

Breast cancer surgery linked to swollen arm syndrome

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Breast cancer survivors who have extensive surgery are four times more likely to develop the debilitating disorder arm lymphoedema, a QUT study has found.

The findings in a new paper "Incidence of unilateral arm lymphoedema after [breast cancer](#): a systematic review and meta-analysis" published in the prestigious journal *The Lancet Oncology*, reveal the invasiveness of surgery to treat breast cancer increases the risk of developing arm lymphoedema.

Lead author of the study Tracey DiSipio, from QUT's Institute of Health and Biomedical Innovation, said women who had undergone an axillary [lymph node dissection](#) - an invasive surgery to remove lymph nodes under the arm - were four times more likely to suffer swollen or disfigured arms.

She said this was compared to women who had received a [sentinel lymph node](#) biopsy.

"Arm lymphoedema is typically characterised by swelling in one or both arms, causing pain, heaviness, tightness and a decreased range of motion," Dr DiSipio said.

"The appearance of the swollen or disfigured arms provides an ever-present reminder of breast cancer and often contributes to anxiety, depression and emotional distress in effected women."

Dr DiSipio said the study, a systematic review of the incidence of arm lymphoedema after breast cancer, also found that one in five women (21.4 per cent) would be diagnosed with the condition.

"This is a significant research finding and provides us with the most accurate incidence rate to date," she said.

"Until now the incidence rate has been reported anywhere from between zero to 94 per cent. With this information we can explore whether lymphoedema rates differ between [breast cancer survivors](#)."

Dr DiSipio said the study also pinpointed a number of risk factors linked to arm lymphoedema.

"The risk factors increased when there was a lack of [regular physical activity](#), or high body-mass index," she said.

"These factors are potential targets for future [prevention strategies](#) or for more effective management of the disorder."

Dr DiSipio said the results of the study added weight to calls to integrate prospective surveillance of arm lymphoedema into standard breast cancer care.

"Currently there are no standardised practices when it comes to detection and treatment of arm lymphoedema," she said.

"Given most patients present with the arm lymphoedema within the first two years after breast cancer, more frequent surveillance throughout this time is recommended."

Provided by Queensland University of Technology

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