

Liposuction in the management of lipoedema

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Abstract

For lipoedema nowadays both conservative and surgical treatment options are available. Manual lymphatic drainage and compression (combined decongestive therapy) reduces oedema and complaints. Tumescent liposuction reduces circumscribed subcutaneous fatty volumes and improves body proportions, oedema, pain and bruising.

Liposuction should be used, when - in spite of consequent conservative therapy - a progression of signs and symptoms of the disease occurs. Then patients notice an increase of fatty subcutaneous volume, often with an increase of weight, and a worsening of oedema and pain.

Following liposuction(s) an obvious improvement of body shape (disappearance of the disproportion) and of complaints with a distinct enhancement in the quality of life can be noticed. Long-term studies showed a persistent improvement for more than 8 years. About one third of the operated patients did not need combined decongestive therapy anymore; two third of them used it less often than before.

The right combination of conservative and surgical therapies is the key for the success in the treatment of lipoedema.