

***Endermologie® & the LPG® Technique with the Cellu-M6® Device :  
My Clinical Practice***

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*Endermologie®* was originally introduced into widespread use in the US in 1996. Ersek, Fodor and others, including myself reported early success with the use of the device in the US. The original emphasis was on the reduction of fat by its effects on fat metabolism in addition to the subjective reduction of cellulite seen by clinicians. At that time, other proposed but unsubstantiated mechanisms included increased lymphatic and blood flow. After a series of research verifying these claims initial skepticism gave way to general acceptance by a significant portion of plastic surgeons in the US. Further research demonstrated layering of new collagen at the junction between the deep surface of the subcutaneous fat and the muscle fascia. Thickening and tightening of the skin is subjectively seen in patients. Over 14,000 machines are in use worldwide and 1200 machines in the US since FDA clearance for marketing in April 1998. Benefits have been stated as an alternative to liposuction, a pre- and post-operative adjunctive therapy to lipoplasty and as an interoperative aid to dispersing the tumescent wetting solution. In 1997 my clinic obtained an *LPG Cellu-M6® (ES1)* device. We now have almost 4 years experience in several hundred patients. Over 75% of the patients choose the LPG technique for their therapy. In the first 100 patients treated with *Endermologie®* who did not present for body contouring by liposuction 50 were highly satisfied, 30 were somewhat satisfied and 20 were dissatisfied. Five to ten percent of these patients may choose to undergo liposuction after the treatment, even if they are satisfied. All patients are highly motivated initially and experience increased redness and a sense of relaxation after treatment and most report increased thirst. About 20% of the patients see results within 2-3 treatments, usually due to early edema; about ½ see results by 10-12 treatments and the rest later in the course of 2 weekly treatments for 8 weeks. Patients who do not experience results within 5-7 treatments (~30%) become impatient and are given extra education about the phenomenon of late response. We offer post-operative treatment to all of our liposuction patients and about 30% enter a series of twice weekly treatments for 4-6 weeks starting two weeks post-operatively. Treatments are begun at level 1-2 in the surgical sites and as tolerated in other areas. It is our subjective assessment that the irregularities of edema, induration and contours are improved by the treatments, but no blinded, unilateral trials have been conducted to date in the post-operative setting. Almost 100% of these patients consider the treatment beneficial. We offer pre-operative treatment to all patients, but few choose to wait for eight weeks of therapy before undergoing liposuction. The few that do, are either not suitable candidates for immediate liposuction due to an overweight condition (generally >25 lbs), or prefer to try something less drastic to avoid surgery altogether. We cannot find a clear advantage to pre-operative therapy, however, we have no blinded clinical trials to report. To improve our results we have been looking to more advanced techniques offered by the CelluM6. As suggested by Shack in his laboratory studies, in our experience the *Endermologie®* technique is highly operator dependent and successful in over 80% of patients as an alternative to and after liposuction. Excellent technique and psychological motivation by the therapist improves the results and active participation and cooperation by the patient is essential, much like in dieting and exercise.