

Congress reports

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Report on the international congress 'Lymphedema and Lipedema across borders: comparing experiences'

A Onorato¹, T Galli¹, A Macciò³

¹Linfamed Srl, Udine (Italy)

²PT, Italian Physiotherapy Association, Specialist Network in Lymphology

³Humanitas Medical Care & Gavazzeni (BG) -

LymphoLAB, Savona (Italy)

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On 5 and 6 April 2024, the international congress "Lymphedema and Lipedema across borders: comparing experiences" was held in Trieste (Italy).

The speakers were 26, from 9 countries: Italy, Austria, Germany, Slovenia, Croatia, Serbia, Switzerland, UK, US. The event was divided into three sessions.

First session: Healthcare in Europe: models compared

In the first session, aspects relating to the organization of care for people with lymphedema and lipedema were investigated. Roberto Ferri gave a lecture on the role of the state, business and the third sector in the organization of care. There was afterwards a comparison among the systems of 6 nations, with reports by Christian Ure (Austria), Manuel Cornely (Germany), Tanja Planinšek Rucigaj (Slovenia), Ana Poljicanin (Croatia), Katarina Vojvodic (Serbia) and Tiziana Galli (Italy). Significant differences emerged in the healthcare systems of the different states.

Austria and Germany have a Bismarkian health system, in the first case divided between the federal and the regional level, with the contribution of several social insurance funds, while the second is based only

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Abstract The report of the scientific conference held in Trieste on 5 and 6 April 2024, on topics relating to lymphedema and lipedema, is presented. Aspects relating to what is provided by the health services of 6 European countries were addressed. Various innovative diagnostic and therapeutic approaches were then presented. Finally, aspects relating to chronic diseases were discussed, with regard to new concepts and professional figures. Other particular topics completed the program.

Keywords Lymphedema, Lipedema, Health system, Precision medicine, Elastic compression

on several sickness funds. They ensure that people with lymphedema receive treatment (lymphatic drainage and complex decongestive therapy) on an outpatient or inpatient basis (in dedicated departments or clinics), depending on the type and extent of the disorder, as well as social factors. Reimbursement is guaranteed for two sets of made-to-measure elastic compression garments per year.

Slovenia has a universally accessible, mostly publicly-owned health care system based on statutory, employment-based social health insurance. A voluntary complementary health insurance plays cover co-payments levied on services within the benefits package. Most of the treatments for lymphedema are performed on an outpatient or inpatient basis at the Dermatology Clinic in Ljubljana. Two sets of elastic compression garments are ensured per year.

Croatian health system is centralized, mandatory and with most health care providers remaining under public ownership. Assistance for patients with lymphedema is continually improving, with an increase in knowledge of its diagnostic and therapeutic aspects, through courses and association activities.

The health system of Serbia is based on compulsory health insurance, with contributions as main source of

financing. The most complex cases of lymphedema are referred to hospitals of the major cities, for a third level therapy. In most cases the treatments take place in a private setting and elastic compression garments are not reimbursed.

In Italy the National Health Service (SSN) ensures universal access to the equitable provision of health care to all citizens on equal terms. Currently, both outpatient and inpatient treatment regimens are possible for people with lymphedema, but with important differences from region to region. The supply of elastic compression garments is ensured and there is the possibility of having reconstructive operations with total expense coverage by the SSN.

In all six countries, people with lipedema receive assistance exclusively or almost exclusively in the private regime.

The second part of the session was opened by Sandro Michelinini's lecture on motivations and objectives of associations for lymphedema and lipedema. His conclusions were that collaboration between scientific and patients' associations has become an essential element in sharing pathways leading to the best management of chronic and disabling diseases such as lymphedema and lipedema.

Then video presentations of Heather Ferguson for Lymphedema Treatment Act (US), Christine Moffatt for International Lymphedema Framework (UK), Valeria Giordano for Lipedema Italia Onlus and Lipedema World Association were projected. The history, aims and strategies of the different associations were presented.

Stefano Camurri Piloni described the activities of the largest non-profit organization in the world: Lions International. In particular he spoke about the history, the objectives of the association and the global health causes it deals with: visual impairment, diabetes, childhood cancer. He concluded with some hypotheses of local collaboration in favor of people with lymphedema and lipedema.

Second session: New approaches to diagnosis and therapy of Lymphedema and Lipedema

The second session of the congress concerned innovative aspects of diagnosis and therapy of lymphedema and lipedema. It was started by Alberto Macciò, who gave a historical perspective starting from the origins of lymphology. Francesco Boccardo presented the new methods of visualization of lymphatics, also showing several application examples: starting from the evolution of lymphoscintigraphy, he showed lymphangioMRI, fluoroscopy with ICG, lymphography and the latest photoacoustic tomography. Alberto Onorato discussed the topic of the application of ultrasound to the study of lymphedematous tissues, also giving information on

sonoelastography. Luigi Maria Galantucci spoke about 3D scanning methods and techniques applied to the study of the human body. His conclusions were that the whole-body three-dimensional surface imaging (3DSI) offers the possibility to monitor morphologic changes in multiple areas without the need to individually scan every anatomical region of interest.

Tatiana Petrova discussed the possibilities of a renewal of lymphatics, giving directions for possible future therapies for lymphedema: optimized use of lymphatic growth factor VEGF-C, nutritional/dietary intervention to reactivate VEGF-C/VEGFR3 and mTOR pathway, developing of mechanical stimulation methods to regrow lymphatic valves, administration of small molecules mimicking mechanosensing.

Lucia Mazzolai spoke about a device currently undergoing clinical trials in patients with lymphedema, which implements a lymphatic active bypass, via a subcutaneous pump and catheters. The system is activated by magnetic coupling, does not require connection to veins or lymphatic vessels and is implanted in outpatient setting. The session continued with the report by Alessandro Busetto, who explained how and when to use the Biobridge. It is an implantable scaffold, consisting of aligned collagen fibrils. It works by capillarity and stimulates the regeneration of lymphatic vessels. Corrado Cesare Campisi clarified the indications and operational methods of debulking interventions for deforming lymphedema and lipedema. Roberto Cannataro indicated the nutritional approach to the two pathologies.

Nandu Goswami gave a lecture on the dynamics of body fluids in weightlessness. He explained that staying in space has several negative effects. In a first phase there is a redistribution of fluids to the upper part of the body, with various effects including visual impairment. Subsequently, a loss of 20% of the plasma volume, a muscular hypotrophy which also affects the myocardium, and a significant loss of bone mass are highlighted. These modifications cause various disturbances when astronauts return to earth.

Third session: New approaches to chronic pathologies: concepts, experiences

In the third session, new approaches to chronic pathologies were discussed. Dario Boschiero clarified the effects of chronic stress on the functions and systems of the human body. Nerina Fabbro described meaning and value of therapeutic alliance, the process in which patient and therapist share objectives, with definition of mutual tasks. Eligio Linoci spoke about the role of expert patient in the treatment process. Alberto Onorato presented Precision Medicine and how to apply it to the process of diagnosis and treatment of lymphological pathologies. He highlighted the importance of having many standardized data, to be treated

by machine learning technologies, in order to find clusters of patients with same pathology but different features. The aim is to find and apply the best fitted treatment for each group of patients. Finally Nicoletta Suter reported on the characteristics of Narrative Medicine and the possibilities of its application.

A lecture given by Manuel Cornely presented facts and fakes about lipedema. He highlighted various concepts: lipedema still needs a proper definition; liposuction, if correctly performed, does not damage the lymphatic vessels and is not followed by recurrence; lipedema, obesity and lymphedema can be simultaneously present in the same person, but they are distinct pathologies; a term that best describes the pathology is “lipohyperplasia dolorosa” (LiDo).

The event aroused great appreciation among the speakers and the public for the innovative topics covered and represented the starting point for scientific collaborations among many of the participating professionals.

List of Speakers

Francesco Boccardo (Italy), Dario Boschiero (Italy), Alessandro Busetto (Italy), Roberto Cannataro (Italy), Corrado Cesare Campisi (Italy), Stefano Camurri Piloni (Italy), Manuel Cornely (Germany), Nerina Fabbro (Italy), Heather Ferguson (US), Roberto Ferri (Italy), Luigi Maria Galantucci (Italy), Tiziana Galli (Italy), Valeria Giordano (Italy), Nandu Goswami (Austria), Eligio Linoci (Italy), Alberto Macciò (Italy), Lucia Mazzolai (Switzerland), Sandro Michelini (Italy), Christine Moffatt (UK), Alberto Onorato (Italy), Tatiana Petrova (Switzerland), Tanja Planinsek Rucigaj (Slovenia), Ana Poljicanin (Croatia), Nicoletta Suter (Italy), Christian Ure (Austria), Katarina Vojvodic (Serbia).



From left, kneeling Roberto Cannataro, Alessandro Busetto, standing Manuel Cornely, Christian Ure, Alberto Macciò, Alberto Onorato, Francesco Boccardo, Tiziana Galli, Luigi Maria Galantucci, Tatiana Petrova, Corrado Cesare Campisi.