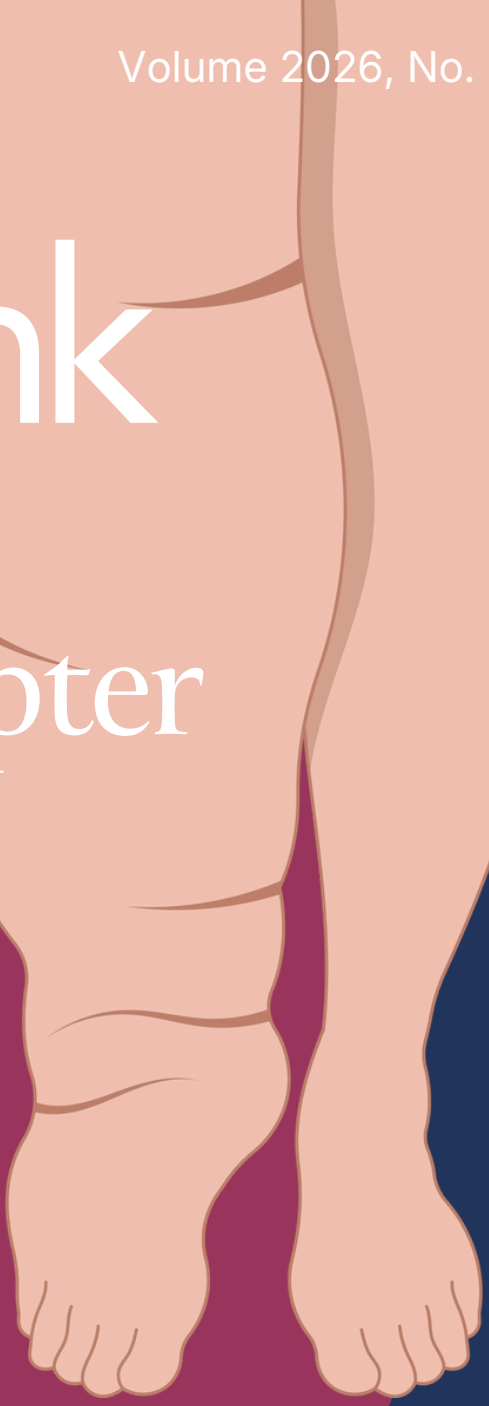
Volume 2026, No. 2

nln LymphLink

The Next Chapter

A fresh, digital evolution of LymphLink - bringing information, insights, and community connection straight to you as we open a new era of learning, advocacy, and shared experience.



The NLN continues to champion support, education, and advocacy for everyone affected by lymphatic diseases.

National Lymphedema Network

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National Lymphedema Network

Letter from the National Lymphedema Network

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Mission Statement
The National Lymphedema Network's mission is to empower our community of lymphedema practitioners and patients by providing educational opportunities, networking opportunities, and interventional resources. We aim to inspire clinicians to provide world-class care for people with lymphedema by promoting best practice guidelines and standards of care.

Deadline for the next issue is August 27, 2026

Article Submissions - Click Here

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The goal of this publication is to provide information specific to the needs of lymphedema patients and health care providers.

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Dear NLN Community,

As the National Lymphedema Network continues to grow and advance its mission, we remain focused on building a stronger future for the patients, clinicians, and communities we serve. As part of this transition, we acknowledge the resignation of Jennifer Williams, PT, DPT, CLT-LANA, from her role as Co-Executive Director. We are grateful for Jennifer's dedication and the many contributions she made to NLN, particularly in advancing clinical education and supporting the growth of our organization. On behalf of the Board of Directors, we thank Jennifer for her service and wish her continued success in the future.

Looking ahead, we are excited to welcome three new members to the NLN Board of Directors: Linda Hodgkins, Cheryl Brunelle, and Ken Johnson.
Each brings exceptional experience, fresh perspectives, and a deep commitment to advancing education, strengthening advocacy, and expanding access to high-quality lymphedema care. Their leadership reflects NLN's continued investment in innovation, collaboration, and the long-term growth of our organization.

This is an exciting time for the National Lymphedema Network. Together with our volunteers, members, clinicians, patients, and partners, we are building a stronger foundation for the future—expanding educational opportunities, fostering local communities through our Regional Ambassador Program, advocating for better care, and ensuring NLN remains the trusted voice for the lymphatic community for years to come.

We are grateful for your continued support and look forward to this next chapter together.

With appreciation,

The National Lymphedema Network

Check Out the New NLN Website

The National Lymphedema Network launched a newly rebuilt website in mid-May, designed to make it easier to find exactly what you need, whether you are living with lymphedema, caring for someone who is, or treating it every day.

Organized Around You

The biggest change is how the site is organized. Instead of one crowded menu, the experience now splits into two clear paths, one for patients and advocates and one for clinicians, so you can go straight to the resources built for you.

For Patients and Caregivers

The site brings together the resources patients and caregivers rely on, including the Community Video Library, educational resources, and the NLN Store and Bookstore. And coming soon, a brand new therapy directory, custom-built to make finding a provider easier than ever.

For Clinicians

A dedicated Clinical Support area gathers resources including position papers, research articles, NLN Clinical Focus Groups, and surveys, alongside Continuing Education, a Call for Abstracts, CLT Scholarship, Lymphedema Jobs, and the LymphLink. The events calendar also keeps the 2026 Summit and networking meetings easy to find and register for.

A New Member Platform

The NLN has also moved to a new membership platform. Whether you joined as a patient or a clinician, signing in, renewing, registering for events, and reaching your member-only benefits, forums, and resources now happen in one place, with a more straightforward experience than the previous system offered.



Q&A

M. DANETTE CHANCELLOR PT, CLT-LANA, ALM



"The Földi, clinic experience reminded me that regardless of location globally all CLTs face the same issues with the same limitations to optimal treatment."

NLN member Danette Chancellor recently traveled to Germany for Klose Training's Lymphedema Advanced and Review Course at the Földi Clinic, the internationally recognized birthplace of lymphedema treatment. Alongside clinicians from several countries, she spent an immersive week studying advanced care for complex lymphedema and lipedema. She sat down with us to share what she learned, and the changes she is bringing home to her own patients.

What inspired you to attend the Advanced and Review Course at the Földi Clinic?

I was inspired to attend the Advanced and Review Course at the Földi Clinic for multiple reasons. The field of lymphedema/lipedema treatment is progressing currently due to the newer techniques, ICG imaging, providing better information into the lymphatic system. This information is shaping the treatment of lymphedema for the better and staying on top of reliable research, not opinions, and how that knowledge directs our treatments is vital to providing the best care to my patients.

Having the class at the Földi clinic and meeting Dr. Etelka Földi was also an inspiration for me. The clinic is internationally known and is considered to be the birthplace of lymphedema treatment.

The course focused on managing complex patients with multicausal lymphedema and lipedema. How did it change or reinforce your approach to treating these patients?

The course focused on management of complex patients with multicausal lymphedema and lipedema with an immense emphasis on the effect of obesity in particular. Previously I have given little focus on stabilizing weight with each patient. I now realize the importance of educating the patient in good dietary habits without judgement as well as an increased activity level. I will be more aggressively referring patients to a nutritionist and our local physician of obesity medicine.

Can you share one practical tip or clinical pearl that other therapists would find helpful?

One practical tip I took from this class that I would share with other CLT's is not to treat lipedema like lymphedema. Lipedema is not a disease and there is no mechanical insufficiency of the lymphatic system. Lipedema is a syndrome better described as lipalgia syndrome with painful excess adipose tissue. There is no swelling and MLD is unnecessary. This population is better treated with compression, weight stabilization, and activity.

Q&A with M. Danette Chancellor Continued...

Has this experience influenced the way you'll evaluate or treat patients moving forward? If so, how?

This experience will change my evaluation to include BMI measurements and give me different ways to manage lymphostatic fibrosis with both hands on techniques and compression management.

Were there any differences in clinical practice or philosophy that surprised you?

The clinic there had specialists for every aspect of lymphedema and lipedema treatment. They had specialists who did nothing but measure for compression; nutritionists on staff who instructed in healthy cooking; psychologists; wound care specialists; doctors; nurses; those who provided the necessary education; and exercise specialists. All of these team members coordinate the care of every patient, communicate the progress, and ensure optimal outcomes. The ability of each person to specialize a portion of each patient's treatment was surprising as here in America the treatment is directed and provided by the therapist after the initial referral by the medical provider.

What did you learn from interacting with international colleagues outside the classroom?

The class was composed of students from several different countries. Interaction with therapists from other countries made me realize that regardless of whether the country has private insurance or a national healthcare system the major limiting factor in optimal treatment of lymphedema is the expense involved. The knowledge is there, the commitment is there, the products are available but the expense often dictates what we can do as CLT's.

Beyond the educational sessions, what was your favorite part of the experience in Germany?

Beyond the educational experience, my favorite part of my experience in Germany was the class trip to Felldberg, the highest peak in the Black Forest. The scenery was breathtaking there and it gave us time to get to know our classmates.

Was there a memorable conversation or moment that you'll always remember?

The most memorable moment for me was meeting Dr. Etelka Földi and getting my picture with her.

What advice would you give to another clinician considering attending this course?

My advice to any clinician considering attending this course is to take advantage of this opportunity to advance your education, improve your treatment outcomes, and make lasting connections with others that have the same passions. It is a once in a lifetime opportunity you will never regret taking.

Why do you think continuing education experiences like this are important for advancing lymphatic care?

Continuing education experiences like this is important to advancing lymphatic care because it motivates the therapists, provides knowledge with the latest research, and provides networking opportunities not typical to local classes. It gives us the resources and knowledge we each need to further lymphatic care in our region.

What will you implement on your first day back at work?

My first day back at work I will immediately begin to incorporate asking the patient "What do you need from me so that you feel in good hands?" My follow up responses will be sure to include their responses in acknowledgement that I listened and will address those needs.

Q&A with M. Danette Chancellor Continued...

What was the biggest myth or assumption that changed during the course?

The biggest assumption that changed during this course is that I, as a CLT, can address the patient in entirety without other specialists.

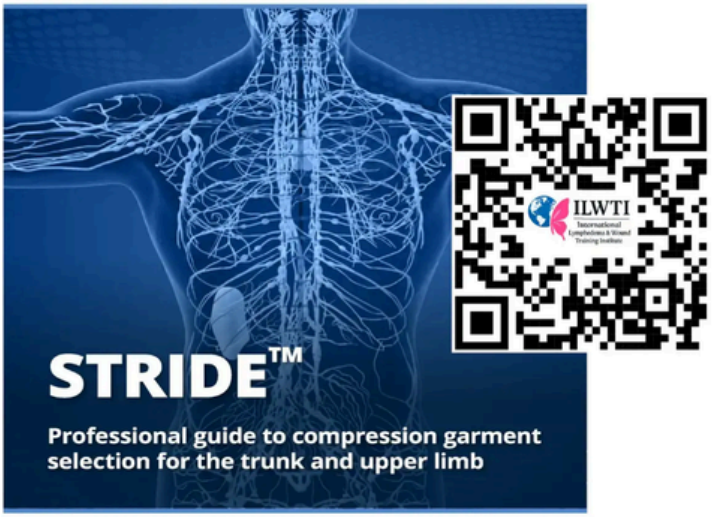
If you could summarize the course in three words, what would they be?

Incredible educational experience.

What was the most valuable lesson or "aha" moment you took away from the course?

The most valuable lesson I learned during the course was that increasing my pressure over lymphostatic fibrosis is a very effective way to soften the hardened tissues.





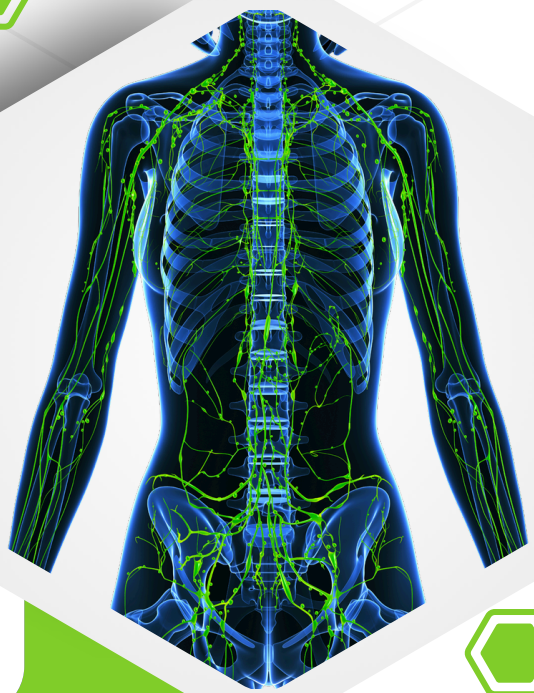
National Lymphedema Network

2026 SUMMIT

Whole Body Healthcare

November 6-8, 2026
Mesa, Arizona

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Welcome to the Interdisciplinary Summit

The lymphatic system influences nearly every aspect of human health. This summit is designed to bring together professionals from across medicine, rehabilitation, and allied health to examine how lymphatic science applies to whole-body care.

Attendees will gain practical tools that can be applied immediately in clinical practice, regardless of specialty. The program emphasizes real-world integration rather than isolated techniques. Join us in Mesa, Arizona for three days of forward-thinking education and professional connection.

REGISTER NOW

Whole Body Healthcare: A New Lens at the 2026 NLN Summit

This November, the National Lymphedema Network is putting the lymphatic system at the center of the conversation about whole-body health. The 2026 NLN Summit, Whole Body Healthcare, takes place November 6-8, 2026, at A.T. Still University in Mesa, Arizona, and it reframes the lymphatic system not as a niche specialty, but as a foundational component of health across the entire body.

That foundation reaches further than many clinicians realize. The summit explores the lymphatic system's role in cardiovascular, pulmonary, gastrointestinal, neurological, orthopedic, and oral-facial health. In other words, it touches nearly every discipline and every patient. The event is designed for all professionals who care for patients across the lifespan and across clinical settings, whatever their specialty.

A Mission to Connect the Dots

The goal of the summit is to bridge disciplines, promote whole-system wellness, and spark new possibilities for collaborative, patient-centered care. Rather than treating the lymphatic system in isolation, the educational sessions demonstrate how lymphatic science informs everyday clinical decision-making in medical, surgical, and rehabilitation environments. The result is a program built for the kind of cross-disciplinary thinking that better outcomes increasingly require.

Featured Topic Tracks

The program spans the full range of where lymphatic health meets clinical practice, including:

- Post-surgical recovery, wound healing, and inflammation
- Head and neck oncology, dysphagia, and airway management
- Integrative and adjunctive therapies for better outcomes

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LYMPHEDEMA
Education & Awareness
PROJECT

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Whole Body Healthcare: A New Lens at the 2026 NLN Summit Continued

- Oncology rehabilitation
- Visceral lymphatics
- Orthopedic trauma, sports medicine, and return-to-activity
- Brain-body connections
- Chronic inflammatory and systemic conditions

Who Should Attend

Because the lymphatic system touches so many areas of care, the summit is built for a broad, interdisciplinary audience:

- Physicians (MD/DO) and Physician Assistants
- Nurses and Nurse Practitioners
- Speech-Language Pathologists
- Respiratory Therapists
- Dentists and Oral Myofunctional Therapists
- Athletic Trainers
- Massage Therapists
- Physical and Occupational Therapists

Featured Faculty

The summit brings together faculty from surgery, medicine, research, and rehabilitation, and a few names stand out. Leading the list is Dr. Wei Chen, MD, FACS, Professor of Plastic Surgery at the Cleveland Clinic and a globally recognized leader in reconstructive microsurgery and supermicrosurgery. Also returning is David Doubblestein, DPT, CLT-LANA, Associate Professor at A.T. Still University, whose Visceral and Deep Abdominal Lymphatic Drainage session was one of last year's most popular.

They are joined by a deeply interdisciplinary group, including Sheila Ridner, PhD, Brad Smith, SLP, CLT, Linda Roherty, CLT, Jodi Winicour, PT, CMT, CLT-LANA, Carmen Recupero, MBA, CLT-LANA, LMT, and Marlys Witte, MD, reflecting the whole-body, cross-disciplinary spirit of the event.

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Whole Body Healthcare: Speakers


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Melissa Buss


Karen Ashforth


Andrea Brennan


Cindy Beers


Wei Chen


Kerry D'Ambrogio


David Doubblestein


Colleen Endrizzi


Heather Gavric


Raymond Hruby


Linda-Anne Kahn


Leslyn Keith


Cristina Kline-Quiroz


Melchiorra Mangiaracina


Kim Marshall

Whole Body Healthcare: Speakers


Kathy McGinty


Brandy McKeown


Lauren Meffen


Tammy Mondry


Barbara Murphy


Sara Nelson

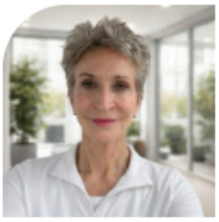

Alaina Newell


Carmen Recupero


Martha Richards


Sheila Ridner


Holly Rodriguez


Linda Roherty


Brad Smith


Sandra Sublett


Lisa Berman Sylvestri


Jodi Winicour


Marlys Witte

The Hidden Burden of Cellulitis in Lymphedema: What Clinicians & Patients Need to Know

Abigail Leslie, OTR/L, CLT, OTD, PAMs

Cellulitis remains one of the most frequent—and most preventable—complications affecting individuals living with lymphedema. Despite increasing awareness of lymphatic disorders, both patients and clinicians often underestimate the seriousness of these infections and the damage they can cause when left untreated. Cellulitis not only accelerates lymphatic damage but also leads to avoidable hospital admissions, systemic illness, and long-term disability.

The Cambridge Media Evidence Summary reports that approximately one-third of all individuals with lymphedema experience cellulitis as a sequela of their condition. This elevated risk is rooted in the biology of lymphatic impairment: protein-rich interstitial fluid disrupts skin integrity, increases inflammatory mediators, and weakens local immune defense, creating an ideal environment for bacterial invasion. Even minor breaks in the skin—scratches, insect bites, or fissures due to dryness—may open the door for infection. [journals.c...dia.com.au]

The 2025 British Lymphology Society (BLS) and Lymphoedema Support Network guidelines reinforce the complexity of this issue. According to their expert-reviewed report, 23.3% of patients experience recurrent cellulitis, and clinical presentation can range from mild inflammation to severe systemic infection requiring hospitalization. Most episodes are linked to Group A Streptococcus, though Staphylococcus aureus is increasingly recognized as a causative organism. Misdiagnosis remains a significant challenge because cellulitis can mimic other inflammatory skin conditions, including lipodermatosclerosis, further delaying timely treatment. [lymphoedema.org]

Why Prevention Works

The good news is that cellulitis is often preventable with consistent self-care, clinical follow-up, and patient education. According to the Cambridge Media report, daily skin hygiene, paired with routine inspection for breaks in the skin, is a "well-recognized strategy to prevent infection" in lymphedema management.

Two major pillars form the foundation of effective prevention: [journals.c...dia.com.au]

1. Skin Care

Maintaining the skin barrier is crucial. Low-pH cleansers and fragrance-free emollients reduce dryness, cracking, and the risk of bacterial entry. Regular inspection of skin folds and interdigital spaces is especially critical for individuals with chronic edema.

2. Compression Therapy

Compression reduces stagnant protein-rich fluid, improves lymphatic return, and lowers inflammatory burden. The National Lymphedema Network emphasizes compression as an essential component of both treatment and self-management, noting that many patients lack adequate access due to financial hardship. Their Garment Assistance Program provides medically necessary garments to qualifying patients who otherwise could not afford them. [lymphnet.org]

Empowering the Patient

Patients benefit significantly from clear, actionable guidance. Key strategies include:

- Inspecting skin daily for breaks or redness
- Treating minor cuts immediately
- Using gentle, non-drying cleansers
- Ensuring skin folds and toe web spaces are clean and dry
- Moisturizing with fragrance-free emollients
- Seeking urgent care for fever, warmth, rapid swelling, or red streaking

These steps help patients become active partners in preventing recurrent inflammatory episodes.

Conclusion

Cellulitis is not an inevitable outcome for individuals with lymphedema. With evidence-based skin care, proper access to compression garments, and early recognition

of warning signs, the risk of cellulitis can be dramatically reduced. Empowering clinicians and patients with accurate information and practical tools is essential to interrupt the cycle of infection, inflammation, and worsening lymphatic damage. The signs, the risk of cellulitis can be dramatically reduced.

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National Lymphedema Network Welcomes New Board Members

The NLN is proud to welcome three accomplished leaders to our Board of Directors. Cheryl Brunelle, Ken Johnson, and Linda Hodgkins bring decades of combined experience across clinical care, research, and rehabilitation leadership, united by a shared commitment to advancing education, strengthening advocacy, and expanding access to high-quality lymphatic care. Please join us in welcoming them as we move into this next chapter together.



Cheryl Brunelle

Cheryl Brunelle is the Associate Director of the Lymphedema Research Program at Massachusetts General Hospital in Boston. She is an APTA Board-Certified Clinical Specialist in Physical Therapy and a certified lymphedema therapist. Her clinical practice focuses on the conservative treatment of patients at risk for or living with lymphedema and lipedema, in collaboration with the MGH lymphatic surgery program.



Ken Johnson

Ken Johnson is the Executive Director of Ambulatory Rehabilitation Therapy Services at the Johns Hopkins Rehabilitation Network, where he leads a multidisciplinary outpatient team across 14 locations and brings nearly three decades of rehabilitation leadership and clinical experience.



Linda Hodgkins

Linda Hodgkins is the Lymphedema Program Manager at Hartford HealthCare Rehabilitation Network in Connecticut, where she leads a nationally recognized program designated as a Center of Excellence for Conservative Care by LE&RN. An Occupational Therapist and Certified Lymphedema Therapist since 1997, she is passionate about advancing evidence-based care for patients with lymphedema and edema. She has presented internationally, including at the Földi Days Conference in Germany, the Power Lymphatics Conference, and the AVLS Congress. Linda is also a faculty member with Klose Training.

The State of Lymphatic Care and the Future of the NLN

Eric Ansart

There has never been a more exciting time to be involved in lymphatic care.

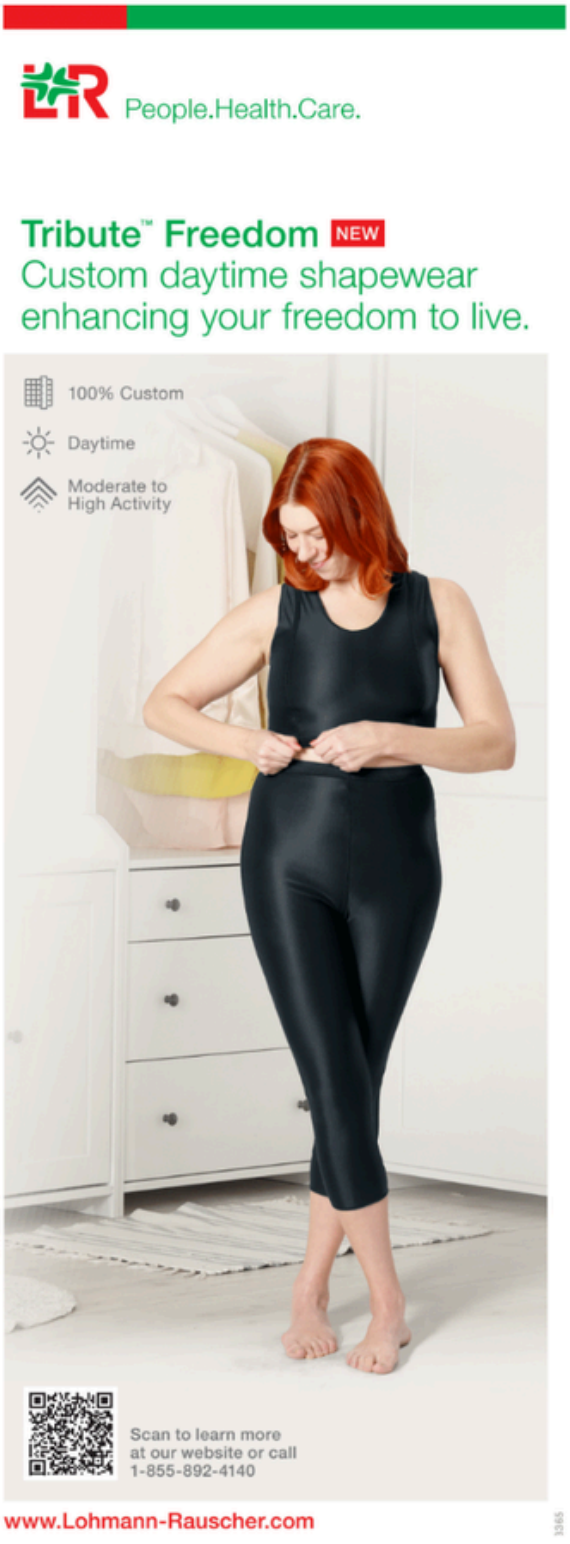
Over the past several years, awareness of the lymphatic system and its critical role in overall health has grown significantly. What was once considered a niche area of medicine is now gaining recognition across healthcare disciplines, leading to increased research, improved treatment options, and greater acceptance among providers and patients alike.

We are witnessing meaningful progress in the treatment of lymphedema and lymphatic disorders. Complete Decongestive Therapy (CDT) remains the gold standard of care, helping countless patients achieve improved function, reduced symptoms, and a better quality of life. At the same time, emerging therapies and technologies continue to expand the options available to patients and clinicians.

Research into surgical interventions has also produced encouraging results. Beyond traditional applications, some studies have begun exploring the relationship between lymphatic function and neurological conditions, including dementia. While much more research is needed, these early findings offer hope and reinforce the importance of understanding the lymphatic system's broader role in human health.[5,6]

Similarly, the growing use of GLP-1 medications has generated interest within the lymphatic community. While some observations suggest these treatments may have beneficial effects related to inflammation, weight management, and lymphatic health, the science is still evolving. Continued research will be essential to fully understand their potential impact and appropriate role in lymphatic care.

At the National Lymphedema Network (NLN), we recognize that progress happens not only through research and innovation, but through community. That is why we are excited to launch our Regional Ambassador Program.



The State of Lymphatic Care and the Future of the NLN Continued

This initiative is designed to support local therapists, strengthen professional connections, and create more supportive communities for both clinicians and patients. By fostering collaboration at the local level, we can help ensure that individuals affected by lymphatic disorders have access to education, resources, and quality care.

If you are interested in becoming involved with the NLN or learning more about the Ambassador Program, we encourage you to visit our website here.

As we look ahead, it is difficult not to feel optimistic. We may be entering a golden age of lymphatic medicine—a period marked by increased recognition, accelerating research, and expanding treatment possibilities. For the first time in history, the prospect of transformative therapies and even potential cures appears closer than ever before.

Yet progress brings responsibility. As a community, we must continue to advocate for our patients and for one another. We must uphold high standards of care, promote evidence-based treatment, and ensure that CDT remains accessible to those who need it. At the same time, we should remain open to new modalities and innovations that can complement existing therapies and further improve patient outcomes.

Together, we can build a future where lymphatic diseases are better understood, more effectively treated, and ultimately prevented or cured. The momentum is real, the opportunities are growing, and the future of lymphatic care has never looked brighter.



Call to Action: Protect Meaningful Outcome Measurement in Lymphedema Care

Jan Weiss, PT, DHS, CLT

The Lymphedema Life Impact Scale (LLIS) is a validated, condition-specific quality of life measure that captures the physical, functional, psychosocial, and emotional impact of chronic edema and lymphedema.1 It is essential for accurate assessment, treatment planning, research continuity, and reimbursement justification.

A digital health platform recently replaced the LLIS with generic orthopedic patient-reported outcome measures (PROM)2,3 as the default tool for patients with lymphedema, despite its narrow focus on functional impairments only and its lack of relevance to the complexity of this condition. The LLIS has been moved to an opt-in status in addition to the PROM, and the generic PROM is being administered after every treatment session, even in programs treating patients 4-5 times per week.

While the shorter length of this new PROM is promoted as an advantage to existing lymphedema QOL measures, this shift creates serious risks:

- **Incomplete Measurement:** Functional impairment alone does not reflect the multidimensional burden of lymphedema. Key domains central to this condition are omitted.
- **Undervalued Treatment Outcomes:** Without comprehensive measurement, the effectiveness of lymphedema treatment may appear limited or inconsistent.
- **Reimbursement Risk:** Insufficient outcome data may lead to perceived lack of progress, jeopardizing treatment justification and reimbursement.
- **Patient Burden:** Administering this limited PROM after every session (often 4–5 times per week) may contribute to survey fatigue, reducing engagement and response accuracy. Requests from customers to reduce testing frequency have been denied.
- **Clinical Misalignment:** While the new PROM may be appropriate for its intended orthopedic population, it is not aligned with the complexity, chronicity, or longitudinal management needs of lymphedema. Its lack of condition-specific design creates a utilization gap.

Your Action is Needed

Advocate with your digital health platform provider to:

- Have the LLIS to remain the primary, default QOL outcome measure for lymphedema.
- Align testing cadences with specialty care, not orthopedic norms.
- Ensure software supports, rather than constrains evidence-based practice.

Lymphedema care requires a tool that reflects its complexity. Our patients - and our profession - deserve nothing less.

I have no disclosures to report.

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Outcome Measure is Reliable, Valid, and Efficient for Patients with Lymphatic and Venous Disorders. Phys Ther 2023;103:1-10.

Are You Interested in Sharing Your Experience Living with Lymphedema or Lipedema During Pregnancy and Post-Partum?

Progress is being made in the prevention and treatment of lymphedema and lipedema, but the relationship between these conditions and pregnancy is still not well understood! Please consider taking part in a short international survey to help us gain insight into your experience with lymphedema/lipedema and pregnancy! The survey is available in 10 languages. The hope is that the information gained from this study will help shape the understanding and treatment guidelines for lymphedema/lipedema during pregnancy! Please share this with others who may be interested in participating.

https://www.surveymonkey.com/r/ZC6Q9ST

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Join NLN for Expanded Member Benefits and Partner Programs

NLN membership connects you to a growing set of tools, education, and support designed for patients, caregivers, and clinicians. Through partnerships with trusted organizations and industry experts, members gain access to resources that support whole-person wellness, stronger care delivery, and a more connected community.

Education and Learning

Members can access NLN's learning platform for live virtual courses, on-demand education, and special programming throughout the year. These offerings support continuing education for professionals and practical, patient-friendly learning for those managing lymphatic conditions.

Practice and Business Support

For clinicians, clinic owners, and small businesses, membership includes access to partner resources that support your online presence and communication. These services can help improve local visibility, strengthen digital outreach, and support long-term growth. Join today to elevate your practice.

Clinical Tools and Patient Resources

Members can explore partner offerings that support measuring and tracking progress, organizing workflows, and improving patient education. These tools are designed to strengthen consistency in care and make it easier to share reliable information.

Community Connection

NLN membership includes access to member forums and private groups that make it easier to connect with others, share insights, and stay informed on NLN updates and opportunities.



Active & Fit Direct program is just one of the benefits that the NLN offers to all members. Members - Log in to sign up today!

NLN continues to add new partnerships throughout the year, so members are encouraged to check back regularly for expanded benefits and new collaborations.

Join the NLN to Access Member Benefits

Understanding Lymphedema Surgery: A Review of the NLN Position Paper

Jay Granzow, MD, MPH, FACS

In a new video for the National Lymphedema Network, lymphedema surgeon Dr. Jay Granzow reviews the NLN's position paper on lymphedema surgery, explaining what these surgeries are, who they help, and how they fit into a complete treatment plan.

His central message: lymphedema surgery is well established and effective for carefully selected patients, but it complements conservative therapy rather than replacing it. Complete Decongestive Therapy remains the cornerstone of care, there is no cure for lymphedema, and the best outcomes come from a team-based approach with careful patient selection.

The payoff for the right candidates can be significant: meaningful limb volume reductions, fewer infections and episodes of cellulitis, and a better quality of life.

Dr. Granzow groups the surgeries into two broad types:

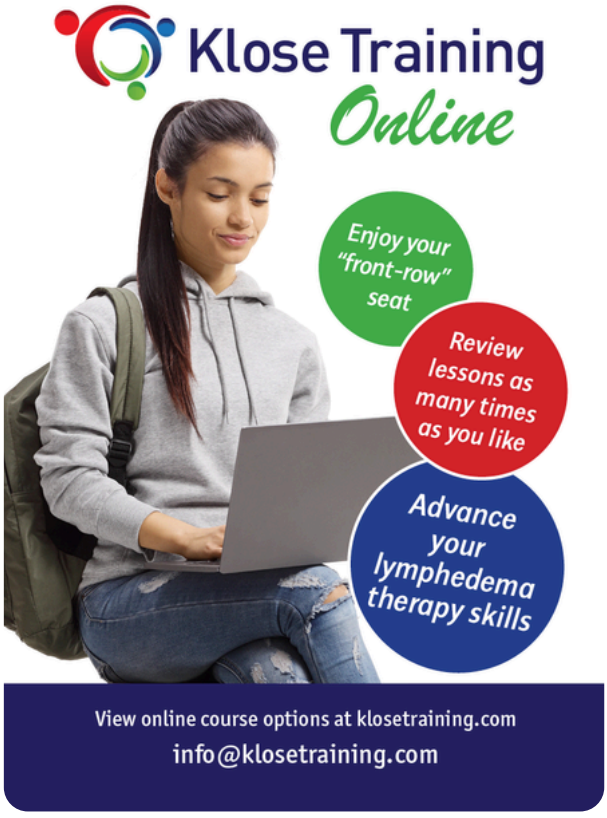
- Microsurgery and supermicrosurgery, such as lymphaticovenous anastomosis (LVA) and vascularized lymph node transfer (VLNT), which create new drainage pathways and tend to help most in earlier-stage or fluid-predominant lymphedema.
- Debulking, or volume-reduction surgery, such as SAPL (suction-assisted protein lipectomy), which permanently removes the solid fat and protein deposits found in advanced, stage 2 or worse lymphedema.

He is clear that debulking is not the same as cosmetic liposuction. It uses different techniques, equipment, and recovery protocols, and it does not remove the need for compression. Custom flat-knit garments are still required before and after surgery. He also explains how surgeries can be staged and combined to first reduce the limb and then lower the amount of therapy and compression needed long term.

The patient results he shares are striking, with large and lasting volume reductions and, in several cases, far less reliance on daily compression. He also clears up one of the most common points of confusion in the community: the difference between lymphedema and lipedema, and how a patient can have both.

This article and video are educational and not medical advice. There is no cure for lymphedema, treatment approaches vary by surgeon and center, and care should be guided by a qualified, experienced lymphedema team.

Watch the Full Video



Upcoming NLN Events



NLN Clinical Focus Group - Healthy Lifestyle
Monday July 06
12:00 PM - 1:00 PM



NLN Clinical Focus Group - Start Strong (Self-Care & Education)
Wednesday July 29
12:00 PM - 1:00 PM



NLN Clinical Focus Group - Private Practice
Thursday Aug 06
6:00 PM - 7:00 PM



NLN Clinical Focus Group - Start Strong (Skin Care & Wounds)
Wednesday Aug 26
6:00 PM - 7:00 PM

Upcoming NLN Events Continued...



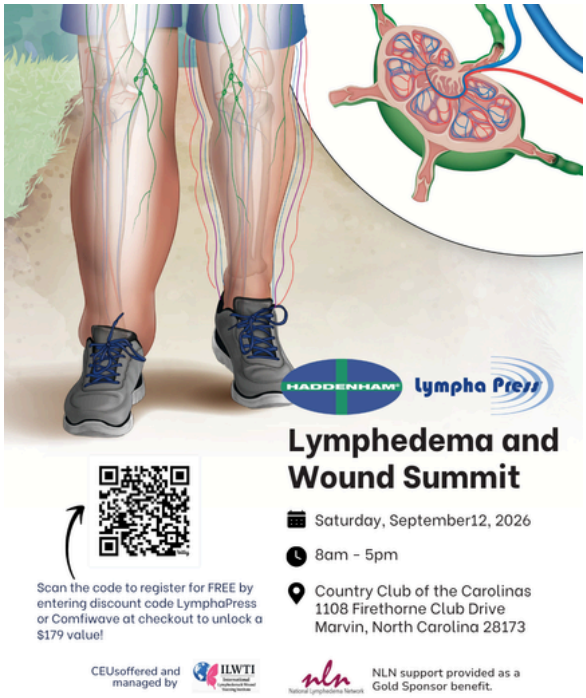
NLN Signature Series

Lifting Lymphedema Care: Advanced Clinical Training in Breast, Pelvic, Head & Neck, as well as Lower Extremity Lymphedema and Lipedema

Saturday Aug 8
8:00 AM - 5:00 PM

Join us for a full-day, advanced clinical training designed for healthcare professionals dedicated to elevating standards in lymphatic and oncologic rehabilitation care.

Register Now



Lymphedema & Wound Summit 2026

Saturday, September 12

Lymphedema & Wound Summit! Sponsored by Haddenham & Lympha Press, A regional clinician forum bringing together experts in lymphedema, chronic edema, and wound care.

Register Now