

## Q & A Session 28th March: What to expect as you prepare for Lipoedema Surgery

### Skin and Surgery

1. What would your recommendation be for a patient with a significant amount of excess skin, in addition to Lipoedema?

<https://lipoedemasurgicalsolution.com/faq/#1619056774828-9130c9ba-957f>

2. Please provide more information on the skin removal necessary after liposuction.

<https://lipoedemasurgicalsolution.com/faq/#1619056774828-9130c9ba-957f>

### Pre-Surgical Requirements

1. Is a GP referral necessary for surgery?

[Answered live 18:15:57](#)

2. What is the wait time for surgery following the completion of a consultation?

[Answered live 18:34:15](#)

3. How much does surgery cost?

<https://lipoedemasurgicalsolution.com/faq/#1619046646156-aeb07ae9-fbb8>

6. If a PFO is found, how long is the wait time for an appointment to have it closed up?

*If a PFO is found, we will refer you to a structural cardiologist, expert in PFO closures, and the wait time will depend on their next available appointments. However, in some instances patients can have all their appointments aligned to have the closure within 2 weeks.*

7. What needs to be achieved for a patient to be considered surgically ready?

*Patients preparing for surgery will need to undertake the following requirements:*

- *have an assessment with our doctor, which may require further investigations to exclude any comorbidities and determine underlying causes for swollen legs that may need to be treated prior to Lipo-Extraction Surgery*
- *a minimum of 8 weeks of conservative management to soften the lipoedema tissue so it can be removed via liposuction. Conservative management is made up of three parts and you can read more about conservative management on our website - <https://lipoedemasurgicalsolution.com/faq/#1619056830690-0f9dbdc0-18a6>*
- *reduce secondary obesity*
- *some patients may be required to undergo psychological assessment, such as very young patients*
- *be determined surgically ready by one of our doctor team*

8. Is it preferable to be as lean as possible before surgery?

[Answered live 18:29:49](#)

9. Is it necessary to have continual visits to Miami prior to surgery?

[Answered live 18:22:59](#)

10. Is Lipo-Extraction surgery covered by Private Health Insurance?

<https://lipoedemasurgicalsolution.com/faq/#1619046646156-aeb07ae9-fbb8>

11. I have been told that I do not have any fluid in my legs, and therefore MLD would not be beneficial for me until after surgery. Would some other form of massage be beneficial for me to soften the Lipoedema fat?

*MLD would be considered appropriate by most therapists to optimise the lymphatic system and keep the lipoedema tissue soft.*

12. Will Dr Lekich perform the surgery when limbs are still presenting with Lymphoedema, or does Lymphoedema swelling need to be almost zero before surgery can be performed?

*Optimising conservative management will reduce secondary lymphoedema and this is the goal before surgery. However, to completely remove lymphoedema with significant lipoedema still present may not be possible. It is not uncommon for patients to have secondary residual lymphoedema despite best endeavours with conservative management. Our doctors will advise when you are surgery ready.*

13. I cannot afford the expense of my PFO closure - what is my next step?

*Please speak to our doctors as affordable PFO closures can be facilitated. You may be interested in reading this article - <https://lipoedemasurgicalsolution.com/pfo/>*

14. What is the approximate timeline from initial consultation to surgery?

[Answered live 18:39:13](#)

15. What is the wait time to book a consultation?

*The first step of the process is to book a group zoom call with Dr Lekich, this is your opportunity to hear an overview of lipoedema, the way it is diagnosed and treated, and what to do before seeing a doctor for a one-on-one consultation. Group zoom sessions are typically held once or twice a month; you can click [here](#) to see available times.*

16. I am having laser vein surgery this year. Would I be ok for surgery next year?

*Yes, usually 4 to 6 weeks is required post vein treatment.*

17. Are there any medications that you think assist with prep for surgery - ie Ozempic?

*This may be helpful in treating secondary obesity and you may wish to do this if your GP or specialist has suggested this.*

18. Is the bubble study safe if you have previously had little blood clots in your lungs? i.e Can it bring on a stroke or heart attack?

*This would be very rare.*

19. Is BMI and/or weight a factor for someone not being a surgical candidate?

<https://lipoedemasurgicalsolution.com/faq/#1619056514009-f5f013b8-3836>

20. What is the best pre-surgery diet?

<https://lipoedemasurgicalsolution.com/faq/#1619057009655-0ec42018-4045>

### Surgical Protocol

1. How does Dr Lekich's method of Lipoedema removal differ/compare to other specialists in Australia?

[Answered live 18:44:17](#)

2. Does Dr Lekich perform surgery on the Mons pubis or rump areas as well?

*If lipoedema is affecting abdominal and mons pubis areas, or other areas of the body, the lymph-sparing technique that is used for the limbs can also be applied. This can also be applied in allocating extra surgery time when the arms are performed, obviating the need for a separate surgery.*

3. What is the maximum amount able to be removed in the one surgery?

[Answered live 18:44:25](#)

4. Does Dr Lekich target the armpit fat when doing arms?

Yes

5. Does the fat return to other parts of the body (post-surgery) as it does with normal liposuction?

<https://lipoedemasurgicalsolution.com/faq/#1619056514009-f5f013b8-3836>

6. Does Dr Lekich perform Lipo-extraction surgery on both (legs) at the same time?

*Surgery is performed bilaterally, on both legs/arms during the same procedure. This will optimise balance, function, and form following surgery. You can read more about our surgical protocol here -*

<https://lipoedemasurgicalsolution.com/faq/#1619056438207-d72fbe51-3da2>

7. Do patients need to have a General Anaesthetic for surgery, or can patients be given a twilight?

*Yes, patients are typically administered a twilight sedation, either light or deep, depending on the patient's preference.*

8. Can patients have their own music playing during surgery?

Yes

9. Do you do surgery in Melbourne as well?

<https://lipoedemasurgicalsolution.com/faq/#1619055791614-913586e1-486f>

10. Can full legs be done in one operation if the patient's legs are small?

*Dr Lekich uses a very specific protocol developed in Germany where he was trained to remove fat from every square centimetre of the limb completely and circumferentially all the way down to the ankles. To ensure lipoedema is 100% removed from the legs, surgeries have to be performed in a staged manner targeting different areas of the lower body.*

*Some patients only require one surgery on the legs, if they have more progressed lipoedema in one area. For example, surgery on the lower legs from the knees to the ankles could be performed and surgery on the thighs could be deferred, only to be performed if it progressed in the future.*

11. Can surgery be performed in locations other than the Gold Coast?

*Answered live 18:26:55*

12. Does Dr Lekich remove fluid during surgery and if so, will it return?

*The fluid and lipoedema tissue are removed at the same time. After 6 to 12 months recovery, fluid related swelling will have significantly reduced. This depends on how progressed the lipoedema was and the effects on the lymphatics from long standing lipoedema.*

13. I watched a video from a surgeon in the US who not only does liposuction removal but also makes small incisions and squeezes out the fat nodules that liposuction doesn't typically suck out. He mentioned the recovery and pain levels are significantly reduced by manually removing the fat nodules combined with liposuction. What are Dr Lekich's thoughts on this approach?

*Dr Lekich has seen this video and it is not consistent with the protocol that he has been trained to perform from Germany.*

14. As Dr Lekich utilises a staged approach to surgery, which section of the legs is treated first and which is the most painful for recovery?

*You can read more about our surgical protocol here -*

<https://lipoedemasurgicalsolution.com/faq/#1619056438207-d72fbe51-3da2>

*In regards to most painful for recovery, the lower legs are more technical and may experience more discomfort.*

15. Do you operate on late stage lipoedema with high BMI please?

<https://lipoedemasurgicalsolution.com/faq/#1619056514009-f5f013b8-3836>

16. Does Dr Lekich perform Lipo-extraction surgery on arms and legs at the same time?

*Dr Lekich uses a very specific protocol developed in Germany where he was trained to remove fat from every square centimetre of the limb completely and circumferentially all the way down to the ankles. To ensure lipoedema is 100% removed from the legs, surgeries are performed in a staged manner targeting different areas of the lower body.*

## Post-Surgery

1. What is the recovery time after surgery.

<https://lipoedemasurgicalsolution.com/faq/#1619056638851-bc492771-dd74>

2. Is conservative management still required post-surgery?

*Conservative management is an important and ongoing requirement during recovery, which may take 6 to 12 months. Maintaining a good, healthy, anti-inflammatory diet is important, not just for lipoedema patients. It is the goal of surgery to remove the lifelong commitment to wearing compression and having MLD once the patient is fully recovered from surgery. Patients who have had progressed lipoedema for many years, may have some residual swelling and damage to the lymphatics that may require intermittent compression and MLD, but the lipoedema tissue is not expected to grow back.*

3. What are the requirements post-surgery in terms of staying local to the hospital?

*Following surgery, you will stay overnight at Miami Private Hospital for one night. You will be discharged the following day at 7am, and then must stay locally to the hospital (10 – 15 minute drive) for the following 7 nights. You will visit our team during this time if extra support is needed. You will be in daily contact with your doctor via an sms update. You will have your deep vein thrombosis (DVT) check done on approximately day 5, where are team will also check your vital signs and answer any questions before you return home.*

4. What is the likelihood of the diseased tissue returning post-surgery?

<https://lipoedemasurgicalsolution.com/faq/#1619056514009-f5f013b8-3836>

5. How long do patients need off work after surgery, especially those who stand for long periods due to their job?

<https://lipoedemasurgicalsolution.com/faq/#1619056638851-bc492771-dd74>

6. How long after surgery before patients can return to physical activity such as swimming or running?

*Answered live 18:56:13*

7. Is there an MLD therapist offered for the first week of surgery?

*Dr Lekich and Lipoedema Surgical Solution do not endorse specific MLD therapists, or offer a specific provider post surgery. However, we do have an online support register where you can find providers to support you on your lipoedema journey. Along with MLD therapists you may find lipoedema friendly providers for compression, dieting, GPs, and more. For patients having a straight forward recovery, MLD in the first week is advisable and some of the local MLD therapists have a mobile service.*

8. Do we need pain medication after surgery and if so for how long?

*Post surgery it is recommended that you take regular pain medication with food to avoid indigestion/heartburn. If you have no contraindications paracetamol is ideal, as well as non-steroidal anti-inflammatories (e.g Nurofen or Voltaren), as well as compression and regular walks alongside of manual lymphatic drainage.*

9. How long should patients book accommodation when coming from interstate for surgery?

*Answered live 18:25:14*

10. Do patients usually need psychological support after the surgery?

*It would be strongly recommended that patients seeks psychological / psychiatric / counselling before and after surgery, as the lipoedema can be a significant mental burden.*

11. Do patients need to wear compression garments after the surgery?

*Compression is required post surgery:*

- *For the first 2 weeks post op, wear your compression garment 24/7 including while showering*
- *3 to 8 weeks post op, you can have an hour out of compression each day*
- *9+ weeks post op, wear compression as directed by your MLD therapist or our doctor*
- *Flat knit compression will be required for a minimum of 8 weeks post-operatively, but it may be needed for 6 to 12 months*

12. Are new compression garments required post-surgery?

*Prior to surgery, your doctor will decide if your flat knit compression or our lipoedema elastic garment (Lipoelastic) will be used as your post-surgery garment. In general however, a second set of compression is required for lipoedema surgeries, this is for while your flat knits are being washed or when your flat knits may be too tight for a short period of time following surgery due to swelling.*

*Flat knit compression will be required for a minimum of 8 weeks post-operatively but it may be needed for 6 to 12 months*

13. How long after all surgeries are complete is it safe to have a baby?

*Within 3 to 6 months.*

14. Is it advised to hold off having surgery until after having children?

<https://lipoedemasurgicalsolution.com/faq/#1619055357426-f6865eaf-3a0b>

15. I live on my own - is it likely I will need a friend staying with me during the recovery period? If so, for how long? Would I be able to put the compression stockings on myself?

*Post surgery it is required to arrange an able-bodied carer to help you for the first two weeks (24/7) post-surgery. Having a carer to pick you up on discharge from the hospital and stay with you is a hospital safety requirement.*

*Regarding compression stockings, this will depend on many factors individual to your situation – however, most patients would cope.*

## Comorbidities

1. Would I still be considered a surgical candidate if I am very fibrous and over 50?

*If you have completed optimal conservative management, your doctor will advise if you are surgery ready. Your age is not a limitation, many patients are over 50 years, with the oldest patient being 78 years.*



2. Would I still be considered a surgical candidate if I have had previous surgeries? I've had both knees replaced.

*Lymphatics can be more compromised after knee surgery or any other surgery on the limbs however this is not a barrier to surgery and is common with our patients. This also includes past plastic and cosmetic surgery including liposuction.*

3. Is surgery recommended if the patient suffers from chronic pain with fibromyalgia?

*Many patients with lipoedema are significantly more comfortable after surgery, however, a full assessment by our doctor will determine whether there are no other connective tissue disorders that need to be investigated or managed.*

4. Does Dr Lekich treat seromas? Especially if the patient is international.

*Yes our doctor and nursing team will manage seromas.*

5. Is surgery recommended if the patient suffers from varicose veins?

*As a part of our surgical protocol, treatment of comorbidities such as varicose veins are a requirement pre-surgery. When comorbidities are managed, the doctor may clear you for surgery. In relation to varicose veins in particular, having these treated can significantly reduce swelling and bring physical relief before any lipoedema surgery. You can read more here - <https://lipoedemasurgicalsolution.com/faq/#1619055464837-5aba39d6-d448>*

6. Are there any other recommendations to break down the larger nodules of fibrosis, additional to the conservative surgery protocol. Would deep tissue tools help?

*Best to discuss this with your MLD therapist*