

Policy title	Lipoedema: liposuction v1.1
Policy position	Intervention Not Normally Funded
Date of Priorities Forum recommendation	May 2018

Lipoedema is a chronic and progressive disease characterised by bilateral symmetric enlargement of the legs as a result of abnormal deposition of subcutaneous fat and orthostatic oedema.

As lipoedema is a long term condition with wide ranging impacts on health and psychosocial wellbeing there is a need for an interdisciplinary approach to management. Of note is that lipoedema is a different condition to lymphoedema, although it is often misdiagnosed as lymphoedema and there are some similarities in treatment and similar specialists treat both conditions.

Specialised lymphoedema services are best placed to manage patients with lipoedema, due to expertise in differentiating between these conditions (lipoedema and lymphoedema) and their experience of delivering compression therapy.

Conservative treatments for lipoedema are supported in line with the Lipoedema Patient Pathway developed by the Expert Working Group, through specialised lymphoedema community services. These include, for example, compression therapy and manual lymphatic drainage.

Principles of Lipoedema Therapy:

1. Facilitating and enhancing the patient's ability to self-care and cope with the physical and psychosocial impact of the condition.
2. Managing symptoms.
3. Optimising health and preventing disease progression.

The main components of lipoedema management are:

- Psychosocial support and education.
- Healthy eating and weight management.
- Physical activity and improving mobility.
- Skin care and protection.
- Compression therapy.
- Pain management.

Due to limited evidence of effectiveness and cost-effectiveness liposuction for lipoedema is **not normally funded**.

Applications for Individual Funding Request (IFR) may be considered in exceptional circumstances in patients in the following circumstances:

- Those with severe symptoms that acutely affect day to day functions.
- They are documented to have fully complied with conservative treatments for over 12 months.
- They have achieved required weight loss, where applicable.
- The patient continues to experience severe symptoms.

Reference:

Wounds UK Expert Working Group Best Practice Guidelines: management of lipoedema (2017)

NOTE:

- This policy will be reviewed in the light of new evidence or new national guidance e.g. from NICE
- Where a patient does not meet the policy criteria or the intervention is not normally funded by the NHS, an application for clinical exceptionality can be considered via the ICB's Individual Funding Request (IFR) Policy and Process

Clinical coding:

OPCS-4 code(s):

S62.2 Liposuction of subcutaneous tissue NEC Plus site code

ICD10

R60.9 Oedema, unspecified (includes fluid retention)

Key words: Lipoedema, liposuction