

## Patient Diagnosis Resource for **LIPOMAS**

### *Your Diagnosis*

Your doctor has determined that you have one or more lipomas, or deposits of fatty tissue under the skin. They are not cancer and do not increase the risk of developing skin cancer.

Lipomas can affect people of any age, but usually arise in early adulthood. They tend to occur more often in women than in men.

### *About the Condition*

The skin is the largest organ of the body. Its top layer is the epidermis, which provides protection against the environment. The second layer of the skin is the dermis, which supplies blood, oxygen, strength and support. Underneath the dermis is the hypodermis, or subcutaneous fat layer, which provides an ongoing blood supply to the dermis.

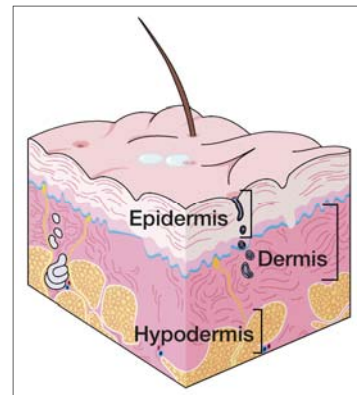
Lipomas occur when round or oval lumps of fat cells grow together within a thin capsule of tissue under the skin. These benign, or harmless, tumors range from the size of a walnut or smaller to that of a baseball. The neck, chest, back, forearms and thighs are the most common sites for lipoma development.

The texture of a lipoma is usually soft and rubbery. The overlying skin appears normal and is not connected to the tumor, thus it is moveable under the skin.

Most people with lipomas have no noticeable symptoms other than the appearance of the lumps. Some may experience mild tenderness. Lipomas can also cause pain if they grow against a nerve.

No one knows what causes lipomas to develop, but there is thought to be a genetic, or inherited, component. They are commonly found in overweight people, but losing weight will not shrink or eliminate lipomas. Some people only have one lipoma, while others may develop many.

Occasionally lipomas can arise deeper in the body and affect muscles, tendons, internal organs or other bodily tissues. This type of lipoma more often affects men, and is most commonly found in the large muscles of the arms and legs.



### *Treatment Options*

Treatment for lipomas may not be necessary unless they are large, painful or cosmetically undesirable, in which case they can be removed.

The following treatment possibilities are available:

**Excision** – Cutting out lipomas with a scalpel (excision) is one common method of removal. Stitches may be needed, especially for larger lipomas.

**Squeeze Technique** – For smaller lipomas situated near the surface of the skin, the squeeze technique may be used. During this procedure, the doctor makes a small stab incision and pushes the lipoma out through the opening.

**Liposuction** – In some cases lipomas can be removed with a suction device through a small incision. This liposuction technique may provide the potential for less scarring.

## What You Can Do

Lipomas rarely come back after they are removed. If they do return, or if you have any changes in lipomas that were not removed, be sure to promptly report them to your doctor.

To maximize your health and minimize your risk of ever developing skin cancer, you should strive to prevent skin damage from ultraviolet (UV) ray exposure. General steps you can take include:

- ◆ Avoiding the sun, especially between 10 a.m. and 4 p.m. when UV rays are the strongest
- ◆ Using SPF 15 or higher sunscreen that contains avobenzone (Parsol 1789), titanium dioxide and/or zinc oxide, applying it 20 minutes before going outdoors and again every 2 hours, or immediately after swimming or sweating
- ◆ Wearing a wide-brimmed hat and 100% UV-blocking sunglasses when outdoors
- ◆ Avoiding tanning salons and other UV tanning devices
- ◆ Visiting your doctor regularly for skin cancer screenings

## Additional Resources

American Academy of Dermatology, 888.462.3376, [www.aad.org](http://www.aad.org)

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