

THE BODY ELECTRIC
WILL MICROCURRENTS
REPLACE CONVENTIONAL
EXERCISE? ABAËTÉ SWIMSUIT,
MANOLO BLAHNIK SANDALS.
PHOTOGRAPHED BY PATRICK
DEMARCHELIER. FASHION
EDITOR: TONNE GOODMAN.

inch by inch

Marina Rust discovers an arm-toning, waist-cinching, thigh-whittling machine that promises miracles in minutes.

Really? A machine that exercises for you?
“I’m serious,” said a friend. “It burns fat. Instantly. In 40 minutes I lost almost *two* inches off my waist. People refuse to believe me. ‘If you’ve lost anything, it’s water,’ they tell me. I’m beginning to feel like the boy who cried wolf.”

A few people thought they knew it. “That machine’s been around forever,” said a 70-year-old man.

“Is it like those wide jiggly vibrating belts on a thirties cruise ship?” asked a younger friend who’s seen lots of old movies. (It’s not.)

A cousin seemed to have heard of a similar machine. “That electric thing from England? The spa at the club bought one last year. The members were furious.”

But did they like the results?

“I don’t know anyone who’s tried it. It couldn’t possibly work.”

I decide to investigate. I mean, even in “The Boy Who Cried Wolf,” isn’t there eventually a wolf?

“We call it the Body Machine,” says Mary Schook, proprietor of Beauty by Mary Schook on East Twenty-third Street in Manhattan. Marketed to spas by the Melbourne based company, **BodyOlogy International**, the machine officially known as the **Sculptology** employs technology originally developed in the nineties as physical therapy for multiple-sclerosis patients and those suffering from muscle atrophy. “It operates on a very specific microcurrent,” explains Schook, who first heard about the machine as a way to tighten and firm skin. “This microcurrent bypasses the usual brain-nerve pathways, stimulating the nerve, and causing muscles to contract. It was meant to make the muscles strengthen and reengage, but the patients noticed a side effect: They were losing inches.” Model turned makeup artist turned mad scientist, Schook helped pioneer lash extensions, as well as an electrical antiaging facial treatment called the Platinum Lift. Her salon acts as something of a laboratory for the newest beauty advances. I trust her implicitly with all things unlikely.

I fill out a release form attesting to my lack of a pacemaker, diabetes, or serious varicose condition (those with epilepsy or electronic or metal implants are advised not to use this



therapy), and meet Fiona, the technician who operates the machine. She ushers me into a cream-curtained room with a large padded table in the center, similar to a doctor’s office. Beside it, about twice the size of a bread box, is a metal console fitted with dials and wires.

“What shall we do today?” Fiona asks with a Scottish lilt. “Abs, hips, thighs?” Fiona is wearing a black sleeveless top; her arms are trim and toned. (“Yes, I did several sessions on them,” she explains later.)

I decide on abs. After I’ve stripped down to my underwear, Fiona takes “before” photos and measurements so that we can gauge my progress, and she applies pads moistened with water to my waist, my abdomen, and the top of my hips. She fastens to each pad one of sixteen clips, each attached to a wire running back to the console. She directs me to lie down flat, then tells me what I might expect—a contraction of the muscle—and instructs me on breathing technique. “Breathe in between contractions, out with the contraction. Ready?” As I’ll ever be. *fitness >628*

Hair, Jimmy Paul for Bumble and Bumble; makeup, Fulvia Farolfi for Chanel; set design, Piers Hammer; produced on location by HGFProductions.com. Details, see in This Issue.

The contractions start as short zaps, later increasing in intensity and duration.

I gaze up at the chandelier and focus on breathing. Fiona warns me each time she ups the current. The first session is just 30 minutes, "the equivalent," she promises, "of more than 400 sit-ups."

Is it painful? Not painful, exactly, but certainly not comfortable. In the year she has been offering the treatment, Schook says, only one client stopped returning because of discomfort. Still, I'd be lying if I said I wasn't relieved when those 30 minutes were over.

Of course, I'm relieved when any exercise is over. Fiona measures again. I've lost an inch off my waist, and 1½ inches off my hips. Fiona adds that I may be swollen right now and could be down another fraction of an inch tomorrow.

As with most exercise, afterward I feel good. Really good. "It's the endorphins," explains Fiona. (I should warn that later that evening, a newly zapped person might want to jump their significant other—or whoever—partly from the endorphins, partly to show off their trim new form.)

A week later, I return for more abs, followed by the inner thigh. As I arrive, a young man is leaving. (Yes, says Fiona, she sees several male clients, each there in hopes of achieving a six-pack.) Fiona measures. That inch has stayed off my waist, as has 1½ off my hips. This time, I do 40 minutes. Immediately, I feel increased core strength. When Fiona measures again, my thighs are down ¼ of an inch, and I've lost another ¼ off my abs. My muscles feel stronger, more engaged.

The cost? Not cheap: \$180 per 40-minute session. How long do the results last? "You're burning fat," says Schook. "The inches stay off at the same rate they would if they were the result of traditional exercise. If you have cheesecake every day and do no cardio, they'll come back." For a month, I get my hips and abs zapped weekly. I watch my diet. The inches stay off.

I send four friends, and each one loses approximately the same amount I did during their first session. One male friend calls it "the church of Mary." His wife now also makes pilgrimages. "Find me a Mary in London!" says another convert, who lives there.

The following month I don't visit Mary's church, nor do I exercise. (I'd like to say this was an effort toward a controlled experiment, but really it was just laziness.) The inches come back. I book another appointment, and 40 minutes later, nearly two inches are again gone from my hips.

I E-mail my editor about the machine and my results. She is wary and would like an expert opinion as to whether any of this is safe—or even possible. She suggests I call Eric Small, M.D., assistant clinical professor of pediatrics, orthopedics, and rehabilitation medicine at Mount Sinai hospital in New York.

Small is familiar with cable devices. "In rehabilitation, we often use currents—a TENS unit," he explains. "TENS is 'transcutaneous electrical nerve stimulation.' I use it postsurgery for knee or shoulder pain. It's the same concept. It counteracts muscle atrophy."

Have any of your patients noticed inch loss, I ask? I mean, like, near their knee?

There is a silence. I sense disapproval. Small, forgiving my shallowness, then warns, "With any device, you have to be leery about side effects. You can burn out the muscle by contracting it too much."

Understood. But do you know why, with this contraction, inch loss is immediate, as opposed to regular exercise, where you don't see results until perhaps the next week, or even month? I ask in a follow-up E-mail. "Inches may disappear," he writes back, "but this is likely to be temporary—fifteen to 20 minutes, perhaps a day."

Tommy Boone, Ph.D., M.P.H.—cofounder of the American Society of Exercise Physiologists and a department chair at the College of St. Scholastica in Duluth, Minnesota—doesn't exactly give me a ringing endorsement, either, though he has experience with similar devices. "I have analyzed some previous equipment," says Boone, whose tenure as an exercise physiologist spans the past 35 years. "It's true that that equipment produced an intense muscle contraction," he says, though

"I can't imagine that stimulation by itself is enough to modify the subcutaneous fat. . . . Not to exercise at all and to stimulate the muscle to burn fat is very hard for me to believe. Exercising regularly and cutting back on calories—that's the only logical way to affect muscle-to-fat ratio." This

said, Boone does not believe that it would be unsafe, "if we're looking at contact points around the upper arms and waist." (A microcurrent near the heart—or, especially, a pacemaker—however, would be a problem, he says.) And though I can't quite convince him of the two-inch loss my friends and I experienced, he says, rather kindly, "If someone believes they are benefiting, I'd almost not want to take that away from them."

I know that I am not imagining this.

"Did your husband notice the change?" asked Fiona.

Yeah. He put his hand on my middle and worried about a "weird indentation."

"Your waist?" Exactly.

Although he acknowledges my newly whittled middle, my husband does remain dubious about the means. He shakes his head: "No pain, no gain."

Actually, the process is not entirely comfortable, I explain. Especially the thighs.

"You know what I mean," he says. "In law, this is what we'd call a 'moral hazard.'"

To some extent, he's right. Knowing that a teeny waist can be quickly attained, one might very possibly make it to the gym less frequently (or never again). But instead of hazard, I see the machine as motivator, a perfect way to jump-start an exercise program. After feeling and seeing my core strengthen, I find traditional crunches become easier and more satisfying. Certainly, for general health, I still visit my building's gym to do the StairMaster, the weight machines, and a set of old-fashioned crunches. While my goal is to maintain my results from Mary's miracle machine, I just can't help spreading the word to my neighbors.

I usually wait until after their trainer leaves. □ *fitness* >630

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abs zapped weekly.
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