



**SURGEON
WILFRIED SCHMELLER, MD**

Transcript of Surgeon Video Episode 6



SURGEON

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Dramatic Changes from Lymph Sparing Liposuction

We started to work with lipedema patients in 2002, more or less by chance. We had a connection to a lymphatic clinic in the east of Germany, and they had several patients who were unhappy with their legs. So they came to us, and we were a bit unsure how to handle it. Then we started doing liposuction of the lower legs in a very small amount. And slowly we realized that these patients were not only happy with their figures, they reported less symptoms after liposuction.

So that made us curious, and we continued with this group of patients who were coming because they heard they can benefit from it. And so after some time, the number of women who came to us for aesthetic reasons only shrank, and the number of women who came for medical reasons increased.

The patients who come to us, most of them are diagnosed as lipedema. Most of them have gone through a period of conservative therapy over many years, meaning they had lymphatic drainage, they had compression bandages, and they had compression socks or stockings which they were wearing. The majority of these people have realized that in spite of the good and continuous conservative therapy, their legs grew bigger and they increased with pain. So this was for them a very frustrating experience, because they did everything the doctors told them but they realized that this was not enough.

Let's say one day after surgery...the people realized that there was a dramatic change, a change they never experienced before, and they were so happy. And there was a next surprise over the following weeks, when they realized that not only the legs looked different, meaning much better, but also the heaviness was gone, the pain was gone, the swelling was less, and they could move much better.

You can mainly deal with the edema by conservative therapy but conservative therapy does not influence the increase of fatty volume. So there was before no real chance for these patients. They had more or less helplessly to realize that over the years the legs turned bigger and bigger, a very frustrating experience. The people were desperate, they were helpless, and they were skeptical. But there was a slight hope – maybe liposuction could improve their condition. So they were willing to go through every trial.

Let's say one day after surgery, meaning the next morning, the people realized that there was a dramatic change, a change they never experienced before, and they were so happy. And there was a next surprise over the following weeks, when they realized that not only the legs looked different, meaning much better, but also the heaviness was gone, the pain was gone, the swelling was less, and they could move much better. They had fun again in making sport and wearing sport trousers, they were going swimming for the first time, because they felt more or less normal now. They had never felt this before.

Liposuction for Lipedema

In the last years, it has been generally accepted that liposuction is a medical treatment for lipedema. Even the conservative lymphologists favor it now, and in the guidelines for the treatment of lipedema, surgical therapy is now an important path. The benefit of local tumescent anesthesia is that the patient can place herself in the best position for herself and for the surgeon, making liposuction an easy thing in every area. And she can stand up after surgery, and I can directly control whether there are areas that need a second go.

The other important thing is you do it in different sections. Let's say you have lipedema in the hip area and the thigh area, the lower leg area and maybe the upper arm. We do it in several sessions. We do more or less smaller areas in one session, what is easier for the body to get on with, but in these smaller areas we remove a lot of fat. Then we go to the next area and remove in a small area a lot of fat. So at the end of three or four sessions, there is quite a big amount of fat that is removed. And after each session, the

local anesthesia still works for a long time. In general anesthesia, the patient needs a lot of painkillers. In local anesthesia, he is painless for another twenty-four hours, because that is the long duration of the local anesthesia. And if the pain comes, it comes very, very slowly, so he can handle it very well.

In former years, we used to operate [on] patients in stage 1 and stage 2...And with growing experience, we have found out that some of these patients in stage 3, you can do in the same way, and they can benefit in the same way. I wish that more people would benefit from this treatment.

In former years, we used to operate [on] patients in stage 1 and stage 2. We did not really dare to work in patients with stage 3, because these are huge volumes and you need a lot of local anesthesia. And with growing experience, we have found out that some of these patients in stage 3, you can do in the same way, and they can benefit in the same way. I wish that more people would benefit from this treatment.

There are several obstacles to [having] liposuction. One obstacle is there are not many people in the world who are specialized in this treatment – liposuction in lipedema. And the second obstacle is that it is an expensive treatment that is not paid by health insurance. And that is, for many people, a big problem.

We are not sure what will happen within the next years, a lot of self-help groups are fighting [to get liposuction] accepted as a medical treatment paid by health insurance. There are many discussions going on, there is much political activity at the moment. It's very difficult to foresee the result of it. But with these patients, they have suffered so much for so many years. They suddenly realize there is a dramatic improvement, they are the happiest people [in] the world, and they show it to you. And of course for yourself as a doctor, [that is] very satisfying as well. So this is really a fantastic job.



About Prof. Wilfried Schmeller, MD

Prof. Dr. Wilfried Schmeller is a dermatologic surgeon who practices at the Hanse-Klinik in Lübeck, Germany. Beside clinical treatment of patients from several countries he conducts research in lipoedema, has published on lipedema, presents at and organizes congresses regularly.

AMA citation

Schmeller, W. *Dramatic Changes from Lymph Sparing Liposuction*. [video interview]
<http://DiseaseTheyCallFAT.tv/shop/lipedema/surgery/lymph-sparing-liposuction/wilfried/schmeller>
The Lipedema Project; 2015.