Self-Reported Training and Confidence Levels Among Practitioners Managing Genital Lymphedema

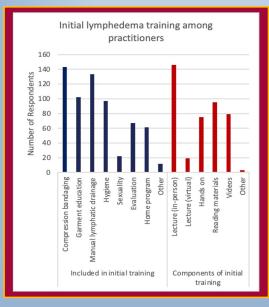
Alicia Schmidt, Shelley DiCecco, Rhian Noble-Jones Philadelphia College of Osteopathic Medicine Georgia Lymphoedema Network Wales LymphEd, LLC

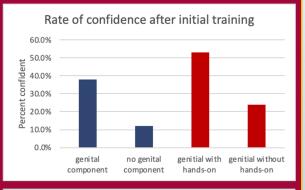
INTRODUCTION

Genital lymphedema (GL) can present with significant psychological, social, and physical impairments. Barriers to treatment include under-reporting, socio-cultural issues, patient/healthcare practitioner (HCP) perception/comfort, and lack of knowledge among HCPs.1-4 General lymphedema training utilizes hands-on approaches to learning for extremities; yet GL training is often minimal with little to no hands-on component. This self-reporting retrospective study investigates GL training, instruction methods, and confidence levels among HCPs.

METHODS

An online 20 question survey was disseminated via direct email to HCPs that had previously downloaded tools for males/females with GL, announcements on social media pages related to lymphedema, links provided at conferences/courses, and in a published article. Respondents include 245 HCPs from 19 countries.







RESULTS

Respondents presented from different countries, professions, and practice settings. Initial lymphedema training included a genital component for 66% of HCPs but included handson learning for less than 50%. Only 29% reported confidence in treating GL post training. Additional GL training was sought by 37% of HCPs, 63% of which included a hands-on component. HCPs reported higher confidence post hands-on learning for both initial and additional training. The most common type of hands-on training included models attached to another HCP and 96% of HCPs who used this type reported it increased their confidence over other types/no models. 86% of all HCPs felt training with genital models attached to another participant would increase their confidence, and 75% said they felt they needed additional training to treat GL.

SIGNIFICANCE

This study showed courses that not only included specific GL focused training, but included a hands-on component, lead to higher levels of confidence. Additionally, genital models on other HCPs also increased this perception in all HCPs who utilized this technique. This highlights HCPs' need for comprehensive training in GL and lack of confidence following current training methods.

REFERENCES

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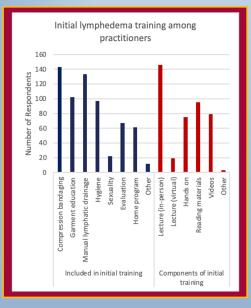
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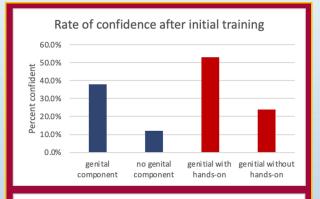
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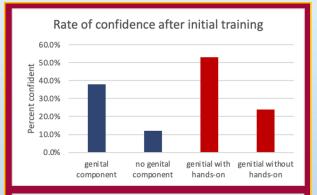
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