

Lipoedema

Introduction



A ring of fatty tissue overlaps the top of the feet

Lymphoedema vs lipoedema

These two conditions can look very similar, but there are important differences.

<u>Lymphoedema</u> is swelling under the skin caused by a build-up of a protein-rich fluid called lymph within the skin tissues. This is the result of a problem with the lymphatic system, the network of vessels that drains excess fluid from body tissue.

Swollen skin caused by lymphoedema will pit if you press it, but this does not happen in cases of lipoedema.

A person with lipoedema may eventually develop lymphoedema as well if fat gets in the way of lymphatic drainage. This combination of the two conditions is known as lipo-lymphoedema.

Lipoedema is the abnormal build-up of fat cells in the legs, thighs and buttocks.

This page aims to address the commonly asked questions about lipoedema for anyone who has just been diagnosed with the condition.

What are the features of lipoedema?

In lipoedema, the legs become symmetrically enlarged from the ankles right up to the hips, but the feet and hands are unaffected. The build-up of fat often creates a ring of fatty tissue overlapping the top of the feet, as if there were tight bands around the ankles.

Because of the increased fat under the skin, the legs can appear pale and feel cold when compared with the rest of the body. The skin feels fatty or doughy, and is often tender and bruises easily.

The feet and hands are not affected, although the arms can be occasionally.



Lipoedema can be very painful – women with the condition often complain of aching in the affected limbs and pain in the knees.

Women may also experience fluid retention, and in about 60% of cases small varicose veins are seen under the skin surface.

Who is affected?

Lipoedema occurs almost exclusively in women. It tends to start at puberty or at times of hormonal change, such as pregnancy, and progresses gradually.

The accumulation of fat tends to be worse in people who are obese, but also affects people who are a normal weight. It should not be mistaken for obesity, as dieting does not make any difference to the condition (see Treatment section below).

What causes lipoedema?

The cause of lipoedema is not known, but there is a family history of the condition in up to 50% of cases.

The fact that it starts in puberty or pregnancy suggests that hormones have an influence.

In rare cases of lipoedema in men, the men have usually been taking hormone therapy or have <u>cirrhosis of the liver</u>.

How is it diagnosed?

There are no specific scans or investigations for lipoedema – it is diagnosed by appearance alone.

Unlike lymphoedema, in lipoedema the skin does not pit when you press it and compression garments do not reduce the swelling

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How is it treated?

The only treatment that appears to be effective for lipoedema is a procedure called tumescent liposuction, although this is not usually available on the NHS.

Tumescent liposuction involves injecting a liquid solution into the legs to help numb the area and reduce blood loss, before the unwanted fat is removed.

It has been reported to be a highly effective treatment with good long-term results.

Read more about liposuction and having an operation

Treatments that don't work

Treatments used for some types of tissue swelling are generally unhelpful for lipoedema. Lipoedema does not respond to:

- raising the legs
- diuretics (tablets to get rid of excess fluid)
 dieting this tends to result in a loss of fat from areas not affected by the lipoedema with little effect on the affected areas, but weight gain does tend to affect lipoedema sites more (particularly the thighs and hips)

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