

Manual Lymph Drainage

THE DR. VODDER METHOD

Imagine a husband-and-wife team seeing clients at their physical-therapy institute in Cannes, France, in the 1930s. Emil Vodder closes his eyes as he palpates the hard and swollen lymph nodes of a client seeking aid for a nose-and-throat infection. Closing his eyes, Vodder sees chains of lymph nodes forming a natural drainage path for the skin, organs and glands. As he thinks about the drainage, he wonders if this swollen, congested system could be the root cause of many ailments

by Catherine DiCecca and Phillip Pollot

The medical system in the 1930s did not fully understand the role of the lymph system in the body. Considering it to be uncharted waters, it was an area to be left alone, with no tampering or treatments, as the outcome was at best uncertain. Yet, Emil Vodder, a massage practitioner, and his wife, Estrid Vodder, a massage practitioner and naturopath, studied the lymph system from 1932 to 1936 and developed a system of hand movements to stimulate the lymph vessels.

A lymph-system overview

The lymph system houses our immune system, the cleansing system of the body. It can be thought of as a network over the entire body, a system that takes part of the interstitial fluid back to the circulatory system entering at the left and right

subclavian/jugular vein complex.

Interstitial fluid is called lymph after entering the lymph capillaries, and it moves through the lymph vessels carrying proteins, fragmented cells, fats and inorganic materials using water as its vehicle for this transport. All this material is moved by the peristaltic action of the lymph vessels, the pressure of skeletal muscles contracting, pulsations of the arterial blood vessels and diaphragmatic (abdominal) breathing.

Small valves in the vessels prevent back flow, making this a process of one-way drainage. Bodily activity is constantly creating material to be moved along these drainage pathways. On its journey, it comes to filtering stations (lymph nodes) that contain “warriors” (lymphocytes and macrophages) that constantly search the material for intruders, such as bacteria or tumor cells.

When the lymph system becomes congested, wastes and fluids accumulate in the tissues, which hinder normal physiological processes. Sometimes the body needs help in removing this toxic buildup of cellular waste. The added boost comes with manual lymph drainage.

The Vodder technique

The Dr. Vodder Method of Manual Lymph Drainage¹ is often confused with massage, perhaps because it appears at first view to be soft-tissue manipulation.

Massage is the manipulation of the soft tissues using stroking, kneading, tapping, petrissage, friction, rolling, nerve compression and percussion. In contrast, manual lymph drainage is a skin technique. The pressure is very light, the weight of 20 to 40 millimeters of mercury (close to the weight of a quarter), allowing careful stretching and twisting hand movements to move fluids collected under the skin and to stimulate the peristaltic action of the lymph vessels.

Vodder's techniques—known as stationary circles, thumb circles, fork technique, pump, fan strokes, rotary and scoop—require a focused concentration. The precise hand movements have been proven to accelerate lymph flow, first clearing proximal pathways and then distal pathways. The pressure does not compress the lymph vessels, nor do the blood vessels increase their filtrate rate to the tissue. Higher pressure can spasm the lymph vessels and cause a greater filtration rate from the blood vessels, in turn causing increased congestion. This would be counterproductive to stimulating lymph flow and clearing fluid congestion.

The Vodder Method offers sequences that focus on specific areas of the body, such as face, arms, neck/shoulders, chest, abdomen, legs, buttocks, back and nape of the neck. These sequences are based on stimulating the lymph system with attention to the drainage direction of the lymph reservoirs.

In combination with other therapies, such as exercise, compression and diet, manual lymph drainage is most commonly used to treat a condition called lymphedema, or accumulated lymphatic fluid in the interstitial

tissue. The number-one cause of lymphedema in the United States is mastectomy, which severs lymph-drainage pathways.

Manual lymph drainage is not restricted to treating lymphedema; it can be used to treat sluggish lymph



By using slight hand pressure, the massage-therapist moves lymph fluid collected under the client's skin.



systems, burns, sinusitis, skin ailments, scars, pre- and post-cosmetic surgery, whiplash, leg ulcers, neuralgia-RSD and fibromyalgia. Stimulating the lymph vessels to move lymph allows toxins, debris and cellular by-products to move on, decongesting the tissue and giving the cells an environment in which to flourish.

Manual lymph drainage puts no weight or strain on a therapist's hands or wrists.

Client challenges

There is no weight or strain on the therapist's hands or wrists, since manual lymph drainage generally addresses the superficial layers. This being said, there is a psychological component to consider. People who seek this treatment will often come as a last resort, which can put a lot of pressure on the therapist to "fix" the problem.

In reality, though, manual lymph drainage helps the client help herself in the treatment and maintenance of a possible lifelong condition. Lymphedema patients are usually very grateful to find someone who actually knows what this condition is, what the complications are and what they can do for themselves to minimize the impact of the condition in their day-to-day lives.

Applications of the technique

The use of manual lymph drainage in pre- and post-plastic and orthopedic surgery is on the rise. The increase in recovery rate and decreased scar formation using manual lymph drainage techniques has opened the eyes of surgeons in these disciplines, and there is a growing network just waiting to be explored and utilized. (See sidebar, "Vodder Method Resources," page 82.)

Wound care is another opportunity for manual lymph drainage therapists. Last year, a case study was presented at a review in Dallas, Texas, in which a manual lymph drainage therapist received a young patient slated to have his leg amputated because of chronic festering wounds secondary to another condition. His doctor sent him for manual lymph drainage a few weeks before his surgery. After a few weeks of treatments, the wounds started to heal, and the surgery was ultimately canceled.

Whiplash is another perfect example of utilizing manual lymph drainage. As massage therapists, we are taught to stay away from acute injury with inflammation, but in this case using manual lymph drainage on

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the day of injury actually decreases inflammation, therefore decreasing the pain of whiplash and increasing the rate of recovery.

Manual lymph drainage can also be applied to acute sports-related sprains and strains.

Training in the Vodder Method

Training in the Dr. Vodder Method of Manual Lymph Drainage is regularly held in cities throughout North America. Training consists of 160 post-graduate hours broken down into four 40-hour weeks.

The first week is basic training, an introduction to the various hand techniques and sequences to stimulate lymph circulation.

The second week, called Therapy I, expands on the previous week to include orthopedic techniques for

VODDER METHOD RESOURCES

➔ The North American Vodder Association of Lymphatic Therapy (NAVALT) provides information about lymphedema treatment. The NAVALT Web site is a meeting place for Vodder Method therapists to ask questions, share experiences and gather information. www.navalt.org.

➔ The Dr. Vodder School North America provides education in the Dr. Vodder Method of Manual Lymph Drainage and Combined Decongestive Therapy and ensures the continuing competence of practitioners trained by the Dr. Vodder School. www.vodderschool.com

joints. This allows the therapist to address various conditions other than lymphedema, including tendonitis, joint replacements (pre- and post-surgery) and temporomandibular joint dysfunction (TMJ), for example. This class focuses on perfecting the hand techniques.

The next two levels, Therapy II and Therapy III, are held in conjunction with each other. Here the therapist learns to address various lymphedema conditions (primary, secondary and functional), lipedema and edemas due to circulatory problems, venous insufficiency, arterial problems as well as ulcers and wounds. Students are also taught to properly use

compression bandages on the limbs and make suggestions for compression garments.

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every year throughout North America, and recertification is asked every second year in order to perfect techniques, learn new skills and update compression-bandaging knowledge. The completion of the review allows therapists to remain listed as an active therapist on the school's Web site, www.vodderschool.com.

The need for therapists

At this time it is mostly lymphedema patients who search out treatment options and relay that information back to their physicians. Our clients are educating the medical community about manual lymph drainage as a viable treatment for lymphedema. With this increase in awareness and education comes the need for more therapists who specialize in manual lymph drainage.

The skills you will acquire in manual lymph drainage training will complement your practice and offer more treatment options to your patients.

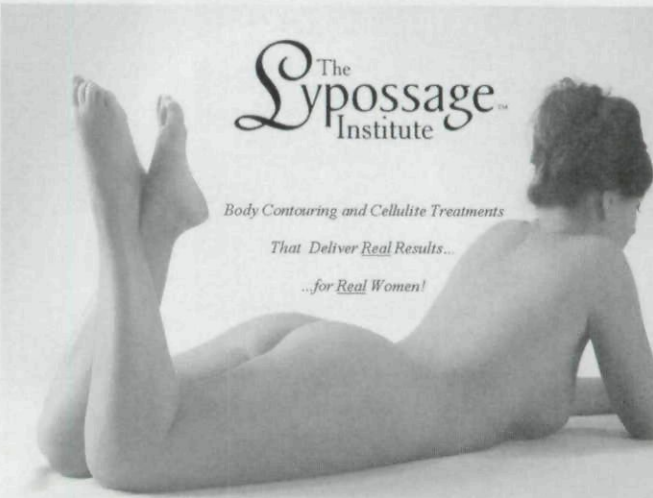
FOOTNOTE

1. Emil Vodder was not a physician. He was given a Ph.D. in philosophy by the University of Brussels in Belgium.

Catherine DiCecca is a massage therapist practicing in Vancouver and Nanaimo, British Columbia, Canada. She has more than 11 years of experience using Dr. Vodder Manual Lymph Drainage Techniques and has been teaching the basic level of training for the Dr. Vodder School since 2002.

Phillip Pollot is a massage therapist living in Rochester, New York. He has been in private practice for the last nine years, with more than half of his treatment sessions devoted to lymphatic conditions. He has served on the NAVALT Board of Trustees for the last five years.

Robert Harris H.D.N., R.M.T, C.L.T.-LANA, director of the Dr. Vodder School International, contributed to this article.



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