully pre-operatively and discussed with your physician or therapist.

1. Absolutely do not ignore any slight increase of swelling in the arm, hand, fingers, neck or chest wall (consult your doctor immediately).
2. Never allow an injection, IV or a blood drawing in the affected arm(s).
3. Have blood pressure checked in the unaffected arm.
4. Keep the edemic arm, or "at-risk" arm, spotlessly clean. Use lotion (Eucerin, Nivea) after bathing. When drying it, be gentle, but thorough. Make sure it is dry in any creases and between fingers.
5. Avoid vigorous, repetitive movements against resistance with the affected arm (scrubbing, pushing, pulling)
6. Avoid heavy lifting with the affected arm. Never carry heavy handbags or bags with over-the-shoulder straps.
7. Do not wear tight jewelry or elastic bands around affected fingers or arm(s).
8. Avoid extreme temperature changes when bathing, washing dishes, or (no sauna or hot tub). Keep the arm protected from the sun.
9. Avoid any type of trauma (bruising, cuts, sunburn or other burns, sports injuries, insect bites, cat scratches).
10. Wear gloves while doing housework, gardening or any type of work that could result in even a minor injury.
11. When manicuring your nails, avoid cutting your cuticles (inform your manicurist).
12. Exercise is important, but consult with your therapist. Do not overtire an arm at risk; if it starts to ache, lie down and elevate it. Recommended exercises: walking, swimming, light aerobics, bike riding, and special designed ballet or yoga. ( Do not lift more than 15 lbs.)
13. When traveling by air, patients with lymphedema (or those at risk) must wear a compression sleeve. Additional bandages may be required on a long flight. Increase fluid intake while in the air.
14. Patients with large breasts should wear light breast prostheses (heavy prostheses may put too much pressure on the lymph nodes above the collar bone). Some pads may have to be worn under the bra strap. Wear a well-fitted bra; not too tight and with no wire support.
15. Use an electric razor to remove hair from the axilla. Maintain electric razor properly, replacing heads as needed.
16. Patients with lymphedema should wear a well-fitted compression sleeve during all waking hours. At least every 4-6 months, see your therapist for follow-up. If the sleeve is too loose, most likely the arm circumference has reduced or the sleeve is worn.
17. Warning: If you notice a rash, blistering, redness, increase of temperature or fever, see your physician immediately. An inflammation or infection in the affected arm could be the beginning or a worsening of lymphedema.
18. Maintain your ideal weight with a well-balanced, low-sodium, high-fiber diet. Avoid smoking and alcoholic beverages. Lymphedema is a high protein edema, but eating too little protein will not reduce the protein element in the lymph fluid – rather this will weaken the connective tissue and worsen the condition. The diet should contain protein that is easily digested, such as chicken, fish or tofu.

*Unfortunately, prevention is not a cure. However, as a cancer and/or lymphedema patient, you are in control of your ongoing cancer checkups and the continued maintenance of your lymphedema. Source: National Lymphedema Network*