

2021 ~ 2022

Professional Directory & Resource Guide





Mission

We are the provincial resource to promote optimal healthy living with Lymphedema.

Goals

- Advance awareness and knowledge about Lymphedema and available management options.
- Advocate on behalf of people and families affected by Lymphedema.
- Encourage patients to take an active role in the management of their condition.
- Liaise with and contribute to the Canadian Lymphedema community.
- Become known, respected and promoted as a resource by our key stakeholder groups.
- Encourage and support local, national and international Lymphedema research and development.

The BC Lymphedema Association is here to support people living with Lymphedema. Please note we are not able to provide medical advice.

The resource directory has been prepared entirely by BCLA Directors and administrator. It is intended to help you find the services you need within your health region.

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STAGES OF LYMPHEDEMA

Whether Primary or Secondary, Lymphedema usually progresses through a series of stages from mild to severe. That's why it's important to get help right away, even if your initial symptoms don't seem like a big deal or they come and go. One episode of numbness, tingling, or swelling will very often lead to more. If you don't act on early symptoms, the buildup of fluid can cause permanent damage to the tissues under the skin.

There are many methods for staging, which are frequently being upgraded. Currently, the Canadian Lymphedema Framework (CLF) refers to the criteria established by the International Society of Lymphology (ISL). The stages are:

Stage 0 (refers to subclinical or latent condition): There may be no changes visible to the naked eye despite impaired lymph transport. Symptoms such as mild tingling, unusual tiredness, or slight heaviness, may be palpable or “felt” by the patient (sometimes, by the trained therapist). At this stage the body's homeostasis is trying hard to cope with the change that has occurred due to organic and/or functional alterations to the lymphatic system. The changes can come from a variety of causes (some examples: surgery, trauma, radiation). Due to subtle alterations in lymph system transport capacity, the potential exists for Lymphedema to occur at any time from a few months to several years after the alteration occurred. Then, visible symptoms develop, which are general descriptions of the following stages:

Stage 1 (early or mild): Swelling occurs where the lymph transport capacity is altered. The swelling could be in any affected area, such as limbs, hand/feet, trunk, breast, or other areas, as the protein-rich fluid starts to accumulate. The symptoms are visible and palpable. When the skin is pressed, a temporary small dent (or pit) forms; this may be referred to as “pitting edema.” Such early-stage Lymphedema is considered reversible, as the swelling will disappear with elevation or bed rest. While the swelling resolves, however Lymphedema is still present.

STAGES OF LYMPHEDEMA (continued)

Stage 2 (moderate): Elevating the arm or other area does not resolve the swelling. The swelling tends to increase. Pressing on the skin may or may not leave a pit (non-pitting edema). Some changes to the tissue under the skin start happening, such as accumulation of fat and/or fibrosis which is a hardening, or thickening of the tissue. The more fibrosis is present, the harder it is to produce pitting. Stage 2 Lymphedema can be managed with treatment. However, at this stage, the tissue changes are difficult to completely reverse.

Stage 3 (severe): This is the most advanced stage, the affected limb or area of the body tend to become very large and/or misshapen with the amount of swelling present, Fibrosis is hard and difficult to soften. If Stage 3 is present in distal extremities, the skin thickens and may even shed the outer layer. It may take on a leathery, wrinkled appearance, and may have small/tiny projections like little warts or bumps. Stage 3 may also be managed with treatment.

It should be noted that it is possible to have mild, moderate and severe of any of the stages. Once you have mild Lymphedema, you are at higher risk for moderate-to-severe Lymphedema than someone who has never had any symptoms. This risk persists even if your symptoms reduce with treatment.

Treatment of Lymphedema should be done by a Health Care Professional (HCP) who has been trained in the care of Lymphedema/lipedema/lymphatic pathologies. Treatment may be with Combined Decongestive Therapy (CDT). CDT consists of Manual Lymph Drainage, Skin Care, Compression and Exercise. Or, it may be possible to use compression alone, under the supervision of a trained HCP.

DIAGNOSIS, ASSESSMENT & MONITORING

The diagnosis or early detection of Lymphedema is difficult. The first signs may be subjective observations such as "my arm feels heavy" or "I have difficulty these days getting rings on and off my fingers". These may be symptomatic of early stage (stage 0) Lymphedema, where accumulation of lymph is mild and not detectable by any difference in arm volume or circumference.

As Lymphedema develops further, then definitive diagnosis is commonly based upon an objective measurement of difference between the affected or at-risk limb to the opposite unaffected limb (e.g. in volume or circumference). A generally accepted minimum criteria is a volume of difference of 100 ml between limbs or a 2 cm difference (measured at set intervals along the limb) is often used.

Recently, the technique of bioimpedance spectroscopy measurement (a method that measures the amount of fluid in a limb) has been shown to have greater sensitivity than these existing methods and holds promise as a simple diagnostic and screening tool. Impedance analyzers specifically designed for this purpose are now commercially available. Similarly, assessment and monitoring of Lymphedema progression, or its response to treatment, is usually based on the changes in volume, circumference, or impedance over time.

For a formal diagnosis ask your doctor for a referral to Dr. E. Weiss at Providence Medical (St. Paul's)
(see page 16 for Dr Weiss contact info)



Image used with permission from Joachim Zuther
www.lymphedemablog.com

DIAGNOSTIC CODES

Lymphedema billing numbers

It is important that patients ensure the family doctor & other medical specialists, use the correct billing codes for all visits related to Lymphedema.

In the ICD9

457 is Non-infective Disorders of Lymphatic Channels.

457.0 - Post mastectomy Lymphoedema Syndrome

457.1-Other Lymphoedema

457.2-Lymphangitis (inflammation of the lymph system)

457.8- Other non-infective Disorders of Lymphatic Channels.

457.9-Unspecified (unspecified lymphatic problems)

782.3 Edema –Is a symptom with the underlying cause not specified or yet to be diagnosed.

In the ICD10

ICD10 add new specific conditions,

I 89.0 - Lymphoedema, not elsewhere classified, includes:

- Lymphangietasis, secondary elephantiasis (nonfilarial), glandular, lymphangietatic, lymphatic vessel, scrotum.
- Lymphangietasis is defined as leakage of fluid from the intestinal lymphatic system due to blockage of the lymphatic system).

Q82.0 (The 'Q' is important identifier of this billing number)

Hereditary Lymphoedema,

Includes: Elephantiasis, (nonfilarial)

- congenital (any site) (hereditary)

I 97.2 Post mastectomy Lymphoedema Syndrome

(Includes Elephantiasis due to mastectomy, obliteration of lymphatic vessels due to mastectomy)

Lipidema—No code currently available

SKIN CARE

Skin care plays an essential role for both patients at risk of development and in the management of existing Lymphedema. Prevention is in the patients' best tool in risk reduction for the onset of Lymphedema.

The skin is the first line of defence against foreign invaders and is usually impermeable to bacteria and other pathogens. However, any defect in the skin such as burns, chafing, dryness, cuticle injury, cracks, cuts, splinters, fungal infections, insect bites and tattoo needles can present an entry site for pathogens or agents which cause infection.

Lymphedema patients are particularly susceptible to infections which can easily lead to Cellulitis. The main goal in skin and nail care is to prevent infection. Inflammation from bacterial or fungal infection can not only damages lymph vessels but can also develop into a serious medical crisis.

AVOID: tattoos, sun burn, mosquito bites and minor injuries from daily activity Commercial manicures, acrylic nails, pedicure treatments, with the possible exception of services by a podiatrist using sterilized equipment.

DO: Keep nails short and do not use implements to push back cuticles on fingers or toes. Make sure fungal infections (athlete's foot, yellow nail) are treated, as soon as possible

DO: Carry an alcohol swab, antibacterial ointment, insect repellent and band-aids to protect wounds from become infected. Following discussion with your doctor you may also carry prophylactic antibiotic to use at the first sign of infection.

Moisturizers, ointments, soaps and skin cleansers should have good moisturizing qualities, contain no fragrances, be hypo-allergenic and be in either in the neutral (pH7) or slightly acidic range of the pH scale. Dry scaly skin increases the risk of cracks and fissures allowing bacteria to enter. It is very important to make sure the skin is completely dry after bathing. Apply moisturizing lotions once or twice daily. It is best not to moisturize before donning compression garments, as this may speed up deterioration of the fibres of the compression garment.

For more information consult: "The Complete Lymphedema Management Guide" by LaMantia & Dimenna or CLF (canadalymph.ca ~ What is Lymphedema Skin Care?) or Google "Lymphedema Guru"

A NOTE ABOUT INFECTION

Erysipelas is an acute infection typically with a skin rash, usually on any of the legs and toes, face, arms, and fingers. It is an infection of the upper dermis and superficial lymphatics, usually caused by A *Streptococcus* bacteria on scratches or otherwise infected areas. Erysipelas is more superficial than cellulitis, and is typically more raised and demarcated. Signs and symptoms may include high fever, chills, shaking, headaches, fatigue or vomiting; a general feeling of un-wellness. The rash is typically red, warm and can be painful. It can change and grow in surface area in a very short period of time (a few hours to 48 hours).

Cellulitis is a bacterial infection involving the inner layers of the skin. It specifically affects the dermis and subcutaneous fat. Signs and symptoms include an area of redness which increases in size over a few days. The borders of the area of redness are generally not sharp and the skin may be swollen. While the redness often turns white when pressure is applied, this is not always the case. The area of infection is usually painful, and the person may have a fever and feel tired. It is an aggressive infection which can affect lymphatic transport capacity. Group A *Streptococcus* and *Staphylococcus* are the most common of these bacteria, which are part of the normal flora of the skin, but normally cause no actual infection while on the skin's outer surface. If you are suspicious about the possibility of either of these infections, please see your doctor immediately.



Image used with permission from Joachim Zuther

COMPRESSION GARMENTS FOR LYMPHEDEMA

There is a wide array of compression garments to choose from and deciding which one is suitable can be daunting. Having the right fit is the most important aspect - compression garments are effective only if they are worn consistently and the patient is satisfied. Therapeutic benefit is lost if the garment is stored away. Please consult with your Lymphedema therapist, doctor and fitter to find the best one for your unique needs.

The “**grades**” for compression are measured in mmHg (millimeters of mercury just like the pressure of a blood pressure cuff):

- 15-20mm Hg – no prescription required; preventative; for tired achy legs; good for mild swelling experienced on airplane flights
- 20-30 mmHg (class I) – prescription required; for mild Lymphedema in upper or lower extremity
- 30-40 mmHg (class II) – prescription required; for moderate Lymphedema in upper or lower extremity
- 40-50 mmHg (class III) – prescription required; for severe Lymphedema especially of lower extremity
- 50-60 mmHg (class IV) – prescription required; for severe Lymphedema of lower extremity

Flat Knit vs. Circular Knit Material

Most ready made garments are circular knit and flat knit are generally custom made. Circular knit fabrics are less expensive and cosmetically more attractive because they do not have a seam and can be produced using finer and sheerer materials. Flat knit garments are more dense & provide a precise fit whilst also allowing the skin to breathe once expanded during wear.

Custom measure vs. Off-the Shelf / pre-made

Custom fitted garments are made for limbs that have an unusual shape such as the top of the limb is much larger than the bottom, or the limb does not fit into the manufacturer sizing charts. Since the greatest compression needs to be at the distal end (lower arm or leg) of the limb if the garment fits the top of the limb and is loose at the bottom this may cause the fluid to travel down to the hand or foot. If the limb is symmetrically larger all over, the person may be able to fit into a ready made “off the shelf” garment. At no time should the garment have a tourniquet effect which will cause more swelling below the level of the tight area.

THE ROLE OF SHORT-STRETCH BANDAGES IN MANAGING LYMPHEDEMA

Modified from a blog by Joachim Zuther

Compression therapy, like manual lymph drainage (MLD), exercises and skin care, is a main element of Complete Decongestive Therapy (CDT). In most cases of Lymphedema, the elastic fibers in skin tissues are damaged and unable to provide adequate resistance against the muscles to pump Lymph fluid. It is crucial to provide the skin tissues with external compression which compensates for the lack of tissue elasticity and prevents the accumulation of lymph fluid particularly while standing, sitting, walking, or performing therapeutic exercises.

Why short-stretch bandages?

There are two distinct types of compression bandages – short-stretch and long-stretch bandages: - Short-stretch bandages are made from cotton fibers, interwoven to allow for about 60% extension of the original length. Long-stretch bandages (“Ace” or “Tensor” bandages) contain polyurethane, which allows for an extension of more than 140% of the original length.

Short-stretch cotton bandages provide a high working pressure necessary for the management of Lymphedema transmission during exertion, but low resting pressure to prevent a tourniquet effect provided these bandages have been correctly applied.



Long-stretch (“Ace” or “tensor”) bandages have the exact opposite effect and are not suitable for Lymphedema management.

Coban Wrap is an alternative to short stretch bandages providing the same type of

compression. Once applied Coban wrap has the advantage of being water-proof, cohesive preventing slippage, can stay on for several days and is less bulky.

Compression bandages are primarily used during the decongestive (intensive) phase of CDT. In this sequence of the treatment the volume of the affected limb changes on a daily basis, and it is necessary that external compression adapts to these changes in volume. Bandages are much better suited for this task than compression garments, which would frequent change in size. Garments are used in the second phase of CDT, when the limb is decongested and volume changes are minimal.

(used with permission from Joachim Zuther www.lymphedemablog.com)

THE BC PROVINCIAL LYMPHEDEMA PROGRAM: 2021 UPDATE

Drs. Erin Brown, Kathryn Isaac and Elliott Weiss are co-physician leads in the BC Provincial Lymphedema Program. We are involved in the care of patients with both established diagnoses of Lymphedema, and patients where this may be a diagnostic consideration. Our catchment area includes patients from across BC and Western Canada. We have now initiated surgical management of patients with either upper and/or lower extremity Lymphedema. While the COVID-19 pandemic has created additional program challenges, we continue to move forward, expanding our comprehensive, multidisciplinary approach to assist in the management of this challenging problem.

Our approach to patient care remains a comprehensive assessment with our goal being,

- to provide accurate diagnosis and staging,
- maximize conservative management, and
- consider surgical options which may be of benefit.

Both lymphaticovenous anastomosis (LVA) and vascularized lymph node transfers (VLNT) can be offered to appropriate patients, along with other interventions, such as liposuction, and skin and soft tissue resection. The exact nature of treatment is guided by the assessment of each patient, and the best available evidence to support the most effective interventions. The evidence for the “best” treatment(s) for Lymphedema continues to evolve, and we will evolve with them.

Our greatest current challenge is providing timely assessment for the large volume of patient referrals. We recognize and support appropriate early conservative Lymphedema management regardless of the patient's appropriateness for surgery. We encourage this be undertaken prior to referral.

We are in the process of redesigning the initial consultation process to include ICG imaging (as appropriate). We are currently not able to accept referrals for lipedema, in good part due to the lengthy waitlist for Lymphedema. Fortunately, many plastic surgeons in BC perform liposuction for the management of this condition.

We will continue to gather detailed information from all patients to ensure that our assessments and treatments provide the highest level of care and optimal outcomes, while we look forward to our Program improving over time.

Referrals from across the province can be made through your family physician or nurse practitioner (see page 16 Dr. Erin Brown for details). The exact referral process will be changing. Up to date information can be found through the BC Lymphedema Association website & help line.

QUALIFICATION ABBREVIATIONS

AGF	Advanced Garment Fitter (Vodder School)
BAET	Bachelor of Athletic & Exercise Therapy
BSc	Bachelor of Science
BScN	Bachelor of Science in Nursing
CAT(C)	Certified Athletic Therapist
CHE	Certified Health Executive
CLT-LANA	Certified Lymphedema Therapist (Lymphology Association of North America)
CO	Certified Orthotist
MD	Medical Doctor
MLD/CDT	Manual Lymph Drainage /Combined Decongestive Therapist (Vodder School)
MTC	Master Therapeutic Counselor
OT	Occupational Therapist
PGC	Pain Post Graduate Certificate in Pain
PN	Practical Nurse
PT	Physiotherapist
RMT	Registered Massage Therapist
RN	Registered Nurse
RTC	Registered Therapeutic Counselor
WOCC	Wound, Ostomy & Continence Certified
WOCN	Wound, Ostomy, Continence Nurse
CSEP-CEP	Exercise Physiologist
NSWOC	Nurse Specializing in Wound, Ostomy, Continence

QUALIFICATIONS OF MLD / CDT THERAPISTS

All therapists listed in the BCLA Directory have been trained by a school approved by the Lymphology Association of North America (LANA) and have received a minimum of 135 hours of post graduate training specific to the treatment of Lymphedema including the following: Manual Lymph Drainage (MLD) Combined or Complete Decongestive Therapy (CDT), Decongestive Lymphatic Therapy (DLT) or Complex Lymphatic Therapy (CLT). Components include: Manual Lymph Drainage, compression bandaging/garments, exercise, diet/nutrition and skin care.

Trained therapists are primarily from the following health care professionals: registered massage therapists (RMT), physiotherapists, (PT) occupational therapists, (OT) and nurses.

Vancouver Coastal Health

BRENDA COLAIRE, RMT, MLD/CDT

Bayswater Neuromuscular Massage

218-2475 Bayswater St Vancouver BC V6K 4N3

bayswater.ca | Tel: 604-732-4665 | brenda@bayswater.ca

FLOW LYMPHATIC HEALTH CLINIC **NEW**

RMT, MLD/CDT, Vodder Certified Practitioners

Melissa Krull (garment fitter), Leslie Williams (garment fitter),

Jemma Bradely, Paula Clark, Denise Drisdelle,

Kiara Hanemaayer, Elli Kaus, Miyuki Numata

1803-805 West Broadway Vancouver BC V5Z 1K1

www.lymphatichealthclinic.com

Tel: 604-875-8695 | info@lymphatichealthclinic.com



FLOW provides holistic lymphatic care from one convenient location including complementary treatments from Registered Massage Therapists, Certified Compression Garment Fitters, Acupuncturists, as well as tailored advice from Nutritionists, Naturopathic Physicians and Registered Therapeutic Counsellors to suit all lymphatic conditions.

Flow Lymphatic Health Clinic
1803-805 West Broadway Vancouver
(604) 875-8695
info@lymphatichealthclinic.com
www.lymphatichealthclinic.com



Vancouver Coastal Health

GRACE DEDINSKY-RUTHERFORD, BSc, RMT, MLD/CDT

North Shore Lymphedema Clinic
2165 William Ave North Vancouver BC V7J 2P7
www.northshorelymphedemaclinic.wordpress.com
Tel: 604-551-8202 | gracermt@gmail.com

MELISSA IDLE, PT **NEW**

Vancouver General Hospital
Melissa.idle@vch.ca

DIANA LJULJOVIC RMT, MLD/CDT

Northview Health & Wellness Centre
300 1124 Lonsdale Avenue North Vancouver BC V7M 2H1
northviewhealth.com | Tel: 604-986-3771 | ljuljovic@telus.net

AMANDA McILWRAITH, RMT, MLD/CDT

Wellstream Massage Therapy Centre
203 - 938 Gibsons Way Gibsons BC V0N 1V7
wellstreammassagetherapy.com
Tel: 778 462-3226 | wellstreammassagetherapy@gmail.com

MIYUKI NUMATA, RMT, MLD/CDT

Flow Lymphatic Health Clinic
1803-805 West Broadway Vancouver BC V5Z 1K1
Also see listing under Fraser Health
Tel: 604-589-2291 | miyukinrmt@gmail.com

Vancouver Coastal Health

LESLIE WILLIAMS, RMT, MLD/CDT

Garment Fitter ~ Flow Lymphatic Health Clinic

1803-805 West Broadway Vancouver BC V5N 1K1

flowlymphatichealthclinic.com

Tel: 604-875-8695 | leslieannewilliams@hotmail.com

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Burnaby | bcmedequip.com

Tel: 604-888-8811 | Cell: 604-218-0700

patricia@bcmedequip.com

HOWE SOUND PHARMACY

Catherine Almquist & Michele Hamel ~ Garment Fitters

#208 1100 Sunshine Coast Highway Gibsons BC V0N 1V7

Howesoundpharmacy.ca

Tel: 1-800-886-3365 | Local: 604-886-3365

admin@howesoundpharmacy.ca

NIGHTINGALE MEDICAL SUPPLIES

Karen Virag—District Manager

#104 – 950 West Broadway Vancouver V5X 1K7

nightingalemedical.ca | Tel: 604-563-0422 |

info@nightingalemedical.ca

Book an appointment for a complimentary fitting for compression garments, post-surgical mastectomy bras and breast forms.

Vancouver Coastal Health

DOCTORS

DR ERIN BROWN, MD, PhD, FRCSC

Head of New Lymphedema Program

Fellowship & Research Director, UBC Plastic Surgery

Gordon & Leslie Diamond Health Care Centre

Plastic Surgery, 3rd floor, Reception 8

2775 Laurel Street, Vancouver BC V5Z 1M9

Ph. 604.875.5866 ext 2 | Nazarene.Que@vch.ca

See Pg 11 for more information on the Lymphedema Program

DR ELLIOTT WEISS, MD

Providence Health Care

408-1160 Burrard St Vancouver BC V6Z 1Y6

Fax Referral to: 604-974-8882

eweiss@providencehealth.bc.ca

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Patricia Montagano, RN, BSN (hons)

Certified Lymphedema Consultant, Advanced Expert Garment Fitter

2230 Springer Ave, Burnaby, BC

Tel: 604-888-8811 ~ Cell: 604-218-0700

Email: patricia@bcmedequip.com



Vancouver Island Health

CAROL ARMSTRONG, RMT, MLD/CDT, AGF

307 Beechwood Ave Victoria BC V8S 3W8

Tel: 250-598-8004 | carmstrongrmt@telus.net

BETH ATKINSON, RMT, MLD/CDT

Foundations Complementary Health Centre

172 Weld St Parksville BC V9P 2H4

foundationshealthcentre.com

Tel: 250-586-5442 | info@foundationshealthcentre.com

MELANIE BRANCATO, RMT, MLD/CDT

4560 Waldy Rd Cowichan Bay BC V0R 1N2

Tel: 250-748-3351 | melaniebrancato@hotmail.com

BRYAN HILL, RMT, MLD/CDT

Courtenay

bryanhill.ca | Tel: 250-702-7048 | rmt@bryanhill.ca

JENNA LAFLECHE, RMT, MLD/CDT

****NEW BCLA DIRECTOR****

Right Fit Clinic & Medical Supply

211-2840 Peatt Road Victoria BC V9B 3V4

rightfitclinic.com

Tel: 778-654-0241 | jennalaflechermt@gmail.com



Vancouver Island Health

SHANNON LAWRENCE PT, MLD/CDT, LANA Certified

Comox Physiotherapy Clinic

264 Anderton Road Comox BC V9M 1Y2

comoxphysio.com

Tel: 250-339-6221 | shannon@comoxphysio.com

CHRISTINE MORRISON, PT

Physio Plus

809 Fairfield Road Victoria BC V8V 0A7

physioplusvictoria.com

Tel: 250-220-7205 | admin@physioplusvictoria.com

LAURIE OTTENBREIT, PT, MLD/CDT, LANA Certified

Form Health Clinic

3034 Ross Rd Nanaimo BC V9T 3Z1

formclinicnanaimo.com | Tel: 250-756-9722

formclinic@shawbiz.ca

PATTY SMYTH, RMT, MLD/CDT

#550-2950 Douglas St. Victoria BC V8T 4N4

Tel: 250-882-8292 | pattysmythrmt@gmail.com



Listings Continue Next Page

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NIGHTINGALE MEDICAL SUPPLIES

Robin Hryciuk – Supervisor

#815 Bay Street, Victoria, BC V8T 1R3

nightingalemedical.ca

Tel: 250-475-0007 | info@nightingalemedical.ca

Book an appointment for a complimentary fitting for compression garments, post-surgical mastectomy bras and breast forms.



Advocacy team at the BC Legislature June 18th 2021
following delivery of the BCLA application to BC Pharmacare

ASSOCIATIONS, NETWORKS & FRAMEWORKS

Canada Lymphedema Framework	canadalymph.ca
ILF	lympho.org
Alberta	albertalymphedema.com
Atlantic Clinical Lymph Network	atlanticlymph.ca/en
British Columbia	bclymph.org
Manitoba	lymphmanitoba.ca
Nfld & Labrador	lymphnl.com
Ontario	lymphontario.ca
Quebec	info-lympho.ca
Saskatchewan	sasklymph.ca
New Brunswick	lymphedemanb@gmail.com
Nova Scotia	Lymphedemanovascotia@yahoo.com

BCLA T-SHIRTS ~ please visit bclymph.org to order



Adult Loose Fit
(available in
blue and green)



Ladies Fit
(available in
blue and green)



Back Layout

LINDA (KOBY) BLANCHFIELD
RMT, MLD / CDT, CLT-LANA

Cedar Hills Lymphatic & Massage Therapy Clinic
9474-126 Street Surrey BC V3V 5C5

lindakobyblanchfield.ca

Tel: 604-589-2291 | kobymld@gmail.com

SAMANTHA DEAKIN, MPT, CLT-LANA

Tri-Cities (Coquitlam, Port Moody, Port Coquitlam), BC

lymph-physio.ca

info@lymph-physio.ca

CHRISTINE FOTH **NEW**

3760 Sandy Hill Cres Abbotsford BC

Tel: 778-552-4794 | thesockladyfv@gmail.com

KYLIE HALL, RMT, MLD/CDT

Pebble Hill Massage Therapy

5426 5B Ave Delta (Tsawwassen) BC V4M 1K5

pebblehillclinic.ca | Tel: 778-434-2083

kylie@pebblehillclinic.ca

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ROXANNE KARADIMAS, RMT, MLD/CDT (LANA) **NEW**

Garment Fitter (2 locations)

1) White Rock ~ 680 - 15355 24 Ave Surrey BC V4A 2H9

semiahmoophysiotherapy.com | Tel: 604-531-8080

2) North Surrey/Delta

9474 126 St, Surrey, BC V3V 5C5

voddermld.ca | (604) 589-2291 | roxanne.rmt@hotmail.com

MAY LY, PT, MLD/CDT

Restore Physiotherapy Clinic

402-555 6th Street New Westminster BC V3L 5H1

restorephysiotherapy.ca | Tel: 604-553-4799

may@restorephysiotherapy.ca

MIYUKI NUMATA, RMT, MLD/CDT

Cedar Hills Lymphatic & Massage Therapy Clinic

9474-126 Street Surrey BC V3V 5C5

Also see listing under Vancouver Coastal Health

Tel: 604-589-2291 | miyukinrmt@gmail.com

MIEKO RENNIE, RMT, MLD/CDT

Cornerstones Chiropractic & Complementary Therapies

305-2502 St Johns St Port Moody BC V3H 2B4

cornerstoneschiropractic.ca | Tel: 604-931-7797

mieko@rennie.com

KELLY SKELTON, PT, MLD / CLT-LANA

Renew Physical Therapy

Abbotsford BC V3G 0A2

renewphysicaltherapy.ca

Tel: 778-808-4686 | kskelton@renewphysicaltherapy.ca

DOCTOR

Dr. Lawrence Kei—Physiatrist, Physical Med. & Lymphedema

304-250 Keary Street, New Westminster BC V3L 5E7

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info@rutlandphysio.ca

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janet@healthyessentialsclinic.ca

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Kenzie Wade RMT

Unit 2 - 1122 10th Ave Golden BC V0A 1H0

kenziewadermt.ca

Tel: 250-344-1881 | kenziewadermt@gmail.com

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Andrea Edwards MScPT, Loni Horsley RMT

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Healing Rivers Physiotherapy

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sonja.redden@healingrivers.ca

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Medi Canada products are available from BCLA Corporate members:

Macdonald's Prescriptions Vancouver, Macdonald's Prescriptions #3

Kitsilano, Kootenay Columbia Home Medical Equipment, (see pg 29 for contact info) & Nightingale Medical (Vancouver, Langley, White Rock, Victoria, Kamloops and Vernon (see regional listings and below for contact info) Pharmasave in Mission & Health Source Specialty Medical Supplies in Penticton.

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- **Academy of Lymphatic Studies** (www.acols.com)
Courses in Manual Lymph Drainage and Complete Decongestive Therapy
- **Klose Training and Consulting** (www.klosetraining.com)
Online and classroom Lymphedema education
- **Norton School of Lymphatic Therapy**
(www.nortonschool.com)
Lymphedema Therapy certification courses and workshops
- **Vodder School International** (www.vodderschool.com)
Professional training in manual lymph drainage and combined decongestive therapy
- **Foeldi College** (www.foeldicollege.com)
Teaching Institute for Manual Lymph Drainage and complete Physical Therapy
- **Casley-Smith International** (www.casleysmithinternational.org)
- **ILWTI International Lymphedema and Wound Training Institute** (www.ilwti.com)
- **Monarch Continuing Education** (www.monarchce.com)

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The Dr. Vodder School International offers full Lymphedema training to health care professionals in CDT/MLD. Training is offered in many locations worldwide with the head office in Vancouver, BC.

For those living with Lymphedema, go to our website and click on FIND A THERAPIST to find a Vodder-trained therapist in your home area.

SUPPORT GROUPS

Groups are connecting through e-mail, outdoor distanced gatherings or via ZOOM online meetings. For those without a local group, check out the BC wide Zoom chat, Facebook, Instagram or our monthly webinars. (www.bclymph.org)

Support groups are open to all Lymphedema patients whether or not you are a BCLA member. You can join a support group anytime by contacting a leader in the list below.

We would love to have someone initiate a group in Vancouver or Kamloops.

BC LYMPHEDEMA SUPPORT GROUP LEADERS		
Abbotsford	Sharalyn Cronan	778-908-6902
Kamloops	<i>Starting Fall 2021</i>	<i>TBA</i>
Kelowna	Sandi McConnach	778-839-3577
Kootenays (East & West)	Willa Condry Seymour	250-364-1120
Prince George	Sophia Neppel	613-809-4303
Sea to Sky	Christine Chandler	1-866-991-2252
Surrey (incl. Delta, Langley, White Rock)	Sandi McConnach	778-839-3577
Tri-Cities	Katherine Butler	604-941-5809
Vancouver	<i>Contact Needed</i>	1-866-991-2252
Vancouver Island (Central & North)	Lynn Holloway	250-954-3883
Victoria (South)	Gail Reichert	778-352-2020
BC Wide Zoom	Willa Condry Seymour	250-364-1120

WE NEED YOUR SUPPORT!

PLEASE DONATE

Did you know that there are an estimated **one million Canadians living with Chronic Edema or Lymphedema?**

The province of BC currently has no medical coverage for the management of this disease and prior to Jan 2020 no treatment facility.

BCLA Has Two Significant Goals:

- 1.To provide education workshops and mini workshops around the province, teaching "Risk Reduction " and other management strategies. Donations are essential to support the costs of providing education days.
- 2.To raise sufficient funds to provide the diagnostic & surgical equipment for a dedicated Lymphedema surgical program, which will offer specialized optional treatments for Lymphedema patients.

We hope that you will consider making a donation to either one of these causes.

Donations can be made to either:

1.The **BC Lymphedema Association** via:


- E-transfer to info@bclymph.org
- Mail a cheque to:
723 Donegal Place, North Vancouver, BC V7N 2X6
- Donate on-line through [Canada Helps.org](http://CanadaHelps.org)


2.Or to the **VGH Foundation Lymphedema Program** fund by pasting this link in your web browser
www.vghfoundation.ca/give/lymphedema

**Please Give generously
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