

TRIACTIVE™ System: a Three-Fold Action Against Cellulite.

Preliminary Results

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The equipment was used on 4 patients (women ages 26, 35, 38, 42) affected by fibro-sclerotic-oedematous lipodistrophy in various stages for a maximum of 5 sessions, on 1 patient (man of 40, 3 sessions) with an abdominal relaxation disorder associated with localised adiposity to a slight extent (following a significant weight loss), and on 1 patient (a non-Mediterranean woman of 34, 3 sessions) with a relaxation in the tricipital region of the arms.

In order to assess to a maximum the response of the tissues to the laser stimulation, the vacuum rhythmicity was set at the maximum frequency and the minimum cycle ratio. No stimulation maneuvers were carried out on the lymph nodes in the upper part of the body to assess the maximum draining component linked to the laser stimulation. This reduced to a minimum the vacuum component and the “coldness” in the one session.

For all the subjects the first session was described as “irritating” on first contact of the handpiece over the entire surface to be treated. This irritation was linked to the “Cryo” component. During the following sessions this first contact was described as more “pleasant,” and eventually “enjoyable”.

The patients suffering from “cellulite” were treated in the same manner with regard to time and tracings, and the rhythmicity parameters. In all the cases the elimination of fluids was immediate and parallel to a subjective sensation of lightness in the lower limbs. The patient with the worst “cellulite” (3rd – 4th stage with symptoms of the venous-lymphatic type) noted

from the first session that her shoes had become too “large” and after the fourth session, after four days, she noticed a reduction in the “holes” in her skin.

From an objective point of view the skin of the body areas of all patients treated underwent an immediate change, both from the tactile point of view (defined by the patients themselves as “softer and more velvety”) and the appearance, which seemed more vascularised.

The patients underwent 4 to 6 sessions. The 35 year-old patient observed an “imposing” improvement of her “cellulite” (2nd stage) after the third session, and this was apparent the day after the session itself.

The patient with abdominal problems (3 sessions) had an increase in the tonicity of the tissues after the first session, and after the third, there was a net reduction in the volume of the localised adiposity and the elimination of fluids. The patient affected by skin relaxation in the tricipital region of the arms had excellent results after 3 sessions. Objectively a net improvement was observed in the skin tonicity and after the second session the patient said: “My arms feel thinner and tighter”.

In relation to the “facial” treatment with the “Face” handpiece, the three patients treated (ages: 34, 48, 57) underwent 3, 3 and 2 treatments respectively. Also for the face the same tracings were used, as well as the same times and the same rhythmicity. From the first session the subjective sensation was described as excellent and better than the “other technique” (all three subjects had previously undergone mechanical stimulation treatments of the tissues using other techniques). Objectively the tissular response was excellent and progressive,

exponentially superior after each session. The 34 year-old patient also had a marked reduction of the expression wrinkles; the 57 year-old patient only underwent 2 sessions. It would be interesting to complete the treatment cycle for the 57-year-old to evaluate the tissular modification photographically (a photo was taken before each of the two sessions). The 48 year-old patient is particularly interesting, seeing that her “major problem” was a deep line in her forehead. Given the pleasant sensation of the treatment, the general tissular response, and the attenuation of the line itself, she has managed (after only 3 sessions) to consider her initial problem as no longer important. She is accepting it much better and expressing the hope of being able to continue the treatment as

she finds the technique extremely valid.

In general, despite the limited number of sessions carried out, and the uniformity of the treatment in relation to TIME, TRACINGS, RHYTHMICITY, the method can be defined as more than valid. The “creation” of well-defined protocols for exploiting to a maximum the Vacuum component makes it possible to structure a “uniform” after-sales training for using the device. In order to exploit to a maximum the vacuum effect it is recommended increasing the Hertz to “12” and the cycle ration with an excursion of “10% to 90%”.



Fig.1a: Gynoid woman before treatment.

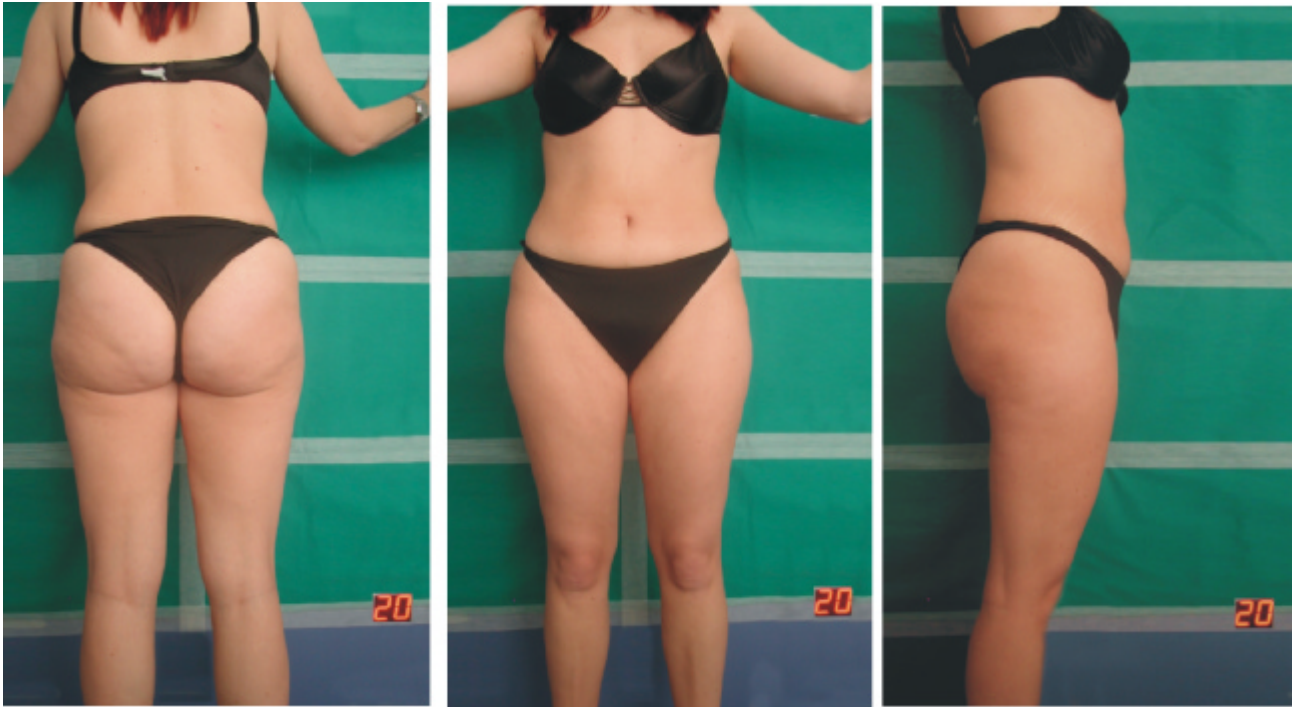


Fig.1b: Gynoid woman after 20 sessions with Triactive system plus protein-dissociated diet.



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