

The Effects of an Education Program of Lymphedema for Breast Cancer Patients

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INTRODUCTION

Lymphedema occurring after mastectomy threatens a patient's quality of life and is a painful and serious condition for breast cancer survivors. Lymphedema is difficult to cure and is likely to relapse even after cure; therefore, prevention and early treatment of lymphedema is important. For this purpose, specific education for lymphedema is emphasized. Although education by dedicated personnel is provided at many large hospitals, a more specific analysis is needed to identify the impact that this knowledge has on the patient, on emotional symptoms, and on preventive action.

OBJECTIVES

This cross-sectional study was performed to evaluate the effectiveness of lymphedema education on lymphedema knowledge, lymphedema prevention practices, patient anxiety, and patient depression

METHODS

A cross-sectional survey design was used. The data were collected from 125 breast cancer patients with a mean age of 52.3 years (SD = 8.8). The patients were recruited from a single university hospital in Seoul, Korea. The questionnaire consisted of questions pertaining to general and medical characteristics of patients, experience of education, anxiety, depression, knowledge of lymphedema management, and practice of lymphedema prevention. The data were analyzed using the chi-square test, the *t*-test, and the ANOVA.

RESULTS

Among the study participants, 69.6% participated in one or more education programs. Among group education programs, the participants attended education for "lymphedema" most often (50.4%), followed by "management after breast cancer surgery" (45.6%), and "understanding breast cancer" (39.2%). Personal education from an education specialist nurse was received by 22.4% of patients. The participants who received educational training had a greater knowledge of lymphedema ($p = .002$). According to the educational training received, there was a significant difference in awareness of various treatments for lymphedema including manual lymph drainage ($p < .001$), use of compression bandages ($p = .034$), use of compression garments ($p = .040$), decongestive exercises ($p < .001$), and skin care ($p < .001$).

CONCLUSION

The results of this study suggest that specific lymphedema education programs for breast cancer patients can raise knowledge and awareness of lymphedema. Education or intervention to improve the practice for lymphedema prevention needs to be considered.

		Lymphedema education		t, χ^2	p
		No (N=59)	Yes (N=62)		
		n(%) or M±SD	n(%) or M±SD		
Knowledge of lymphedema		20.15±2.90	21.78±2.99	-3.10	.002
Awareness of the treatment for lymph edema	Manual lymph drainage	14(23.7)	41(66.1)	21.92	<.001
	Compression bandages	6(10.2)	16(25.8)	4.97	.034
	Compression garments	7(11.9)	17(27.4)	4.60	.040
	Decongestive exercise	14(23.7)	36(58.1)	14.70	<.001
	Skin care	10(16.9)	29(46.8)	12.31	<.001
	Pump	4(6.8)	8(12.9)	1.269	.364
Practice for lymphedema prevention		9.98±1.26	9.90±1.30	0.34	.734
Anxiety		9.05±2.84	8.72±2.37	0.71	.481
Depression		11.30±2.66	11.45±2.20	-0.34	.732