LYMPHOEDEMA SELF MANAGEMENT.

2. CELLULITIS

WHAT IS CELLULITIS?

Cellulitis is a sudden, non-contagious infection of the skin, characterised by redness, swelling and heat, accompanied by pain and tenderness. People with lymphoedema are particularly susceptible to cellulitis because the lymphatic system is damaged or overloaded and does not function adequately to fight infection.

WHAT CAUSES CELLULITIS?

The infection may enter via a break in the skin, such as a scratch or insect bite or through a pre-existing wound or ulcer, or through an area of skin inflammation, e.g. athlete's foot, eczema or dermatitis. However, it may not always be possible to identify the cause and an attack may arise without warning at all.

HOW CAN I RECOGNISE CELLULITIS?

The patient often (but not always) feels unwell first, as if 'flu is starting. Symptoms may include fever, shivers, muscular aches and pains, headache, nausea, vomiting etc. The swollen area then develops a rash or becomes red, hot and tender to the touch. Swelling may dramatically increase and pain may occur in the swollen area, or the armpit, with lymphoedema of the arm, or groin with lymphoedema of the leg.

WHAT SHOULD I DO IF I DEVELOP CELLULITIS?

Contact your doctor immediately as you will need antibiotic treatment. For information on the type of antibiotics used in the treatment of cellulitis in lymphoedema please see the Lymphoedema Support Network Cellulitis Consensus Document.

Treatment of cellulitis in lymphoedema is very important, not only because the sufferer may become very ill, but because lymph drainage routes risk being damaged further. This may cause the swelling to worsen and lead to permanent skin changes, e.g. tissue thickening. This does not help the long-term management of the condition.

POINTS TO NOTE:

- Patients with severe constitutional upset may require admission to hospital for intravenous antibiotics
- Those people familiar with attacks and who have appropriate oral antibiotics to hand, should commence them immediately and finish the course completely (even if symptoms improve)
- Remove all compression garments until the area feels better and they can be tolerated again
- Other forms of treatment such as Manual Lymphatic Drainage and exercise programmes should be temporarily suspended
- Rest with the affected limb elevated in a comfortable position, ideally raised to the same level as the heart
- Drink plenty of water
- Paracetamol may be taken, however, anti-inflammatory medications such as ibuprofen should be avoided.