LYMPHOEDEMA CARE IN BC TODAY AND OVER THE HORIZON

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Physical Medicine and Rehabilitation
BCLA Lymphoedema Awareness Day
Saturday, June 25th, 2011
Objectives

Yesterday is already a dream,
And tomorrow is only a vision,
But today well lived,
Makes every yesterday a dream of happiness,
and every tomorrow,
A vision of hope.

Shoorty, January 21, 2011
Lymphoedema in the past in BC

- Poorly recognized with limited acknowledgement within the medical community
- Diagnosis of primary disease inconsistent
- Diagnosis of secondary disease also inconsistent
- Sporadic episodic unstandardized care or no care
- No advocacy
Lymphoedema in the present in BC

- Advocacy
- Education
- Awareness
- Pockets of specialized care
Lymphoedema in the present in BC

- Often still poorly recognized with limited acknowledgement within the medical community
- Diagnosis of primary disease inconsistent
- Diagnosis of secondary disease also inconsistent
- Sporadic episodic unstandardized care or no care
• How do we get from DIstORG NizATION to A comprehensive system of care?
BC Lymphoedema Network 201?

- Who are the players:
  - Patients and their families
  - Health care providers
  - Health regions
  - Government
  - Funding agencies
  - Advocacy organizations (BCLA)
  - Health care educational institutions
‘Silo-Care’

We need to minimize the ‘silo’ mentality
How do we achieve standardized care in BC?

- Structural opportunities
  - Primary centres in local communities
  - Secondary referral centres in each health region
  - Tertiary centre associated with academic based (UBC?)
How do we achieve standardized care in BC

• Services Delivery Models
  • Diagnostic centres of excellence with access to specialized clinical expertise and technologies including lymphoedema surveillance
• Standardized systems of care
  • MLD/CDT etc.
  • Compression Pumps
  • Compression techniques
  • Standardized fitting/expertise
  • Improved access to acute care expertise
How do we achieve standardized care in BC

- Gold Standards in Care
  - Evidence and outcome based care
  - Education and knowledge translation
  - Participation in regional, national and international activities
- Seamless patient care models
- Research and sharing of knowledge
Challenges in care

- Who has lymphoedema?
  - Should we assume all patients with a susceptibility to lymphedema (post-surgical/radiotherapy) be managed even without clinical manifestations?
- Primary edema versus non-malignant forms of secondary edema; (should they system deny access to patients with edema without proven primary lymphoedema)
Challenges in care

- Primary versus secondary Lymphoedema
- Should either population of patients have access to different services, benefits etc. on the basis of their underlying diagnosis (i.e. BC Cancer Agency)
- Should all patients have equal/equivalent access to services/equipment regardless of income/Extended Health benefits (i.e. pharmacare/amputees)
Special Populations with Special Needs

- Children
- Adolescents who are transitioning
- Palliative care
- Frail elderly
- Other susceptible/fragile populations
BC Lymphedema Network 2011
What’s next?

- BC Lymphedema Association
- Canadian Lymphedema Framework
- Providence Healthcare: FI/EW
- Vodder School
- BCCA
- BCCH
- UBC
- Partners in industry