A Needs Assessment of Lymphoedema Services in Fife:

An Exploration of Physiotherapy and District Nursing Management

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Lymphoedema

• Fluid accumulation in the tissues (input > output)
• Failure of the lymphatic system, e.g. damage from breast cancer treatments
• Chronic, progressive, → swelling and fibrotic, thickened skin
• Physical and psychosocial sequelae
• Management → reduction and control of swelling

Logan, 1995
Needs Assessment of Lymphoedema Services in Fife

- Current services:
  - Part-time Physiotherapist
  - Palliative Care Services
  - Private practitioner

- Project commissioned by the Core Cancer Review Group in Fife

- First question: who treats lymphoedema?
Method

- How experienced and confident are non-specialist Physiotherapists and District Nurses in the treatment of lymphoedema? What management options do they choose?
- Descriptive, market research approach
- Postal questionnaire

→ all Physiotherapy units (n=36) on a central postal list at Queen Margaret Hospital, Dunfermline
→ all District Nursing units (n=53) located within Primary Practices in Fife (Fife Health Board mailing list)
Experience of Lymphoedema Management

Experience of Physiotherapists and District Nurses represented in responses* (Response rates 58% and 53%)

<table>
<thead>
<tr>
<th>Clinicians represented:</th>
<th>Physiotherapists (n=60*)</th>
<th>District Nurses (n=91*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of clinicians with experience of lymphoedema management</td>
<td>26.67</td>
<td>56.04</td>
</tr>
<tr>
<td>Mean number of patients treated by each clinician with experience, during their career</td>
<td>2.94</td>
<td>1.27</td>
</tr>
</tbody>
</table>
Experience and Confidence In Lymphoedema Management

Physiotherapists

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Some Experience</th>
<th>No Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lacking Confidence</td>
<td>20%</td>
<td>70%</td>
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<tr>
<td>Confident</td>
<td>10%</td>
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District Nurses

<table>
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Therefore…

• Many District Nurses and even more Physiotherapists lacked experience in managing lymphoedema.

• A large proportion of the clinicians with experience in managing lymphoedema lacked confidence.

• So, what management strategies would clinicians suggest?
Suggested Management Strategies

• Management strategies suggested by clinicians reflected incomplete awareness, and occupational leanings, e.g.
  → Physiotherapists most frequently suggested limb elevation, massage and exercise
  → District Nurses most frequently suggested compression garments or bandaging and skin care advice
Conclusions

• A localised pilot investigation
• Further work is required: greater depth and in different geographical regions
• Non-specialist Physiotherapists and District Nurses appear to lack experience, confidence and knowledge of lymphoedema management
• Specialist lymphoedema services are recommended and should be promoted