

Lymphedema and fibrosis are underappreciated long-term effects from head and neck cancer and its therapy. Lymphedema is failure of the lymphatic system resulting in abnormal buildup of lymph (protein rich) fluid, which leads to fibrosis, possible skin changes, immune compromise, and cosmetic changes.

Head and neck lymphedema occurs in about 50-75% of patients receiving radiation and/or surgery for head/neck cancer.

- Surgery to the neck can also result in hardening of the tissues of the neck or face, which can cause swelling of the head and neck due to lymph system compromise.
- When lymphedema is severe, it can impair communication, swallowing, breathing, and vision

Internal (on inside) lymphedema involves underlying soft tissue. It may result in hoarseness, difficulty breathing, and difficulty swallowing. This requires an evaluation using special equipment with a camera to assess.

External (on outside) lymphedema involves tissues of the face, neck, and shoulders. It may result in swelling, tightness, and decreased range of motion with reduced function of those structures and discomfort.

- Visible to others along outside of neck, face, inside the mouth, or above the collar bone
- Submental space and neck (“double chin” or “turkey neck”) are most common
- Typically treatable with a therapy called manual lymph drainage

How could head/neck lymphedema affect you?

- Breathing and communication problems
- Changes to your speech/articulation
- Difficulty swallowing
- Affects wound care
- Changes to vision (reading, writing, walking challenges)
- Uncomfortable

Treatment

Complete Decongestive Therapy (can be completed in a home program with cases of mild-moderate severity, after a lengthy lymphedema evaluation by a certified specialist)

- Manual lymph drainage (MLD): Lightweight, skin stretching technique that targets both the deep and surface level lymphatic system. This stimulates lymph fluid flow, is soothing, and is used to redirect lymph fluid to an unaffected area of the body.
- Compression with bandaging/garments: Always goes hand in hand with MLD. Provides support to the tissues.
 - To be worn before MLD to soften the tissue and prepare it for MLD.
 - Worn after MLD to prevent refilling of lymph fluid and promote tissue drainage. Not to be worn too tight!
- Skin care to help prevent infection or breakdown

Other resources:

- www.ahns.info/survivorship_intro/topical_review-lymphedema