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Lipoma and Homoeopathy

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Definition

Lipoma is a common benign adipose tumor with uniform nuclei, which is usually painless, soft, rubbery, easily movable and often located in the subcutaneous tissues of the head, neck, shoulders, and back, appearing single or multiple. (Psora/ Sycosis)



Incidence

- Most common soft tissue tumor
- Adults above 40 years
- Both sexes
- Rare in children
- Associated with obesity
- Multiple lipomas 5%, more common in women, often familial, associated with neurofibromatosis, multiple endocrine neoplasia syndromes, Bannayan syndrome (macrocephaly, hemangiomas and lipomas)

Causes

The cause of lipomas is unknown. There may be genetic involvement as many patients with lipomas come from a family with a history of these tumors (Psora/ Sycosis). Sometimes an injury may trigger growth of post-traumatic lipomas (Causa occasionalis).

Signs and symptoms

It is often difficult to appreciate presence of lipomas until they have grown large enough to become visible and palpable (Psora/ Sycosis). Growth occurs slowly over several years. Their characteristics are-

- Relatively static growth after initial growth period (Psora)
- Does not regress even with starvation (Psora)
- Becomes hard after application of ice (Psora)
- A dome-shaped or egg-shaped lump about 2-10 cm in diameter or even larger (Psora/ Sycosis)
- Feels soft and smooth and easily movable under the skin (Psora)
- May have a rubbery or doughy consistency (Psora/ Sycosis)

- Multiple lipomas may occur in groups of two to hundreds of confluent painless tumors of various sizes over any part of the body
- Lipoma sites are
 - o Usually trunk, back, shoulder, neck, proximal extremities
 - o Rare on hands, feet, face, lower leg, retroperitoneum
 - Usually subcutaneous (liposarcomas are usually deep seated)
 - Unusual sites include oral cavity, pancreas, breast, intestines
 - Less common in internal organs

Most lipomas are symptomless, but some are painful on applying pressure. Tender or painful lipomas are usually angiolipomas, lipoma with increased number of small blood vessels. Painful lipomas are also a feature of adiposis dolorosa or Dercum disease.

Pathophysiology

- Simple lipomas are circumscribed encapsulated soft masses, made up of fat mainly (Psora)
- Occasionally solid components are also present like blood vessels, muscle fibers, fibrous septae, and fat necrosis (Psora/ Sycosis/ Syphilis)
- Histology demonstrates mature adipocytes with no cellular atypia or pleomorphism (Psora)
- Lipomas differ biochemically from normal fat by demonstrating increased levels of lipoprotein lipase and the presence of a large number of precursor cells (Psora/ Sycosis)
- Approximately 60% of solitary cutaneous lipomas display clonal alterations. The most common alteration involves a breakpoint on bands 12q13-15 (Psora)
- Karyotype aberrations also have been noted on arms 6p and 13q. Multiple lipomas do not display these alterations. (Psora)



Types

There may be several types of lipomae based on their morphology, histology, origin, site and number.

According to histology

Conventional lipoma

Common, mature white fat, also called encapsulated subcutaneous lipoma.

Hibernoma

Brown fat instead of the usual white fat

Fibrolipoma

Fat plus fibrous tissue

Angiolipoma

Fat plus a large amount of blood vessels, painful subcutaneous nodules having all other features of a typical lipoma.

Myelolipoma

Fat plus tissue that makes blood cells

Angiolipoleiomyoma

Acquired, solitary, asymptomatic acral nodules, characterized histologically by well-circumscribed subcutaneous tumors composed of smooth muscle cells, blood vessels, connective tissue, and fat.

Pleomorphic lipoma

Like spindle-cell lipomas, occur for the most part on the backs and necks of elderly men and are characterized by floret giant cells with overlapping nuclei.

Spindle-cell lipoma

Asymptomatic, slow-growing subcutaneous tumors that have a predilection for the posterior back, neck, and shoulders of older men.

Based on number

Solitary lipoma

Solitary encapsulated lipoma

Multiple lipomas

Dercum's disease



Based on origin

Neurolipoma

Lipomas associated with nerves.

Naevolipoma

Lipomas associated with naevi.

Adenolipomas

Lipomas associated with eccrine sweat glands.

Based on site

Cerebellar pontine angle and internal auditory canal lipomas

Located at cerebellar pontine angle and internal auditory canal lipomas.

Chondroid lipomas

Deep-seated, firm, yellow tumors that characteristically occur on the legs of women.

Corpus callosum lipoma

A rare congenital brain condition that may or may not present with symptoms. This occurs in the corpus callosum, also known as the calossal commissure, which is a wide, flat bundle of neural fibers beneath the cortex in the human brain.

Intradermal spindle cell lipoma

Distinct in that they most commonly affect women and have a wide distribution, occurring with relatively equal frequency on the head and neck, trunk, and upper and lower extremities.

Neural fibrolipoma

Overgrowths of fibro-fatty tissue along a nerve trunk, which often leads to nerve compression.

Lipomatosis

An autosomal dominant condition in which multiple lipomas are present on the body. Many discrete, encapsulated lipomas form on the trunk and extremities, with relatively few on the head and shoulders.

Familial multiple lipomatosis

Familial multiple lipomatosis (FML) is a rare condition that is characterized by multiple lipomas on the trunk and extremities. As the name suggests, FML is diagnosed when multiple lipomatosis occurs in more than one family member, often over several generations.

Multiple symmetric lipomatosis

Multiple symmetric lipomatosis is a rare condition characterized by the symmetric growth of fatty tumors (lipomas) around the neck, shoulders, upper arms and/or upper trunk. It most often affects men of Mediterranean ancestry between the ages of 30 and 70 who have a history of alcohol abuse.

Familial multiple lipomatosis

Familial multiple lipomatosis (FML) is a hereditary syndrome of multiple encapsulated lipomas which are found on the trunk and extremities, with relative sparing of the head and shoulders.

Diagnosis

- Clinically by finding a soft lump under the skin
- Deep skin biopsy

Differential diagnosis

Madelung's disease

Benign symmetric lipomatosis or multiple symmetric lipomatosis.

Diffuse lipomatosis

Characterized by an early age of onset, usually before the age of 2, diffuse infiltration of muscle by an unencapsulated mass of histologically mature lipocytes and progressive enlargement and extension of the tumor mass. It usually involves a large portion of the trunk or an extremity.

Dercum's disease (adiposis dolorosa)

Seen most often in obese or corpulent menopausal women who develop symmetrical, tender, circumscribed fatty lesions. They are often accompanied by weakness and psychiatric disturbances.

Encephalocraniocutaneous lipomatosis

A rare neurocutaneous syndrome characterized by unilateral porencephalic cysts with cortical atrophy, ipsilateral facial and scalp lesions, ocular abnormalities, cranial asymmetry, and neurologic complications.

Proteus syndrome-multiple lipomas

Epidermal nevi, cerebriform lesions of the plantar surfaces, vascular malformations, macrodactyly, hemihypertrophy, exostoses, and scoliosis.

Bannayan-Riley-Ruvalcaba syndrome

Characterized by multiple subcutaneous lipomas and vascular malformations, lentigines of the penis and vulva, verrucae, and acanthosis nigricans.

Cowden syndrome

Characterized by multiple benign tumor like growths called hematomas and increased risk of developing malignancy.

Multiple endocrine neoplasia type 1

Skin lesions consisting of multiple facial angiofibromas, collagenomas, cafi-an-lait spots, lipomas, confetti-like hypopigmented macules, and multiple gingival papules in addition to the tumors of the parathyroid glands, endocrine pancreas, and anterior pituitary.

Frohlich syndrome

Consists of multiple lipomas, obesity, and sexual infantilism.

Gardner syndrome

Consists of multiple osteomas, fibromas, desmoid tumors, lipomas, fibrosarcomas, epidermal inclusion cysts, and leiomyomas, associated with intestinal polyposis exclusively in the colon and rectum.

Liposarcoma

A cancer that arises in fat cells in deep soft tissue, such as that inside the thigh or in the retroperitoneum.

Complications

- Myxomatous degeneration
- Saponification
- Calcification

- Infection
- Ulceration
- Intussusception
- Intestinal obstruction

Treatment

Most lipomas require no treatment. Most lipomas eventually stop growing and remain indefinitely without causing any problems. To eliminate patient's anxiety for lipoma, it may be removed. If small, the lesions may be ignored, otherwise it may be removed completely by surgery.

Occasionally, lipomas that interfere with the movement of adjacent muscles may require surgical removal.

Lipoma of the lumber region may be associated with spina bifida occulta and removal of the tumor is dangerous without simultaneous exploration of the cauda equina.



Simple surgical excision, squeeze technique (a small incision is made over the lipoma and the fatty tissue is squeezed through the hole) and liposuction may be adopted.

Homoeopathic treatment

Homoeopathic remedies do miracles with disappearance of lipoma if applied as per rules on similia. The most effective remedies are- agar. AM-M. aur. bacls-10. BAR-C. BELL. calc-ar. CALC. Croc. cypr. graph. guare. KALI-BR. LAP-A. med. merc. petr. Phos. PHYT. sil. Spong. Sulph. Thuj. ur-ac.

Short repertory of Lipoma

CHEST - TUMORS - lipoma, false ribs - left, non-malignant carc.

CHEST - TUMORS - lipoma, false ribs bacls-10. carc.

CHEST - TUMORS - Lipoma, lower ribs - left side, non-malignant carc.

CHEST - TUMORS - Lipoma, lower ribs bacls-10. carc.

Clinical - tumors, general - fatty, tumors am-m. bar-c. calc. lap-a.

Clinical - tumors, general - head, tumors – lipoma croc.

Clinical - tumors, general - lipoma, fatty, tumors - liquors, from abuse of Calc.

Clinical - tumors, general - lipoma, fatty, tumors - neck, on Bar-c. Phos.

Clinical - tumors, general - lipoma, fatty, tumors - scalp, on Croc.

Clinical - tumors, general - lipoma, fatty, tumors - scrofulous Calc.

Clinical - tumors, general - lipoma, fatty, tumors agar. Am-m. Bar-c. Bell. calc-ar. Calc. croc. graph. Kali-br. Lap-a. phos. Phyt. Thuj. ur-ac.

Clinical - tumors, general - neck, lipomas, fatty, on Bar-c. calc. Thuj.

Clinical - tumors, general - neck, lipomas, fatty, on - cystic, on both sides brom.

Clinical - tumors, general - neck, lipomas, fatty, on - malignant on calc-p.

EXTERNAL THROAT - WARTS - tough, like lipoma and pointed thuj.

EXTREMITIES - LIPOMA - Thighs bar-c. petr.

EXTREMITIES – LIPOMA petr.

FACE - TUMORS - lipoma, nose - alcohol, from abuse of ars. bell. calc. hep. merc. nux-v. puls. sulph.

FACE - TUMORS - lipoma, nose - contusion, from arn. con. rhus-t.

FACE - TUMORS - lipoma, nose - mercury, from abuse of aur. bell. hep. sulph.

FACE - TUMORS - lipoma, nose - scrofulous aur. bry. calc. hep. lach. merc. phos. puls. sulph.

FACE - TUMORS - lipoma, nose arn. ars. aur. bell. bry. calc. con. hep. lach. merc. nux-v. phos. puls. rhus-t. SULPH.

Fevers - HECTIC, fever - lipoma, on neck Phos.

GENERALITIES - Tumors – Lipoma Bar-c. calc-ar. calc. lap-a. phyt. Thuj. ur-ac.

GENERALITIES - TUMORS, benign — lipoma agar. Am-m. aur. bacls-10. BAR-C. BELL. calc-ar. Calc. carc. croc. cypr. graph. Kali-br. Lap-a. med. phos. Phyt. Thuj. ur-ac.

Growths new, tumours etc – lipoma aur. croc. lap-a. phos. phyt.

HEAD - TUMORS – lipoma croc.

Neck - TUMORS, lipomas, fatty, on neck - cystic, on both sides brom.

Neck - TUMORS, lipomas, fatty, on neck - malignant, on calc-p.

NOSE - LIPOMA - alcohol, from abuse of ars. bell. calc. hep. merc. nux-v. puls. sulph.

NOSE - LIPOMA - contusion, from arn. con. rhus-t.

NOSE - LIPOMA - mercury, from abuse of aur. bell. hep. sulph.

NOSE - LIPOMA - scrofulous aur. bry. calc. hep. lach. merc. phos. puls. sulph.

NOSE – LIPOMA arn. ars. aur. bell. bry. calc. con. hep. lach. merc. nux-v. phos. puls. rhus-t. Sulph.

NOSE – LIPOMA Sulph.

Nose - LIPOMA, nose arn. ars. aur. bell. bry. calc. con. hep. lach. lap-a. merc. nux-v. phos. puls. rhus-t. Sulph.

SKIN - TUMORS – lipoma beryl.

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DIAGNOSTIC EXAMINATION

DIAGNOSTIC

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