



Low Level Laser Therapy & depression clinical research

Acupunct Med. 2005 Sep;23(3):103-11.

Laser acupuncture for mild to moderate depression in a primary care setting--a randomised controlled trial.

Quah-Smith JI, Tang WM, Russell J.
Monash University, Victoria, Australia. jiqs@tpq.com.au

OBJECTIVE: Depression is a major public health problem. There is some evidence supporting the effectiveness of needle acupuncture in its treatment. Laser stimulation, regarded here as a modality of acupuncture, is non-invasive and therefore free of infection risk; and it is acceptable to patients with needle phobia. The technique is relatively easily learned by community-based general practitioners. It is also amenable to sham control and therefore double-blinding in clinical trials. A double-blind randomised controlled trial was conducted to test the efficacy of low level laser acupuncture in mild to moderate depression.

METHODS: Thirty patients with depression were randomised to receive either active or inactive laser treatment. The laser unit could be switched to one of two settings. One switch position delivered active laser acupuncture and the other was inactive (sham). In the active mode, 0.5J was delivered to each of six to eight individually tailored acupuncture sites per visit. All patients were treated twice weekly for four weeks then weekly for a further four weeks. The patients and the acupuncturist were both blinded to conditions. Outcome was assessed using the Beck Depression Inventory at baseline, weeks four and eight during treatment, and at 4 and 12 weeks following the treatment.

RESULTS: At the end of the treatment period, Beck Depression Inventory scores fell from baseline by 16.1 points in the intervention group and by 6.8 points in the sham control group ($P < 0.001$). The difference showed only a trend four weeks later, but was again significant after 12 weeks ($P = 0.007$). Laser acupuncture was well tolerated with transient fatigue as the most common adverse effect.

CONCLUSION: Laser acupuncture may be worth further investigation as a treatment for mild to moderate depression in primary care.

Lasers Med Sci. 2004;19(2):100-4.

Use of low-energy laser as adjunct treatment of alcohol addiction.

Zalewska-Kaszubska J, Obzejta D.

Department of Pharmacodynamics, Medical University, Muszynskiego 1, 90-151 Lodz, Poland. jzalewska@pharm.am.lodz.pl

Auricular acupuncture is a medical method that has been used in the treatment of alcohol addiction. In our study we decided to intensify this method by additional biostimulation of the whole organism. The aim of this study was the therapy of patients with alcohol dependence syndrome. Fifty-three alcoholics were treated with two types of laser stimulation in four sessions. Each session consisted of 20 consecutive daily helium-neon laser neck biostimulations and 10 auricular acupuncture treatments with argon laser (every 2nd day). The Beck Depression Inventory-Fast Screen (BDI-FS) was used to assess their frame of mind before the session and after 2 months of treatment. Moreover, beta-endorphin plasma concentration was estimated five times using the radioimmunoassay (RIA) method. Improvement in BDI-FS and increase in, betaendorphin level were observed. These results suggest that laser therapy can be useful as an adjunct treatment for alcoholism.

Qlaser Wellness Solutions
Michael F. Lagana, President
708 Route 35 N., Neptune, NJ 07753
732 866-4226
Michael@Qlaserws.com