Frequency of upper Extremity Musculoskeletal Problems in Women with Breast Cancer Related Lymphedema: a Study in Shiraz

Moslemi Haghighi F: PhD candidate of physiotherapy, Rehabilitation school, Shiraz university of Medical Science, Shiraz, Iran
Mohammadi M: Student of physiotherapy, Rehabilitation school, Shiraz university of Medical Science, Shiraz, Iran
Pirouzi S: Assistant Professor of physiotherapy, Rehabilitation school, Shiraz Shiraz university of Medical Science, Shiraz, Iran
Hemmati L: PhD candidate of physiotherapy, Rehabilitation school, Shiraz university of Medical Science, Shiraz, Iran
Soadat Z: PhD candidate of physiotherapy, Rehabilitation school, Shiraz university of Medical Science, Shiraz, Iran
Farahmand E: Student of physiotherapy, Rehabilitation school, Shiraz university of Medical Science, Shiraz, Iran
Tahmasebi S: Assistant Professor of Surgery, Breast Diseases Research Center, Shiraz university of Medical Science, Shiraz, Iran
Zakeri Z: General Physician (Lymphotherapist), Shiraz Lymphedema Clinic, Shiraz university of Medical Science, Shiraz, Iran

Corresponding Author: Zeinab sadat Zakeri, zszakeri@yahoo.com

Abstract

Introduction: Breast cancer is the second cause of cancer death in women in the world. Lymphedema is also a chronic and debilitating condition for breast cancer survivors. The main aim of this study was to determine the frequency of patients suffering from upper extremity musculoskeletal problems who are known case of Breast Cancer Related Lymphedema (BCRL).

Methods: In this cross-sectional study, thirty women with lymphedema associated with breast cancer surgery were assigned by convenience sampling. To determine upper extremity musculoskeletal problems (Biceps tendonitis, Rotator cuff& Shoulder instability, Impingement Syndrome) a data form was applied including patient’s history? from medical records and also by asking themselves, and orthopedic tests performing by therapist contain six tests in shoulder belt for shoulder pathology, 3 test in elbow for tennis elbow, 3 test in wrist for carpal tunnel syndrome and 2 test in thumb for De Queravin syndrome. The patients were counted as affected, even with one positive test.

Results: The results suggest that a 70% incidence of shoulder pathology, 43.3% carpal tunnel syndrome, 20% De Queravin syndrome and 13.7% tennis elbow in the studied patients.

Conclusion: Evaluation of musculoskeletal pains can improve the process of treatment and quantity of life for the patients with breast cancer and lymphedema and also can helpful for them, their families and medical staff by reducing the complications of main illness. Our study showed high frequency of musculoskeletal problems in lymphedema patients, especially in shoulder joint and wrist joint. So early diagnosis of these problems in lymphedema patients can increase the quality life of them and it seems too important.

Keywords: Lymphedema, Breast Cancer, Breast Cancer Surgery, Musculoskeletal Problems.