

# Coming soon: the best practice statement on lipoedema

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Wound UK is proud to announce that an Expert Working Group has developed *Best Practice Guidance on Lipoedema*. The document was inspired by the need for clear guidance and improved patient involvement in the management of lipoedema. It offers guidance on diagnosis and assessment and highlights the important role that self-care and psychosocial support play in helping patients live with and manage the condition. It also looks at the importance of compression therapy alongside non-surgical and surgical interventions in the management of this chronic, incurable disease.

People with lipoedema in the UK face significant challenges. Many are not recognised by healthcare professionals as having the condition or are misdiagnosed.

Even when lipoedema is diagnosed correctly, accessing appropriate care within the NHS may be difficult because of poor understanding of treatment and referral routes, and geographical variations in clinic availability, funding and capacity.

First described in 1940, the chronic incurable condition involves a pathological build-up of adipose tissue. It typically affects the thighs, buttocks and lower legs, and may, although not always, cause considerable tissue enlargement, swelling and pain. It may significantly impair mobility and ability to perform activities of daily living.

Lipoedema can have a severe life-altering impact on quality of life, and physical and psychosocial wellbeing. Some patients are so seriously affected that they lead restricted lives, sometimes to the extent of being unable to leave their homes. The complexity of the issues faced by patients requires multidisciplinary care with an emphasis on education and managing expectations with goals that include encouraging self-management.

There is still a considerable amount to learn about lipoedema. The Expert Working Group instrumental in the development of the document hopes that the guidelines will bring tangible benefits for patients with lipoedema.

## KEY POINTS OF THE GUIDELINES

- » Lipoedema is underdiagnosed and mainly affects women
- » Although lipoedema is often misdiagnosed as simply being obesity, lipoedema and obesity can co-exist
- » Hormonal and genetic factors are likely to contribute to the adipose tissue enlargement characteristic of lipoedema
- » The diagnosis of lipoedema is made on clinical grounds: there are no diagnostic tests for the condition and it is a condition that is distinct from lymphoedema
- » Lipoedema may have a significant impact on a patient's physical and psychosocial wellbeing
- » Patients with lipoedema generally report a history of bilateral symmetrical limb enlargement, with sparing of the hands and feet, which is not responsive to dieting. They may also report pain, sensitivity to touch and easy bruising, and a family history of similar tissue enlargement.

These are only some of the key points and recommendations about the management of lipoedema contained in the *Wounds UK's* best practice guidance. The full guidelines will be available in April in print and online via the Wounds UK website on: <http://www.wounds-uk.com>. 