

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Interventional procedures

Patient Organisation Submission Liposuction for chronic lymphoedema IP409/3

Thank you for agreeing to give us your views on this procedure or operation and how it could be used in the NHS.

When we are developing interventional procedures guidance we are looking at how well a procedure or operation works and how safe it is for patients to have.

Patient and carer organisations can provide a unique perspective on conditions and their treatment that is not typically available from other sources. We are interested in hearing about:

- the experience of having the condition or caring for someone with the condition
- the experience of having the procedure or operation
- the outcomes of the procedure or operation that are important to patients or carers (which might differ from those measured in clinical studies, and including health-related quality of life)
- the impact of the procedure or operation on patients and carers. (What are the benefits to patients and their families, how does it affect quality of life, and what are the side effects after the procedure or operation.)
- the expectations about the risks and benefits of the procedure or operation.

To help you give your views, we have provided this template. You do not have to answer every question — they are there as prompts. The text boxes will expand as you type, the length of your response should not normally exceed 10 pages.

Please note, all submissions will be published on the NICE website alongside all evidence the committee reviewed. Identifiable information will be redacted.

About you	
1. Your name	████████████████████
2. Name of organisation	St George's University Hospitals NHS Foundation Trusts
3. Job title or position	Consultant in Dermatology and Lymphovascular Medicine
4. Brief description of the organisation (e.g. who funds the organisation? How many members does the organisation have?)	NHS-funded tertiary referral lymphoedema service
<p>5. How did you gather the information about the experiences of patients and carers to help your submission?</p> <p>(For example, information may have been gathered from one to one discussions with colleagues, patients or carers, telephone helplines, focus groups, online forums, published or unpublished research or user-perspective literature.)</p> <p>Information gathered from discussions with (and examination of) patients suffering from lymphoedema in a national lymphoedema clinic. Assessment of patients that have undergone treatment with liposuction that has been offered by this clinic for the last 10 years (IFR-funded cases).</p>	

Living with the condition

6. What is it like to live with the condition or what do carers experience when caring for someone with the condition?

Lymphoedema is a chronic, incurable and debilitating condition that can cause significant physical and psychological suffering. Lymphoedema is associated with a risk of recurrent cellulitis infections that lead to hospital admission and risk of sepsis. Each infection will exacerbate the lymphoedema and lead to a poorer quality of life.

Advantages of the procedure or operation

7. What do patients (or carers) think the advantages of the procedure or operation are?

Liposuction in our cohort of patients has significantly improved patient's quality of life and reduced their morbidity/complications. There have been longterm reductions in limb volume, improved mobility and significantly reduced rate of infections and hospital admissions after liposuction. Patients are independent in their activities of daily living after the operation and all patients agreed they had a very successful outcome.

Disadvantages of the procedure or operation

8. What do patients (or carers) think the disadvantages of the procedure or operation are?

The need to wear compression garments 24 hours a day after the operation.

Patient population
<p>9. Are there any groups of patients who might benefit either more or less from the procedure or operation than others? If so, please describe them and explain why.</p> <p>Patients with a less favourable outcome have been those with: 1) presence of significant pitting oedema in the limb before surgery; 2) obesity; 3) difficulty complying with use of compression garments 24 hours a day after the operation.</p>
Equality
<p>10. Are there any potential equality issues that should be taken into account when considering this topic?</p> <p>None, other than it should be available to patients with all types of lymphoedema (including primary lymphoedema) and not reserved for cancer-related lymphoedema patients,</p>
Other issues
<p>11. Are there any other issues that you would like the Committee to consider?</p>
Key messages
<p>12. In no more than 5 bullet points, please summarise the key messages of your submission.</p> <ol style="list-style-type: none">1. Liposuction is an effective treatment for lymphoedema that is not “pitting” in nature, but has become fatty and fibrotic (and therefore will not respond to conventional lymphoedema treatment with compression).2. Quality of life is significantly improved and patients report a huge benefit from the procedure.3. Liposuction has resulted in patients suffering fewer infections/cellulitis episodes compared to pre-surgery.4. Liposuction is not suitable for the majority of patients with lymphoedema but should be offered to those with non-pitting oedema who are suffering adverse effects as a result of their condition.5. A good outcome of liposuction is reliant on careful patient selection (e.g. not obese, is mobile, is able to comply with compression garments, absence of pitting oedema before surgery etc).

Thank you for your time.

Please return your completed submission to ip@nice.org.uk