

A palliative approach to cancer-related lymphoedema

Palliative care has been highlighted as integral to the comprehensive, high value management of chronic and progressive medical conditions. Much attention has focused on cancer where palliative care's early integration has been shown to improve quality of life and, even, survival.

However, increasingly palliative care is considered a critical dimension of care, independent of diagnosis, when patients experience intense symptoms and psycho-emotional distress, navigate treatment tradeoffs and ambiguity, or confront terminal disease.

Multifactorial edema is prevalent among patients receiving palliative care, and its management is important to optimize comfort, safety, and function. However, conventional approaches to decongestion must be modified based on patients' goals, preference, tolerance, and medical vulnerability. Additionally, palliative contexts are frequently marked by rapid shifts in prognoses and treatment plans necessitating flexibility on the part of the lymphedema therapist. Systemic contributors to edema; solid organ function, medications, and inflammation, among others, may also be highly dynamic.

This presentation will provide a brief overview of the assessment essentials for the appropriate management of lymphedema in the palliative setting. Common CDT treatment modifications will be described, as will strategies to increase effectiveness and safety.