



Photo: Keith Munyon

Kathy Bates Talks of Her Toughest Role Yet

Oscar-winning actress Kathy Bates felt pressured to stay silent when she was first diagnosed with ovarian cancer, but now she's speaking out for women everywhere.

Her close friend urged her to visit the doctor, and if she hadn't, she may not be here today.

"She saved my life," says the *American Horror Story* star. She had been feeling flushed and tired, but thought it was due to work. "It would have been easy for me to write off all of those things if she hadn't been there."

From tragedy to inspiration

Despite testing negative for BRCA 1&2, Bates was diagnosed with breast cancer nine years after surviving ovarian cancer.

"I want women to know that a test is not a get out of jail free card," she says. "I was less vigilant. I really wished I had caught it earlier."

"When I got breast cancer, I was inspired by women who go out with bald heads." She believes each appearance or opportunity can remind women to pay attention to their bodies. "I would urge women to make that part of their regular checkups, as well as breast self-exams."

Her next role

Bates also became an ambassador for the Lymphatic Education & Research Network (LE&RN). Lymphedema can affect up to 30 percent of breast cancer survivors. "The challenge is getting the word out," she says. Bates feels lucky to have a less severe case of lymphedema, and hopes speaking about LE will help educate the public and physicians. "I'm grateful my hardships have given me a purpose. Funny how that happens."

Sherry Li

Lymphedema – Under the Radar

Lymphedema affects men, women, and children — approximately 120 million people worldwide, and yet is under the radar, under-funded, and under-researched. For an estimated one million Canadians, lymphedema is a growing and complex problem in need of coordinated prevention and treatment.

Founded in 2009, the Canadian Lymphedema Framework (CLF) is a collaboration between health professionals, community-based organizations, patients, and industry partners. Its mission is to improve the standards of lymphedema management by promoting research, best practices, and clinical

development. Organizing educational conferences and publishing the *Pathways* magazine helps address the knowledge gap surrounding the chronic condition among physicians, allied health professionals, and patients.

Though cancer treatment was previously considered to be the most common cause of lymphedema, it is becoming greatly overshadowed by lymphedema caused by the rising obesity rate. Despite this growing problem, recent advances in diagnostic imaging, surgical techniques, possible drugs, and our ability to predict lymphedema provide hope that how we detect, treat, and manage lymph-

edema in the future will improve greatly.

Left untreated, lymphedema tends to progress in volume and severity, leading to loss of limb function, chronic infections, skin changes, and wounds. As well as debilitating physical effects, lymphedema also causes psychological distress, which can profoundly affect one's quality of life.

While lymphedema can be managed with early diagnosis and diligent care of the affected limb, there is currently no cure. Recommended treatment involves specialized massage and compression, such as combined decongestive therapy, to improve lymphatic

Anna Kennedy
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drainage. Self-management is fundamental in caring for lymphedema, and the provincial lymphedema associations across Canada are an essential element in providing support, education and access to resources for patients across the country. Volunteers work hard to raise awareness for lymphedema and advocate for equitable access to care in their provinces. Their efforts are helping to change the face of lymphedema in Canada.

Anna Kennedy

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Alberta: Alberta Lymphedema Association	www.albertalymphedema.com
Atlantic Region: Atlantic Clinical Lymphedema Network	www.atlanticlymph.ca
British Columbia: BC Lymphedema Association	www.bclymph.org
Manitoba: Lymphedema Association of Manitoba	www.lymphmanitoba.ca
Newfoundland and Labrador: Lymphedema Association of Newfoundland and Labrador	www.lymphnl.com
Nova Scotia: Lymphedema Association of Nova Scotia	www.lymphedemanovas Scotia.com
Ontario: Lymphedema Association of Ontario	www.lymphontario.ca
Quebec: Lymphedema Association of Quebec	www.infolympho.ca
Saskatchewan: Lymphedema Association of Saskatchewan	www.sasklymph.ca



Pathways – Canada's National Lymphedema Magazine. www.canadalymph.ca

Empowering patients and health professionals. This national magazine is published quarterly. Contact your provincial lymphedema association for subscription details.

Lymphedema, Affecting Millions, Understood by Few

Dr. Anna Towers is an expert on an ailment that impacts an estimated one million Canadians, but is understood by far fewer: lymphedema. Dr. Towers is a Director of the Lymphedema Program at Montreal's McGill University Health Centre, where she's been running lymphedema clinics since 1995.

About 160,000 of lymphedema diagnoses are cancer-related, representing side effects of cancer surgery or radiotherapy. Other causes can include obesity or chronic venous disease of the leg. Dr. Towers works on a team that assesses and recommends tailored therapy to patients who have lymphedema as a complication of cancer treatments.

Chronic but manageable

"Lymphedema manifests as chronic, lifelong swelling and inflammation of various degrees," she says. It is caused by a buildup of fluid that occurs when a patient's lymphatic system cannot function as it normally would. According to Dr. Towers, lymphedema can affect patients on any part of the body, but most commonly affects an arm, or one or both legs.

Make no mistake though: lymphedema is not simply a cosmetic problem. "It can lead to loss of function, inability to work, chronic wounds, and infections of the skin and underlying tissues that can be life-

threatening," says Dr. Towers.

Since lymphedema is a chronic condition, it requires lifelong management and support to treat it. Watching your weight and exercising are important steps to treating lymphedema, in addition to using compression garments, bandaging, and other treatments recommended by a lymphedema specialist.

Dr. Towers says some health professionals are not aware of how common the condition is and often miss out on opportunities for early diagnosis. In fact, patients "can be referred for treatment very late or not at all." Those who've been treated for cancer and have had lymph nodes or vessels removed, or affected during treatment are at a lifelong risk for lymphedema.

More awareness, earlier detection

Because of the gap in information on lymphedema, Dr. Towers says there is little or no coverage under Medicare for proven decongestive lymphedema therapies however, she believes that "with better awareness and education, chronic edema will be prevented or managed in the early stages, before complications develop." Those afflicted with lymphedema can learn more about treatments offered in their area by visiting the webpage of their provincial lymphedema associations.

Rob Csernyik



Dr. Anna Towers

Director of the Lymphedema Program, McGill University Health Centre (BSN)

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