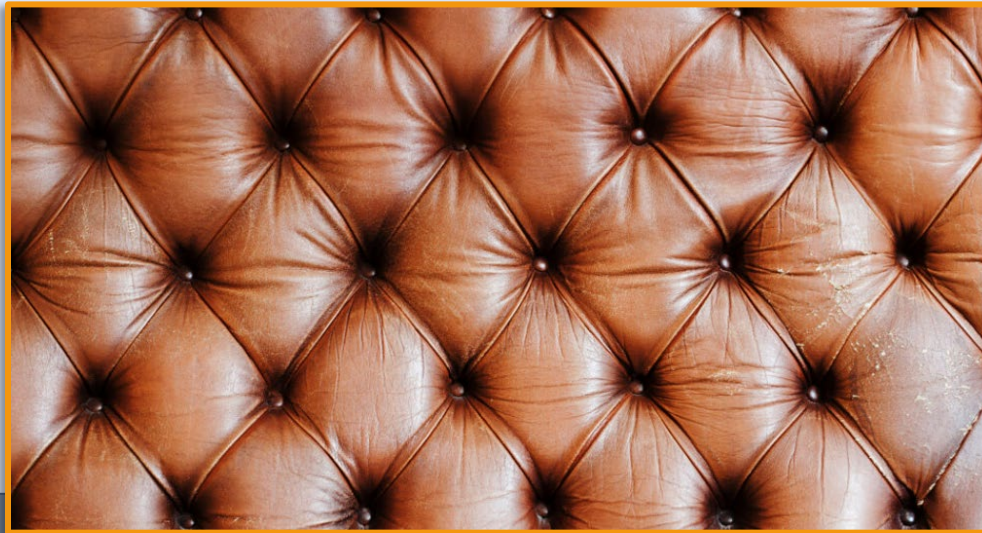


Pathophysiology of Cellulite

- Pathophysiology multifactorial and unclear¹
- Environmental, hormonal, and genetic factors¹⁻³
 - Cause structural, inflammatory, morphologic, and biochemical alterations in subcutaneous tissue³
 - Seen in areas where adipose tissue deposited in largest amounts in women
 - Accelerates during adolescence, pregnancy, menopausal age



Pathophysiology of Cellulite (continued)



- Although subcutaneous fat is a component of cellulite, not all subcutaneous fat is cellulite¹
- Diffuse rippling represents increased adiposity and/or increased skin laxity
 - May benefit from lipolytic and skin-tightening modalities²
 - Laxity frequently occurs in areas where large amount of adipose tissue is covered by relatively thin layer of skin³
 - Buttocks, thighs, region above knee, upper arms
- Patients often incorrectly describe any excess bulge of adipose tissue or area with tissue laxity as cellulite⁴

1. Callaghan DJ III et al. *Adv Cosmet Surg*. 2018;1(1):45-53. 2. Christman MP et al. *J Drugs Dermatol*. 2017;16(1):58-61.

3. Kaminer MS et al. *Dermatol Surg*. 2019;45:S12-S21. 4. Green JB et al. *Semin Cutan Med Surg*. 2015;34:140-143.