

Lipoedema

Guide

JUNE 23



A genetic, inflammatory painful
fat + connective tissue disease.
It's not your fault and it's not simply obesity.

F O R M E
i n s t i t u t e

ASAPS Australasian Society of
Aesthetic Plastic
Surgeons™
Excellence in cosmetic surgery™

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Dr Naveen Somia

MBBS, FRACS, PhD
Specialist Plastic Surgeon



about naveen

Dr Somia trained in Sydney, Melbourne and the US and is a Fellow of the Royal Australasian College of Surgeons (FRACS), President of The Australasian Society of Aesthetic Plastic Surgeons (ASAPS) and a member of the Australian Society of Plastic Surgeons (ASPS). He recently celebrated his 15th year in private practice.

Dr Somia has successfully treated patients with lipoedema since 2013. He gained valuable insight from Dr Josef Stutz when he visited Germany in 2016 and subsequently commenced using the water assisted liposuction technique for lipoedema.

His philosophy on the management of lipoedema lies in a multi-disciplinary approach of compression, nutrition, movement, skin health, mental health, metabolic health and liposuction surgery.

Dr Somia operates at Lakeview Private Hospital in Bella Vista, Sydney Australia.

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lipoedema presentation

Physical

Patients may experience any combination of the following:

- Enlarged legs and arms bilaterally & symmetrically
- Waist is small in proportion to the thighs, buttocks & legs
- NO involvement of the feet and hands
- A 'cuff' or "bracelet" around the ankle or wrists
- A round pad of fat just below the knees
- Legs are painful to touch and/or heavy
- Skin is cold
- Evidence of dilated veins & bruising
- The fat is soft to touch, wobbly & cold
- Skin is always involved in Lipoedema & has a cellulite appearance

History

- Legs bruise easily
- Legs feel heavy at the end of the day
- The first sign of fat deposition in the thighs may occur following the hormonal changes of puberty, pregnancy & menopause (or worsening of symptoms)
- Exercise or diet have no effect on reducing lipoedema fat
- Strong family history of Lipoedema mainly affecting females though rare cases in males have been reported (inherited from either side).

Testing

There is no simple blood test or scan to diagnose & presentation varies from person to person. Diagnosis is made by history & physical examination. See <https://www.lipedema.org/staging> for lipoedema staging information.

what causes lipoedema?

Lymphatic dysfunction is inherited. Fat deposition is amplified when you go through hormonal surges such as puberty, pregnancy and menopause. Lipoedema is an inflammatory disease. Inflammation leads to fibrosis if the body cannot resolve it.

Risk factors for those who have the lipoedema gene:

- hormonal surges
- hormonal imbalances
- chronic stress
- ageing
- obesity
- sedentary lifestyle

You can only control two of those risk factors: lifestyle and non lipoedema weight management. This in turn assists in modifying the response of the other risk factors. Excess non lipoedema fat contributes towards lymphatic dysfunction causing inflammation and swelling.

newly diagnosed?

A diagnosis of lipoedema can leave you with a multitude of feelings - relieved & reassured it's not your fault, validated that your pain is real - to feeling shocked, worried or overwhelmed by the diagnosis. It's normal to feel many of these emotions.

Allow yourself time to come to terms with your new diagnosis, talk to loved ones when you are ready and seek the care of a therapist or counsellor that understands lipoedema (see resources).

Conservative treatments can help you to feel better along with speaking to other members of the Lipoedema Australia community.

newly diagnosed?

Avoid extremely low calorie diets (and crash dieting).

Practice long term healthy eating that nourishes your body and reduces inflammation. Don't try to do this alone. At your consultation we will provide resources for nutrition, metabolic health, exercise physiology and psychology.

Focus on reducing any excess weight around the tummy to relieve the lymphatic system and lipoedema growth.

Reduce the systemic inflammation that feeds the viscous lipoedema cycle by improving gut health and reducing exposure to toxins.

Reduce chronic stress.

Layering lighter compression may help to progress to full compression.

Do something everyday for lipoedema, don't attempt all at once.

Treatment is personal - what makes you feel better?

lipoedema management

Patients who proactively treat lipoedema with conservative methods respond better to surgery

The success of any surgery can only be maintained with consistent long term conservative management of lipoedema.



It is not user friendly to rely solely on liposuction as a form of management. If you fail to control the growth of the fat depositions you will require more regular liposuction

conservative treatments

Eat Well & Hydrate

Reduce inflammation & improve movement. Nutrition is not one size fits all. Trial different eating plans to find the right fit. for you The key is to find a sustainable long term eating plan with a focus on nutrition as well as portion control. You may find a nutritionist helpful. Certain food groups tend to disagree with lipoedema patients such as: Gluten / Dairy / Meat / Sugar / Alcohol / Carbs / Chemicals / Preservatives. You may not react to all but you may react to more than one. Avoid food groups that consistently cause inflammation for you. Stop using nicotine products as soon as possible.



nutrition resources

nutritionalsynergy.com.au

holisticnutritionprincess.com

ichoosehealth.com.au

No day is wasted between diagnosis and surgical treatment - its an opportunity to fully explore conservative management and prepare the body

Skin Health

Look after your skin, keeping it well hydrated. Regular moisturising will help skin to stay healthy & lowers the risk of wounds & infections. Avoid pumps and choose tubes or pots.

Movement

Keep moving. Movement is important for lymphatic function and mobility. Low impact activities such as walking, aqua aerobics, yoga & weights are beneficial to reduce fluid buildup, boost mobility & maintain how well your legs work. Finding something you enjoy will make maintenance easier. You may benefit from using an oscillating vibration plate.

exercise physiologist

Marcus Cassaniti - book a consultation
fitnessclinic.com.au/new-patients/

conservative treatments

Consult a Lipoedema Therapist (see resources page)

A Lipoedema Therapist can help with manual lymphatic drainage, conservative treatments & advice on compression garments.

MLD (manual lymphatic drainage) is a gentle form of massage performed with sweeping or tapping motions to the connective tissues immediately below the skin. It helps to stimulate lymph flow, remove excess fluid, break up fibrosis & reduce pain/swelling.

Wear Compression & Feel Good

Compression garments are important in the maintenance of lipoedema to reduce swelling & encourage the flow of lymphatic fluids. As the skin is involved in lipoedema you can also think of compression garments as a second supportive skin that helps to milk up fluid.

Save time and money by discussing compression with a lipoedema therapist. You may wish to ease into wearing compression slowly building up. Perhaps start with Bioflex or Czsalus then moving onto Class 1 and then Class 2 Flat knit compression after. Please note: When preparing for surgery stronger compression is required (exact requirements for surgical garments will be provided when you are approaching surgery). See resources for more info.

resources



For more information on conservative treatments and lifestyle see lipoedemaaustralia.com.au, lipedema.org, fatdisorders.org.

Information for GPs: <https://praxhub.com/education/a-gps-guide-to-lipoedema-and-how-to-differentiate-from-lymphoedema/>

compression garments

<https://naveensomia.snapforms.com.au/form/lipoedema-garment-resources-jan-23>



mld therapists

<https://naveensomia.snapforms.com.au/form/therapists>



Lipoedema Conservative Care Video Package by Lisa Higgins (MLD Therapist) covering compression, conservative care & self-lymph drainage available to download for \$33. <https://www.lisahiggins.com.au/lipoedema-conservative-care-video-package/>.

psychology

www.purposefulpsychology.com.au

A psychologist who understands & has lipoedema for those struggling with diagnosis or body acceptance. Rebates may be available with GP health care plan

weight management

Patients with Lipoedema have varying degrees of non lipoedema adipose tissue in addition to Lipoedema fat. Lipoedema fat and non lipoedema fat behave differently with the classic difference being the response to diet and exercise. Non lipoedema fat responds and Lipoedema fat does not.

A weight control strategy is as essential as WAL liposuction for lipoedema patients

Obesity is an ongoing trigger for Lipoedema. This effect is mediated through the hormone LEPTIN produced by normal adipose tissue (non lipoedema fat) that worsens lymphatic dysfunction which in turn worsens lipoedema.

Losing non lipoedema fat is beneficial for long term lipoedema management as well as making the lipoedema fat more visible and easier to remove during the liposuction procedure. Recovery is also much better. Another significant benefit is that you will need less sessions of WAL liposuction which in turn helps you to reduce your costs.

A BMI of 30 and above, increases the anaesthetic risk associated with WAL liposuction and hence will limit the liposuction options. Liposuction could be attempted but needs to be discussed with Dr Somia. Lipoedema patients may not be suitable for liposuction on their back as lying on their stomach would be at risk of crushed lungs during surgery.

While 80% of people can control weight by diet and exercise, 20% need medical help. Medical help could be a Metabolic Physician guided management plan escalating to surgical weight loss methods where appropriate. During your consultation, Dr Somia will discuss this at greater length and recommend a metabolic or weight loss specialist if you need assistance in this area.

PS: We know its hard!

surgery

What is the role of Liposuction in Lipoedema?

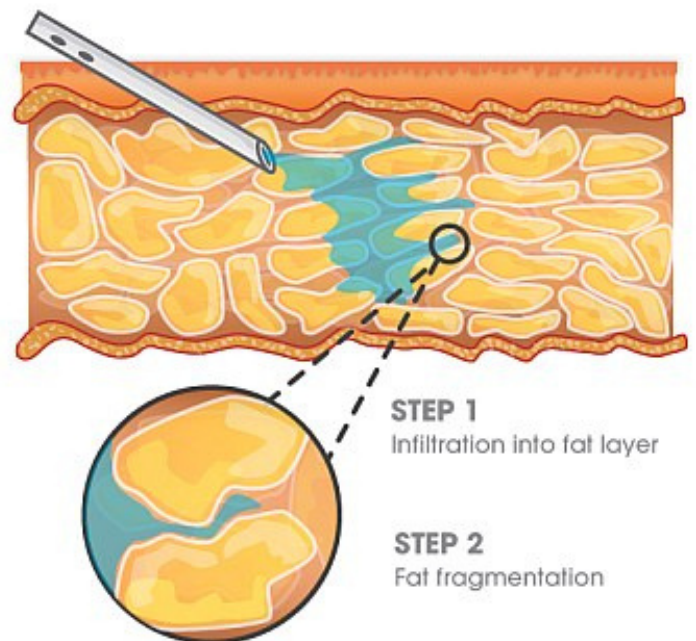
The aim of liposuction in the treatment of lipoedema is to remove stubborn fat, limit disability, slow disease progression, avoid permanent lymphatic dysfunction and may assist in the reduction of pain symptoms. As of today, Liposuction is the only method proven to safely remove the 'Lipoedema Fat'. It is important to note that liposuction for Lipoedema provides a form of control but not a definitive cure. The best results are seen in patients who are proactive and diligent with all conservative treatments methods before and after surgery. Surgical treatment should not be performed on patients in the inflammatory phase as this will add to swelling post surgery

What is Water Assisted Liposuction?

Water Assisted Liposuction is a precise liposuction technique where the cannula that sucks fat tissue out has an attached waterjet that separates and removes the fat cells from the surrounding tissues with less damage to lymphatics.

Why Dr Somia uses Water Assisted Liposuction

- Proven safety record
- Does not damage the lymphatics and low risk of causing lymphoedema
- Invented in Germany: extensively used for the last 20 years for treating Lipoedema
- He has used all liposuction techniques with a good experience with WAL since 2016



What is the investment?

Legs: Over the years Dr Somia has found 4 hours to be an appropriately safe surgery duration for legs. At this time as a guide the total cost for 4 hours of water assisted liposuction including Dr Somia, specialist anaesthetist, overnight hospital stay, theatre, pre and post surgery pathology testing and 6 months aftercare is approximately \$22,000. Additional costs to consider are custom compression garments, mld therapy, additional accommodation, medications etc (as a guide allow \$2500-3000)

Arms: Arm surgery generally takes around 2.5 hours (sometimes slightly longer). At this time as a guide the total cost for 2.5 hours of water assisted liposuction for Dr Somia, specialist anaesthetist, overnight hospital stay, theatre, pre and post surgery pathology test, post surgery compression and 6 months aftercare is approximately \$15,000. Surgical garments are provided and included for arms. Additional costs to consider are mld therapy, additional accommodation, medications etc (as a guide allow \$2000)

When will I see results? Lipoedema patients respond differently to liposuction compared to non lipoedema patients and recovery times vary. It cannot be guaranteed that removal of fat will translate to improved symptoms, improved mobility, a better contour or an aesthetic improvement. Final results may not be visible for 12-18 months.

What can be done in 4 hours of surgery? Each patient has a different volume of lipoedema fat to be removed and areas to be treated. You can help make the most of the 4 hours by actively engaging in conservative treatments to pre-soften the fat. The softer the fat, the more fat can be removed. The quality of fat at the time of surgery greatly determines what can be achieved. Dr Somia will ask you to pre-mark the areas that concern you most (ie most painful) to focus on.

Will I need additional surgery? This depends on the degree of treatment required and the areas that you would like treated. There is a limit to the amount of fat that can be removed in one surgery safely. Dr Somia will advise at your initial consultation how many surgeries he believes you will need. Please note: there is no pressure to undergo more than one surgery. Some patients are happy with the results they achieve from one surgery. Sometimes, following surgery skin doesn't spring back and this may require an additional procedure.

faq's

What is the process to have liposuction surgery? Consultation with Dr Somia is the first step. An initial consultation is \$355. Payment is required within 2 weeks of booking and is refundable less a \$5 processing fee up to one week before.

You will generally see Dr Somia 3 times before surgery. If you prefer one of these consultations can be held via telehealth. Two consultations are required by law before a date for surgery is scheduled. This is to allow you plenty of time to ask questions and feel comfortable about the procedure. Your third consultations will assist us to prepare you for your surgery (ie paperwork, pre-operative testing).

What is the recovery like? Each patient recovers at a different rate and another's recovery should not be compared with yours. Generally, initial recovery from swelling and bruising is approximately 4 weeks. A return to normal activities can usually be expected after 6-12 weeks. This procedure requires a compression garment to be worn for 12 weeks (this is to assist with swelling and to ensure the skin and tissue re-adhere to the skin layers disturbed during the procedure).

You can return to work when you feel well and if your employer has lighter duties for you and will allow you to take time to rest and move around. Most patients take at least 4 weeks off work if they work in an office context. Patients working outdoors or in a physical capacity may need to take up to 8 weeks off work whilst they recover. Talk to us about your specific situation.

You can drive when the anaesthetic has worn off, your vision is clear, and you are pain free getting in and out of the car and whilst performing an emergency stop. You should check your vehicle insurance policy for their requirements in this situation.

If I live outside Sydney how long do I have to stay? You must have a travel companion to assist you with travel and post surgery care. Patients who live within a 1-2 hour flight distance from Sydney can usually travel on Day 2/3 after surgery. Patients further away ie WA / NT we recommend a stay of one week.

Can I claim from medicare and fund or access my superannuation? Unfortunately, at this time Liposuction treatment for lipoedema is considered by medicare and health funds a cosmetic procedure and cannot be claimed. Please note our area of specialist is lipoedema not lymphoedema and we do not perform skin excision at the same time.

Some patients have had success in accessing their superannuation fund (pain must be symptomatic to apply). Withdrawal of super is considered to be income and taxed accordingly. Consider this option carefully before applying. Only one surgery can be applied for at a time and our practice policy is to complete superannuation applications in the 4 months before your surgery (you must have a surgery date to apply).

faq's

What are the risks of liposuction surgery? All surgery carries risks. When travelling overseas on a plane whilst the expectation is a safe journey and arrival, it is understood things could go wrong. The choice of the airline based on safety record and flight path are important elements in determining risk. Similarly, for your surgery, the experience and expertise of your Surgeon, the skill of your anaesthetist and the standard of the hospital will determine the risk. Risks, both general and specific, will be discussed during your consultations and written information will be provided for you to take home. A brief overview of risks is below.

General risks include pneumonia, deep venous thrombosis and pulmonary embolism, stroke, heart attack, allergies, awareness, death, Bleeding, Infection, sensation change, haematoma and seroma, skin contour irregularities, Damage to deeper structures, Firmness, Delayed healing and tissue death, exposed sutures, dog ears or additional skin folds, dressing issues, asymmetry, scars, lymphoedema and unsatisfactory results.

Risks specific to Lipoedema surgery include public distortion, ultrasound assisted liposuction, liposuction wetting solutions.

Before and After Photography Our practice privacy policy prevents sharing patient before and afters online. Indicative before and after photos can be viewed during your consultation.

DISCLAIMERS: All surgical procedures are performed by Specialist Plastic Surgeon, Dr Naveen Somia (MBBS PhD, FRACS - APHRA Reg: MED 0001189889). For full information on Dr Somia's qualifications and risk/recovery information on procedures please visit the procedure page on this website. From July 1, 2023 all surgical procedures require a GP referral.

All surgery carries risks. information provided is general only. Outcomes experienced by one person do not necessarily reflect the outcomes of others given factors such as genetics, diet and exercise. Please seek a 2nd opinion from a qualified Specialist Plastic Surgeon.

next steps

Call 02 9387 2110 or email reception@naveensomia.com.au for an appointment.

We hope you found this information helpful. We look forward to seeing you soon.