



### **New concept in treatment of lymphedema**

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#### **Abstract**

Lymphedema is a health problem that affects millions of people around worldwide. There are, however, a number of barriers that obstruct development in both the prevention and treatment of this disease. One of these barriers is the current concept that splits the management of lymphedema in two phases: treatment (Phase I) and maintenance (Phase 2). The evolution of treatment requires new concepts that address the treatment of lymphedema as a whole. One of these new concepts, reported by Godoy, states that Phase I (treatment) ends when a total or near total reduction in edema is achieved. Phase II (maintenance) aims to keep the losses and keep the limb within the normal or near normal size.

**Keywords:** Lymphedema, treatment.

#### **Letter to Editor**

Lymphedema is a health problem that affects millions of people around worldwide<sup>1</sup>. There are, however, a number of barriers that obstruct development in both the prevention and treatment of this disease. One of these barriers is the current concept that splits the management of lymphedema in two phases: treatment (Phase I)

and maintenance (Phase 2). In Phase I, treatment defines the reduction in edema. After this, maintenance begins even though the edema has not been reduced completely. This is the main obstacle of this concept where, what was not reduced remains the same and the maintenance phase is started. Therefore, this concept does not provide a total reduction in size for patients in their treatment. Thus this concept deprives the patient from achieving the best possible result and the caregiver, limited by this concept, does not attain a complete solution for the case. Thus, progress in the prevention and treatment of lymphedema is impaired by this concept. The evolution of treatment requires new concepts that address the treatment of lymphedema as a whole. Therefore, the reproduction of results attained in the past should be reviewed. The patient can not be penalized by outdated concepts and professionals should look for new concepts. One of these new concepts, reported by Godoy, states that Phase I (treatment) ends when a total or near total reduction in edema is achieved. Phase II (maintenance) aims to keep the losses and keep the limb within the normal or near normal size. This will thus allow

the patient to attain the best result and encourage the caregiver to perfect the therapeutic technique until this goal is reached. The new concepts and techniques demonstrate that even patients with elephantiasis can achieve reductions in size to near normality. In more than 90% of cases of grade I and II lymphedema, limbs can be reduced to within normal limits or near to this. Thus, the expectations of patients can be changed in respect to their treatment.

### **References**

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