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# Self-MLD vs. Therapist-Performed MLD – Outcomes, Frequency, and Training Tips

## Introduction

Manual Lymph Drainage (MLD) is one of the cornerstones of Complete Decongestive Therapy (CDT). This gentle, rhythmic massage technique stimulates lymphatic flow, reduces swelling, and supports tissue health. While Certified Lymphedema Therapists (CLTs) are trained to deliver MLD with precision, many patients are also encouraged to learn **self-MLD** to manage their condition daily. Understanding the differences between therapist-performed MLD and

self-MLD—along with the outcomes, frequency, and training considerations—empowers patients to take an active role in their long-term care.

## Outcomes: Therapist-Performed vs. Self-MLD

### Therapist-Performed MLD

CLTs apply advanced techniques, including rerouting fluid across lymphatic watersheds, clearing central areas before working on extremities, and adapting to surgical scars or radiation damage.

Outcomes tend to include:

- Greater initial volume reduction in the affected limb.
- Improved softening of fibrotic tissue.
- More effective management of complex or advanced lymphedema.

### Self-MLD

Self-MLD may not achieve the same dramatic limb volume reductions as professional sessions, but it improves **maintenance** between visits and helps prevent flare-ups. Patients who consistently practice self-MLD often report:

- Better day-to-day control of swelling.
- Reduced sensations of heaviness and discomfort.
- Greater independence and confidence in managing their condition.

## Frequency Considerations

### Therapist-Performed MLD

- Often provided intensively during the **reduction phase** of CDT (e.g., daily or several times per week for 2–4 weeks).
- Transitioned to less frequent sessions during the **maintenance phase** (weekly, monthly, or as needed, depending on the patient's condition).

### Self-MLD

- Recommended **daily practice**, often incorporated into morning or evening routines.
- Especially beneficial before and after compression garment use, exercise, or long periods of immobility.
- Frequency may increase during times of stress, travel, or when swelling risk is higher.

## Training Tips for Self-MLD

1. **Learn from a Certified Therapist.** Proper instruction is essential. Patients should receive hands-on training to ensure correct pressure, hand placement, and sequence.
2. **Start with the Core.** Always begin with clearing central lymphatic regions (neck, abdomen, trunk) before moving to the affected limb. This creates a “pathway” for fluid to drain.
3. **Gentle Pressure Matters.** The lymphatic system lies just beneath the skin. Pressure should be light, slow, and rhythmic—intense massage can collapse lymphatic vessels rather than stimulate them.
4. **Consistency Over Intensity.** A few minutes performed consistently every day is more effective than occasional long sessions.
5. **Use Mirrors or Guided Videos.** For difficult-to-see areas, mirrors or therapist-approved video tutorials can reinforce proper technique.
6. **Pair with Compression.** Self-MLD works best when combined with compression garments, exercise, and meticulous skin care.

## Conclusion

Both self-MLD and therapist-performed MLD play crucial roles in lymphedema management. Therapist sessions provide **specialized intervention and measurable reductions**, while self-MLD ensures **long-term maintenance and independence**. With proper training, patients can confidently integrate self-MLD into daily life, improving outcomes and quality of life.



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