

Multipolar RF Body Slimming Device - Clinical Architecture & Performance
Reference Manual

CLINICAL ARCHITECTURE & PERFORMANCE REFERENCE MANUAL:
MULTIPOLAR RF BODY SLIMMING DEVICE

EXECUTIVE SUMMARY

The Multipolar RF Body Slimming Device represents a paradigm shift in non-invasive adipose tissue remodeling. Unlike legacy bipolar or monopolar configurations that risk epidermal hotspots and unpredictable current pathways, the multipolar architecture employs six discrete energy vectors that self-calibrate to dermal impedance. This topology generates a homogeneous volumetric heating zone (40–43°C) at the adipose-hypodermal interface while preserving the cutaneous layer via real-time impedance feedback. The system is indicated for circumferential reduction, cellulite textural improvement, and temporary laxity correction across Fitzpatrick skin types I–V.



CLINICAL ARCHITECTURE & DESIGN

Generator Topology: The RF power stage utilizes a class-E resonant converter operating at $1.0 \text{ MHz} \pm 5\%$, delivering 150 W peak envelope power. Six active electrodes are arranged in a hexagonal planar array with alternating phase-shifted carriers ($0^\circ, 60^\circ, 120^\circ, 180^\circ, 240^\circ, 300^\circ$). This eliminates neutral electrode requirements and prevents preferential current steering toward low-impedance paths (e.g., bone or fluid accumulations).

Control Logic: A proprietary adaptive impedance matching network (range: 50–250 Ω) adjusts phase duration (1–8 ms per electrode pair) 100 times per second. The system aborts energy delivery if dermal temperature exceeds 43.5°C or if inter-electrode impedance variance surpasses $\pm 15\%$.

KEY INDICATIONS & CAPABILITIES

- Primary: Abdominal, flank, and subgluteal adipose reduction (≥ 2 cm circumferential loss after 6 sessions, $p < 0.01$ in clinical study $n=120$).
- Secondary: Improvement of Grade I–II cellulite (Nurnberger-Muller scale) via septal fibrous band relaxation.
- Off-label (CE cleared, not FDA): Bra fat pad contouring and axillary adipose tissue.
- Contraindications: Active implants (pacemakers, cochlear devices), pregnancy, malignancy near treatment site, hemorrhagic diathesis.

COMPLIANCE & STANDARDS

- MDD 93/42/EEC (Class IIa) – CE 0482
- IEC 60601-2-2:2017 (High-frequency surgical equipment safety)
- IEC 60601-1-11 (Home healthcare environment – for clinic use only despite rating)
- FCC Part 18 (ISM equipment)
- RoHS 3 (Directive 2015/863)

TECHNICAL SPECIFICATIONS

Parameter	Specification
RF Frequency	1.0 MHz \pm 0.05 MHz (Class E resonant)
Output Power	150 W max (6-electrode time-sliced)
Electrode Geometry	Hexagonal, 12 mm diameter, 20 mm center-to-center spacing
Impedance Range	50 Ω – 250 Ω (adaptive matching)
Temperature Monitoring	2x thermistors per electrode + IR surface array (accuracy \pm 0.3°C)
Cooling System	Sapphire contact tip (5 ° C) + closed-loop water circulation (2.5 L/min) + variable fan (32 dBA)
User Interface	10.1" capacitive touch, 1280 \times 800, glove-compatible
Dimensions (W \times D \times H)	38 cm \times 45 cm \times 105 cm (cart configuration)
Weight	21.5 kg (net), 28 kg with consumables cart
Power Supply	100 – 240 VAC, 50/60 Hz, 750 VA (auto-ranging)

CLINICAL PROTOCOLS

Consultation & Marking: Circumferential measurements at umbilicus, waist, and hip (supine, same tape tension daily). Photographic documentation (Canon EOS with cross-polarized lighting). Fitzpatrick skin typing mandatory.

Treatment Parameters (Handpiece stationary for 5 min per grid):

- Grid size: 12 × 12 cm (overlapping 1 cm).
- Energy fluence equivalent: 45–65 J/cm³ (volumetric).
- Target temperature rise: +6 °C above baseline subdermal (verified by IR thermal camera at minute 3).
- Duty cycle: 20 min ON / 10 min OFF (thermal relaxation).
- Max contiguous treatment area: 500 cm² per session.

Post-Treatment: Lymphatic massage (5 min, 40 mmHg pressure). Hydration >2L water for 48h. Avoid NSAIDs 24h pre/post. Expected shedding of adipocyte triglycerides via lymphatic system: days 3–14.

Follow-up: 3 sessions, 2 weeks apart, then maintenance q3 months. 12-week endpoint compliance: 89% of patients maintain ≥70% of initial reduction.



DISCLAIMER: For professional use only by licensed aesthetic physicians or supervised registered nurses. Results vary with adherence to hydration and compressive garment protocols. This document supersedes all prior revisions.