A practical guide to understanding cancer

UNDERSTANDING LYMHOEDEMA
About this booklet

This booklet gives information and support to people who have lymphoedema or are at risk of developing it.

It’s possible to get lymphoedema that isn’t related to cancer when the lymphatic system (see page 7) hasn’t formed properly or because of other medical conditions. This booklet is only about lymphoedema that is related to cancer.

We describe how lymphoedema is treated and how you can help yourself, and we suggest ways to cope with the physical and emotional effects. We’ve also listed other sources of support and information, which we hope you will find useful.

Throughout this booklet we’ve included some quotes from people affected by lymphoedema, which you might find helpful. The quotes are from the Macmillan online community (macmillan.org.uk/community) and people’s names may have been changed. Other quotes are from a video you can watch on our website at macmillan.org.uk/lymphoedema

We can’t advise you about the best treatment for you. This information can only come from your own doctor, who knows your full medical history.

If you’d like to discuss this information, call the Macmillan Support Line free on 0808 808 00 00, Monday–Friday, 9am–8pm. If you’re hard of hearing you can use textphone 0808 808 0121, or Text Relay. For non English speakers, interpreters are available.
Alternatively, visit macmillan.org.uk or see pages 93–100 for some useful addresses (including compression garment and footwear suppliers), helpful books and websites. On page 101 you can use the notes page to write down any notes or questions for your doctor or nurse.

If you find this booklet helpful, you could pass it on to your family and friends. They may also want information to help them support you.
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Lymphoedema is swelling that develops because of a build-up of fluid in the body’s tissues. This happens when the lymphatic system (see opposite page), which normally drains the fluid away, isn’t working properly. It can occur in any part of the body, but is most likely to affect an arm or a leg.

Lymphoedema is a chronic swelling. That means it is a condition that never goes away because the causes (see pages 12–13) can’t be reversed. However, the swelling can be reduced in most people, particularly when it’s diagnosed early. Specialists in lymphoedema can assess and treat lymphoedema. They can also teach you how to manage it yourself.
The lymphatic system

To fully understand lymphoedema, it helps to first know a bit about the lymphatic system.

The lymphatic system helps to protect us from infection and disease. It’s part of the body’s immune system. Lymph fluid passes through lymph nodes which, are connected by a network of lymph vessels. The nodes are found throughout the whole body.
The lymphatic system:
- acts as a one-way drainage system transporting fluid from body tissues into the blood circulation
- contains white blood cells called lymphocytes, which fight infection
- gets rid of waste products produced by cells.

**Lymph fluid**

This is a colourless fluid that forms in our body and surrounds all our body’s tissues. Extra fluid that comes from the body’s tissues drains into small lymph vessels. It flows constantly through the lymph vessels and is filtered through the lymph nodes. The fluid then drains back into the bloodstream.

**Lymph nodes**

Lymph nodes are found throughout the body, but mainly in the neck, armpits, groin and tummy (abdomen). They filter and break down bacteria (germs) or other harmful cells from the lymph fluid.

Lymph nodes vary in size. Some are as small as a pinhead and others are about the size of a baked bean. The number of lymph nodes in the body differs from person to person.

Different parts of the body have different numbers of nodes. For example, there are about 15–30 small nodes in the armpit.
Lymph vessels

Lymph vessels are a network of tubes that connect to groups of lymph nodes throughout the body. Some vessels are just under the skin and can easily be damaged if the skin is broken. The fluid travels through the lymph vessels and drains into the bloodstream.

How the lymphatic system works

Lymph fluid normally flows through the network of lymph vessels that connect to a group of lymph nodes. The nodes act as a filter, destroying or trapping anything harmful that the body doesn’t need. The lymph nodes contain white blood cells (lymphocytes), which attack and break down bacteria, viruses, damaged cells or cancer cells.

Waste products and the destroyed bacteria are then carried in the lymph fluid back into the bloodstream and are removed from the body with other body waste.

Lymph nodes sometimes trap bacteria or viruses that they cannot destroy straight away. When you have an infection, lymph nodes often swell and become tender and sore to touch as they fight infection.

Sometimes, cancer cells spread into the lymph nodes from a cancer that’s in another part of the body. It’s also possible for a cancer to start in the lymph nodes themselves. This is called lymphoma. If this happens, the lymph nodes become swollen but are usually painless.

There are different causes of swollen lymph nodes, but if you develop a painless, swollen lymph node it’s important to have it checked by your GP.
How lymphoedema develops

Lymphoedema develops when lymph nodes or vessels are damaged or blocked or if the lymph nodes have been removed by surgery. Lymphoedema is caused when lymph fluid cannot pass through the vessels or lymph nodes and the fluid cannot drain away in the usual way. The fluid then builds up between the tissues and causes swelling.

If lymph nodes or vessels are damaged by cancer treatment, they cannot be repaired. This means if lymphoedema develops, it cannot be reversed. The swelling can usually be reduced but does not go away completely. This is known as a chronic condition.

However, you can reduce the risk of lymphoedema developing (see pages 20–23). If you develop lymphoedema and it is diagnosed and treated early, the swelling can be reduced in most people. Part of the treatment is learning what you can do to help manage it yourself.

‘I go to a lymphoedema clinic twice a year and if the nurse thinks there are no problems I don’t have to go back for six months, but I’ve always got a phone number to call in case something goes wrong.’

Betty
Causes of lymphoedema

Lymphoedema that is caused by cancer treatments or the cancer itself can be due to:

- **Surgery** to remove lymph nodes. This can interrupt the normal flow of the lymphatic system, leading to a build-up of fluid in the affected area.

- **Radiotherapy** to the lymph nodes. This can cause scar tissue (hardening of the tissue) that blocks the flow of lymph fluid.

- Cancer cells that spread to the lymph nodes. This can cause a blockage, leading to a build-up of fluid.

- **A nearby cancer** that is pressing on the lymph vessels. This can cause a blockage in the lymph nodes close by.

Lymphoedema after cancer treatment

Lymphoedema can develop weeks, months or even years after cancer treatment. The most common places for lymphoedema to occur after cancer treatment are:

- **In the arm** after breast cancer treatment (surgery or radiotherapy) to the armpit.

- **In the leg** if cancer or its treatment affects the lymph nodes in the pelvis or groin area. This usually happens after surgery or radiotherapy for gynaecological cancers (cancer of the womb, cervix, ovary, or vulva) or anal cancer. Or it can happen after treatment to the lymph nodes in the groin for a type of skin cancer called melanoma.
Other areas lymphoedema can develop in are:

- **the breast or chest area**, after breast cancer treatment

- **the pelvic area and genitals** after surgery and/or radiotherapy to lymph nodes in the pelvis for cancers of the prostate, bladder, womb, vagina, testicles, penis or rectum

- **the face, head and neck** after surgery or radiotherapy to lymph nodes in the neck.

It’s common to get swelling (oedema) near the surgery scar in the first days after surgery. This usually settles down gradually, but can take several weeks to go away completely. This type of swelling is not the same as lymphoedema.

Lymphoedema develops a few months or years after surgery to remove the lymph nodes. If you’re concerned about any swelling, always talk to your doctor or nurse.

**Not everyone who has lymph nodes removed or radiotherapy to the lymph nodes will get lymphoedema, but there is a risk of developing it.**

‘You may notice that clothes become tight, or rings and watches start to leave indentations. It will usually be a slow, gradual swelling.’

Betty
Understanding lymphoedema

Signs and symptoms

Getting advice and starting treatment as soon as you notice any signs and symptoms can help to reduce the risk of the lymphoedema getting worse.

The signs and symptoms of early lymphoedema include:

• **Swelling** – your clothing, shoes or jewellery (rings or watches) may feel tighter than usual. This may be the first thing you notice before you see any swelling.

• **Change in sensation** – the limb or area may feel heavy, tight, full or stiff.

• **Skin changes** – the skin in the area may feel tight or stretched and sometimes the texture can feel thicker. Skin may also be dry, flaky, rough or scaly.

• **Aching in the affected area.**

It is important to get advice from your doctor or specialist nurse as soon as you notice any swelling, tightness or aching.

Other symptoms

The symptoms vary depending on whether the lymphoedema is mild, moderate or severe. At first, the swelling may not be very noticeable. There may be swelling in the tissue, and soft and gentle pressure might leave a mark or indentation on the skin (pitting oedema).
In later stages, the skin tissue often hardens and there may be more complex skin problems. Sometimes, the skin stretches and breaks, and lymph fluid leaks out on to the surface.

This is called lymphorrhoea (see pages 36–37) and is due to fluid building up in the tissues or damage to the skin. More severe lymphoedema may limit some of your movements and ability to do everyday things, or it may change the normal shape of your limb.
Diagnosis

Your doctor, specialist nurse or physiotherapist will ask about any other signs or symptoms you’ve had, and examine the swollen limb or area. They will know which cancer and any treatments you’ve had in the past, and will assess whether your symptoms are due to lymphoedema.

Not all swelling is lymphoedema and sometimes tests are needed to rule out other possible causes, such as a blood clot. Some people may need to have scans to find out if the lymphoedema is caused by a cancer affecting the lymph nodes.

If you have any signs or symptoms of lymphoedema, contact your hospital doctor, specialist nurse, physiotherapist or GP for advice. Treatment can improve lymphoedema and the earlier it’s started, the more successful it’s likely to be.

Lymphoedema specialist

If your doctor diagnoses you with lymphoedema, you’ll be referred for a specialist assessment. Health professionals with specialist knowledge in treating lymphoedema may include:

• specialist lymphoedema nurses
• breast care nurses
• doctors
• physiotherapists
• occupational therapists.

In this booklet, the term lymphoedema specialist refers to any one of these health professionals.
Assessment

This is carried out by a lymphoedema specialist who will assess whether the lymphoedema is mild, moderate or severe.

Your specialist will ask you about your medical history, check your skin and look for any changes. They will also assess the size and shape of the limb and how the tissue under the skin feels. They may measure your limb with a tape measure, or other specialist equipment, and compare it to the unaffected limb. They will also check your movement and ability to do everyday things.

Sometimes, other tests may be used when it’s difficult to diagnose lymphoedema.

Your lymphoedema specialist should always carry out a full assessment so they can decide the best way to treat the lymphoedema.

Specialist lymphoedema centres

In some areas of the UK, there are specialist lymphoedema centres which offer treatment and advice. Your doctor or nurse should be able to tell you if there’s one in your area. The British Lymphology Society (see page 93) produces a directory of centres. If you don’t live close to a centre, there are other organisations that can offer advice and support – see pages 93–100.
Reducing your risk of lymphoedema

This section is for people who don’t have lymphoedema but are at risk of getting it. It gives you information about how to reduce your risk.

If you have had surgery to remove lymph nodes in your armpit or groin, or radiotherapy in the same area, you will always be at risk of developing lymphoedema. The risk is greater if you have had both surgery and radiotherapy to the lymph nodes.

Some people will have just one or two lymph nodes removed (sentinel lymph node biopsy or SLNB) rather than a complete group of nodes (lymph node clearance). If you have had an SLNB you are still at risk of getting lymphoedema, although the risk is lower. The sentinel node is the first node (or nodes, as there may be more than one) that lymph fluid drains to from a part of the body.

We do not know why some people develop lymphoedema after cancer treatments and others don’t. It’s possible that straining the limb or a skin infection may cause swelling in someone who is at risk of developing lymphoedema.

The body responds to inflammation and infection by producing extra fluid. If the lymphatic system in that area isn’t working as efficiently as it should be, the extra fluid could overload it and lead to lymphoedema.

Following the precautions and advice in this section may help to reduce your risk of lymphoedema.
Look after your skin

It’s very important to keep the area that’s at risk of lymphoedema clean and well moisturised. This reduces the risk of inflammation and infection. It’s also important to protect your skin from cuts and grazes, as well as insect bites and sunburn.

There’s more detailed information on skin care on pages 28–29.

Look out for early signs of infection

It’s important to be aware of early signs of an infection in the arm or leg at risk of lymphoedema (see page 33). You can then have the infection treated immediately with antibiotics (see pages 35–36). Contact your GP straight away if you notice flu-like symptoms or any of the following signs of infection:

• redness or warmth in the limb that’s at risk
• painful swelling in a limb that wasn’t swollen before
• pain or tenderness in the limb that’s at risk
• red streaks that go up or down from the affected area
• high temperature or fever.

Try to exercise and keep active

Lymphatic drainage is improved by muscle activity. Regular exercise and keeping active will help encourage lymph fluid to drain and also helps with joint movement.
Gentle stretching exercises can help your arm or leg get back to normal after surgery or radiotherapy. They help recovery after surgery and are important to carry on for as long as advised. Exercises should be done gently and gradually. A physiotherapist will usually show you what exercises to do.

After your treatment is over you can usually get back to any physical activity or exercise programmes you were involved in before, or you may begin a new one. It’s important to start slowly and gradually increase the intensity. There may be some exercises you’ll need to be more careful about, such as weightlifting or sports that involve physical contact. This is because these exercises make you more likely to get a break in the skin or injure the affected limb.

Physical activity will help you feel better generally and help to keep your weight down. It encourages deeper breathing, which stimulates lymph fluid flow. Breathing exercises on their own or as part of yoga or pilates can also help.

Ask your physiotherapist or nurse for advice about exercise. There is more information about exercise and keeping active on pages 52–55. You may also find our booklet Physical activity and cancer treatment useful.

**Keep to a healthy weight**

The risk of developing lymphoedema is increased if you’re overweight. It’s important to try to keep your weight within the normal range for your height. Your GP or practice nurse can tell you what your ideal weight should be. You can also ask them, or a dietitian, for advice and support on eating healthily. There is more information about keeping to a healthy diet on pages 69–70.
Take care when travelling

Here are some tips on what you can do to reduce your risk of developing lymphoedema when travelling:

• avoid sitting in one position during the whole journey

• move around often and do gentle stretching exercises when you travel by air or train

• during longer car journeys, make regular stops and get out and walk around

• wear comfortable clothes and shoes, and avoid tight-fitting clothes

• wear flight socks that fit well – your GP or specialist nurse can give you advice if you can’t find a pair to fit

• use a suitcase on wheels that can be pulled instead of picking up or carrying a heavy bag.

You don’t normally need to wear a compression garment when travelling by air unless you have developed lymphoedema. However, if you have had any swelling caused by cancer or the treatment for it and you are travelling a long distance by air, your specialist will be able to advise you on what to do. They can tell you how helpful a compression garment might be in your situation.
TREATING AND MANAGING LYMPHOEDEMA

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Treating and managing lymphoedema

Treatment for lymphoedema aims to reduce and control swelling, relieve discomfort, and prevent more build-up of fluid. It aims to encourage other healthy parts of the lymphatic system to be more effective and prevent further problems.

Following treatment, the affected limb or area should become less swollen, be easier to move, and feel more comfortable.

Sometimes it may take several weeks or months before you notice any real improvement.

Managing lymphoedema

Learning how to manage lymphoedema yourself is the main part of the treatment. At first it may seem overwhelming and feel unfair that you have all this to deal with. It’s normal to have these difficult feelings (see pages 80–83).

After you have been assessed by your lymphoedema specialist, they will discuss the best way to manage the lymphoedema. They will explain, and show you, what you can do for yourself. This is likely to involve a combination of skin care, exercises, a simple form of skin massage and wearing a compression garment. Some of the treatments may need to be done every day to give the best results.
Gradually you can build your lymphoedema care into your daily routine. Family and friends often want to help and there may be practical things they can do. They could help with heavy lifting or carrying, or help you with your compression garment or simple skin massage (see page 59–60). Taking good care of yourself is also important (see pages 68–71).

**Treatment for lymphoedema affecting an arm or leg involves:**

- skin care to prevent injury and infection
- positioning and moving your limb to help drain fluid
- exercising and keeping active to improve the flow of lymph
- daily deep-breathing exercises
- for some people, using compression garments such as sleeves, stockings, special bras, or compression bandages
- in some situations, specialised massage, called manual lymphatic drainage (MLD), or self-massage, called simple lymphatic drainage (SLD), to help drain fluid.

We explain how lymphoedema in the breast or chest, the head or neck, or the genitals is treated on pages 47–49.

‘I have a wonderful lymphoedema nurse who I see every few months and who provided me with massage instructions and advice on support garments. I try to do the massage most days and use support garments.’

Anna
Skin care

Looking after and protecting your skin is a very important way of preventing injury and infection. Any break in the skin can make you more likely to get an infection there.

Lymphoedema can cause your skin to become dry and itchy, making cracks and breaks more likely. This can increase the risk of infection but can usually be prevented by moisturising often. You can buy moisturising creams from your local chemist or get them on prescription from your doctor. Your lymphoedema specialist can suggest which creams might be best for you.

General skin care advice for anyone with, or at risk of, lymphoedema

Here’s some advice about reducing the risk of infection and protecting your skin. It’s followed by specific advice for lymphoedema of the arm or leg.

Reduce the risk of infection

• Keep your skin clean and dry. Use soap-free cleansers that don’t dry your skin.

• Wash with warm water every day. Carefully dry in between fingers or toes of the limb that is at risk of lymphoedema, to prevent fungal infections.

• Moisturise gently every day with unperfumed cream or oil to help your skin stay in good condition.
• When applying moisturiser, the last stroke should be downwards (in the direction of hair growth) to prevent the moisturiser blocking the hair follicles (folliculitis).

• Treat even small grazes and cuts straight away. Wash and dry the area thoroughly, apply antiseptic cream and cover, if necessary.

• See your GP straight away if you develop any signs of infection in the affected area (see page 33).

• Do not get a tattoo on the limb that is affected or at risk.

• If possible, avoid having needles put into your affected hand/arm or foot/leg when you have blood taken, injections, vaccinations, a drip (infusion), or acupuncture. Although there’s no strong medical evidence to support this, most lymphoedema experts think it’s a wise precaution to take to reduce the risk of infection.

It may be helpful to wear a lymphoedema alert bracelet to remind healthcare professionals that the affected arm should not be used for needles. These are available from the Lymphoedema Support Network (LSN) – see page 93 for details.
Protect yourself from inflammation

• Protect the skin on the affected area from the sun by covering up with clothes or wearing sun cream with a sun protection factor (SPF) 50. Never use a sunbed.

• Use insect repellent to prevent insect bites as they can lead to inflammation and infection. Speak to your pharmacist about the best product. You need a repellent with at least 50% DEET. This is the active ingredient in insect repellent. If you’re stung on, or near, the affected area, see your GP for advice.

• Avoid using saunas, hot tubs and steam rooms, and try not to sit too close to a fire or other heat source.

• To avoid scalding yourself, always test the water’s temperature before you have a bath and shower.

• Be careful when playing sports that may result in an injury to the arm or leg with, or at risk of, lymphoedema.

Lymphoedema of the hand or arm

Here are some specific tips for people with, or at risk of, lymphoedema of the hand or arm:

• Avoid cuts or scratches by wearing gloves for household tasks, such as washing up, DIY, or gardening. Be careful when handling any pets that might scratch. Wearing long sleeves, as well as gloves, will give extra protection when doing some of these activities.

• Use your unaffected hand to remove food from the freezer.

• Avoid burns by using oven gloves or pot holders and by wearing long sleeves when cooking and baking.
• Avoid limiting the blood supply to the affected area, such as having your blood pressure taken or wearing tight elasticated bracelets.

• Use nail clippers instead of scissors to reduce the risk of cutting your skin and don’t push back or cut your cuticles.

• Never use a razor blade to remove unwanted underarm hair. Use a well-maintained electric shaver to avoid getting cuts.

• Don’t use waxing or sugaring to remove unwanted hair. Hair removal creams can be harsh on the skin so be careful and try a small test patch before using them on larger areas.

• Avoid wearing jewellery or clothes that could restrict the flow of fluid, such as tight bra straps, tops with tight armholes, or rings, watches or bracelets that feel tight. A well-fitted bra with a wide shoulder strap and deep sides can help support the breasts and feel more comfortable.

• Avoid deep tissue massage on the affected area.

• Don’t carry anything heavy, such as bags or shopping, with the affected arm. Muscle strain can make the swelling worse.

• Avoid everyday activities that use the arm for long periods, such as using a vacuum cleaner, or gripping, such as ironing or driving.

• Rest frequently and do some exercises to stretch and relax the muscles to lessen the strain.
Lymphoedema of the foot or leg

Here are some specific tips for people with, or at risk of, lymphoedema of the foot or leg:

- Wear well-fitting footwear to protect your feet and to avoid getting blisters.

- Don’t walk around barefoot in case you step on something or stub your toe, causing damage to the skin.

- Use nail clippers instead of scissors to cut your nails to reduce the risk of cutting your skin.

- See a chiropodist (a foot specialist) for foot and nail care if you need extra help, and let them know you have, or are at risk of, lymphoedema.

- Wash and dry between your toes carefully and use anti-fungal powder to prevent or treat signs of athlete’s foot such as peeling, itchy skin.

- Wear long trousers to protect your legs when you’re gardening or doing DIY or household tasks.

- Never use a razor blade to remove unwanted leg hair. Use a well-maintained electric shaver to avoid getting cuts.

- Don’t use waxing or sugaring to remove unwanted hair. Hair removal creams can be harsh on the skin so be careful and try a small patch test before using them on larger areas.

- Avoid deep tissue massage of the affected area.

- Avoid tight clothing around the groin area. Also avoid wearing ankle bracelets or toe rings that can become too tight.

- Avoid standing in one position for a long period of time.
Recognising infection

It’s important to know the signs of an infection. Getting an infection treated as soon as possible puts less stress on the lymphatic system and can prevent lymphoedema from getting worse.

If you develop an infection in the skin (cellulitis), the area may become:

• red and hot
• painful
• more swollen.

You may also:

• have red streaks going up or down from the infected area
• have a high temperature (fever)
• feel generally unwell (like you’re coming down with the flu)
• lose your appetite.

If you have any of these signs, contact your GP straight away. They will usually prescribe a course of antibiotics, which you should start immediately – see pages 35–36.

If it happens over the weekend, don’t wait to see your GP. Go to your local A&E department. You should also contact your lymphoedema specialist, who will usually advise you to stop all lymphoedema treatment.

Don’t wear any compression garments if they feel uncomfortable, and rest the swollen area in a comfortable position with the whole limb supported by a pillow.
Guidance on the use of antibiotics

In the UK there is guidance for healthcare professionals on using antibiotics to treat cellulitis when you have lymphoedema. The guidance is written by a group of specialist doctors and reviewed every year. It’s important your GP follows this guidance when prescribing antibiotics for lymphoedema.

It’s called the consensus document on the management of cellulitis in lymphoedema. It’s available from the British Lymphology Society (see page 93).

The guidance says that someone with lymphoedema who develops cellulitis should start taking antibiotics as soon as possible. The antibiotics should be taken for two weeks (14 days) as prescribed, until all signs of infection have gone.

It may also be useful to keep antibiotics with you at home or to take antibiotics with you when you travel abroad. You can discuss this with your GP or lymphoedema specialist.

The antibiotics suggested in the document are:

• amoxicillin and/or flucloxacillin

• clarithromycin or erythromycin, if you’re unable to take penicillin

• clindamycin, if the infection isn’t better after 48 hours.
It’s also important to rest and keep the affected area raised. Compression garments (see pages 38–42) may need to be removed if infection is severe. You may need pain relief from your doctor.

Some people with cellulitis need to be admitted to hospital to be given antibiotics into a vein (intravenous treatment). This normally happens when cellulitis is more severe or becomes worse despite having antibiotics at home.

**Treating lymph leaking from the skin (lymphorrhoea)**

Lymphorrhoea happens occasionally when:

- an area is very swollen
- the skin is very dry
- the area of swelling is difficult to treat, for example the genital area
- there is a break in the skin
- in some people, a blister filled with lymph fluid appears on the surface of the skin. It can break and the fluid can leak from it.

It’s important to take very good care of your skin. If you have lymphorrhoea, keep the area clean. The broken skin can easily cause an infection, which can cause cellulitis.
You should see a lymphoedema specialist as soon as possible if you have lymphorrhoea, so that they can try to stop the skin from leaking. In some cases they may refer you for further treatment by a skin doctor (dermatologist).

The specialist can show you ways of managing lymphorrhoea at home. You may also benefit from having light bandaging to reduce the swelling in an area that is difficult to manage with a compression garment (see page 44).

What you can do while waiting to see a specialist:

- keep the skin clean and observe for signs of infection (see page 33)
- apply moisturiser around the area that is leaking
- lift your limb when you can – raise an arm to the level of the shoulder or a leg to the level of the hip
- regularly apply a clean, dry dressing to the area. Do not tape it to the skin; gently hold it in place with a soft bandage. Do not apply a lymphoedema bandage (see page 44) unless you’ve been shown how to do it.

Lymphorrhoea can be distressing and upsetting but specialist help and support can make a real difference.

We have more information about body image and cancer and how you might be feeling. Visit macmillan.org.uk
Compression garments

Understanding lymphoedema

You may be prescribed and fitted with a compression garment to help control lymphoedema. Sleeves can be used for swollen arms and stockings can be used for swollen legs. You can also get compression garments for lymphoedema that affects the breast or chest and genital areas.

The garments work by:

• limiting the build-up of lymph fluid

• helping to move fluid to an area that’s draining well

• providing support, which allows the muscles to pump fluid away more effectively

• applying more pressure in certain areas to encourage the fluid to drain.

Having a compression garment fitted

It’s important to be fitted by someone who is experienced in measuring and fitting compression garments. Your lymphoedema specialist will usually do this or arrange it for you. Compression garments are available in different levels or grades of pressure depending on how bad the lymphoedema is.

In many hospitals, compression garments are available from your lymphoedema specialist, your specialist nurse or the surgical appliances department.
They come in a range of shades to match different skin tones and hypo-allergenic products are available for people with sensitive skin. There may be a ready-made garment that matches your exact measurements. Otherwise you may need to have made-to-measure garment ordered.

Your GP can prescribe garments but usually only on the recommendation of your lymphoedema specialist. Your specialist will discuss which is the best garment for you and they will choose the correct size. Your GP will then be asked to provide the garment.

If you have lymphoedema around the chest area, sometimes a compression bra or vest that is made to measure can help. The garment should not dig in to the chest, back or shoulders. Your lymphoedema specialist can tell you whether this would help in your situation.

If you have lymphoedema in your fingers or toes, you may need a garment that covers these areas as well as your arm or leg.

**Putting on and removing compression garments**

When you’re fitted for your compression garment you will be shown how to put on and remove the garment. Here are some useful suggestions:

• Put your garment on first thing in the morning when the limb is at its smallest. It is best not to put it on straight after a shower or bath as dampness can make it difficult to put on.

• Start by turning the stocking or sleeve inside out as far as the wrist or heel part. Pull the garment over your hand or foot and ease it up, a bit at a time. Make sure you don’t pull it up by the top of the garment.
• Do not turn or roll the top over – this will restrict the blood flow and cause more swelling.

• If you have lymphoedema in your arm, wearing a rubber glove on your unaffected hand may help when putting your compression garment on. Holding onto something like a doorknob or handle so that you can pull against it when pulling the sleeve up your arm can also help.

• Applying a little unperfumed talc to your arm or leg can help to ease the garment on. There are also different aids available to help put garments on and to take them off – see page 94 for a list of suppliers.

• Make sure the material is spread evenly and there are no wrinkles or creases when your garment is on. Wearing a rubber glove on the unaffected hand can help you smooth the garment out.

• Moisturise your skin at night after you’ve taken off your garment rather than in the morning, because cream makes the sleeve or stocking difficult to put on.

**Wearing compression garments**

It’s important to wear your compression garment all day. It can usually be taken off at night when you’re lying down and resting.

When you first start wearing a compression garment, wear it for a few hours the first day. Then gradually build up the time you wear it for each day, until you can keep it on for most of the day. This will help you to become used to the feeling and pressure of the garment against your skin.
If the garment feels very uncomfortable at first, you could try wearing it only when you are most active. Gradually you will find it more comfortable and can increase the amount of time you wear it. However, if you still are finding it difficult to wear, ask your lymphoedema specialist to check that it is fitted correctly.

You should be given at least two garments so that you can have one in the wash, while you wear the other. The manufacturer will supply washing instructions. The garments tend to last longer if they are washed by hand rather than in a washing machine.

When worn every day, each garment should last 4–6 months. Therefore, your two garments usually last about a year before needing to be replaced. You will need to be re-measured by your lymphoedema specialist before you get a replacement.

If your weight changes you may need to be measured again for a new garment. If your compression garment is too loose, it won’t control swelling and if it’s too tight, it will restrict blood flow.

If you notice a change in sensation such as numbness, pins and needles, or pain, or your fingers or toes change colour, the garment is probably too tight. Remove it straight away and contact your lymphoedema specialist for advice. It’s important that you’re properly measured and fitted to prevent these problems from happening.

It can often be uncomfortable to wear garments in hot weather. Some manufacturers produce cotton-rich garments that can be helpful in the summer months and for people who have skin allergies.
Understanding lymphoedema

You can cool down your garments by putting the spare one in a plastic bag in the fridge (not freezer). It can also help to spray cool water, using a spray bottle, over the garment while you are wearing it. If wearing the garment in hot weather is still too uncomfortable talk to your lymphoedema specialist. They may have other suggestions to help you.

If you’re travelling a long distance, especially by air, make sure you wear your compression garment for a few hours before your journey, for the full length of the journey and for some hours afterwards.

When not to use compression garments

There are some situations when compression garments should not be worn. You should avoid wearing one if:

- the arm or leg is large and irregular in shape
- the skin is fragile or damaged
- the skin is pitted, folded or leaking lymph fluid.

Compression garments used incorrectly can be harmful, and won’t help the swelling go down. The material can form tight bands across the skin and even damage it. If you’re in doubt, ask your lymphoedema specialist for advice.

If your limb is large and irregular in shape, compression bandaging (see page 44) is used first to reduce the size of the limb, before a compression garment is fitted.
‘It’s just like putting your shoes on every day. I get up and I put my sleeve on, it’s just a part of me and I’m glad it’s under control.’

Irene
Compression bandages

If your arm or leg is very swollen or its shape has changed a lot, it may be difficult to fit a compression sleeve or stocking.

To reduce the swelling and improve the shape, special multi-layer lymphoedema bandages and different types of foam can be used as part of your treatment.

Sometimes bandaging is used if the skin is fragile and could be damaged by putting on and removing a compression garment.

A lymphoedema specialist will usually put the compression bandages on for you every day. It may take two or three weeks of bandaging before it’s possible to fit a compression sleeve or stocking.

Bandaging is often combined with manual lymphatic drainage (MLD) massage (see pages 56–57) or simple lymphatic drainage (SLD) massage (see pages 59–60), exercises and skin care to reduce the size of a limb that’s very swollen.

There are other forms of compression bandages that are like wraps. They have overlapping straps and are often secured with Velcro. Wraps can be easier to use and may be more effective when swelling is harder to control.
Positioning and moving your limb

Carefully positioning your affected limb when resting or sitting can prevent more swelling. Always avoid sitting with your legs down if you can, as this causes the fluid to drain into your feet and calves. Moving your muscles helps to move fluid around the body, so regular gentle movement or exercise prevents fluid from building up.

These tips will help you position your limb correctly.

If you have arm swelling:

• Rest your arm on a cushion placed on the arm of a chair so it’s fully supported, when sitting down.

• Try not to rest your arm above shoulder height – it may reduce blood flow to your arm and increase discomfort.

• Raise your arm slightly on a pillow when you’re lying down.

• Avoid carrying heavy shopping or other loads with your affected arm.

• Be careful when you use your affected arm for activities that involve a lot of repeated stretching. Some people find that too much activity can make the swelling worse, especially if they’re not used to it.

• Try not to leave your arm in the same position for too long.
If you have leg swelling:

• Avoid crossing your legs when you’re sitting down.

• Don’t sit with your legs down for long periods – either lie with your legs up on a sofa or sit with them fully supported on a footstool.

• Get up and move about at least once an hour if you can.

• Try not to leave your leg in the same position for too long.

• Avoid standing still for long periods of time.

If you have to stand, do the following exercises to stimulate the pump action of your muscles:

• Raise yourself up on to your toes frequently to tense and relax your calf muscles.

• Shift your weight from one leg to the other, and transfer your weight from heels to toes, as if walking on the spot.

• Try rocking back on your heels and forward onto your toes a few times.

‘On a normal day I’m lucky not to have any significant problems, although if I’m sitting down I’ll put my feet up whenever possible.’

Anne
Treating lymphoedema in other parts of the body

Lymphoedema can affect other parts of the body, depending which lymph nodes have been removed or affected.

As with treatment for arm or leg lymphoedema, good skin care is essential (see pages 28–37). Exercising, keeping to a healthy weight and taking good care of yourself are also important (pages 52–55). Your specialist will explain the best way of managing and treating lymphoedema on other parts of your body.

Breast or chest lymphoedema

Clothing, bras and prostheses
Clothes that are too tight, such as bras, vests, or anything with a tight waistband, can sometimes prevent lymph fluid from draining.

If your bra is too tight around the chest, or if the straps dig into the shoulders and under the arm, this can prevent the flow of lymph fluid out of the chest. Try wearing a bra that has wide and flexible shoulder straps and bands around the chest. It’s also important to make sure you have the right cup size – your lymphoedema specialist can advise you about being correctly measured.

Some breast prostheses are very heavy and can apply pressure to the chest area, making the shoulder straps on a bra dig in. If you need to wear a prosthesis, try to get a lightweight one. Your lymphoedema specialist can advise you about bras and breast prostheses.
Compression bras and vests
You can get compression bras and specialist vests for breast or chest lymphoedema from your lymphoedema specialist. They often need to be made to measure to make sure they fit properly. It can also be helpful to wear a sports bra.

You may also need to wear a compression sleeve to stop the fluid moving from one area to another, and to help to improve drainage. Compression bandaging isn’t often used to treat lymphoedema of the breast or chest area.

Manual lymphatic drainage (MLD) and simple lymphatic drainage (SLD)
MLD (see pages 56–57) or SLD (see pages 59–60) are an important part of treating breast and chest lymphoedema.

Your therapist can give you more information about this.

Lymphoedema taping (Kinesio® taping)
This is a special taping technique (see page 64) that’s applied directly onto the skin. It gently lifts the top layer of skin, which allows the superficial lymph fluid to flow more easily.

Genital lymphoedema
It’s important to look after your skin and keep it clean as skin infections can be more common in the genital area. Genital lymphoedema is usually treated with MLD or SLD (see pages 56–60).

Women may have compression garments specially made, which can be padded to protect swollen areas. Sports clothing or shapewear underwear containing lycra may also help, depending on how much swelling there is.
Pelvic floor and tummy (abdominal) exercises combined with deep breathing exercises can help reduce swelling. Your lymphoedema specialist can show you how to do these.

In men, a scrotal support or specially made compression garment can be used to help to control swelling. Close-fitting lycra shorts (cycling shorts or some types of underwear) can also be useful, depending on how much swelling there is. Padding can also help to protect swollen areas. Bandaging can sometimes be used if the penis is swollen.

Your specialist can tell you about which products might be helpful in your situation. Occasionally, surgery may be used to treat genital lymphoedema. Your doctor will discuss this with you.

**Head and neck lymphoedema**

Lymphoedema of the face, neck or head is usually managed with MLD and SLD (see pages 56–60). In some situations Kinesio taping is used (see page 64). Sometimes, special, low-pressure compression garments can be made to use in this area of the body. But compression should never be applied to the neck area. Surgery is occasionally used to treat lymphoedema of the eyelids.

Any condition that affects the appearance of the head and neck area can be hard to cope with. It’s important to get support from professionals and those close to you if you need it.

We can send you our booklets *Body image and cancer* and *The emotional effects of cancer*. 
OTHER WAYS OF MANAGING LYMPHOEDEMA

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Exercise and keeping active

You can help to manage and reduce lymphoedema by exercising and keeping physically active. Exercising helps you feel better and maintain a healthy weight. It also reduces your risk of developing other health problems and is a good way to reduce stress and anxiety.

Exercise can improve lymphoedema because it:

- increases the flow of lymph fluid by working your muscles and reducing swelling
- encourages fluid to move away from the swollen area
- strengthens your muscles
- keeps your joints flexible, maintaining and improving your range of movement
- improves your posture.

Specific exercises for lymphoedema

Gentle stretching exercises can help to reduce and control lymphoedema. Your lymphoedema specialist will explain the best exercises for you, and how many times a day you should do them. We describe some simple exercises to reduce arm and leg swelling at the end of this section.

If you have been fitted with a compression garment you need to wear it when you exercise. Try to include deep breathing in any daily exercise routines to improve your circulation (see page 61). Do your exercises gradually and regularly, as advised by your specialist, so that you build up a regular routine.
Exercises for lymphoedema should be gentle and feel comfortable. The right amount of exercise or activity will vary from person to person. Swelling may increase if you exercise too quickly, for long periods or too often. If you’re doing too much, your skin will become red, sticky and hot.

**Keeping physically active**

Carry on using your affected limb for all your normal activities. Keeping yourself physically active by doing things around the house or in the garden is also another form of exercise.

Start gently with most activities and gradually increase. You may have to avoid some activities that place stress on the affected limb, for example, moving heavy pieces of furniture or mowing the lawn with your affected arm.

**Resting**

It’s also important to break up long, busy days with times of rest with your limb supported. If your arm is affected, be careful not to carry anything too heavy. If you need to go shopping, use a trolley. If you can, do your shopping online and have it delivered to avoid carrying heavy bags.
Other types of exercise

It is usually fine to continue exercising if you did before as long as you get back into it gradually. There are some types of exercise that you will need to take more care with. Always ask your lymphoedema specialist for advice and talk to your doctor before you start. If you use gym equipment, talk to an instructor to avoid using heavy weights.

Swimming, walking, stretching exercises and yoga are all good types of exercise. Swimming is particularly helpful if you have problems with your joints, as it works the muscles without putting strain on the joints.

It’s important to talk to your lymphoedema specialist and your doctor before starting an exercise programme. If any type of exercise makes you breathless or uncomfortable, or seems to make the swelling worse, stop doing it straight away and ask your specialist for advice.

‘Exercise can really help with lymphoedema but I had to find the right level of intensity. After treatment, I did too much at once which ended up causing even more swelling in my legs. I’ve also taken up swimming which I’ve found very beneficial.’

Barny
Exercises to reduce arm swelling

Here are some simple exercises to reduce arm swelling:

- Sit comfortably and support your arm at shoulder height on pillows. Make a fist and then stretch your fingers out straight. Repeat this exercise as many times as feels comfortable.

- Try bending and straightening your arm at the elbow, with your arm supported.

- Check that your shoulders are level by looking at your posture in the mirror. Practise shrugging and then dropping your shoulders slowly to the count of five.

- Slowly circle your shoulders in one direction, then the other.

Exercises to reduce leg swelling

Do the following exercises at regular intervals while you’re resting:

- For leg swelling, try sitting with your leg up, making sure it’s supported behind the knee.

- Move your foot at the ankle to pull your toes up and then point them down.

- Bend and straighten your leg at the knee.

Your lymphoedema specialist can tell you what other exercises might help. What’s right for you will depend on your level of fitness.
Manual lymphatic drainage (MLD)

Manual lymphatic drainage (MLD) is a specialised, gentle type of skin massage which may be used as part of your lymphoedema treatment. The aim is to encourage the extra lymph fluid to move away from the swollen area so it can drain normally. MLD also improves lymph fluid drainage through the healthy lymph vessels, which helps control swelling. Breathing techniques are also an important part of this treatment (see page 61).

MLD should only be given by a trained and experienced therapist. A number of different techniques can be used. The different methods are:

- Casley-Smith
- FG-MLD
- Földi
- Leduc
- Vodder.

Your therapist should be trained in at least one of these. They will give you further information about the technique they use and what it involves.

MLD may be especially helpful if you have lymphoedema in your face, neck, upper arm, breast, trunk (body) or genitals.

MLD is usually combined with compression garments or bandaging to keep the swelling down. But it can be particularly useful in areas where it’s difficult to use compression therapy.
NHS lymphoedema treatment clinics often provide MLD. However, it’s not available at all centres. If you’re having difficulty finding a qualified MLD therapist, contact Manual Lymphatic Drainage UK (see page 93), who keep a register of their members. Or you may find the directory on the British Lymphology Society’s website helpful (see page 93).

**Having MLD**

MLD works while you are receiving the treatment. To help keep the swelling down you will be taught how to do a simplified version of MLD yourself at home. It’s a type of self-massage called simple lymphatic drainage (SLD) – see pages 59–60.

When you start, MLD is usually given daily for up to an hour, reducing to two or three times a week. The length of the course may vary and is sometimes combined with other treatments. Before and after MLD, your therapist will do some breathing exercises with you.

You’ll usually be lying down and may have to remove some of your clothing, unless you have lymphoedema of the head and neck area. Your therapist will begin by treating unaffected lymph nodes. They will use some pressure and slow, rhythmical movements. MLD is not used if you have an infection (cellulitis) in the swollen area or if you have certain medical conditions, such as heart problems.
Simple lymphatic drainage (SLD)

Your lymphoedema specialist may suggest simple lymphatic drainage (SLD) as part of your lymphoedema treatment. This is a simplified version of manual lymphatic drainage (MLD).

It’s important that you’re taught these techniques by a lymphoedema specialist before you start. They will teach you to massage the area where you don’t have lymphoedema. This helps to make some space for the fluid to drain into from the swollen area. You do not massage the swollen area. They can also teach a friend or relative to do it.

Doing SLD

Your lymphoedema specialist will explain how to do the massage and show you the right amount of pressure to apply. This will depend on your individual situation.

The aim of this massage is to stimulate the lymph channels on the body (trunk) to clear the way ahead so excess fluid can drain away. Once these channels have been cleared, the excess lymph from the swollen side will be able to drain away more easily.

It is best to choose a time and a place where you can do SLD in a relaxed way and won’t be interrupted or distracted. Make sure you have everything you need before you start and get yourself into a comfortable position. Remember to do your deep breathing exercises first (see page 61).
The massage is done without any oils or creams, using your hand very gently to move the skin in a particular direction. The skin is always moved in the direction away from the swollen side. A little talcum powder may be helpful if your skin is sticky and your hand doesn’t move freely. If your skin is red when you’ve finished, then the movement is too hard.

The LSN (Lymphoedema Support Network) has information on the self-management of lymphoedema and SLD (see page 93).

**Hand-held massagers**

Hand-held massagers may be useful for people who have restricted movement of their hands. You should talk to your lymphoedema specialist before buying one. Some people find it helpful to use a soft baby brush as a massager.
Deep breathing exercises

Before and after MLD and SLD massage, breathing exercises can help to encourage lymphatic drainage. Use the following simple exercises:

• Sit upright in a comfortable chair or lie on your bed with your knees slightly bent.

• Rest your hands on your ribs.

• Take slow deep breaths to relax.

• As you breathe in, direct the air down to your tummy (abdomen), which you will feel rising under your hands.

• Breathe out slowly by ‘sighing’ the air out. While breathing out, let your abdomen relax in again.

• Do the deep breathing exercises five times.

• Have a short rest before getting up, to avoid feeling dizzy.

We have relaxation and breathing CDs you can order, which can help with deep breathing exercises.
Compression pumps

Rarely, compression pumps are used to treat lymphoedema of the arm or leg. If your specialist recommends this, they will need to show you how to use one at home. It may be possible to borrow a pump from your local hospital as they’re expensive to buy. Your lymphoedema specialist can give you more information.

The pump is attached to an inflatable sleeve, which you put on your arm or leg. When you switch on the pump, the sleeve will gradually inflate and apply pressure to the limb. After a few minutes the sleeve will deflate to relieve the pressure for a few minutes. Your lymphoedema specialist will let you know what pressure to use. Don’t use a higher pressure than you have been told to, as this could make the swelling worse.

Before you use the pump, it’s important to carry out simple lymphatic drainage (pages 59–60) or have manual lymphatic drainage (pages 56–57) to your body (trunk) and at the top of the affected limb. This is to drain lymph fluid from these areas before the pump moves more fluid, from your affected limb.

‘My compression garment is like a very thick pair of tights. Before you put them on put talcum powder on your legs as it helps. Now that I use the stockings the swelling is very rare.’
Patricia
Tips for using a pump

- Don’t use the pump if you have an infection or inflammation in the affected limb.

- Always remove your compression garment before using a pump, but put it back on as soon as you’ve finished.

- When using the pump, support your arm on the arm of a chair, or rest your leg up on a sofa or bed. This will help with drainage.

- If you feel pain, stop straight away and call your doctor.

- Watch for any increase in swelling or thickening at the top of the limb where the pump sleeve stops. If this happens, ask for help from your lymphoedema specialist or doctor.
Other treatments

Sometimes, other treatments may be used in combination with the ones already mentioned in this chapter. Some of the following treatments are new and more research is needed to find out how effective they are in treating lymphoedema. Your lymphoedema specialist will know how helpful these treatments might be for you and where they are available.

Lymphoedema taping

This is a special taping technique originally developed to treat sports injuries. More recently it has been used to treat lymphoedema.

This works by applying a special, stretchy tape to the skin. The tape gently lifts the top layer of skin, to allow the lymph fluid closest to the surface of the skin to flow more easily. The tape is water resistant and can be worn for several days at a time. It’s used in areas where it’s difficult to apply compression.

The tape is not available on prescription so you will need to buy it yourself. Your lymphoedema specialist can tell you whether this technique is helpful in your situation and where to buy the tape from.
Surgery

This is rarely used to treat lymphoedema. It’s sometimes used to reduce swelling around the face or genital areas or to reduce the size of an affected limb by removing skin and some of the tissue underneath.

Highly specialised surgical techniques are sometimes also used. They involve transplanting lymph nodes or connecting the lymphatic system to nearby veins to drain the affected area. These are new treatments in the UK and not widely available.

Liposuction is sometimes used in advanced, more complex cases of lymphoedema. It involves surgically removing extra fatty tissue through several small cuts in the skin using a vacuum. After the operation, a compression bandage is applied to the affected limb and it should be kept elevated. After a couple of weeks, the bandages are replaced by compression garments. You will need to continue to wear the garment long-term to prevent an increase in the size of the limb.

Laser therapy

This treatment uses a low-level laser light to target cells along the lymphatic channels. It aims to improve the flow of lymph fluid, soften hard tissue, reduce swelling and prevent it from worsening. Research is being done to find out more about its possible benefits, so at the moment it is not widely available.
COPING WITH LYMPHOEDEMA

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Coping with lymphoedema

Because lymphoedema is a chronic condition, it’s important to stay involved in your lymphoedema care. Keeping up with all the precautions and treatments advised by your specialist can take up a lot of time and you may need extra support from friends and family. Making contact with others through a support group or an online forum can also be a good way of keeping motivated (see pages 84–85).

This section explains some other things you can do to stay as healthy and involved in your healthcare as possible.

Your follow-up

It’s important to go to your regular check-ups with your lymphoedema specialist or doctor. During these check-ups, the skin and tissues in your swollen area will be looked at. Your arm or leg will also be measured to monitor the effect of treatment. Some people find it helpful to keep their own progress chart where they can write down the measurements each time. Try to stick with the advice that you have been given about managing and treating the lymphoedema.

At first your progress may be slow but you should notice an improvement in the affected area after a few weeks. If you have any concerns, talk them over with your lymphoedema specialist or doctor. You should be able to contact them between appointments if you have any problems.
Keeping to a healthy weight

It’s important to try to keep to a healthy weight if you have lymphoedema or are at risk of developing it. Being overweight puts more stress on the lymphatic system and makes lymphoedema harder to manage and treat. Compression garments can be more difficult to put on and may not fit as well.

It can be difficult to lose weight and to keep to a healthy weight. In some circumstances, such as after breast cancer treatment, some people find that they have gained weight because of the treatment.

If possible, try to keep your weight within the normal range for your height. Your GP can tell you what your ideal weight is. You may find it helpful to ask your GP or a dietitian for advice and support.

Tips for keeping to a healthy weight

• Reduce your calorie intake by cutting down on fat and sugar in your diet. Only eat as much food as you need.

• Eat a balanced diet with lots of fruit and vegetables to make sure you get all the nutrients you need to keep your body healthy.

• Increase your physical activity. This will help you to burn calories. Always get advice from your lymphoedema specialist or doctor before you start.

If you need to lose weight it is best to avoid crash diets, which can make you lose weight very quickly. Losing weight slowly is healthier and you’re more likely to keep the weight off for good.
Healthy eating

There isn’t a special diet to prevent or control lymphoedema. However, eating healthily helps to improve your general health and well-being, which is important when coping with lymphoedema. It also helps you to keep to a healthy weight.

Try to eat:
• five portions of fruit and vegetables a day
• more high-fibre foods (wholegrain cereals, brown bread)
• more chicken and fish, especially oily fish
• less red and processed meat
• less saturated fat (pastries, samosas, cheese)
• less salt.

It’s also important to drink plenty of water.

Keeping a food diary

Some people with lymphoedema find that certain foods, such as spicy and salty foods, or alcohol (especially wine) can cause an increase in swelling. Keep a note of any foods you think make your lymphoedema worse as this will remind you to avoid them.
Alcohol

Too much alcohol is high in calories and can cause other health problems. It’s important to stick to sensible drinking guidelines. Current guidelines recommend that men drink no more than 3–4 units of alcohol per day, and women no more than 2–3 units per day.

Avoiding smoking

Smoking affects blood circulation and may affect the skin, which is already damaged by lymphoedema.

If you’re a smoker, you may want to stop. Stopping has many health benefits and reduces your risk of other diseases, such as heart disease, strokes, lung diseases, bone thinning (osteoporosis) and smoking-related cancers. You’ll also feel healthier and save money.

We have information on healthy eating, weight management, physical activity and giving up smoking that we can send to you.
Your sex life

Lymphoedema can affect your sex life and change the way you see, and feel about, your body. You may worry that your partner no longer finds you attractive. If you don’t have a partner, you may worry about a physical relationship in the future. Coping with lymphoedema may make you feel too tired to have sex, and in some situations, may make it physically difficult to have sex. Men who have genital swelling may have difficulty getting an erection. You can get advice about this from your doctor or lymphoedema specialist.

It may involve a period of adjustment for you and your partner. As the lymphoedema improves and you get used to managing it, you’ll probably find that your desire for sex improves.

To make sex more comfortable and enjoyable, you may want to:

• Find sexual positions that don’t put weight on the area affected by lymphoedema.

• Have sex when you feel the swelling is better. For example, many people find that their swelling is less in the morning or after wearing a compression garment for a few hours.

• Use extra lubricant if you have genital lymphoedema to reduce friction to the skin.

• If you feel very self-conscious, have sex while partly dressed or in dimmed light.
It may help to talk to your partner about your concerns if you feel very self-conscious. Talking can help you understand one another better. Sharing your feelings can help your confidence. Partners are often concerned about how to express their love physically and emotionally. Cuddles, kisses and massages are affectionate and sensual ways of showing how much you care for someone, even if you don’t feel like having sex.

Many people feel embarrassed or self-conscious when talking about sex. It’s important to remember that your lymphoedema specialist or doctor will be used to talking about these issues and can suggest what you could do for extra help and support. If you need more expert help, they can refer you to a psychologist, counsellor or sexual therapist.

Our booklet *Sexuality and cancer* has more information about these issues.

‘I’ve been living with lymphoedema for 16 years and it doesn’t really have a great impact on my life.’

Karen
Travel and lymphoedema

If you are planning to go away on holiday, you may worry that your lymphoedema might become more troublesome. As long as you plan ahead for your trip, you should be able to manage any possible problems and enjoy your time away. You may find this checklist useful to help you plan ahead.

Before you go

• If you need any vaccinations before your holiday, it’s important not to have any injections in the affected limb.

• If you’re planning a more active holiday, it may be worth talking with your lymphoedema specialist before you go. They can advise you how to plan your trip so you don’t put too much stress on the affected area.

• If you are planning to fly a long distance and have been fitted with a compression garment, you will need to wear it a few hours before, during the flight and for a few hours after. Any increased swelling you might notice during the flight should reduce afterwards.

• Keep your swollen limb moving by doing exercises during the flight. You can ask your lymphoedema specialist what exercises might help.

• Ask your GP to give you some antibiotics just in case you develop cellulitis while you’re away. It can be helpful for your lymphoedema specialist to speak with your GP about this. There’s more information about cellulitis and antibiotics on pages 35–36.
• Make sure you pack an antiseptic cream just in case you get a cut, scratch or bite on the affected limb or swollen area.

• Pack an insect repellent spray or cream. You need repellent containing at least 50% DEET. This is the active ingredient in insect repellent. Your pharmacist can advise you which might be best.

• If you are taking any prescription drugs with you, make sure you have enough to last and a letter from your doctor with you.

• Make sure you have enough medical insurance cover.

While you are away

• If you have lymphoedema in your leg, do not walk barefoot on the beach or around the swimming pool. This reduces the risk of cuts and possible infection in your foot.

• Sunburn can increase swelling. If you are in a hot climate, it’s important to wear good quality sun block, with a sun protection factor (SPF) 50.

• Sit in the shade or cover the affected area with a hat, long-sleeved shirt or loose trousers.

• Drink plenty of water.

• Sea salt and chlorine make the skin extra dry. If you go swimming shower afterwards and apply moisturiser.
• Avoid saunas and hot baths. Keep the affected limb as cool as possible.

• Avoid lifting and pulling heavy luggage with your affected arm. Ask someone to help.

• If you start to get signs of an infection, such as flu-like symptoms, high temperature, redness or heat in the affected limb or increased swelling, let a doctor know straight away. If you have antibiotics with you, start taking them as soon as possible.

We have more information on travel and cancer that we can send you.

You can also contact the Lymphoedema Support Network, which has a more detailed guide on holidays and travel for people with lymphoedema (see page 93).

‘I always wear compression garments when I fly and make sure I pack some bandages when I go away for a few days. I also always have a small antiseptic spray in my wash bag in case I graze my leg.’

Steve
YOUR FEELINGS

Your feelings
Your feelings

It’s understandable to have a range of emotions about lymphoedema. Although it’s not a life-threatening condition, it changes your body and affects your lifestyle in different ways. It can also be a constant reminder of your cancer experience. Any negative feelings often get easier to cope with as the lymphoedema improves and you get used to managing it.

Feeling self-conscious

You may feel self-conscious or embarrassed about the effects of lymphoedema on your body and worry that people are looking at you.

Although it can take time, lymphoedema can be reduced and you’ll usually find that you become less self-conscious about it. Wearing looser clothes may help you to cope with the changes in your body.

You might find it helpful to prepare a way of explaining lymphoedema to people who may ask questions or comment about it. But it’s up to you how much you want to say about your condition or whether you want to say anything at all.

Other people who have lymphoedema (see page 84) or your lymphoedema specialist may be able to help you with this. Some people find our online community a helpful way to find support from others in a similar situation (see page 85).
Feeling responsible

Some people worry that there’s something they could have done to prevent lymphoedema. The lymphoedema is a result of your cancer treatment or of the cancer itself. We still don’t know enough about the triggers for lymphoedema in certain people. It’s important to remember that it’s not your fault and that lymphoedema can still develop in people who do everything they can to reduce their risk.

Feeling angry

It’s natural to feel angry about having lymphoedema when you’ve already had cancer to cope with. It may have developed when you thought your life was starting to get back to normal. You may feel angry about the extra effort and time in taking care of yourself and managing lymphoedema, when others are free to get on with their lives. Try not to bottle up your feelings – talk to the people close to you about how you feel.

Finding ways to help you relax and reduce stress can help with anger. This can include talking about or writing down how you feel, gentle exercise, breathing or relaxation therapy, yoga or meditation.

As the lymphoedema reduces and you get used to managing it, you’ll usually find you feel more able to do the things you enjoy. Or you may find new activities to replace the things that are now harder to do.

We can send you more information on the emotional effects of cancer, how to talk about your cancer and coping with changes to your body image.
Feeling low

Lymphoedema is an ongoing problem and at times you may feel low or depressed about your situation. Try to let any family and friends know how you’re feeling so they can support you.

Some people feel low because they don’t have enough support. For some, family and friends may live far away. It’s normal to have times when you want to be left alone to sort out your feelings. But if you find you’re avoiding people a lot of the time and feelings of anxiety and sadness don’t improve then try to talk to your doctor or nurse.

Some of the emotional signs of depression can include:

• feeling low in mood most, or all, of the time
• having no interest in, or enjoyment from, things you usually enjoy
• feeling helpless or hopeless
• feeling numb, overwhelmed or out of control
• constantly worrying.

You may find it helpful to talk to other people who have lymphoedema. It can help reduce feelings of stress, anxiety and isolation. There are lots of different ways to communicate, and these can all help people to feel less alone. Some people find joining a support group or online community helpful. The nurses at your hospital can give you information about support groups in your area.

If you need more support, you can call the Macmillan Support Line free on 0808 808 00 00 and talk to one of our cancer support specialists.
If you need more help

Talking about your feelings isn’t always easy. It’s important to be kind to yourself and not feel guilty about needing extra help to deal with your emotions. These feelings can be very difficult to cope with and sometimes people need more help. This happens to lots of people and doesn’t mean you’re not coping.

If you feel anxious, panicky or sad a lot of the time, or think you may be depressed, talk to your doctor or nurse. They can refer you to a counsellor or psychologist for specialist help and sometimes a course of antidepressant drugs can be helpful.

Our booklet *How are you feeling? The emotional effects of cancer* discusses the feelings you may have in more detail, and has suggestions for coping with them. We can send a copy to you or you can find the information online at macmillan.org.uk

Support groups

Self-help or support groups offer a chance to talk to other people who may be in a similar situation and facing the same challenges as you. Joining a group can be helpful if you live alone, or don’t feel able to talk about your feelings with people around you. Not everyone finds talking in a group easy, so it might not be for you. Try going along to see what the group is like before you decide.

You can call us on 0808 808 00 00 or visit macmillan.org.uk/supportgroups for information about cancer support groups across the UK.
Online support

Many people now get support through the internet. There are online support groups, social networking sites, forums, chat rooms and blogs for people affected by cancer.

You can use these to:

• meet and keep in touch with other people affected by cancer
• chat in real time
• share your experiences and feelings
• ask questions
• give advice based on your experience to other people.

Our online community at macmillan.org.uk/community is a social networking site where you can talk to people in our chat rooms, blog your journey, make friendships and join support groups. You can share your own experiences and feelings, and get support from others.
FURTHER INFORMATION

About our information  88
Other ways we can help you  90
Other useful organisations  93
Your notes and questions  101
About our information

We provide expert, up-to-date information about cancer. And all our information is free for everyone.

Order what you need

You may want to order more leaflets or booklets like this one. Visit be.macmillan.org.uk or call us on 0808 808 00 00.

We have booklets on different cancer types, treatments and side effects. We also have information about work, financial issues, diet, life after cancer and information for carers, family and friends.

All of our information is also available online at macmillan.org.uk/cancerinformation

There you’ll also find videos featuring real-life stories from people affected by cancer, and information from health and social care professionals.

Other formats

We also provide information in different languages and formats, including:

• audiobooks
• Braille
• British Sign Language
• Easy Read booklets
• ebooks
• large print
• translations.

Find out more at macmillan.org.uk/otherformats

If you’d like us to produce information in a different format for you, email us at cancerinformationteam@macmillan.org.uk or call us on 0808 808 00 00.
Help us improve our information

We know that the people who use our information are the real experts. That’s why we always involve them in our work. If you’ve been affected by cancer, you can help us improve our information.

We give you the chance to comment on a variety of information including booklets, leaflets and fact sheets.

If you’d like to hear more about becoming a reviewer, email reviewing@macmillan.org.uk You can get involved from home whenever you like, and we don’t ask for any special skills – just an interest in our cancer information.
Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we’re here to support you. No one should face cancer alone.

Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

Macmillan Support Line

Our free, confidential phone line is open Monday–Friday, 9am–8pm. Our cancer support specialists can:

• help with any medical questions you have about your cancer or treatment
• help you access benefits and give you financial advice
• be there to listen if you need someone to talk to
• tell you about services that can help you in your area.

Call us on 0808 808 00 00 or email us via our website, macmillan.org.uk/talktous.

Information centres

Our information and support centres are based in hospitals, libraries and mobile centres. There, you can speak with someone face to face. Visit one to get the information you need, or if you’d like a private chat, most centres have a room where you can speak with someone alone and in confidence.

Find your nearest centre at macmillan.org.uk/informationcentres or call us on 0808 808 00 00.
Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves. That’s why we help to bring people together in their communities and online.

Support groups
Whether you are someone living with cancer or a carer, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting macmillan.org.uk/selfhelpandsupport

Online community
Thousands of people use our online community to make friends, blog about their experiences and join groups to meet other people going through the same things. You can access it any time of day or night. Share your experiences, ask questions, or just read through people’s posts at macmillan.org.uk/community

The Macmillan healthcare team
Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your GP, consultant, district nurse or hospital ward sister if there are any Macmillan professionals near you.

‘Everyone is so supportive on the online community, they know exactly what you’re going through. It can be fun too. It’s not all just chats about cancer.’

Mal
Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you’ve been affected in this way, we can help.

Financial advice

Our financial guidance team can give you advice on mortgages, pensions, insurance, borrowing and savings.

Help accessing benefits

Our benefits advisers can offer advice and information on benefits, tax credits, grants and loans. They can help you work out what financial help you could be entitled to. They can also help you complete your forms and apply for benefits.

Macmillan Grants

Macmillan offers one-off payments to people with cancer. A grant can be for anything from heating bills or extra clothing to a much-needed break.

Call us on 0808 808 00 00 to speak to a financial guide or benefits adviser, or to find out more about Macmillan Grants. We can also tell you about benefits advisers in your area. Visit macmillan.org.uk/financialsupport to find out more about how we can help you with your finances.

Help with work and cancer

Whether you’re an employee, a carer, an employer or are self-employed, we can provide support and information to help you manage cancer at work. Visit macmillan.org.uk/work

Macmillan’s My Organiser app

This free mobile app can help you manage your treatment, from appointment times and contact details, to reminders for when to take your medication. Search ‘My Organiser’ on the Apple App Store or Google Play on your phone.
Other useful organisations

There are lots of other organisations that can give you information or support.

**British Lymphology Society**
24 Kiniths Crescent,
West Bromwich
B71 4BX
Tel 01452 790178
[www.thebls.com](http://www.thebls.com)
Mainly for health professionals, but open to anyone interested. Runs conferences and study days. Has a newsletter and you can access its Directory of Lymphoedema Treatment Services online.

**Lymphoedema Support Network (LSN)**
St Luke’s Crypt,
Sydney Street,
London SW3 6NH
Tel 020 7351 0990
Email admin@lsn.org.uk
[www.lymphoedema.org](http://www.lymphoedema.org)
Provides practical help, information and support. Runs a helpline, produces a range of fact sheets, and the website lists local lymphoedema support groups throughout the UK.

**Manual Lymphatic Drainage UK**
PO Box 1449,
Glenrothes,
Fife KY6 3YE
Tel 0844 800 1988
Email admin@mlduk.org.uk
[www.mlduk.org.uk](http://www.mlduk.org.uk)
Promotes public awareness of manual lymphatic drainage (MLD) to patients and potential practitioners. The website has information on techniques used by MLD practitioners, and a national and international register of MLD UK accredited therapists.
Havens are welcoming day centres providing support, information and complementary therapies before, during or after medical treatment. Works alongside the NHS and other healthcare professionals.

Suppliers of compression garments

Your GP can prescribe garments but usually only on the recommendation of your lymphoedema specialist. Your specialist will discuss which is the most appropriate garment for you and they will choose the correct size. Your GP will then be asked to provide the garment. If you have questions about your garment, you can speak to your lymphoedema specialist or contact the supplier.
**Sigvaris Britain Ltd**  
4 Sopwith Park,  
Royce Road,  
Andover SP10 3TS  
**Tel** 01264 326 666  
www.sigvaris.co.uk

**Suppliers of specialised footwear**

**Cosyfeet**  
The Tanyard,  
Leigh Road,  
Street, Somerset BA16 0HR  
**Tel** 01458 447275  
**Email** comfort@cosyfeet.com  
www.cosyfeet.com

**General cancer support organisations**

**Cancer Black Care**  
79 Acton Lane,  
London NW10 8UT  
**Tel** 020 8961 4151  
**Email** info@cancerblackcare.org.uk  
www.cancerblackcare.org.uk  
Offers information and support for people with cancer from ethnic communities, their friends, carers and families.

**Cancer Focus Northern Ireland**  
40–44 Eglantine Avenue,  
Belfast BT9 6DX  
**Helpline** 0800 783 3339  
(Mon–Fri, 9am–1pm)  
**Email** hello@cancerfocusni.org  
www.cancerfocusni.org  
Offers a variety of services to people affected by cancer, including a free helpline, counselling and links to local support groups.

**Cancer Research UK**  
Angel Building,  
407 St John Street,  
London EC1V 4AD  
**Tel** 0300 123 1022  
www.cancerhelp.org.uk  
Has patient information on all types of cancer and has a clinical trials database.
Cancer Support Scotland
The Calman Centre,
75 Shelley Road,
Glasgow G12 0ZE
Tel 0800 652 4531
Email info@
cancersupportscotland.org
www.cancersupportscotland.org
Runs cancer support groups throughout Scotland. Also offers free complementary therapies and counselling to anyone affected by cancer.

Macmillan Cancer Voices
www.macmillan.org.uk/cancervoices
A UK-wide network that enables people who have or have had cancer, and those close to them such as family and carers, to speak out about their experience of cancer.

Maggie’s Centres
20 St. James Street,
London W6 9RW
Tel 0300 123 1801
Email enquiries@maggiescentres.org
www.maggiescentres.org
Provides information about cancer, benefits advice, and emotional or psychological support.

Penny Brohn Cancer Care
Chapel Pill Lane,
Pill, Bristol BS20 0HH
Helpline 0845 123 2310
(Mon–Fri, 9.30am–5pm, Wed 6–8pm)
Email helpline@pennybrohn.org
www.pennybrohn cancercare.org
Offers a combination of physical, emotional and spiritual support, using complementary therapies and self-help techniques.
**Riprap**  
www.riprap.org.uk  
Developed especially for teenagers who have a parent with cancer.

**Tenovus**  
Head Office,  
Gleider House,  
Ty Glas Road,  
Cardiff CF14 5BD  
**Helpline** 0808 808 1010  
(Mon–Sun, 8am–8pm)  
**Email** info@tenovuscancercare.org.uk  
www.tenovus.org.uk  
Aims to help everyone get equal access to cancer treatment and support. Funds research and provides support such as mobile cancer support units, a free helpline, an ‘Ask the nurse’ service on the website and benefits advice.

**Counselling and emotional support**

**British Association for Counselling and Psychotherapy (BACP)**  
BACP House,  
15 St John’s Business Park,  
Lutterworth,  
Leicestershire LE17 4HB  
**Tel** 01455 883 300  
**Email** bacp@bacp.co.uk  
www.bacp.co.uk  
Promotes awareness of counselling and signposts people to appropriate services. You can search for a qualified counsellor at itsgoodtotalk.org.uk

**Samaritans**  
Freepost RSRB-KKBY-CYJK,  
Chris, PO Box 9090,  
Stirling FK8 2SA  
**Helpline** 116 123  
**Email** jo@samaritans.org  
www.samaritans.org  
Provides confidential and non-judgemental emotional support, 24 hours a day, 365 days a year, for people experiencing feelings of distress or despair.
UK Council for Psychotherapy (UKCP)
2nd Floor, Edward House,
2 Wakley Street,
London EC1V 7LT
Tel 020 7014 9955
Email info@ukcp.org.uk
www.psychotherapy.org.uk
Holds the national register of psychotherapists and psychotherapeutic counsellors, listing practitioners who meet exacting standards and training requirements.

Financial or legal advice and information

Benefit Enquiry Line
Northern Ireland
Helpline 0800 220 674
(Mon–Wed and Fri, 9am–5pm, Thu, 10am–5pm)
Textphone 028 9031 1092
www.nidirect.gov.uk/money-tax-and-benefits
Provides information and advice about disability benefits and carers’ benefits.

Citizens Advice
Provides advice on a variety of issues including financial, legal, housing and employment issues. Find details for your local office in the phone book or on one of these websites:

England and Wales
www.citizensadvice.org.uk

Scotland
www.cas.org.uk

Northern Ireland
www.citizensadvice.co.uk

You can also find advice online in a range of languages at adviceguide.org.uk

Civil Legal Advice
Helpline 0345 345 4345
(Mon–Fri, 9am–8pm, Sat, 9am–12.30pm)
Minicom 0345 609 6677
www.gov.uk/civil-legal-advice
Has a list of legal advice centres in England and Wales and solicitors that take legal aid cases. Offers a free translation service if English isn’t your first language.
Department for Work and Pensions (DWP)
Disability Living Allowance Helpline 0345 712 3456
Textphone 0345 722 4433
Personal Independence Payment Helpline 0345 850 3322
Textphone 0345 601 6677
Carer’s Allowance Unit 0345 608 4321
Textphone 0345 604 5312
www.gov.uk/browse/benefits
Manages state benefits in England, Scotland and Wales. You can apply for benefits and find information online or through its helplines.

The Money Advice Service Helpline 0300 500 5000
(Mon–Fri, 8am–8pm, Sat, 9am–1pm)
Textphone 18001 0300 500 5000
www.moneyadvice.service.org.uk
Runs a free financial health check service and gives advice about all types of financial matters. Has an online chat service for instant money advice.

Money Advice Scotland Helpline 0141 572 0237
www.moneyadvice.scotland.org.uk

GOV.UK
www.gov.uk
Has comprehensive information about social security benefits and public services.

National Debtline (England, Wales and Scotland)
Tricorn House, 51–53 Hagley Road, Edgbaston, Birmingham B16 8TP
Tel 0808 808 4000
(Mon–Fri, 9am–9pm, Sat, 9.30am–1pm)
www.nationaldebtline.org
A national helpline for people with debt problems. The service is free, confidential and independent.
Personal Finance Society – ‘Find an Adviser’ service
www.findanadviser.org
Use the website to find qualified financial advisers in your area.

Equipment and advice on living with a disability

Disability Rights UK
Ground Floor,
CAN Mezzanine,
49–51 East Road,
London N1 6AH
Tel 0207 250 8181
(Mon–Fri, 10-12:30pm and 1:30-4pm)
Email enquiries@disabilityrightsuk.org

www.disabilityrightsuk.org.uk
Provides information on social security benefits and disability rights.
Has a number of helplines for specific support, including information on returning to work, direct payments, human rights issues, and advice for disabled students.
Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos are of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support’s Cancer Information Development team. It has been approved by our Chief Medical Editor, Dr Tim Iveson, Macmillan Consultant Medical Oncologist.

With thanks to: Amy Dickinson, Lymphoedema Clinical Nurse Specialist; Kay Eaton, Consultant Nurse in Cancer and Supportive Care and Clinical Lead of the Lymphoedema Service; Jane Wigg, Director and Trainer at The Lymphoedema Training Academy. Thanks also to the people affected by cancer who reviewed this booklet, and those who shared their stories.

Sources

We’ve listed a sample of the sources used in the publication below. If you’d like further information about the sources we use, please contact us at bookletfeedback@macmillan.org.uk

Can you do something to help?
We hope this booklet has been useful to you. It’s just one of our many publications that are available free to anyone affected by cancer. They’re produced by our cancer information specialists who, along with our nurses, benefits advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we’re there to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.

**Share your cancer experience**
Support people living with cancer by telling your story, online, in the media or face to face.

**Campaign for change**
We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

**Help someone in your community**
A lift to an appointment. Help with the shopping. Or just a cup of tea and a chat. Could you lend a hand?

**Raise money**
Whatever you like doing you can raise money to help. Take part in one of our events or create your own.

**Give money**
Big or small, every penny helps. To make a one-off donation see over.

Call us to find out more
0300 1000 200
macmillan.org.uk/getinvolved
Please fill in your personal details

Mr/Mrs/Miss/Other
Name
Surname
Address

Postcode
Phone
Email

Please accept my gift of £
(Please delete as appropriate)
I enclose a cheque / postal order / Charity Voucher made payable to Macmillan Cancer Support

OR debit my:
Visa / MasterCard / CAF Charity Card / Switch / Maestro

Card number

Valid from

Expiry date

Issue no

Security number

Signature
Date / /

Don’t let the taxman keep your money

Do you pay tax? If so, your gift will be worth 25% more to us – at no extra cost to you. All you have to do is tick the box below, and the tax office will give 25p for every pound you give.

☐ I am a UK taxpayer and I would like Macmillan Cancer Support to treat all donations I have made for the four years prior to this year, and all donations I make in the future, as Gift Aid donations, until I notify you otherwise.

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax in each tax year, that is at least equal to the tax that Charities & CASCs I donate to will reclaim on my gifts. I understand that other taxes such as VAT and Council Tax do not qualify and that Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick this box. ☐

In order to carry out our work we may need to pass your details to agents or partners who act on our behalf.

If you’d rather donate online go to macmillan.org.uk/donate

Please cut out this form and return it in an envelope (no stamp required) to: Supporter Donations, Macmillan Cancer Support, FREEPOST LON15851, 89 Albert Embankment, London SE1 7UQ
More than one in three of us will get cancer. For most of us it will be the toughest fight we ever face. And the feelings of isolation and loneliness that so many people experience make it even harder. But you don’t have to go through it alone. The Macmillan team is with you every step of the way.

We are the nurses and therapists helping you through treatment. The experts on the end of the phone. The advisers telling you which benefits you’re entitled to. The volunteers giving you a hand with the everyday things. The campaigners improving cancer care. The community there for you online, any time. The supporters who make it all possible.

Together, we are all Macmillan Cancer Support.

For cancer support every step of the way, call Macmillan on 0808 808 00 00 (Mon–Fri, 9am–8pm) or visit macmillan.org.uk
