



FOR IMMEDIATE RELEASE

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LYMPHEDEMA ADVOCATES WORK TO FILL GAP IN HEALTH CARE

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Preventative treatment for this disease would save Medicare hundreds of millions of dollars each year while greatly improving the lives of patients.

WASHINGTON DC – The National Lymphedema Network (NLN), patients, medical professionals and other advocates are converging on Washington DC on May 26th and 27th to increase awareness around lymphedema and to enroll the support of members of Congress for H.R. 4662, The Lymphedema Diagnosis and Treatment Cost Saving Act of 2010. The bill is already backed by over 30 organizations, including LiveStrong, the Lance Armstrong Foundation. The National Lymphedema Network, The Norton School of Lymphatic Therapy, and MediUSA are amongst the endorsing groups represented in DC during this visit.

Lymphedema is an accumulation of lymphatic fluid that causes tissue swelling most often in the arm(s) and/or leg(s), and occasionally in other parts of the body. Although lymphedema can strike anyone at any age, including babies born with the disease, most cases are the result of cancer or cancer treatment. It affects an estimated 1.5 to 3 million Medicare Beneficiaries who are not presently receiving treatment from Medicare according to the current medical standard of care. Medicare is spending **billions of dollars every year** treating **largely preventable** lymphedema-related cellulitis. Over time, untreated lymphedema results in disfigurement, disability and even death.

H.R. 4662, The Lymphedema Diagnosis and Treatment Cost Saving Act of 2010, will accomplish the following:

- will result in estimated savings of hundreds of millions of dollars in Medicare expenditures per year;
- provide diagnosis and treatment of individuals with and at risk for lymphedema according to current medical treatment standards, including manual lymph drainage, compression bandages, garments, devices, and exercise;
- enhance quality of lymphedema patient care by providing therapist qualification requirements;

- provide for lymphedema patient education in the procedures for self-treatment so as to transfer the treatment from the clinical to the home setting;
- encourage patient self-treatment plan adherence by providing necessary medical supplies for use at home;
- expand patient access to qualified lymphedema therapy by extending coverage to qualified, trained lymphedema therapists who may practice under a qualified physician,
- reduce total healthcare costs through avoidance of periodic infections, pain and disabilities resulting from this medical condition.

This is truly a “revolution” by lymphedema patients who have been trying to obtain the quality treatment for their condition which has been used in Europe and Australia for decades, and which they have been fighting for in the U.S. over the last ten years.

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