

Lymphovenous anastomosis during axillary or inguinal node dissection for preventing secondary lymphoedema

Information for the public

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Breast cancer

There is not enough evidence about how well this procedure works in the long term or how it affects quality of life for people with breast cancer. But there are no major safety concerns. So, it can only be done with special arrangements. This means you will have regular appointments afterwards to check how well it is working or if it has caused problems.

Other cancers

This procedure can only be done as part of a research study for other cancers. This is because there is not enough evidence to be sure how well it works or how safe it is. Your healthcare professional should talk to you about the research.

Lymph is a fluid that is carried around the body by a system of small vessels. Surgical removal (dissection) of lymph nodes (also called lymph glands), for example, during surgery for cancer of the breast (axillary nodes) or vulva (inguinal nodes), can lead to a build-up of lymph under the skin (lymphoedema). This procedure is done when the lymph nodes are removed. Some of the lymphatic vessels around where the lymph nodes have been removed are diverted to nearby veins (lymphovenous anastomosis). This helps the lymph flow normally and not build up. The aim is to prevent lymphoedema and the symptoms it causes.

Is this procedure right for me?

You should be included in [making decisions about your care](#).

Your healthcare professionals should explain the risks and benefits of this procedure and how it is done. They should discuss your options and listen carefully to your views and concerns. They should offer you more information about the procedure. Your family or carers can be involved if you want or need them to be.

You will be asked to decide whether you agree (consent) to have the procedure. Find out more about [giving consent to treatment on the NHS website](#).

Some questions to think about

- How many appointments will I need?
- What are the possible benefits? How likely am I to get them?
- What are the risks or side effects? How likely are they?
- Will I have to stay in hospital?
- What happens if it does not work or something goes wrong?
- What happens if I do not want the procedure?
- Are other treatments available?

Information and support

- [NICE's information on HealthTech guidance](#) explains what HealthTech is and how we assess it.
- [NICE's information on HealthTech recommendations](#) explains what special arrangements and only in research are.

You can also get support from your local [Healthwatch](#).

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