

A Comparison Study: Triactive With and Without the 800 nm Diode Laser Component

Sarah M. Boyce, MD

Background: Triactive uses new technology to treat cellulite. It combines rhythmic suction massage, low-level 800-nm laser irradiation, and superficial cooling. Because cellulite is a frustrating and difficult problem for patients and cosmetic surgeons, we wanted to compare 2 methods of treatment so that we could recommend the best possible treatment to our patients. We compared Triactive with and without the laser component on 20 patients.

Methods: Twenty patients were enrolled, all of whom had some degree of cellulite on the posterior or lateral thighs or lower buttocks. For each patient, 1 leg was treated with all three components of Triactive, and 1 with only the suction and superficial cooling. Each patient was treated a total of 14 times twice weekly, with both treatments being performed at each visit. Patients were evaluated on a biweekly basis. The evaluation included photographs, physician assessments, patient questionnaires, and an evaluation by a temperature and elasticity probe on the treated area.

Results: Although all patients saw some improvement with both modalities per patient questionnaire, the laser-treated leg showed slightly greater improvement than the non-laser-treated leg in 15 of 20 patients. Our temperature and elasticity measurements were in concordance with patient evaluations: The improvement in blood flow as well as elasticity were increased in the legs treated with all 3 Triactive components.

Conclusion: We feel that both modalities can offer some benefit to patients who are bothered by their cellulite. However, the added benefit of the 800-nm laser component makes a significant difference for patients.



Intraoperative Treatment of Cellulite With Liposuction of the Thighs

Sarah M. Boyce, MD

Objective: Cellulite remains one of the most frustrating cosmetic issues for patients and physicians alike. Although liposuction can occasionally produce an improvement in cellulite, at best we can offer only a possible modest improvement. We feel that, because of the nature of the liposuction procedure, an additional intraoperative treatment could help boost improvement for patients. We used a device that combines rhythmic suction massage, low-level 800-Nm laser irradiation, and superficial cooling during and after inner and outer thigh liposuction to enhance the effect of liposuction.

Methods: Twenty female patients were enrolled who desired inner and/or outer thigh liposuction. The patients underwent tumescent liposuction according to our standard of practice. Immediately following liposuction, Triactive (DEKA Mela, Florence, Italy) was performed for 30 minutes on one thigh but not the other. A sterile sleeve was used over the head of the device for the initial treatment. The patients were then treated 9 more times at biweekly intervals and evaluated at each visit, and also evaluated 1 month after all treatments were complete. The evaluation included photographs, physician assessments, patient questionnaires, and an evaluation by a temperature and elasticity probe on the treated area. After the study, the patients' untreated legs were then treated.

Results: Out of 18 patients who completed all treatments, 40% of patients saw mild to moderate improvement of cellulite, and 35% saw marked improvement per physician assessment. Eighty percent of patients saw improvement per patient questionnaire. The temperature and elasticity probe measurements showed that 78% of patients who were treated showed an increase in circulation and elasticity of the treated area.

Conclusions: Although more studies are needed, our data have shown that intraoperative Triactive is a valuable tool in the armamentarium for treatment of cellulite. We feel that timing of treatment is key to achieve a good result for the patient and that maximum results can be achieved by beginning the treatment immediately after liposuction.