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## **A pragmatic evaluation of community-based lymphoedema services for individuals at risk of, or living with, cancer-related lymphoedema**

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**Purpose:** This study examined the long-term effects of standard care lymphoedema treatment, delivered by cancer support centres in community-based settings, on quality of life and self-reported symptom severity among individuals with cancer-related lymphoedema.

**Methods:** A single-group, pre-post pragmatic study design was adopted. Survivors of cancer referred to community-based cancer support centres were recruited. Participants received a minimum of 3 standard care lymphoedema treatment sessions at the centres with a certified lymphoedema clinician at baseline (T1), 1 month (T2) and 6 months (T3), where core treatment strategies may have included lymphoedema education to enable self-management, skin care, weight management, strength training and physical activity. Where applicable, lymphoedema clinicians emphasised the benefits of exercise to participants, encouraged attainment of the recommended physical activity guidelines and included regular exercise as an integral part of the person's lymphoedema treatment plan, where exercise commenced at a low level and progressed slowly, as tolerated by the person. Assessments of quality of life and symptom severity were conducted at each visit using the Lymphoedema Quality of Life (LYMQoL) questionnaire and a researcher-developed tool of self-reported symptom severity.

**Results:** One-hundred and twenty survivors of cancer were recruited (mean age ( $\pm$ SD) 59 ( $\pm$ 12y); 90% female). Forty participants (33%) completed the T3 assessment. Linear mixed-model analyses demonstrated significant improvements in arm cancer-related lymphoedema quality of life (n=78) from T1 to T3 ( $p < 0.05$ ), with a small effect size (Cohen's  $d = 0.24$ ). Leg-CRL QoL (n=18) improved significantly from T1 to T3 ( $p < 0.001$ ) with a medium effect size (Cohen's  $d = 0.68$ ). All 7 self-reported symptom ratings, including pain, swelling and functional restriction, improved from T1-T3.

**Conclusion:** Standard care lymphoedema treatment, when delivered in community-based cancer support centres, was associated with improvements in quality of life and self-reported symptoms among survivors of cancer at 6 months.

### **Keywords**

Cancer, lymphoedema, implementation research

### **Conflict of Interest & Ethical Approval**

yes

### **Abstract submitters declaration**

yes

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