

Lymphoedema for patients with severe complicated lymphoedema

CRITERIA BASED ACCESS

Patients can be referred directly to the lymphoedema service if they meet the following criteria:

- Have a diagnosis of severe, chronic lymphoedema confirmed by a Consultant Surgeon from the following
 - Vascular services
 - Dermatology services
 - Out of county specialist lymphoedema centres(Vascular status must be assessed prior to the fitting of any compression therapy).
- Have a diagnosis of lymphoedema/ oedema associated with cancer or cancer treatment.
(This patient group are predisposed to lymphoedema).
- Have severe dependency oedema and fulfil the following
 - Have had unsuccessful intervention by community nursing services including, District nurses, Practice nurses and Clinical Specialists such as tissue viability. Therefore specialist lymphoedema services are needed.
 - Have been assessed as suitable for compression therapy and specialist intervention is needed.(Patients with complex problems which cannot be treated by routine care need specialist treatment to prevent deterioration in condition).
- Have oedema associated with obesity and fulfil the following:
 - Have had generalist HCP intervention with little success.
 - Have been assessed by Dietetic services and are concordant with a weight reduction programme.
 - Can be managed with maintenance lymphoedema care by community services or their GP, once assessed by the GLS and fitted with appropriate compression therapy.

(Obesity is known to cause oedema which over time causes the secondary skin changes associated with lymphoedema. Patients with oedema associated with obesity will not benefit from lymphoedema treatment long term unless they reduce their body weight. Patients who reduce their body weight to within accepted BMI guidelines usually find oedema resolves without treatment. GLS cannot offer care to this patient group on a long term basis and as such will work with HCP to try to develop intervention so that patients can be cared for appropriately).

- Have a combined vascular/lymphatic oedema confirmed by a GP and/or consultant doctor and the following criterion are satisfied:
 - Vascular status is confirmed by a Consultant
 - Joint care is arranged between the specialist service and community nursing services.

(Patients with a mixed oedema do not necessarily benefit from lymphoedema treatment. In most cases of this type of mixed oedema, lymphoedema treatments have to be modified. It is therefore more appropriate that limited lymphoedema treatments are reserved for patients who will most benefit. There are other health services and professionals who can help patients with mixed oedema, for example vascular nurse specialists).