

Early detection of lymphedema crucial, says Regina woman

By Pamela Cowan, Leader-Post April 25, 2012

Glenda Cook, an individual affected by lymphedema and the president of the Lymphedema Association of Saskatchewan Inc., demonstrates a Reid Sleeve — a type of compression garment she wears at night to reduce swelling in her arm.

Photograph by: Don Healy, Leader-Post files



REGINA — Unable to lift her arm and wrap her fingers around her beloved violin, Glenda Cook's life hit a melancholy note soon after she was diagnosed with breast cancer.

Shortly after surgery in 2008, Cook developed lymphedema in her left arm. The abnormal build up of fluid in tissue causes swelling — often in the arms or legs, but it can occur anywhere in the body.

Cook went to Tracy Gardikiotis, a physical therapist with the Regina Qu'Appelle Health Region (RQHR), who is a certified lymphedema therapist and has specialized breast cancer training.

"I was pretty lucky that it was caught early," Cook said.

Still, lymphedema stole one of her great passions — playing second violin in the Regina Symphony Orchestra — something she had done for 32 years.

The 56-year-old president of the Lymphedema Association of Saskatchewan said more awareness is needed of the warning signs of lymphedema.

"The arm might feel heavy or achy and swelling is a major symptom, but often the early signs manifest before there is any swelling," Cook said. "The main thing about lymphedema is that the earlier it is treated, the fewer problems there are down the road."

Lymphedema is a specialized area that is not well understood by some health-care professionals and patients, Gardikiotis said.

To educate patients, health-care workers and policy-makers about the chronic condition, the association, in conjunction with the Continuing Physical Therapy Education department at the University of Saskatchewan and the RQHR held a Lymphedema Management Symposium last week that featured experts from the Mayo Clinic, the Toronto area and Montreal.

Experts at the symposium strongly promoted exercise and reinforced the importance of using compression garments.

Patients diagnosed early often require just a compression garment to contain the swelling, Gardikiotis said.

For three years, Cook religiously wore a compression garment, did self massage and had manual lymph drainage — a light progressive massage to encourage drainage.

Since September, her arm has improved so she doesn't require a compression garment during the day, but wears a Reid Sleeve nightly and does compression wrapping.

Cook lamented that lymphedema treatment across Saskatchewan is spotty and said more specialists are required.

"We are so blessed in Regina to have Tracy," Cook said.

Currently, Gardikiotis treats about 300 lymphedema patients in southern Saskatchewan. Some people are born with lymphedema while others experience it after cancer treatment.

There is no cure, but if caught early, the impact can be significantly minimized, Gardikiotis said.

"In the later stage, there is some tissue damage and some of those changes are irreversible and they require much more treatment to maintain their limb at a stable point and minimize infection and keep them functioning," Gardikiotis said. "If not treated properly, it can have significant physical, psychosocial and financial implications on patients' lives so we're really striving to increase lymphedema awareness and education to ensure that we can improve the care that we are offering patients."