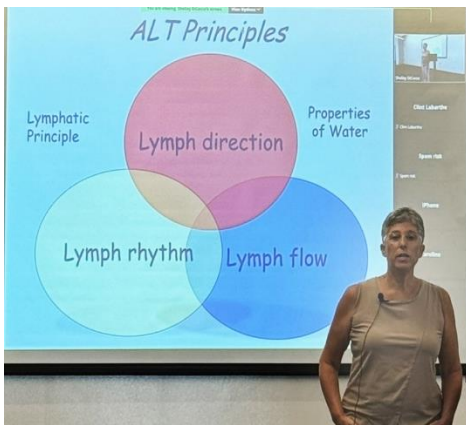


The 25th Annual State of Georgia Lymphedema Education and Awareness Conference

Speakers, therapists, providers, and patients gathered on October 20-21, 2023, for an informative series of presentations on the progress of lymphedema and lipedema research.



Dorit Tidhar, MScPT, PhD, CSCI, ALT, shared her [Aqua Lymphatic Therapy](#) for the Management of Lymphedema in a pre-conference session with therapists as well as our main conference.

Dr. Tidhar developed Aqua Lymphatic Therapy (ALT) based on the Casley-Smith Lymphedema Management principles (www.casleymithinternational.com). ALT is not the typical “aquatics” therapists learn in school or that individuals have experienced in outpatient therapy centers. To develop this program, Dr. Tidhar incorporated the properties of water, the physiology of the lymphatic system, the pathology of lymphatic dysfunctions, and the principles of complete decongestive therapy (CDT).

Water has several properties that impact an individual by improving or hindering fluid movement; the main two are buoyancy and hydrostatic pressure. **Buoyancy** is the property that makes one feel lighter in water than on land. This allows an individual to do exercises in the pool with less stress on the joints and muscles and can help hold the involved limb(s) afloat. Water applies **hydrostatic pressure**, which has an effect similar to compression garments/bandages that assist in fluid movement. This pressure increases with each centimeter of depth a body part is submerged in the water. The properties of water can aid in treating difficult-to-compress areas, like the genitals or trunk/chest. The key with hydrostatic pressure and ALT is that one must follow the proximal to distal principles of CDT, i.e., not have higher pressure in the hand before working on the shoulder and upper arm.

The water temperature should be between 87.8° and 91.4° F for individuals with lymphedema, “should not make the skin red,” and may need to be lower when exercising. This provides a comfortable temperature without causing harm, specifically increased swelling.

ALT can benefit individuals with all stages of lymphedema and, to some extent, those with lipedema. Aquatics helps reduce tissue fluid and increase range of motion, strength, and general fitness. Other benefits from ALT are improved quality of life, reduced pain, and reduced disability scores. Dr. Tidhar shared several cases where individuals reduced in volume in the involved areas after participating in ALT 1-3 days a week. This benefit



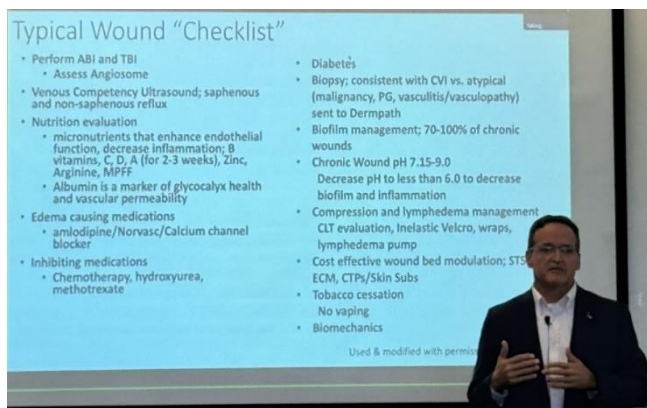
occurred in both the reductive and maintenance phases of CDT. Two of our therapists noticed that their own lymphedema reduced within 24 hours of attending Dr. Tidhar's pre-conference course and pool sessions!

Aquatics does not address the texture of the tissues, like fibrosclerosis or adipose laydown. As with all forms of therapy, there are some precautions/contraindications with aquatic therapy. These include, but are not limited to, infection/cellulitis, chemotherapy, skin sensitivity/rash, bone metastatic disease, paralysis/weakness, fear of water, cardiac conditions, kidney disease, and open wounds. Individuals need to discuss the appropriateness of aquatics with their healthcare professionals before adding aquatics to their treatment regimen.

Aqua Lymphatic Therapy is pleasant for patients, encouraging their long-term lymphedema maintenance.

Sixteen certified lymphedema therapists attended the pre-conference 6-hour course with Dr. Tidhar and experienced her upper and lower extremity pool programs. All therapists gave glowing reviews of the programs and felt ALT would benefit their patients. Therapists hope to bring Dr. Tidhar back soon to present the complete Aquatic Lymphatic Therapy Certification Course.

For more information on this program, visit the website: www.aqua-lymphatic-therapy.org.

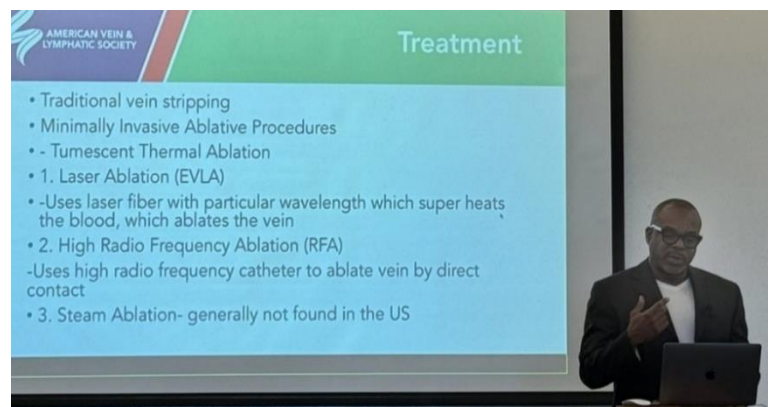


Frank Aviles Jr., PT, CWS, FACCWS, CLT-LANA, ALM, AWCC, MAPWCA, spoke about Wound Care for the Patient with Lymphedema. He frequently works with patients who have slow-healing wounds. He stresses that a healthcare professional should always have the best interests of the patient in mind, and be willing to advocate when necessary.

Understanding the importance of the lymphatic system has helped Frank become a leader in the field of wound care. Frank used pictures to illustrate the inflammatory, proliferative, and maturation stages of wound healing. He discussed the overall preparation of the wound bed with consideration of the surrounding circumstances. He's found that oxygenation and manual lymphatic therapy can benefit healing. He also discussed biofilm, and how to remove it safely from a wound. Look for Frank's article, [All Edema is Lymphedema](#) and his [Frank and Lizzie Show](#) on YouTube.

Keith Moore, MD, ABLVM, RVS, CLT-LANA, presented on the Relationship Between Venous Disease and Lymphedema. Chronic Venous Disease (CVD) is one of the most common human medical conditions, and varicose veins have been discussed throughout written history. Vein walls have three layers, and can be damaged by conditions such as hypertension. Without medical attention, CVD can become chronic venous insufficiency, leading to further complications.

Edema is not always due to venous disorders, but until recently, lymphatic channels have been hard to see. The lymphatic vessels are the size of human hairs, and they have flaps, similar to veins, to control the direction of fluid movement. Some symptoms of lymphedema are similar to venous disease, making diagnosis difficult. The duplex ultrasound is the gold standard for diagnosis of venous disease.





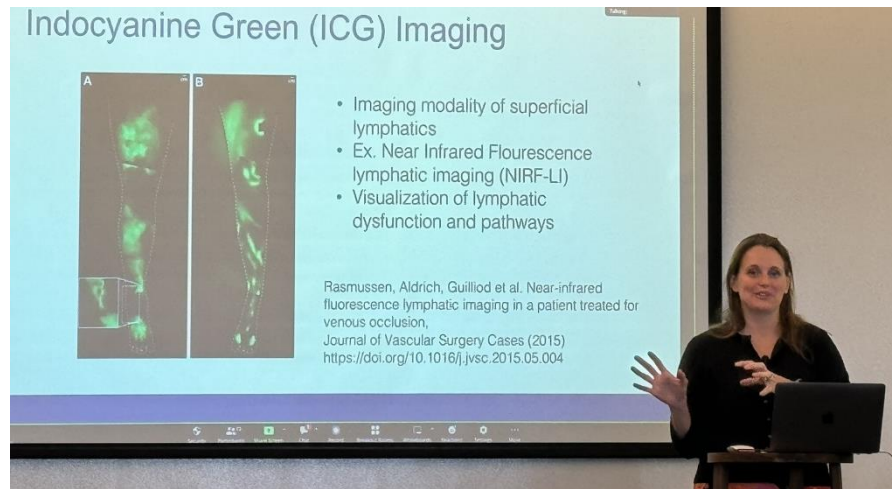
Carletta Cunningham shared her inspiring patient story about completing triathlons after breast cancer treatment. She is a ten-year survivor who serves with several organizations that support breast cancer patients, including It's the Journey.

Carletta was diagnosed with triple negative breast cancer one year after her father passed away from colon cancer. Throughout her journey with surgery, chemotherapy, reconstruction, and more surgeries, she wore bright and clever t-shirts to motivate her medical providers and other patients.

After completing treatment, Carletta set a goal to complete a triathlon in 2014. Not only did she complete one event, but all three. She has since participated in other triathlons and continues to live an active lifestyle. She is an energetic and powerful speaker. Read more about her journey on her blog: <https://www.pinkytri.com/>

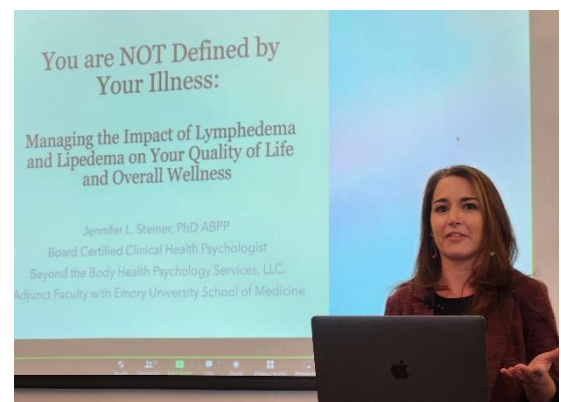
Paula Donahue, PT, DPT, MBA, CLT-LANA, talked about Advances in Lymphedema and Lipedema Diagnosis and Treatment. She reviewed Screening Tests for Early Diagnosis of Lymphedema. She noted that bioimpedance spectroscopy includes surveillance of muscle and skeletal mass which can be valuable after cancer treatment.

Vanderbilt has begun research using ICG lymphography. They are also exploring the use of vibration for scar release and fibrosis. She discussed the importance of patient participation in clinical work, as the individual is ultimately responsible for their long-term health. She has found [Motivational Interviewing](#) helpful for therapists encouraging positive changes with patients.



Dr. Jennifer Steiner, PhD, ABPP, is a psychologist who specializes in helping patients with chronic pain and illness live their best possible lives. She acknowledges the difficulties of having a condition like lymphedema, including pain, fatigue, loss of control and function, changes in self-concept, and feelings of being misunderstood or stigmatized by society. Depression, anxiety, and anger are natural responses to having a chronic illness. And loved ones often feel helpless or have trouble communicating with the struggling patient.

Coping strategies focus on making efficient use of the patient's limited energy. This takes trial and error, as patients often overdo activities, 'crash,' and need extended rest periods. The patient must learn to anticipate energy levels, pace activities, recognize signs of fatigue, and build in breaks. The [Spoon Theory Metaphor](#) can help patients and caregivers communicate about fluctuations in energy levels and needs for the chronically ill. Caregivers can help the patient find new ways to accomplish goals independently, and encourage physical activity and social connections, making life meaningful.



Medical coping strategies include list-making, prioritization, and bringing support to medical appointments. Some medical providers can schedule double appointments for patients with complicated conditions. Role-playing before a difficult appointment can help a patient prepare for the best possible outcome.

As the patient proceeds through the stages of acceptance of a chronic illness, Dr. Steiner helps them identify helpful frames of mind. Thoughts dictate mood and can be helpful or hurtful. Self-talk as we anticipate a good or bad day can affect our physical response, perhaps leading to more energy versus more inflammation. Substituting helpful thoughts, like “This is the hand I was dealt, but these are the things I can do,” may help the patient cope more successfully.

Find a board-certified psychologist at: [Directory – ABPP](#). Reach Dr. Steiner at: [Beyond the Body Health Psychology Services-Online Therapy for Pain and Illness \(beyondthebodypsych.com\)](#)

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