

Reference:

[http://www.lymphedemapeople.com/thesite/lymphedema\\_and\\_diabetes.htm](http://www.lymphedemapeople.com/thesite/lymphedema_and_diabetes.htm)

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## **Lymphedema and Diabetes**

You can have both lymphedema and diabetes. If you have both the swelling from lymphedema will be complicated by edema from the diabetes. Because of the immunocompromised state of a lymphedema limb serious infections such as cellulitis, lymphangitis and lymphadenitis are constant threats. Your risk of infection will double when diabetes is added to this mixture. Finally in both conditions patients face a heightened risk of non-healing wounds. It is thus critical that lymphedema patients who also have diabetes to do all they can to lower their risk of complications from diabetes. Learn the causative risk factors for diabetes and develop a life-style that will help decrease the problems associated with this condition.

### **Limiting Risk Factors for Diabetes and Diabetic Complications:**

**Weight:** Lymphedema does **not** cause obesity or morbid obesity. But, **both** can cause lymphedema and can not only contribute to being diagnosed with diabetes, but can add serious complications to it. It's plain and simple - loose that weight!

**Diet:** Unhealthy diets rich in fats, sugars, cholesterol complicates lymphedema and helps contribute to cardiovascular disease which complicates diabetes. Limit your consumption of those types of foods. Diet is also important in preventing high blood pressure which is another causative factor of vascular disease.

**Smoking:** While smoking has nothing to do with lymphedema, it is an important contributing factor in congestive heart failure, pleural disease such as COPD (not to mention cancers and other conditions).

**Alcohol:** Excessive use of alcohol complicates lymphedema and is an important contributor to liver diseases which can cause diabetic edema. Limit your consumption!!

**Exercise:** The human body was not designed to be a couch potato. Proper and consistent exercise is one key to remaining healthy. Lymph fluid pumps through your body by muscular action. Exercise will help lymphedema and will help prevent diabetic complications.

Just because you have lymphedema does not mean you need to quit either life nor activities. Many lymphedema patients complain the pain is one factor that stops

them from many activities. But the fact is that you must keep going and must get exercise.

**Caffeine:** Caffeine acts as a diuretic which is contraindicated for lymphedema patients. it also is a stimulant causing the heart to work harder. Limit your intake.

**Salt:** Salt (sodium chloride) contributes to fluid retention (edema and lymphedema), contributes to hypertension and congestive heart failure, both of which can cause complications for the diabetic. Maintaining a low salt intake is important in the control of both conditions and in maintaining health.

**Sugar:** Of course, it goes without saying that it is critical you control of sugar intake if you have diabetes, but it would be a good idea with lymphedema (or with overall health) to restrict sugar consumption anyway. Remember, sugar is an empty calorie that does not build healthy tissues, build muscles, heal wounds, sores, or infections, generally has no protein content or any other nutritional value. Save those calories for foods that help heal and maintain health.

## **Lymphedema and Diabetes**

### **Comparison:**

	<b>Diabetes</b>	<b>Lymphedema</b>
Pain	Yes, from complications	Can be severe due to nerve compression
Swelling	Yes, complication of	Yes, can affect all or part of limb
Infection	Yes, from ulcerations	Yes, typically cellulitis
Fluids	Hematologic Fluids	Protein rich lymphatic fluids
Skin	From wounds, infections	Discolorations, growths, hardening
Leg Ulcers	Yes, hard to heal	Yes, also wounds from skin changes
Fibrosis	No	Yes, extending into subcutaneous tissues
Neuropathy	Yes	Yes

## **Special Considerations for Patients with Lymphedema and Diabetes**

**Treatment:** Should you have diabetes and lymphedema, it becomes even more important that you learn the proper treatment for both. The gold standard protocol is manual lymphatic drainage.

**Insulin injections:** These should not be given in limbs (arms) affected by lymphedema. There are two basic reasons for this. First, an injection is a skin break creating an entry foci for bacteria. Secondly, the excess fluid and fibrotic nature of the lymphedema limb will not only improperly dilute the

insulin and can prevent its proper absorption into the body. When giving an injection **always** swab the injection site with either alcohol or another astringent.

**Testing Blood Glucose Levels:** These glucose tolerance tests are absolutely necessary with diabetes. However, they should not be done on a lymphedema limb. Again for two basic reasons. First, the piercing is a skin break creating a possible entry point for bacteria. Secondly, the excess fluid of the lymphedema limb in conjunction with the fluid composition may give a false or inaccurate reading.

**Infections:** Remember that In lymphedema, the affected limb is immunodeficient or immunocompromised so in both conditions, the patient is at an increased risk for infections. Visual inspection of limbs is important. But, also learn the early warning signs of infections that at the very earliest signs antibiotic treatment can begin. Also, with lymphedema patients it should be standard protocol to have an emergency bottle of antibiotics, prescribed by their physician on hand.

Early warnings signs of infections (cellulitis, lymphangitis) include all over body aching (much like the flu), excess and unexplained energy drain and or unexplained lethargy, susceptibility and sensitive to cold, increased urination, unusual sharp pain in the lymphedema limb, **any** sudden appearance of red spots, streaks, rash like areas or blotches. Besides cellulitis and lymphangitis, the third significant infection we get is erysipelas. You can get an overall rundown on bacterial infections by reading our page Infections Associated with Lymphedema and on fungal infections from our page Fungal Infections Associated with Lymphedema. You might also want to read our page Lymphedema Antibiotics, so that should you get an infection, you'll be informed on what antibiotics the doctors might use

It also would be wise to be under the care of an infectious disease doctor. These are highly trained specialists who know how to recognize, treat and cure infections.

**Skin care:** Proper skin care is essential for the lymphedema patient and becomes even more so when they also have diabetes. In both situations the skin can be thin (stretched from edema and lymphedema), become excessively dry and begin to crack and or peel. It is important to use a moisturizing lotion to keep the skin healthy, supple and moist. Lotions should include nutrients like vitamin E, Aloe and zinc. Vaseline as a petroleum based ointment clogs the pores and prevents the skin from breathing. It should **not** be used.

**Wounds and ulcerations:** In both conditions patients suffer from wounds and ulcerations and in both are hard to heal and easy to become infected. In either conditions, wounds can quickly have uncontrolled infections that can lead to gangrene, amputation or death. Any wound no matter how small must be treated

quickly and efficiently. Because the wounds are going to be difficult to heal, it may be necessary for the patient to seek treatment at a wound care clinic.

**Bandaging:** Even with diabetes, lymphedema patients will need to continue bandaging. You will need to work with your therapist, in your particular situation to learn how to bandage

**Exercise:** This is an important part of not only lymphedema and diabetic management, but in over-all general health as well. There is some type of exercise just about anyone can do, regardless of their physical limitations. It is simply a matter of finding what is best for you and being committed to a systematic exercise program.