

ABOUT MONICA RAFTOPOULOS



I have been working in the Physical Therapy field for over 12 years, and I have a Master of Science degree in Physical Therapy from the College of Staten Island.

I am an active member of the APTA, serving as Vice Chairperson of the Greater NY District. I am also a member of the National Lymphedema Association and Oncology and Women's Health Sections of the APTA.

I have published articles in Medical journals and have my certification in Complete Decongestive Therapy (Lymphedema) and Manual Lymph Drainage. I give lectures on Lymphedema to women's groups and Cancer survivor groups.

I am fluent in Spanish and Portuguese and have a working knowledge of Greek.

PHYSICAL THERAPY WORKS, P.C.
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Contact Harriette for insurance-related matters.

DIRECTIONS TO PHYSICAL THERAPY WORKS

From the Long Island Expressway (495): Take Exit 35 - Shelter Rock Road. Travel north on Shelter Rock Road approximately 2 miles. Turn left on Northern Blvd; turn right on Plandome Road. We are 5 traffic lights down on the left hand side.

PARKING

Parking is available in front of the building on both sides of Plandome Road. There is additional parking available at a metered parking lot behind the building on Colonial Parkway. Meters take quarters.

PHYSICAL THERAPY WORKS, P.C.

LYMPHEDEMA PROGRAM



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WHAT IS LYMPHEDEMA?

Lymphedema is a swelling of a body part, most often the extremities. It can also occur in the face, neck, abdomen or genitals. It is the result of abnormal accumulation of protein rich edema fluid in the affected area.

WHAT CAUSES LYMPHEDEMA?

Primary Lymphedema is the result of abnormal development of the lymphatic system (lymphatic dysplasia). While it may be present at birth, it more often develops later in life without obvious cause.

Secondary Lymphedema, which is much more common, is the result of surgery or the side effects of radiation therapy for cancer. Secondary forms may also occur after scarring, injury, trauma or infection of the lymphatic system.

OUR LYMPHEDEMA PROGRAM

We use *Complete Decongestive Therapy* (CDT) to treat Lymphedema. The patient comes to the office for a 1 1/2-hour, one-on-one session, 5 days a week for 4 weeks, followed by periodic reassessments.

GOALS OF CDT TREATMENT

- Utilize remaining lymph vessels and other lymphatic pathways
- Decongest swollen body parts
- Eliminate/reduce fibrotic (scar) tissue
- Avoid the reaccumulation of lymph fluid
- Prevent/eliminate infections
- Maintain normal or near normal size of limb

CDT has no side effects and consists of:

1. Manual Lymph Drainage
2. Compression Bandaging
3. Remedial Exercise
4. Meticulous Skin and Nail Care
5. Instructions in Self-Care for Effective Home Management

MANUAL LYMPH DRAINAGE

Manual Lymph Drainage (MLD) is a manual technique used to redirect the lymphatic circulation to allow for areas of congestion to circulate lymph in greater volume and with less effort. MLD helps restore limbs to a more normal shape and function.

COMPRESSION BANDAGING

Minimally elastic cotton bandages are applied to increase the tissue pressure in the swollen extremity to prevent the re-accumulation of evacuated lymph fluid. These bandages are specialized, reusable and obtained directly through our office.

REMEDIAL EXERCISES

Exercises are performed with the bandages in place to increase lymph vessel activity and improve lymph circulation. The volume of lymph fluid transported by the thoracic duct is increased with breathing exercises.

METICULOUS SKIN AND NAIL CARE

The patient will be shown how to take care of their nails and skin properly. Care of skin and nails eliminates bacterial and fungal growth. It also reduces the chance of infection.

INSTRUCTIONS IN SELF-CARE

Compliance with the home program is key to the program success.

OTHER CONDITIONS TREATED WITH MANUAL LYMPH DRAINAGE

- ⇒ Lipedema
- ⇒ Phlebo-lymphostatic Edema
- ⇒ Combination Forms of Lymphedema, Lipedema, Venous Edema
- ⇒ Cyclic-Idopathic Edema (CIE)
- ⇒ Lymphostatic Encephalopathy
- ⇒ Lymphostatic Enteropathy
- ⇒ Post-traumatic Edema e.g. Sprains, Whiplash, Hematoma
- ⇒ Post-surgical Edema e.g. Facelift, Liposuction, Breast reduction, Breast Augmentation
- ⇒ RSD (Reflex Sympathetic Dystrophy)
- ⇒ Inflammatory Rheumatism (Arthritis)
- ⇒ Scleroderma
- ⇒ Chronic Fatigue
- ⇒ Fibromyalgia
- ⇒ "Detoxification" of Skin and Superficial Fascia