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Is there a cure for lymphedema in the legs

By TristaUpdated: Feb 16, 2021Your lymphatic system has multiple, interrelated functions for the body. For example, lymph vessels collect excess lymph fluids, which are proteins, lipids, and wastes, and remove them from tissues. The lymph nodes not only filter these interstitial fluids, but they also contain white blood cells and lymphocytes, which fight infections and illnesses. If these lymph vessels become blocked, the entire system is unable to get rid of the excess fluid and flow properly. This condition is known as lymphedema. There are two types of lymphedema known as primary and secondary. The first is present at birth whereas the latter develops after the lymphatic system is damaged. The most common cause of lymphedema in the United States is breast cancer treatments such as radiation, but globally a parasite infection known as filariasis is the main culprit. There are four stages of lymphedema and no known cure. If you notice any of these ten symptoms of lymphedema, contact your doctor immediately for diagnosis and treatment. This is one of the earliest signs of lymphedema. During stage zero of lymphedema, the symptoms will develop slowly. The apparent symptom of swelling will not be present yet. However, the protein molecules that are not being filtered out properly will start to accumulate underneath your skin. Even though the limb looks presumably normal on the outside, the extra water will pull into the affected area and cause heaviness. Just like a sensational heaviness of the affected area, fatigue of that same limb might also occur during stage zero of lymphedema. Do not ignore these very early symptoms of lymphedema. The internal changes have already begun and will respond if treated. If you notice a heaviness or fatigue in a region of the arm or leg, talk to your doctor immediately. It can reduce the chance of edema worsening into more uncomfortable symptoms. Stage one of lymphedema is characterized by a puffy appearance on the farthest part of the limb. For example, if the lymph vessels are blocked in your leg then your foot will look puffy. Likewise, if the flow is impaired in your arm, your hand might get puffier than usual. This is the first sign of swelling you may notice associated with lymphedema. As the disease progresses, you may have trouble seeing or feeling the veins or tendons in your affected limbs. There will be impressions on your skin from the underlying pressure on the skin. This pushing appearance is also known as ‘pitting’ edema. If you can no longer see veins on top of your foot or hand, then you might be in the first stage of lymphedema. At this stage, the swelling might reduce overnight or with elevation. However, this is only a temporary way to lessen the symptoms of lymphedema. Depending on what part of your body is puffy, those related joints may hurt also. For example, if your feet are puffy than your ankles and toes might be stiff. Eventually, your knee can become tight and sore. On the other hand (pun intended), you may experience tightness and stiffness in your fingers, wrists, and elbows if the lymph vessels are blocked under your arm. If you have lymphedema, one side of your body will become noticeably swollen. While lymphedema will not affect you from head to toe immediately, it will target a specific extremity and spread. For example, your foot might be puffy, but then several months later, your leg will be more swollen than usual, and your knee joints are stiff. As the stages progress, the asymmetric appearance of your limbs will be more obvious. Visit your doctor to plan a treatment that will reduce the excess fluids in your body. During stage two of lymphedema, the pitting symptom will be less obvious as the skin takes on a spongy consistency. The swelling will not subside overnight or respond to elevation. At this point, too much scar tissue has made the tissue firm to that consistency. As the disease progresses, the tissue will continue to thicken, and the size of the limb will increase as well. Your doctor can help focus your treatment on reducing the fluid volume in your limb as well as softening the scar tissue. The third and final stage of lymphedema, the limbs grow even larger. However, another noticeable symptom is excessively dry and scaly skin on the affected limb. Each person is affected differently by lymphedema. However, even with subtle differences in symptoms and stages, all of the signs are continuous. Even though there is no cure for lymphedema, if you leave the symptoms untreated they will only get progressively worse. Blisters and other excess skin projections can form during stage three of lymphedema. After all this time, the extra fluid is still trying to filter out of the body. Since the lymph vessels are blocked, blisters form as the body’s attempt to contain the fluid. While there is no cure for lymphedema, your doctor can help keep the symptoms at bay and halt the progression of the disease. It is common for a skin infection to develop during the third stage of lymphedema. The skin projections and blisters may leak fluid, which can easily cause an infection. Because of all the excessive fluids trapped in the body, the heaviness of the limb, which was the first sign of lymphedema, is practically unbearable at this point. Continue to visit your doctor to monitor and treat the symptoms. Reducing the risk of infection is one of the main goals in controlling lymphedema. Lymphedema is the abnormal buildup of fluid in soft tissue due to a blockage in the lymphatic system. The lymphatic system helps fight infection and other diseases by carrying lymph throughout the body. Lymph is a colorless fluid containing white blood cells. Lymph may also be called lymphatic fluid. Lymph travels through the body using a network of thin tubes called vessels. Small glands called lymph nodes filter bacteria and other harmful substances out of this fluid. But when the lymph nodes are removed or damaged, lymphatic fluid collects in the surrounding tissues and makes them swell. Lymphedema may develop immediately after surgery or radiation therapy. Or, it may occur months or even years after cancer treatment has ended. Most often, lymphedema affects the arms and legs. But it can also happen in the neck, face, mouth, abdomen, groin, or other parts of the body. Lymphedema can occur in people with many types of cancers, including: Bladder cancer Breast cancer Head and neck cancer Melanoma Ovarian cancer Penile cancer Prostate cancer Symptoms of lymphedema People with lymphedema in their arm or leg may have the following symptoms: Swelling that begins in the arm or leg A heavy feeling in the arm or leg Weakness or less flexibility Rings, watches, or clothes that become too tight Discomfort or pain Tight, shiny, warm, or red skin Hardened skin, or skin that does not indent when pressed Thicker skin Skin that may look like an orange peel (swollen with small indentations) Small blisters that leak clear fluid Symptoms of head and neck lymphedema include: Swelling of the eyes, face, lips, neck, or area below the chin Discomfort or tightness in any of the affected areas Difficulty moving the neck, jaw, or shoulders Thickening and scarring of the skin on the neck and face, called fibrosis Decreased vision because of swollen eyelids Difficulty swallowing, speaking, or breathing Drooling or loss of food from the mouth while eating Nasal congestion or long-lasting middle ear pain, if swelling is severe Symptoms of lymphedema may begin slowly and are not always easy to detect. Sometimes the only symptoms may be heaviness or aching in an arm or leg. Other times, lymphedema may begin more suddenly. If you develop any symptoms of lymphedema, talk with your doctor as soon as possible. You will need to learn how to manage the symptoms so they do not get worse. Because swelling is sometimes a sign of cancer, it is also important to see your doctor to be sure that the cancer has not come back. Causes of lymphedema Lymphedema can be a long-term side effect of some cancer treatments. The most common causes of lymphedema in cancer survivors include: Surgery in which lymph nodes were removed. For example, surgery for breast cancer often involves removing 1 or more lymph nodes under the arm to check for cancer. This can cause lymphedema in the arm. Radiation therapy or other causes of inflammation or scarring in the lymph nodes and lymph vessels Blockage of the lymph nodes and/or lymph vessels by the cancer The risk of lymphedema increases with the number of lymph nodes and lymph vessels removed or damaged during cancer treatment or biopsies. Sometimes lymphedema is not related to cancer or its treatment. For instance, a bacterial or fungal infection or another disease involving the lymphatic system may cause this problem. Diagnosing lymphedema A doctor is often able to find lymphedema by looking at the affected area. But sometimes he or she will recommend additional tests to confirm a diagnosis, plan treatment, or rule out other causes of the symptoms. These tests may include: Measuring the affected part of the body with a tape measure to monitor swelling Placing the affected arm or leg into a water tank to calculate the volume of fluid that has built up Creating a picture of the lymphatic system using an imaging method called lymphoscintigraphy. This is a reliable test, but it is not commonly used. Watching the flow of fluid through the lymph system using an ultrasound. This imaging test uses sound waves to create a picture of the inside of the body. An ultrasound can also be used to rule out blood clots as a cause of the swelling. Having a computed tomography (CT or CAT) scan or magnetic resonance imaging (MRI). These tests show the pattern of lymph drainage and whether a tumor or other mass is blocking the flow of the lymphatic system. Doctors do not usually use CT and MRI scans to diagnose lymphedema unless they are concerned about a possible cancer recurrence. Using other tools to diagnose lymphedema. These include perometry, which uses infrared light beams, or a bioimpedance spectroscopy, which measures electrical currents flowing through body tissues. It is also important to make sure another illness is not causing the swelling. Your doctor may perform other tests to rule out heart disease, blood clots, infection, liver or kidney failure, or an allergic reaction. Stages of lymphedema Doctors describe lymphedema according to its stage, from mild to severe: Stage 0. Swelling usually cannot be seen yet even though the lymphatic system has already been damaged. Some people may feel heaviness or aching in the affected body part. This stage may last months or even years before swelling occurs. Stage I. Swelling is visible but can be reduced by keeping the affected limb raised and using compression (see “Managing and treating lymphedema” below). The skin may indent when it is pressed, and there are no visible signs of skin thickening and scarring. Stage II. The skin may or may not indent when it is pressed, but there is moderate to severe skin thickening. Compression and keeping the affected limb raised may help a little but will not reduce swelling. Stage III. The skin has become very thick and hardened. The affected body part has swollen in size and volume, and the skin has changed texture. Stage III lymphedema is permanent. Managing and treating lymphedema Relieving side effects is an important part of cancer care and treatment. This is called palliative care or supportive care. Talk with your health care team about any lymphedema symptoms you have. Make sure to bring up any new symptoms or a change in your symptoms. Lymphedema treatments: Reduce swelling Prevent it from getting worse Prevent infection Improve how the affected body part looks Improve the person’s ability to function Although treatment can help control lymphedema, it currently does not have a cure. Your doctor may recommend a certified lymphedema therapist (CLT). The CLT can develop a treatment plan for you, which may include: Manual lymphatic drainage (MLD). MLD involves gentle skin massage. It helps blocked lymphatic fluid drain properly into the bloodstream and may reduce swelling. For best results, you should begin MLD treatments as close to the start of lymphedema symptoms as possible. A member of your health care team can refer you to a CLT trained in this technique. Exercise. Exercising usually improves the flow of lymph fluid through the lymphatic system and strengthens muscles. A CLT can show you specific exercises that will improve your range of motion. Ask your doctor or therapist when you can start exercising and which exercises are right for you. Compression. Non-elastic bandages and compression garments, such as elastic sleeves, place gentle pressure on the affected area. This helps prevent fluid from refilling and swelling after decongestive therapy (see below). There are several options, depending on the location of the lymphedema. All compression devices apply the most pressure farthest from the center of the body and less pressure closer to the center of the body. Compression garments must fit properly and should be replaced every 3 to 6 months. Complete decongestive therapy (CDT). This is also known as complex decongestive therapy. It combines skin care, manual lymphatic drainage, exercise, and compression. A doctor who specializes in lymphedema or a CLT should do this therapy. The therapist will also tell you how to do the necessary techniques by yourself at home and how often to do them. Ask your doctor for a referral. Skin care. Lymphedema can increase the risk of infection. So it is important to keep the affected area clean, moisturized, and healthy. Apply moisturizer each day to prevent chapped skin. Avoid cuts, burns, needle sticks, or other injury to the affected area. If you shave, use an electric razor to reduce the chance of cutting the skin. When you are outside, wear a broad-spectrum sunscreen that protects against both UVA and UVB radiation and has a sun protection factor (SPF) of at least 30. If you do cut or burn yourself, wash the injured area with soap and water and use an antibiotic cream as directed by your health care team. Elevation. Keeping your affected limb raised helps to reduce swelling and encourage fluid drainage through the lymphatic system. But it is often difficult to keep a limb raised for a long time. Low-level laser treatments (LLLT). A small number of clinical trials have found that LLLT could provide some relief from lymphedema after removal of the breast, particularly in the arms. Medications. Your doctor may prescribe antibiotics to treat infections or drugs to relieve pain when necessary. Physical therapy. If you have trouble swallowing or other issues from lymphedema of the head and neck, you may need physical therapy. Reducing your risk of lymphedema Talk with your doctor if you have concerns about developing lymphedema. Also, try the following tips: Maintain a healthy weight. If you are overweight, take positive steps to manage your weight after a cancer diagnosis. This may help lower your risk of developing lymphedema. Change your position. Avoid standing or sitting for a long time. While sitting, do not cross your legs. It may also help to lift yourself up with pillows in bed. An upright position improves lymph drainage. Wear loose-fitting clothes. If you are at risk of developing head and neck lymphedema, do not wear tops with a tight neckline. For those at risk of developing leg lymphedema, protect your feet by wearing closed shoes. Avoid flip-flops and sandals. For those at risk of arm lymphedema, avoid wearing tight clothing and jewelry that pinches or squeezes your arm or hand, like a tight sleeve or bracelet. This can cause the fluid to build up. Limit time in extreme heat or cold. Avoid hot tubs or saunas. Limit hot showers to less than 15 minutes. Do not apply a heating pad or ice to swollen areas. Know when to seek medical care. Call your health care team if you have any of the following signs of infection: Temperature higher than 100.5 degrees Fahrenheit (38 degrees Celsius) Skin that is hot to the touch New areas of skin redness, swelling, or pain Related Resources Leg Swelling After Cancer Treatment: What Can You Do? 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