Pilates after a Latissimus Dorsi Flap

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ABSTRACT

A breast cancer diagnosis is life-changing. One in eight women will develop invasive breast cancer during their lifetime. But advances in breast cancer treatment mean many women can expect to beat the disease and maintain their physical appearance.

Post surgery, chemotherapy, and radiation not only involves physical stamina, but emotional as well. Pilates can be used to help bring a sense of homesotaties back to the breast cancer patients.

Traci Stolte, myself, is the case study. Having a right mastectomy, 16 rounds of chemotherapy, then a Latissimus Dorsi Flap repair; I used the Basi Block System to improve my range of motion and overall well being.
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Anatomical Description

Your latissimus dorsi muscle is located in your back, just below your shoulder and behind your armpit. It’s the muscle that helps you do twisting movements. In a latissimus dorsi flap procedure, an oval flap of skin, fat, muscle, and blood vessels from your upper back is used to reconstruct the breast. This flap is moved under the skin around to your chest to rebuild your breast. The blood vessels of the flap are left attached to their original blood supply in your back. Because the flap contains a significant amount of muscle, a latissimus flap is considered a muscle-transfer type flap.
While the latissimus dorsi flap may offer good results with few complications, it does have its drawbacks.

1. You may have partial loss of strength or function that makes it hard to lift things and twist. This can affect your ability to perform certain swimming, golf, or tennis strokes, or turn and manipulate objects. Having this surgery unilaterally can be a challenge.

2. Most women need an implant along with the latissimus dorsi flap, and some women say the implant feels firmer than the tissue in front of it.

3. The fat around the latissimus dorsi muscle is stiffer than the fat that comes from the belly area, so some women say that their latissimus dorsi reconstructed breast feels “tighter” than their other breast.
Case Study

I got diagnosed with stage 3A Breast Cancer three months after I started my Basi Teacher Training. I had a mastectomy July 21, 2014. I discovered after my surgery that it had traveled to my lymph nodes. After a PET Scan in August, I was told that it had not metastasised to anywhere else in my body. I met with an Oncologist after, and was strongly urged to have chemotherapy since it was found in my lymph nodes. I decided to undergo the 16 rounds of treatment. I had a MediPort placed above my left breast under my skin that had a line going directly into my aorta where the chemotherapy would flow into.

Meanwhile I noticed an irritation in my right reconstructed cleavage breast area. I was almost 8 weeks post op, my swelling had gone down, my implant had decided to crease and cause irritation to my skin. After having a consult with my plastic surgeon we decided to remove the implant and perform the LAT transfer in late October 2014.

I’ve been told I have a pain tolerance like no other, but this surgery was over the top. Classified as one of the top 4 most painful surgeries, I really wasn’t fully aware of what I had done. I came home with two drains that were placed in my lower back and two drains that ran vertically up my breast. I am not a pain pill taker, it was difficult to find a comfortable sleeping/sitting posting, but I managed and always kept a good spirit! Afterall, it was October, and it was Breast Cancer Awareness Month and I
had a community of non-stop support!!

As time went on, and I began to heal, I started to develop a pilates routine at the studio that I work at to increase my range of motion in my right arm, prevent stiffness in my lower back, and most of all PRESERVE MY SANITY!!!!!!!!!
Post Recovery

I wanted to focus on these common side effects from having the LAT Transfer

1. Tightness in back
2. Reduced range of movement with waist rotation
3. Tightness in underarm
4. Limited shoulder movement
5. Tightness in chest
6. Inability to pull down
7. Poor posture

My job was now to come up with a BASI Block System Routine to help me overcome these limitations.
BASI Block System Routine for LAT Flap Transfer

I discovered some things along the way as I developed this routine.

--less repetitions with delivered slowly focusing on quantity
--avoid overloading one area of the body, consider sequence of exercises
--once I was strong enough, I focused on shoulder mobility using external
--rotation and abduction as this appeared to be the most restricted movement

WARM UP:
Standing Roll Down
Avalon- Roll Up, Mini Roll Up, Mini Roll Up Oblique

FOOTWORK:
Cadillac-Heels, toes, V Toes, Open V Heels, Open V Toes, Calf Raises, Prances, Single leg toe, and single leg heel

ABDOMINAL WORK:
Spine Corrector-Chest lift, The Reach, and Overhead
Mat-100

HIP WORK:
Avalon--Frog, Circles Down, Circles Up, Openings, Helicopter
Eventually I was able to hold the levers with my hands which was a great stretch
SPINAL ARTICULATION:

Avalon--Bottom Lift (the traction from the hand springs helped with my shoulder tracking 
Semi Circle

STRETCHES:

Barrel--Shoulder Stretch 1, Shoulder Stretch 2, Adductors

FULL BODY INTEGRATION:

Mat--Front Support, leg pull front
Reformer--Up Stretch 1, Up Stretch 2, Elephant

ARM WORK:

Cadillac--Shrugs, Triceps Press Sit, Side Kneeling Arm
Avalon--Arms Sitting Side Series..Adduction, Internal Rotation,
Reformer--Rowing Back 1 and 2, Rowing Front 1 and 2

LEG WORK:

Reformer--Single Leg Skating

LATERAL FLEXION/ROTATION

Reformer--Mermaid

BACK EXTENSION:

Wunda Chair--Basic Swan, Back Extension Single Arm

Finish with a Roll Down
Conclusion

About three weeks after my mastectomy, I was ready to slowly
start a pilates routine. I truly wanted to avoid getting lymphedema in my right arm, so
I diligently worked my right arm to increase the range of motion and reduce swelling and
“banding” of my tendons. I did have a set back having to have my second surgery:
LAT FLAP TRANSFER, but I kept moving forward and gaining ground weekly because
I was always focused on bettering my body.

I realize I will never be the physical person that I was before diagnosis, but I
do know...I never lose. Either I win or learn.
BIBLIOGRAPHY

Resources Kaelin, C. et al 2007  Breast Cancer Survivor’s Fitness Plan

Susan G. Komen for the Cure  www.komen.org

IDEA Fitness Journal, Volume 8, Issue 7

IDEA Pilates Today, Volume 1, Issue 3

Pilates Union The Art and Science of Movement.com  Breast Cancer Rehabilitation

Breast Cancer.org