

Move? It Hurts!

Getting Back to Health in Motion after Breast Cancer Diagnosis

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October is an exciting month as it shines light on Breast Cancer Awareness. Physical Therapy has a very large role in a person's treatment for a breast cancer treatment.

Early detection and treatments for breast cancer are saving more lives, but treatments such as surgery, radiation, and chemotherapy can result in life-changing side-effects. The goal of cancer treatments is to get you cancer free. But "cancer free" does not return you to your old self. That is where physical therapy comes in: the goal of physical therapy is to get you back to your normal everyday activities. Research shows women who received physical therapy after breast cancer surgery, demonstrate improvements in range of motion, pain, and swelling faster than those who do not. (1) Not all physical therapists are trained the same. Therapists who have been trained in oncology and breast cancer treatments can help develop a customized plan of care to address your needs.

After breast cancer related treatments, some women experience shoulder pain, swelling, stiffness, and/or webbing in their under arms. Axillary webbing or lymphatic cording is a thick rope like tissue under the skin. Axillary webbing typically is in the underarm, but can spread to the hand if untreated. (2) This can occur after a lymph node biopsy, lumpectomy, and/or mastectomy. Your physical therapist can guide you through gentle exercises to prevent shoulder pain and range of motion restrictions. Ask your medical team when it is appropriate to start with an exercise routine. The American Cancer Society recommends a patient initiate an exercise routine during the first 3-7 days. This includes simple tasks like using your affected arm as you normally do when you bathe, comb your hair, get dressed, and eat. (3) Other simple activities include:

1. Prop pillows under your arm so your hand, wrist, elbow and shoulder at an incline to help decrease upper extremity swelling;
2. Deflate swelling in the arm by raising your affected arm above heart level and pumping the hand up to 20 times. Progress to bending and straightening your

elbow 20 times, three to four times per day to decrease swelling in the arm. If you have pain in the arm, perform this exercise in a pain-free range;

3. After surgery, your chest may feel tight. Take deep breaths utilizing your diaphragm to assist with maintaining chest and rib mobility. Also try lying on your back and breathe in slowly filling your belly first. Try to progress to taking multiple slow breaths. Repeat this exercise 4-5 times per day.

After the initial couple weeks after therapy, getting your arm back to normal ROM is imperative. Again, ask your medical team when it is appropriate to initiate stretching and strengthening the affected arm.

1. Standing next to a wall, stretch the arm overhead and walk your fingers up the wall. You can also use a towel to slide up a wall in front of you and out to the side of you. Perform 10 times three times per day;
2. Some women demonstrate guarded posturing without even noticing. By performing shoulder rolls and focusing on squeezing the shoulder blades back and down, the chest can open up and the tops of the shoulders decreasing shoulder and neck pain.

If you or someone you know has shoulder pain or tightness in their arm or chest when reaching overhead, swelling in the hand or breast, and/or weakness in the arm after breast cancer treatment, physical therapy may help. Contact us today at Stevensville Physical Therapy for more information 406.777.5354.

1. Anderson RT, Kimmick GG, McCoy TP, et al. A randomized trial of exercise on well-being and function following breast cancer surgery: the RESTORE trial. *J Cancer Surviv.* 2012 Jun;6(2):172-181.
2. Axillary Web Syndrome (Cording). http://www.breastcancer.org/treatment/side_effects/aws. Accessed on 6/28/15.
3. <http://www.breastcancer.org/tips/exercise/treatment/surgery>. Accessed 6/28/15.
4. McNeely ML, Campbell K, Ospina M, et al. Exercise interventions for upper-limb dysfunction due to breast cancer treatment. *Cochrane Database Syst Rev.* 2010 Jun 16;(6):CD005211.

