



Preface

Module 1

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This module covers:

Where it all Began

Terminology

Relationship of DLT:
Lymphoedema and
Lipoedema

What is
Lymphoedema

What is Lipoedema

Three phases of
Decongestive
Lymphatic Therapy

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Learning Outcomes

- Review the history of lymphatics
- Define decongestive lymphatic therapy (DLT)
- Review global terminology for DLT
- Define lymphoedema
- Define lipoedema
- Distinguish the three phases of DLT

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Where it all Began

460-377BC

- Hippocrates spoke of “white blood” – which we now know as chyle

384-322BC

- Aristotle identified structures containing transparent fluid termed ‘sanies’

335-280BC

- Herophilus noted the existence of mesenteric lymph nodes and milky veins (lacteals)

1622

- Historical rediscovery of the mesenteric vessels and the first official differentiation between lymphatics (chyliferous vessels) and veins made by Gasparo Asselli (Italian physician/surgeon)

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Where it all Began

1622

- Anselmi observed lacteals in the intestines of a "fed" dog

1622

- John Pecquet suggested the importance of respiration in the circulation of chyle and described the presence of valves within lymphatics

1624

- Johann Vesling recognised lymphatic vessels in humans

1629

- Jacques Mentel reported the mesenteric lacteals terminated in the thoracic duct before gaining access to the bloodstream

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Where it all Began

1648

- Olof Rudbeck probably the first anatomist to recognise the lymphatic system as part of the circulatory system

1651

- The lymphatic vessels, the thoracic duct, and their connections with the blood circulation described for first time by Jean Pecquet

1651

- John Pecquet suggested the importance of respiration in the circulation of chyle and described the presence of valves within lymphatics

1622 - 1674

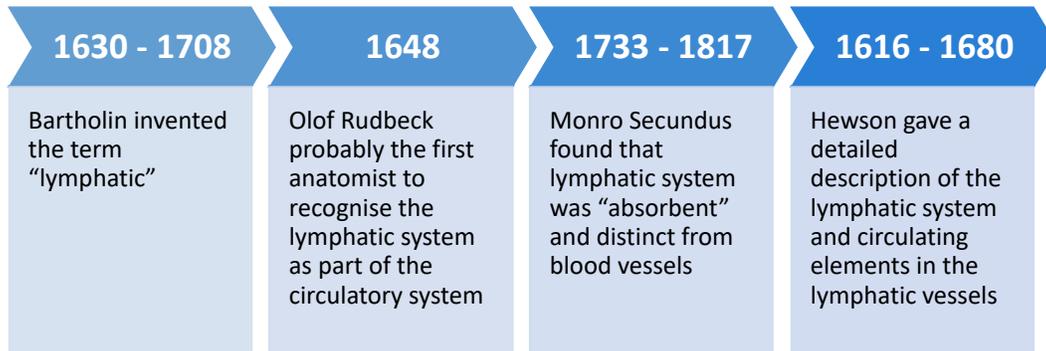
- Pecquet described the main lymphatic vessels including the thoracic duct and cisterna chyle

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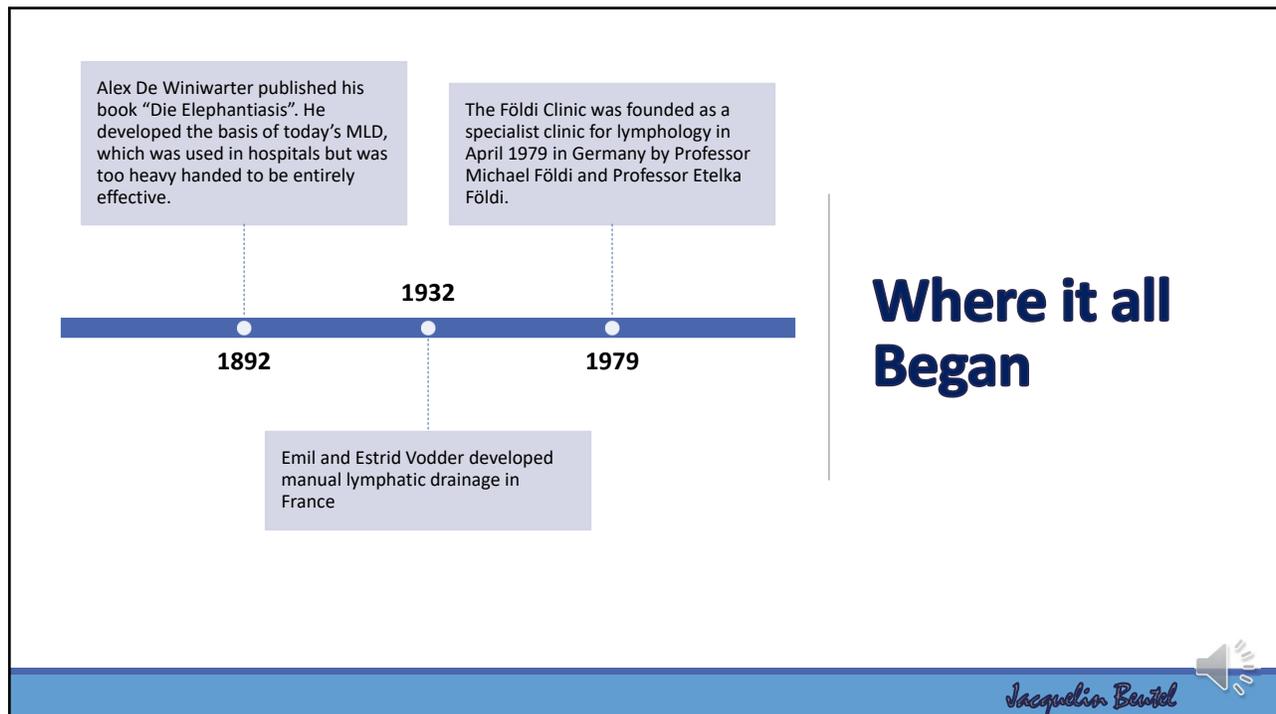
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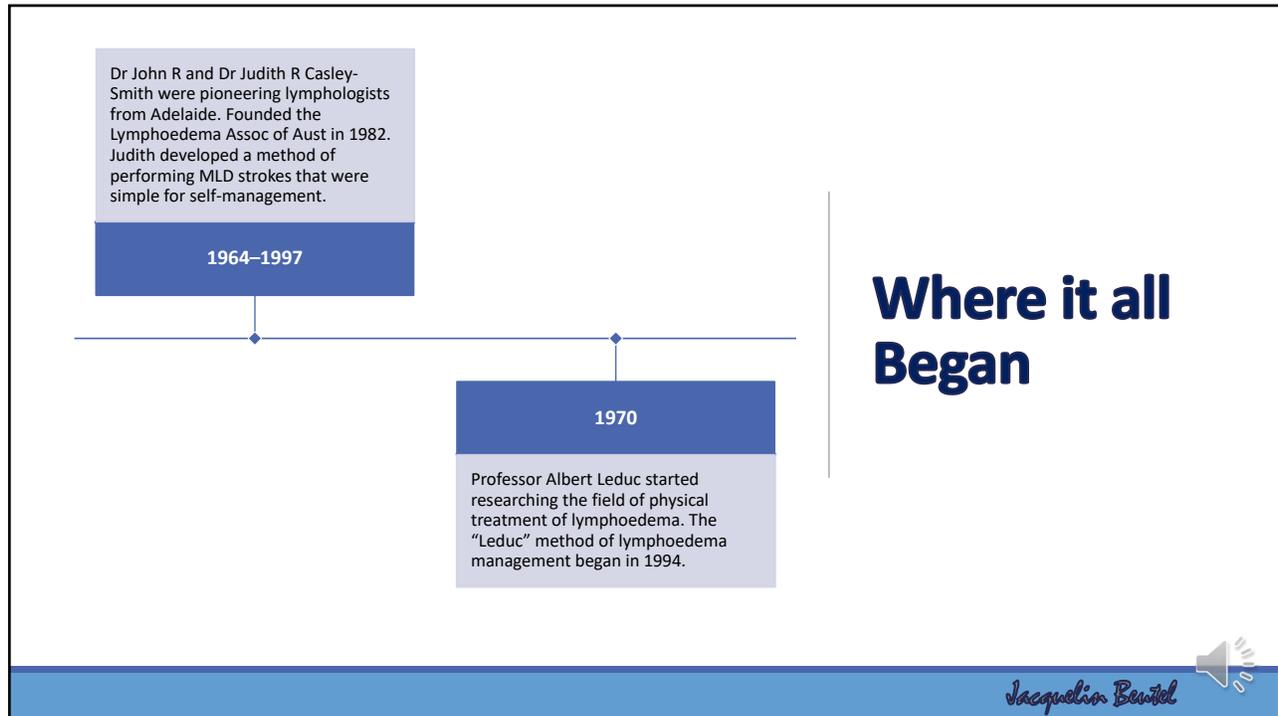


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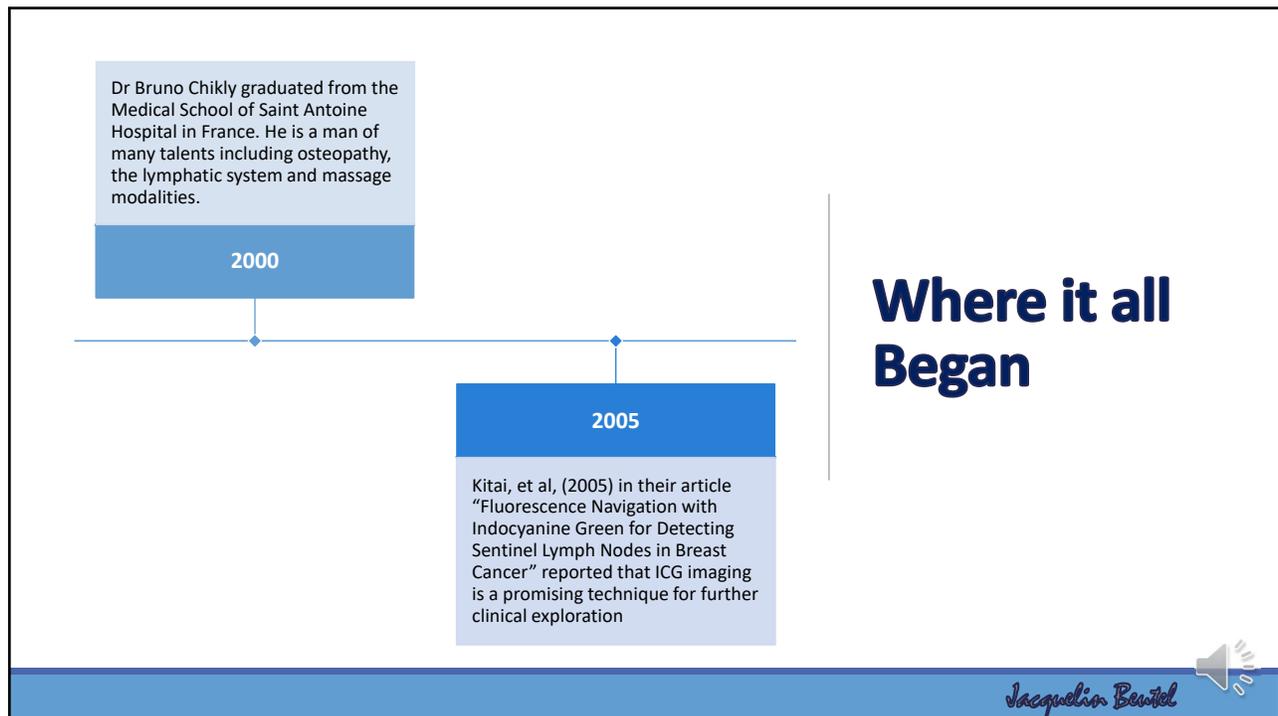
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Define DLT

DLT = Decongestive Lymphatic Therapy

DLT is the gold standard treatment for managing a client at risk of, or with, lymphoedema

DLT is also recommended as best practice for managing clients with lipoedema

Some components of the DLT technique are beneficial for many other conditions – e.g. pre and post-surgery, fibromyalgia, migraine, sinus congestion

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Global Terminology

Decongestive Lymphatic Therapy (DLT)

- Current term used in Australia

Complete Decongestive Therapy (CDT)

- Originated in Europe and Australia
- More prevalent in the United States

Complete Decongestive Physiotherapy (CDP) or Complex Decongestive Physiotherapy (CDP)

- Pioneered in the United States by Dr Robert Lerner

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Different Spelling / Abbreviations

Lymphoedema

Lymphedema

LO

Australia

LE

International

Lipoedema

Lipedema



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What is Lymphoedema?

“Lymphoedema is a disease regarded as a malfunction of the lymphatic system that presents as swelling in body regions, particularly the limbs”.

(Suami, H., & Scaglioni, M. F., 2018)

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Sleigh and Manna (2020) describe Lymphoedema as....

“Lymphedema as a chronic disease marked by the increased collection of lymphatic fluid in the body, causing swelling, which can lead to skin and tissue changes. The chronic, progressive accumulation of protein-rich fluid within the interstitium and the fibro-adipose tissue exceeds the capacity of the lymphatic system to transport the fluid. Swelling associated with lymphedema can occur anywhere in the body, including the arms, legs, genitals, face, neck, chest wall, and oral cavity”.

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What is Lipoedema?

Lipoedema is a rare painful disorder of adipose tissue. It essentially affects females and is often misdiagnosed as lymphoedema or obesity. It is globally misdiagnosed or underdiagnosed, and the literature is lacking appropriate guidance to assist clinicians towards this diagnosis.

(Shavit, et al., 2018)

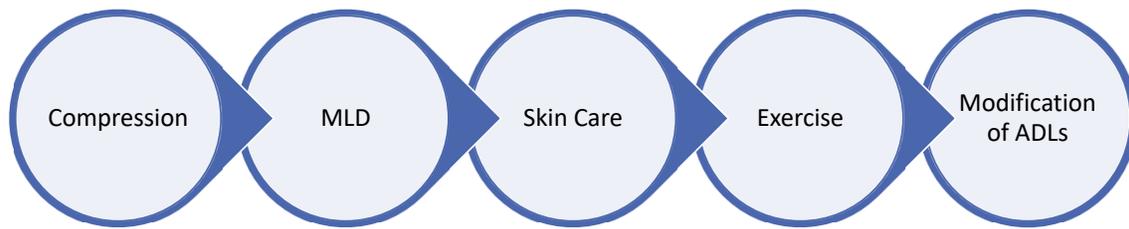
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Decongestive Lymphatic Therapy (DLT)

There are three phases that make up Gold Standard treatment for Lymphoedema. Each phase consists of:



Discussed in detail in own module

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PHASE ONE:



Compression bandaging



MLD



Skin care

Decongestive Phase

Therapist led

Patient is seeing you daily



Exercise



Modify ADLs

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PHASE TWO:

Transition Phase Patient led

Patient will see you regularly



Intermittent bandaging



Compression garment



MLD



Skin care



Exercise



Modify ADLs

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PHASE THREE:

Maintenance Phase Patient led

Patient does not need to see you regularly, they may wish to, but they may just see you every couple of months



Intermittent bandaging



Compression garment



MLD



Skin care



Exercise



Modify ADLs



Adjunctive Tx

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