SOJTHWESTERN NEWS

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PHYSICAL THERAPY PROGRAM AIDS BREAST CANCER PATIENTS

DALLAS — April 30, 1997 — Successful breast cancer surgery has offered Sylvia Mayhew a chance at a healthy future, but physical therapy is giving her back her life.

While swollen arms may not sound like a major problem for a woman who has battled breast cancer, swelling and a decreased range-of-motion can represent significant impediments in a patient's road back to precancer normalcy. A newly established program in the Department of Physical Therapy at UT Southwestern Medical Center at Dallas is allowing women who experience post-surgical complications access to a team of highly trained therapists.

"We want patients who have lived through breast cancer to feel positive about the future," said Dr. George Peters, director of the UT Southwestern Center for Breast Care and professor of surgical oncology. "Physical therapy can play a major role in helping them feel better physically and mentally. The new program also teaches preventive methods to avoid future problems."

Peters operated on Mayhew in September, and she has recovered well. But she decided to begin physical therapy at UT Southwestern this spring after experiencing soreness and increased difficulty raising her arm, caused partly by swelling in her arm, known as lymphedema.

"I think I may have been trying to do too much too soon," Mayhew said. "I believe it's so important to get right back to doing what you enjoy as soon as you can. But you need to be careful and work with a therapist who really knows how far you should push yourself."

Overexertion can affect the healing process and cause post-surgical complications, said Maren Nagorzanski, a physical therapy instructor at UT Southwestern and director of the physical therapy clinic in the James W. Aston Ambulatory Care Center. Also, women who have had no lymphedema for the first few months or years following breast cancer surgery may one day suffer a slight wound, such as a paper cut or a burn, and the lymphatic

(MORE)

PHYSICAL THERAPY -2

fluids will begin collecting. When a back-up of fluid occurs in the arm, swelling begins. The swelling can be painful. If the swelling continues down the arm into the hand, interrupting normal functioning of the hand, a person's independence may be greatly affected.

Lymphedema occurs because surgeons frequently find it necessary to remove a woman's underarm lymph nodes to check for spread of cancer cells. These nodes act as a filtration system for bodily fluids so, without the nodes, fluids don't drain well and may begin to back up within the arm.

About 15 percent of patients with a history of breast cancer experience lymphedema. "Some women may experience minor difficulties for a while but not seek physical therapy until the condition gets considerably worse," Nagorzanski said.

UT Southwestern's program has been designed to allow for close monitoring during recovery and throughout subsequent years, in an effort to prevent any potential difficulties before they can cause pain or interfere with the patient's use of her arm.

The differences between the surgical procedures that are performed on individual patients and the variances between a person's particular healing pattern also can affect how well a woman recovers mobility in her arm. Skin may tighten in an area that has experienced trauma, such as a surgical incision, causing reduced elasticity and a reduction in the range of motion. In some patients, scar tissue will adhere to underlying tissue around the shoulder and upper arm, further limiting the individual's flexibility.

Another chief concern related to lymphedema is cosmetic. If one arm is considerably larger than the other, women may feel self-conscious about wearing short-sleeved blouses, or clothes may fit too tightly in the arm to be comfortable.

Much of the physical therapy regimen recommended for lymphedema and range-ofmotion patients centers around strengthening of the arm and shoulder and restoration of motion within the shoulder joint. Therapists may require patients to attend clinic daily for a limited period of time so therapists can help patients with stretching exercises. They also will assign home exercises.

If scar tissue is interfering with elasticity, patients will be taught how to massage the scar region, loosening the skin and increasing flexibility.

PHYSICAL THERAPY - 3

Mayhew plans to stay active in the future, but she will better know how to protect herself. "I love doing needlework, and I love gardening," she said. "I'm not going to give those things up just to avoid getting tired or injured. I don't need to. But I am going to be much more careful."

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