Lipoedema

Summary

- Lipoedema is a condition that mainly affects women and is characterised by a symmetrical swelling in the legs, thighs and buttocks and sometimes the arms.
- Lipoedema occurs because of the abnormal accumulation of fat under the skin.
- If you have lipoedema your legs become swollen, bruise easily, are tender and feel painful and uncomfortable.
- Lipoedema may occur because of changes in female hormones.
- The most common time of onset is around puberty or when there are other hormonal shifts such as during pregnancy and menopause.
- You are at greater risk of developing lipoedema if other women in your family are affected.
- Treatment includes changes to the composition of your diet, use of compression stockings, bandaging affected areas, low-impact exercise, massage and water-based activities.
- Specialised liposuction for lipoedema can assist when other treatments have not been effective.

Lipoedema is a condition that mostly affects women and is characterised by a symmetrical swelling in the legs, thighs and buttocks and sometimes the arms. It is rare in men.

Lipoedema can be extremely painful. The affected areas can be tender and there is a general tendency to bruise easily. Over time, lipoedema can result in fluid retention in the affected parts, resulting in a medical condition called lymphoedema.

Although it has not been confirmed, it is thought that lipoedema may have a genetic basis, as in some cases there is a family history of the condition.

Sometimes lipoedema is mistaken for excessive lymphoedema, weight gain, obesity or cellulite or is assumed to be due to a lack of exercise. Lipoedema can have a significant impact on quality of life.

Symptoms of lipoedema

Lipoedema occurs because of the way that fat (adipose tissue) is distributed under your skin. Fat is distributed unevenly in your legs and buttocks instead of in a regular pattern. Commonly there is a fatty area on the inside of the knees and the outside of the hips.

If you are affected by lipoedema:

- your legs appear symmetrically swollen – swelling can occur from the hips down to the ankles and your legs appear column-like; the feet are not usually affected
- affected areas feel 'spongy' and cool and the skin is generally soft and subtle
- you bruise easily in the affected areas
- you may have small varicose or spider veins in the affected areas
- your legs and other affected areas are sensitive to touch
- your legs and other affected areas hurt and feel uncomfortable – swelling may become worse in the afternoon, evening, after activity or in hot weather.

People with lipoedema may find it difficult to walk or to participate in physical activities, exercise and other aspects of everyday life. Restrictions in mobility may contribute to people with lipoedema developing low self-esteem and other problems such as anxiety, as well as restricting their social life. Buying clothes is often difficult for people with lipoedema, as their upper and lower body are very different in size.
Causes of lipoedema

The irregular build-up of fat cells that is seen in lipoedema can occur in people in all weight ranges, from those who are excessively overweight to those who are underweight. It can also affect those who have an eating disorder such as anorexia.

The causes of lipoedema are still not clear, but may be related to female hormonal changes. You also have a greater risk of developing the condition if the women in your family are affected by lipoedema. Lipoedema may develop or get worse:

- at puberty
- when you are pregnant
- after surgery – trauma can be a trigger for lipoedema
- during menopause.

Diagnosis of lipoedema

Visit your doctor if you have symptoms of lipoedema. Your doctor will examine the affected areas. In most cases this will enable them to determine if you have lipoedema or lymphoedema, or swelling due to other causes. (Telling the difference between conditions that have similar signs and symptoms is called ‘differential diagnosis’.)

Differences between lipoedema and lymphoedema

Lipoedema is a chronic and progressive condition, and it can develop into lymphoedema over time. The reason for this is that the build-up of fat affects the ability of your lymphatic system to drain fluids, cell waste products and inflammatory molecules from your tissues.

In contrast to those with lipoedema, people with lymphoedema will find that:

- their feet (or hands) are affected
- the degree of swelling is not the same if both legs or both arms are affected – one limb is more swollen than the other
- the swelling is caused by build-up of fluid in the lymphatic system
- if the lymphoedema is of short duration, the swollen skin will pit or indent if you press it with your fingers – pressure leaves a temporary mark on your skin
- there is an increased risk of infection.

Differences between lipoedema and other reasons for swelling

Aside from lipoedema and lymphoedema, there are other reasons for tissue swelling, so a differential diagnosis is very important.

Other causes of tissue swelling include:

- obesity – in which case fat tends to be evenly distributed over the whole body (a balanced diet and regular exercise work well in treating obesity)
- phleboedema and chronic venous insufficiency – characterised by the absence of fat and the presence of fluid. The skin is often itchy with a brownish discolouration.

Treatment for lipoedema

Unlike fat that is accumulated when you gain weight, the fat in lipoedema areas does not decrease if you diet (by reducing calories) or exercise.

Treatment for lipoedema includes:

- changes to the composition of your diet – maintaining a healthy weight helps to reduce the amount of non-lipoedemic fat and may help to reduce inflammation
- compression – bandages are used to tightly squeeze (compress) the affected areas
- exercise – low impact exercise such as swimming helps to increase your mobility and improve circulation
• massage – helps to improve your mobility and move the fluids from the affected area
• liposuction – this technique removes the lipoedemic fat from the affected areas. It involves placing a tube beneath the skin and suctioning the fat away.

Compression is usually required after liposuction to maintain the reduction.

It is important to talk to your doctor if you have lipoedema to discuss the most effective treatment plan for your situation. Your doctor may also suggest groups that can provide you with support and information about how to deal with lipoedema.

Where to get help

• Your GP
• NURSE-ON-CALL Tel. 1300 60 60 24 – for expert health information and advice (24 hours, 7 days)
• Lipoedema Australia Support Society