Lipedema Intake Questionnaire

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Patient name _____ **Date** _____

Treatment for lipedema is evolving rapidly, both medically and surgically. The goal of lipedema surgical treatment is improvement in **function** — mobility, pain, swelling, bruising — and in **aesthetics** — shape and proportion. Your answers to the following questions allow a customized treatment plan to be designed for you. Answer with as much detail as you can; if a question does not apply, leave it blank.

1 PRIORITY

What matters more to you in considering surgical treatment? ■ Function ■ Aesthetics ■ Both

2 AREAS AFFECTED

Which areas of your body have lipedema tissue? (Check all that apply) ■ Arms ■ Forearms ■ Buttocks ■ Thighs ■ Knees ■ Legs ■ Abdomen ■ Back

Which area is most important to treat first? ■ Legs and knees ■ Thighs and buttocks ■ Arms ■ Abdomen

How is lipedema affecting the quality of your daily life?

3 DIAGNOSIS

Have you been formally diagnosed with lipedema? If so, when and by whom?

_____

At what age did you first notice lipedema symptoms? _____

Did your disease or weight worsen after pregnancy or menopause? If so, when?

_____

4 FUNCTIONAL ASSESSMENT

Mobility — Do you have limitations in walking, exercise, hiking or daily activities?

- Do your legs feel heavy when you walk? ■ Yes ■ No
- Do you tire easily after only a short walk? ■ Yes ■ No
- Do you feel discomfort or heaviness going up or down stairs? ■ Yes ■ No
- When did the mobility limitations begin? _____

Swelling — Do you have daily swelling in the arms, thighs or legs?

- Do your legs swell from morning to night? ■ Yes ■ No
- Do you have swelling on the tops of your feet? ■ Yes ■ No
- Do you wear compression garments? ■ Daily ■ Occasionally ■ No
  - If yes — are they medical grade? What pressure gradient? _____
- Garment type: ■ Flat-knit custom ■ Woven ready-to-wear
- Garment length: ■ Knee length ■ Pantyhose
- Have you had a vein evaluation, duplex study or varicose vein exam? _____
- Have you been told you have varicose veins? ■ Yes ■ No

Have you had treatment for varicose veins? ■ Yes ■ No

Bruising — Do you bruise easily and randomly? ■ Yes ■ No

Pain — Do you have pain in any area of your body?

Is the pain deep, felt with pressure on the thighs or legs? ■ Yes ■ No

Is the pain more superficial, sensitive to light touch on the skin? ■ Yes ■ No

Where do you feel this lipedema pain? _____

Has anything helped the pain? _____

5 AESTHETIC ASSESSMENT

Do you feel you have body disproportion? ■ Yes ■ No

If so, which area of your body is disproportionately large? _____

At what age did you first notice the disproportion? _____

Do your legs have a cylindrical or tree-trunk shape that does not taper to the ankle? ■ Yes ■ No

How important is addressing the appearance and shape of your thighs and legs?

_____

Can you wear boots? ■ Yes ■ No

Can you comfortably wear shorts or skirts at or above the knee? ■ Yes ■ No

6 BODY FRAME AND WEIGHT

Height _____ **Current weight** _____ **Dress size** _____

Highest weight _____ **Lowest weight** _____

If you gained weight, when did that happen, and how much? _____

If you lost weight, when did that happen, and how much? _____

Was any medication involved? How much change in weight? _____

7 DIET AND INFLAMMATION

Are you following an anti-inflammatory regimen? ■ Strictly ■ Loosely ■ No

Have you eliminated any of these? (Check all that apply) ■ Gluten ■ Dairy ■ Sugar ■ Alcohol

Are there foods that make you feel unwell, bloated, uncomfortable, or cause diarrhea?

_____

Is there any other reason you might be in an inflamed state — high stress, emotional crisis?

_____

Do you take daily supplements? (For example quercetin, turmeric, magnesium, specific vitamins or herbals)

_____

8 GLP-1 / GIP MEDICATION

Have you taken a GLP-1 or GIP medication? ■ Ozempic / Wegovy (semaglutide) ■ Mounjaro / Zepbound (tirzepatide) ■ Other ■ None

If yes, when did you start? _____ Current dose? _____

Have you stopped the medication? If so, why? _____

While taking it, did you experience any of the following?

Weight loss — how much? _____ ■ Yes ■ No

Decrease in lipedema pain? ■ Yes ■ No

Decrease in lipedema swelling? ■ Yes ■ No

Increase in mobility? ■ Yes ■ No

Decrease in specific lipedema fat areas? ■ Yes ■ No

9 PREVIOUS SURGERY

Have you ever had liposuction? ■ Yes ■ No

If yes, which body areas? _____

Other cosmetic procedures? _____

Any joint replacement surgery? ■ Yes ■ No

Have you ever had a blood clot associated with surgery? ■ Yes ■ No

If yes, please describe _____

10 FAMILY HISTORY

Does anyone in your family have lipedema, or the same body shape? (Mother, grandmother, sister, daughter)

_____

Does anyone in your family, male or female, have painful lipomas or multiple lipomas — fatty tumors?

_____

11 NON-SURGICAL TREATMENT

Have you used conservative treatments for your lipedema? ■ Yes ■ No

For how long? _____ Did they decrease your symptoms? _____

Which have you used, or do you use? (Check all that apply) ■ Vibration plate ■ Lymph press (LymphaPress, Tactile) ■ Pneumatic compression (Normatec)

Do you do aquatic exercise? ■ Yes ■ No

Do you do manual lymphatic drainage regularly? ■ Yes ■ No

If yes: ■ I see a lymphatic massage therapist ■ I do it myself

Which treatments have helped, and what was the benefit? (Less swelling, less pain, better mobility)

_____

12 BLOOD WORK

Have you ever been told you are anemic, or have a low blood count, low hemoglobin or low iron? ■ Yes ■ No

Have you had recent blood work including a thyroid panel, blood count and hormone levels?

_____

Thank you for completing this questionnaire.

Please answer with as much detail and attention as you can. What you write here shapes the plan I build for you.

Where lipedema treatment stands today

The treatment of lipedema is evolving quickly as more health professionals become educated about it and as science finds better ways to intercept the inflammatory signals that drive it.

Until recently, surgery was the only treatment able to control the disease and improve disability. Study after study has shown that removing lipedema tissue and normal fatty tissue targets improves every lipedema disability. But surgery alone does not stop the progression of the disease.

The rapid acceptance of the GLP-1 and GIP medications has been a major benefit for women with lipedema. Today tirzepatide (Mounjaro, Zepbound) appears to be the most effective of this class for both controlling weight and decreasing lipedema inflammatory symptoms. Using these medications before surgery can make the surgery itself safer and more efficient.

> **An example.** A woman weighing 260 pounds, disabled by heavy legs and by disabling pain and swelling, now finds herself at 170 pounds with less pain, less swelling, and isolated areas of fibrotic lipedema tissue remaining. She can be treated in one to two surgical procedures instead of three to four, and her ability to heal with a lower risk of complications is improved at the lower weight.

What we know today is that the best treatment for lipedema is a combined program: dietary and medical control of inflammation, together with surgery to remove lipedema from the body. In the pipeline are new medications aimed at greater specificity, oral dosing, less frequent treatment, and preservation of muscle.

We have proven that removing lipedema from the body can restore quality of life and improve disability in the short term. The hope is for a treatment that can stop the progression of this disease altogether.

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