



Dr Naveen Somia - Specialist Plastic Surgeon

Lipoedema – Diagnosis and Prognosis

A genetic disease of abnormal fat storage influenced by:

Life events

- Puberty
- Pregnancy
- Menopause
- Ageing

Lifestyle events

- Weight gain
- Inactivity/sedentary lifestyle
- Stress

Initial symptoms

- Usually appears at puberty or soon after in response to the estrogen hormone
- Appears in thighs/legs and arms later
- Coincides with growth spurt and lifestyle changes
- Often confused with obesity and misdiagnosed with inappropriate and ineffective advice ie extreme diets creating a vicious cycle and eating disorders

Diagnosis - Dutch Criterior

- Family history
- Typical pattern at onset
- Typical distribution
- No response to diet/exercise
- Jeans that fit thigh but not waist
- Boots don't fit

Distribution of lipoedema fat

- Thighs
- Legs
- Arms
- Upper buttock
- Ankle cuff

Progression

Increasing amounts of lipoedema fat deposition is seen in:

- Puberty
- Pregnancy
- Perimenopause
- Menopause
- Ageing
- Weight gain and immobility

Natural Outcome

- Stage 1
- Progression to Stage 2,3 and 4
- Knee replacement
- Total and permanent disability

Genetics

Research to isolate the gene causing abnormal fat storage is underway. Both sides of the family can have the gene including males. It can skip a generation and siblings.



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Lipoedema – Management

Slow down progression - Control not cure

You cannot control life events but you can manage lifestyle events such as:

- Weight gain
- Inactivity, sedentary lifestyle
- Stress

Management of Lipoedema

- Improve Lymphatic Function
- Reduce levels of leptin
- Conservative treatments
- Remove Lipoedema fat - Liposuction

Improve lymphatic function passively:

- Compression - Class 2 flat knit garments (decongestive therapy)
- Manual lymphatic drainage Therapist
- LX9/bio-compression pant pump
- Vibration plate

+ Muscle based activity such as:

- Walking
- Walking waist deep water
- Yoga / Pilates

Combat weight gain/obesity

Increase lymphatic function to control fat deposition. Lymphatic dysfunction results in fat deposition no matter where the dysfunction or the cause.

Like the heart pumps for blood, muscle contraction pumps lymphatics. After age 30 there is 10% muscle mass loss every 10 years. At 60 you will be lifting a very heavy leg with a weak muscle. Ongoing muscle activity improves lymphatics, and to combat weight gain.

Walking in water - 4 in 1 benefit

Walking in water has a compression and resistance effect, softens the fat and mimics a manual lymphatic drainage massage.



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Lipoedema – Management

Combat inactivity or a sedentary lifestyle

Reduce leptin levels. Leptin is produced by both normal fat cells and lipoedema fat cells. Leptin acts on the lymphatic system and slows it down, A sluggish lymphatic system produces more fat and a vicious cycle is set up.

Reduce leptin

- Diet and nutrition consult
- Exercise and muscle health
- Correct hormone imbalance (metabolic health consult)
- Medical or surgical weight loss

Diet/Nutrition consult

A diet/nutrition consult will help you to understand food intolerances that cause inflammation, avoid restrictive diets that result in nutritional deficiencies, understand gut health and the impact of processed foods, gluten, dairy, sugar and meat on lipoedema. All of these are useful as a long term management strategy.

Metabolic health consult

Metabolic health affects weight gain and obesity. A metabolic health consultation will help you understand how metabolic health impacts your health, how dyslipidaemia/insulin resistance impacts metabolic health, with weight management and as you go through menopause.

Remove diseased lipoedema fat

As of today, there is no proven method available that can drastically reduce or remove lipoedema. Liposuction is the only option to debulk fat, reduce congestion and assist the lymphatics to move with less resistance and pain.

Stress

Easier said than done, try to reduce stress. This involves taking time for self-care, talking to others about your condition and where needed GP support.



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Lipoedema - Summary

Slow down progression - Control not cure

Reduce Leptin		Improve Lymphatic Function		
Reduce normal fat	Reduce lipoedema fat	PASSIVE	ACTIVE	
Diet & Nutrition	Liposuction	Compression	Walking	
Exercise & Muscle health		Class 2 flat knit	Walking in waist deep water	
Metabolic health consult		Decongestive therapy	Pilates	
Medical weight loss		Manual lymphatic drainage by therapist	Yoga	
Surgical weight loss		LX9 or biocompression pants pump at home		

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