

Exploring options for the conservative treatment of lymphoedema

Here, the editor answers a reader's question and invites you to share your thoughts and experiences

Another option for the conservative treatment of lymphoedema?

I'm a retired electrical engineer and have dealt with the impact of electrical energy on biological and non-biological systems all my life. I always like to have an evidence base for things that occur. I know what follows may seem a little unusual but using this and other gained knowledge based on acupuncture, as well as scientific principles, has enabled me to design a metal bracelet, which I think may be able to make a difference to those with lymphoedema. What triggered the design of the bracelet? In his original book on alternative medicines regarding acupuncture, Dr Stanway (1980) states: "It is fair to say that nobody knows exactly how it all works — not even in the East, but work it certainly does." The general perception in the West is that the needle stuck in the body at a certain acupuncture point (or nodules) triggers the brain to produce endorphins, which will neutralise the pain. To my mind this is not all that really happens. I believe it is the thin needle in position that results in a discharge of electrical charge across the nearby muscle, thus relaxing it and perhaps the fascia within and around it helping to relieve the pain associated with its increased tension.

Using the bracelet, I was able to relieve stiff neck muscles in a matter of minutes, quicker than acupuncture, which can take anything between 45–60 minutes. While not recommended, as the evidence needs to be gathered, I applied a metal band (more about that later) to a person experiencing angina, resulting most likely from stress, who was taken to hospital and immediately discharged — whether it was the bracelet or natural resolution, we will never know, but it set my mind working! In another episode, a similar bracelet was tried by an older lady with lymphoedema in the arm. Within a matter of 2 weeks, the swelling of the arm subsided and looked normal, allowing the lady to carry out work in and around the house without affecting her arm.

This prompted me to find an institution to assist with a clinical trial, which no one in South Africa, including the Medical Research Council, took up. I continued work on the design of the bracelet to round the edges, etc, so it would not cause discomfort for a patient with a soft and larger limb. I am in the process of attempting to start up a small pilot trial on the benefits of the bracelet.

But, let us go back a few steps and look at how I think it might have worked.

About the bracelet

It is known that an electrical charge in a body can be discharged via a sharp point in contact with the body. This principle is also applicable in the aviation industry, whereby the electrical charge build up in the airplane is fairly substantial and discharged via sharp points situated at the tip on the back of the wings. Normally, the charge is positive, and the electrons, called cations, are discharged via these sharp points. The bracelet can only discharge positive ions and not negative ions. This discharge principle is not widely known and completely unknown in the acupuncture world.

About the body

As I stated earlier, an abnormal electrical charge build up may be responsible for stiff muscles, resulting in pain. Looking broadly, the pH of our blood on average across all groups is a slightly alkaline 7.4. I soon discovered that the pH of the A and O blood groups could be a little higher i.e. 7.5. There are suggestions that the pH of the AB blood group is 7 and for blood group B, it's slightly acidic at an average of 6.8. It seems that the pH of blood in an individual is pretty fixed and cannot generally be easily altered.

On the other hand, the pH of the urine and body fluids, which includes lymph, is variable and controllable — for instance, by drinking an alkaline solution and/or together with a strict diet of fruit and certain foods. Most of you will be aware of this.

As I understand, the main aim is to get the pH of the body fluids the same as the pH of the

blood. With the A and O blood groups, when the changed red blood cells go into suspension, the inherent slightly negative charge of the red blood cells keeps the red blood cells apart (like charges repel and unlike charges attract).

The red blood cells cannot stick to the side walls of the arteries, as the adjusted negative charge of the extra cellular fluids molecules is the same as the pH charge of the red blood cell's charge, thus keeping the red blood cells in suspension. In this case, you will likely have maximum blood flow transporting essential oxygen to the rest of the organs in the body, which optimises the healing effect. The same with the cells in the extracellular spaces and lymph, which can now have a free flow and naturally/normally drain — this lack of adherence may make the lymph drainage massage so much easier!

Patients with B and AB blood groups could be treated in the same way as the A and O blood groups. It might be found that using the bracelet could be sufficient to deal with swelling of the limbs, although a slight adjustment with a weaker alkaline diet to assist the bracelet might be necessary for these patients. The bracelet can only discharge positive ions to accommodate the pH of the B and AB blood groups for swelling reduction.

The bracelet, on its own, seems likely to be effective for stress-related diseases — when the muscles are tight and when fluids accumulate, and it looks like its effectiveness can be enhanced by the additional tweaking of the body fluid, and maybe blood pH. Once we have completed a pilot clinical trial on lymphoedema, a condition where fluid chronically accumulates in the tissues and where the pH may vary and, if successful, this treatment may be safely prescribed to lymphoedema patients as a sole or additional treatment modality.

I welcome your ideas comments and opinions on this idea!

Pieter Labuschagne, Retired Electrical Engineer, South Africa

Stanway A (1980) *Alternative Medicine: A Guide to Natural Therapies*. Macdonald and Jane's: London

How wonderful it is to have input and some questions raised about our area of lymphoedema and its treatment from Pieter Labuschagne, who is a retired electrical engineer. I was quite excited when I read it; certainly it's not something I or many of you would have thought about, but I can see there is some great potential in taking this idea further (as the writer says) in the form of a small trial.

Meanwhile it would be great to hear from you, the reader, regarding your thoughts and ideas about this idea and maybe further enhance and refine it. The writer has selflessly and openly provided his ideas and how they may make a difference for those with lymphoedemas. So let us know what you think, let's put it together and see what we can do!

More details about your thoughts on our website and in our next issue!

Neil Piller, Clinical Editor of The Journal of Lymphoedema

Send us your comments

Our readers have highlighted some important topics over the years and we very much welcome your input. What are your views and experiences? Let us know, as your contribution could make a difference to many people. Email Managing Editor Adam Bushby at: abushby@omniamed.com and Clinical Editor Neil Piller at: neil.piller@flinders.edu.au