

Lipedema Informational Sheet.

Lipedema is a chronic condition characterised by the abnormal accumulation of fat, usually in the legs and sometimes in the arms, that is often resistant to diet and exercise. It predominantly affects women (one woman on ten on a global scale)(Ärzteblatt, 2020) typically emerging or becoming more noticeable during periods of hormonal change, such as puberty, pregnancy, or menopause (Katzer et al., 2021). It's important to note that **lipedema is not a degenerative condition**, meaning it does not follow a pattern of degeneration that is equal for everyone. Someone may experience the same stage of Lipedema earlier or later in life. Along with its development, it can cause discomfort, mobility issues, and emotional distress due to the physical changes in the body (Ärzteblatt, 2020).

Here's a detailed look at various aspects of lipedema:

1. Cause and Risk Factors

- **Hormonal Influences:** Lipedema has a strong hormonal link. It often begins or worsens during times of significant hormonal changes, such as puberty, pregnancy, or menopause. This suggests that hormonal imbalances, particularly an excess of estrogen, may play a role in its development (Katzer et al., 2021).
- **Genetics:** There is a hereditary component, with many women reporting a family history of the condition, indicating that genetics plays a key role in susceptibility(Ärzteblatt, 2020).
- **Gender:** Lipedema predominantly affects women, although there are rare cases where men may develop it, usually due to other underlying factors such as obesity or specific health conditions.

2. Symptoms

• **Abnormal Fat Distribution:** The hallmark feature of lipedema is the symmetrical, disproportionate accumulation of fat in the lower limbs (hips, thighs, calves) and

sometimes the upper arms, creating a "column-like" appearance. The fat distribution does not follow typical patterns of weight gain. Feet and hands are not affected by Lipedema till the time it evolves to its latest stage: Lipo-Lymphedema.

- Pain and Tenderness: The fat is often painful to the touch, and affected areas can feel
 tender or sore, especially when pressure is applied or when there is increased swelling.
 This is because the fat tissue compresses the cutaneous nerve, making the skin touch
 more sensitive.
- **Skin bruising:** People with lipedema often experience easy bruising in the affected areas due to the fragile blood vessels within the fatty tissue. As per the cutaneous nerve, the fatty tissue can damage the blood capillaries.
- **Swelling:** Swelling, particularly in the lower legs, may occur, and it tends to worsen throughout the day. Unlike <u>lymphoedema</u>, a condition where fluid builds up in tissues, lipedema's swelling does not typically result in a loss of the skin's elasticity.
- **No Impact on Feet or Hands:** The condition primarily affects the upper and lower limbs but spares the hands and feet, which is a key distinguishing feature from other conditions like obesity or lymphoedema.
- **Skin Changes:** As lipedema progresses, the skin over the affected areas may take on a dimpled or "orange peel" texture, similar to the appearance of cellulite.

3. Diagnosis

- Clinical Diagnosis: There is no definitive diagnostic test for lipedema, so it is typically diagnosed based on a combination of clinical presentation (symptoms, physical examination) and patient history.
- **Differential Diagnosis:** It's important to distinguish lipedema from conditions like obesity, lymphedema, and other types of fat distribution disorders, which may require imaging or more extensive medical examination.
- **Lymphatic System:** The lymphatic system in the early stage of Lipedema is not affected (per most of the cases). The Lymphatic system gets affected at the latest stage when the fatty tissue compresses the LS capillaries and blocks the lymphatic liquid absorption (Rasmussen et al., 2022).
- Stage Classification: Lipedema is often classified into four stages, based on the severity and extent of fat accumulation (some other classification are used, where stage 2 and 3 are combined under the same stage as 2a, 2b):
 - o Stage 1: Mild fat accumulation, soft and smooth skin.
 - o Stage 2: Increased fat accumulation with nodules or lumpy texture.
 - Stage 3: More pronounced fat accumulation with significant skin changes (dimpling, thicker tissue).

- Stage 4 (Lipo-Lymphoedema): Severe fat accumulation with further skin changes and possible fibrosis. In this stage the Lymphatic System is affected, and is compressed by the fat tissue.
- Measuring the limbs size, and have measuring done on a regular basis (every 6 months?) can give an idea of what is happening, and keeping track of the limbs volume stage. Measuring can be done manually, with a tape or there are specific clinic which may use machinery to take digital measurements.

4. Treatment and Management

While there is no cure for lipedema, various treatment strategies can help manage symptoms, reduce fat accumulation, and improve quality of life. These treatments typically aim to alleviate pain, improve mobility, and address cosmetic concerns.

• Compression Garments: Compression therapy can help manage swelling and improve circulation, especially when lipedema is accompanied by fluid retention (though it is not the same as lymphedema).

In terms of compression, the best result can be achieved by purchasing garments wear that are made on measurements for your limbs. This ensure that the pressure that those garments applies are ideal for your presentation, and if adjustment are needed after the purchase, you can always talk to the staff of the clinic who provide them.

<u>Sigvaris</u> is a shop /clinic where you can get garments wear fitted on your needs.

- Manual Lymphatic Drainage (MLD): This specialised massage technique can be useful for managing swelling and discomfort. That said, in early stage of Lipedema, the lymphatic system is not affected. But MLD can still help in reducing the discomfort or sensation of heaviness experienced in the limbs.
- <u>Diet and Exercise</u>: Although lipedema fat is resistant to diet and exercise, a healthy diet (anti-inflammatory diet) and regular physical activity are still recommended to maintain overall health and prevent obesity. Weight management may help prevent further progression of symptoms but is not a cure.
- Liposuction (Lipedema-Specific): Data for liposuction in lipoedema are quantitatively and qualitatively poor. If liposuction is performed, patient selection is critical and ideally, it should be part of a multimodal treatment plan. That said, still nowadays Liposuction is often considered the gold standard for treating lipedema. Special techniques like tumescent liposuction or water-assisted liposuction can remove excess fat from affected areas. It is important to note that liposuction for lipedema is different from standard liposuction for cosmetic fat removal because the focus is on removing diseased fat tissue rather than cosmetic contouring (Bejar-Chapa et al., 2024; van de Pas et al., 2019).

• **Psychological Support:** Many individuals with lipedema experience psychological distress due to the changes in their body image. Counselling or support groups may help address feelings of isolation, frustration, and low self-esteem.

5. Prognosis

• Lipedema is not life-threatening and does not lead to degeneration of tissues or organs. However, untreated or severe cases can result in significant discomfort, impaired mobility, and quality of life issues. The condition may progressively worsen over time, especially if not managed properly, with increasing fat accumulation and possible fibrosis in the affected areas (Vyas & Adnan, 2022).

6. Complications

- **Lymphedema:** In some cases, lipedema may be complicated by lymphedema (Lymph fluid buildup in the tissues), leading to additional swelling and more significant health issues. This is sometimes referred to as "lipolymphedema."
- **Mobility Issues:** In severe cases, the accumulation of fat in the limbs can impair movement, making walking or standing difficult, due to joint compression.
- Chronic Pain: Persistent pain and tenderness in the affected areas can interfere with daily activities and contribute to emotional distress. Chronic pain is defined as a pain that last for more then 3 months (Dydyk & Conermann, 2024).

7. Lymphatic System test

Lymphoscintigraphy (Ranzenberger & Pai, 2023): This test consists in injecting a radioactive liquid in the feet and take a series of image to see how the liquid is absorb within the Lymphatic System.

What we would like to see, is an uniform distribution of the liquid along the lymphatic system, starting from the feet, moving upwards in the medial side of the leg, reaching the chest for then seeing a major deposit of liquid in the Liver. That would mean that the liquid has been transmitted distally to proximally via the Lymphatic System, and then once it was passed to the bloodstream, it got processed by the liver before it would get expelled. In Melbourne, this type of service is available at:

<u>https://www.cabrini.com.au/</u> - it is partially funded by Medicare but you better talk your GP for referral and to the clinic for the cost.

About Melbourne Massage and Treatment

Melbourne Massage and Treatment is a Myotherapy and Lymophoedema Clinic, run by myself, Giovanni, and I am <u>located in the heart of Fitzroy North.</u>

If you need clarification and or treatment about your Lipedema or Lymphoedema presentation, do not hesitate <u>contact me</u>. Along my training in the health industry, I did specialised in Lymphoedema and Lipedema management with Lymphatic Drainage and Combine Decongestive Therapy (CDT). Appointment for MLD are available <u>via booking</u>, and a 15

minute online free consultation appointment is available for who needs more information about the Lipedema and Lymphoedema topics.

Other way to get in touch:

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