



What are lipomas?

Mature fat cells enclosed by thin fibrous capsules. They may occur anywhere on the body and are usually superficial. Rarely they may involve deeper structures such as muscle.

What are the symptoms?

Usually, asymptomatic. However, they can occasionally cause pain or cosmetic embarrassment.

What tests are required?

Usually none as the diagnosis remains clinical. Occasionally however, an ultrasound may be useful when the diagnosis remains unclear or the lesion difficult to palpate.

An MRI scan may be required if the lesion is larger than 5cm due to the risk of malignancy.

What are the options of management?

Conservative or surgical. Conservative or non-operative options are only recommended in patients with small lesions who remain asymptomatic.

What are the possible complications?

Minor complications from the procedure include infection of the wound which requires dressings and antibiotic treatment. Other complications include minor bleeding and the lipoma returning. Rarely, if malignancy is discovered on the final pathology review additional procedure may be required or a referral to a specialist centre.

What to expect following your procedure?

Superficial lipomas may be excised under local anaesthetic and sedation as a day procedure whereas a general anaesthetic may be required for deeper and larger lesions and an overnight stay.

Gentle exercises are encouraged. You may drive if you are able to put your foot on the brake in an emergency or have ceased taking any painkillers. Usually this occurs after two-five days, depending on the location and size of the incision. Post-operative follow-up usually occurs in two weeks and will be arranged on discharge with your surgeon.

The dressing should remain intact for four days. The dressing is waterproof to splashes only. Sutures placed are usually dissolving.