

Strength Training with Lymphodema

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Carolyn Garritt is a personal trainer based in London who specialises in cancer rehab. Carolyn is our Southwark 5K Your Way, Move Against Cancer group ambassador and has a fantastic online blog which is all about 'Getting your oomph back after cancer' so make sure you check it out [HERE](#)

In the blog below Carolyn talks about Strength training with Lymphoedema after breast cancer.



Lymphoedema, and the risk of it, is one of the common consequences of treatment and it's something I get asked about a lot. Those with it are, very understandably, reticent to exercise, worried that they'll aggravate it. It is however a condition that you can minimise your risk of, and can help to reduce symptoms when they occur.



But first – I need you to bear in mind that I'm not a specialist nurse, or a lymphoedema expert. Although I'm a specialist rehab trainer, I don't have any clinical qualifications. So, to write this part of the blog, I've researched what the experts say, and translated their fabulous knowledge into what I hope is some useful information about exercise, coupled with the experience I've built from working with women that have it.

Who I've learnt from

This blog is inspired by some smart women, in particular the academic work of Dr Kathryn Schmitz, Chair of the American College of Sports Medicine. I've used guidance published by Melanie Thomas, National Clinical Lead for Lymphoedema (through the Lymphoedema Support Network) and Tina Glynn, Programme Manager at London's Breast Cancer Haven. If you're anywhere near a Haven, go see them, they're fab. And if there's anything that's currently concerning you about your own symptoms, talk to your specialist nurse, or oncologist.

So, should you exercise, and work on strength, with lymphoedema, or risk of it?

Emphatically, yes. It's recommended that women experiencing breast cancer related lymphoedema (BCRL) DO exercise, and DO train their arms and shoulders to be stronger. Sorry about the shouty capital letters – but until recently the advice given was frequently to the contrary, and women would be advised to avoid lifting completely. This has proved to be not only unnecessarily cautious, but also unhelpful: getting stronger can help to manage the symptoms. Plus, avoiding lifting anything heavier than 2lbs (yep, that was once the plan) didn't help anyone to get back on with her life.

Part of the benefit of exercising, of course, is around how it can make you feel, how it can improve your mood and make daily life feel better and more manageable, both physically and mentally. With lymphoedema, exercise also helps to increase blood flow and oxygen to the muscles, which in turn helps the circulatory and lymphatic systems to do their work in processing and removing waste. So, it can help reduce the swelling so associated with the condition.

The evidence

As with other aspects of exercise oncology, there's a growing body of evidence that shows the benefits that can be gained through exercise for women affected by, or at risk of, BCRL. There's much evidence around the efficacy of Nordic walking: Jonsson (2012) found that 'swelling in the arm was significantly reduced after an 8 week programme of Nordic walking 3-5 times a week'. Di Blasio went further and recommended that Nordic walking 'should be prescribed to prevent the onset and to treat light forms of upper limb lymphoedema'.

[There's a whole blog extolling the virtues of Nordic walking here.](#)

In particular this: A Dutch study's results showed that after 10 weeks

'...patients' vitality had improved, whereas perceived shoulder symptom severity and limitations in daily activities had decreased... data indicated that range of motion of the affected shoulder improved significantly within 10 weeks of training. Group interviews at 6 months follow-up confirmed that patients had appreciated the physical and psycho-social benefits of the intervention.'

In terms of strength training, Schmitz et al (2009) challenged traditional thinking by conducting a trial in which women with BCRL followed a progressive weight lifting training programme. Their findings were that slowly progressive weight lifting had no significant effect on limb swelling. They also found that women had fewer flare ups, reduced symptoms, and increased strength. Later Nelson published a Systematic review of breast cancer-related lymphoedema and resistance exercise ([Journal of Strength and Conditioning Research](#), Volume 30, Number 9, September 2016, pp. 2656-2665(10)) and concluded that 'breast cancer survivors can perform resistance training at high enough intensities to elicit strength gains without triggering changes to lymphoedema status. There is strong evidence that resistance exercise produces significant gains in muscular strength without provoking breast cancer related lymphoedema'.

Before you start

There are, of course, some precautions to bear in mind. I know they're not the most comfortable garments, but it is consistently recommended that you wear your

compression sleeve during exercise. It's also recommended that you stay well hydrated before, during and afterwards, and that you look out for any changes in the affected area. If you were given exercises to do by your breast care nurse or surgical team, then refer back to them to look for any specific advice that you were given personally. And, as always, if you become tired while exercising, stop. It's one thing to work hard and push yourself, but another consistent message that I've found is that getting fitter after a cancer diagnosis, and especially with BCRL, is best done slowly, gently, and progressively.

Some cautions

There are a few signs to look out for. Exercising should not be painful: if it is, stop. Check that your posture and technique were correct, and that you weren't trying to increase the amount of resistance you were using by too much. This can, I'm afraid, be a matter of trial and error but it's so important to start light and build up over time. I don't want to make women anxious about doing this, but I do want to help avoid injury, so build up little by little, slowly and surely.

Avoid exercise if you have cellulitis, and avoid these strength exercise if you've had surgery recently (in the last 8 weeks). Sometimes women experience tenderness around areas of cording and they notice it a little more if they're exercising the muscles around the area they had surgery. I've known people really benefit from massage/physiotherapy around cording.

If your arm becomes heavy or more swollen quickly, or if you are experiencing pain, do ask the advice of your specialist nurse, physio or doctor.

Strength, level 1

So, a starting point would be to adopt the short routine below. It is seven exercises, to be done at first just using your body weight, and with your hands empty. Once you're comfortable with the moves you could start to add in a light dumbbell, hand weight, tin of beans etc. If you're experiencing peripheral neuropathy, you could try using light wrist weights that fasten lightly around the wrist with a velcro strap if your grip's not so good.

Start with five relaxing deep breaths, then perform five of each of these exercises.



... then raise the fist until it's above your head.

Once you can comfortably do five of each, start building up gradually so that you do 6, 7, building to 12 of each move. Build up gently, and do them all as slowly, accurately and with as much control as you can.

Strength, Level 2

Once you've got used to the first routine, move on. Although it's important to build up gradually, you do want to move onwards and upwards once you're ready, otherwise your strength will plateau.

These moves all involve some resistance. Start with a light hand weight, wrist weight or resistance band. You want to be using enough resistance so that your muscles would start to tire after 10 or 12 repetitions of each exercise – this might take a little guesswork at first, as you're going to start with just five reps, but if in doubt, start light then build up.

Start with five reps per move and work up until you can do ten of everything on each arm/hand. If you find that your strength is very different on your right compared to your left or vice versa, here's a method I've adopted with many of my clients and it's helped: again, building up gradually, work up to doing a first set of repetitions on your weakest side, then exercise the stronger side, and then do a second lot of the move just on the weakest side. In time, by asking your weaker side to do more work you should find that the strength imbalance starts to even out.

Hammer curls..



Afterwards, drink water, have a stretch, and if you can, make a little time to relax.

Let me know how you get on 😊

By Carolyn Garritt