**Guidance for Healthcare Professionals who are making a referral to the Lymphoedema Service**

The Lymphoedema Service for Bristol, North Somerset and South Gloucestershire is a Nurse led service based at Portishead. We currently have clinics at Portishead and Cossham Hospital in Kingswood.

A treatment plan will be developed with the patient, and they will be taught how to self-manage their condition with the support of the Lymphoedema service.

Their self-management plan will consist of an individually tailored combination of some or all of the following: **skin care, exercise, compression and lymphatic drainage.**

If a clinician at the practice is trained and competent to measure for compression hosiery, this can be done at the surgery and a referral may not be required.

There is much that your patient an do to start the process whilst awaiting their appointment

If they are overweight they should be encouraged to reduce their weight to within a normal BMI range as this will potentially contribute to reduction in their lymphoedema symptoms.

Whilst waiting for an appointment they can contact the Lymphoedema Support Network, there is plenty of advice and guidance for patients on their website <https://www.lymphoedema.org>

**Skin Care**

Skin care in the areas that are swollen is vital to reduce the incidence of cellulitis, stop dryness and reduce further skin breakdown. The following regime is suggested.

**Clean the skin**

* The area should be washed carefully at least once a day using an appropriate emollient. Dry the skin gently patting rather than rubbing, paying particular attention to any skin folds and between the fingers/toes.
* Bath and shower emollients offer no advantages over emollients. Patients can use any of their normal creams or ointment above as a soap substitute in the bath/shower; except 50:50 (since it may not lather well). Guidance on BNSSG formulary choice emollients is available which provides details of creams and gels categorised by consistencies: <https://remedy.bnssgccg.nhs.uk/formulary-adult/chapters/13-skin/131-dry-and-scaling-skin-disorders/>
* Bath and shower preparations for dry and pruritic skin conditions should not be routinely prescribed as per NHS England guidelines <https://www.england.nhs.uk/wp-content/uploads/2017/11/annex-b-sps-evidence-review-bath-emollients.pdf>

**Observe the skin**

* Look for signs of redness, or injury. Fungal infections may also be present which will require prompt treatment.
* If skin damage is found, ensure area is clean, apply an antiseptic and check regularly. They should seek prompt medical attention if they experience any symptoms of cellulitis.
* The British Lymphology Society has produced ‘The Consensus Document for the management of cellulitis in lymphoedema’. This contains specific guidance for practitioners and prescribers on the specialist management of cellulitis in lymphoedema. Patients with Lymphoedema may present with atypically.

<https://www.lymphoedema.org/images/pdf/CellulitisConsensus.pdf>

**Moisturise the skin**

* The area should be moisturised each night with an appropriate emollient.
* If skin feels normal use of a bland emollient will be adequate. If skin is dry and scaly it is vital the skin is moisturised more intensely- use a soap substitute for washing and a cream or ointment to moisturise to help rehydrate the skin. For full list of formulary emollients/ moisturisers please visit the BNSSG Formulary page which provides details of creams and gels categorised by consistencies: <https://remedy.bnssgccg.nhs.uk/formulary-adult/chapters/13-skin/131-dry-and-scaling-skin-disorders/>

**Exercise**

Regular exercise helps to control swelling, keeps joints flexible, improves posture and balance, helps to control weight and can induce a sense of wellbeing.

**What sort of exercise should the patient be advised to do?**

Exercise usually has a very positive impact on lymphoedema and is encouraged because muscle activity helps to promote lymphatic drainage.

The sort of exercise or movement that they can do will depend on your age, general fitness, mobility, inclination and co-morbidities.

Movements have a more effective pumping effect when they are done slowly and smoothly but any movement will be beneficial. Deep breathing exercises also stimulate and improve fluid flow through the veins and lymph vessels.

* Patients can carry out exercises/movements that are within their level of ability – it is always better to start slowly and build up
* No movement or exercise should cause pain
* Patients should not engage in movement/exercise if they are being treated for cellulitis/infection
* If their swelling increases after an activity they may be overdoing it –try doing a little less for a while and then build up again gradually

**Compression**

Compression therapy is the mainstay management of chronic oedema/lymphoedema.

They should expect to be measured for compression garments at your lymphoedema assessment. It will be expected that they will be able to put on and remove their garments daily (every day), the service can assist with provision of application aids, but cannot provide a garment fitting service.

**Lymphatic Drainage**

Lymphatic drainage is a specialist, gentle type of medical massage.

Following assessment, it may (if appropriate) be used as part of their lymphoedema treatment.

NB. If they have active cellulitis/infection, they should not carry out massage.