



Low Level Laser Therapy & Diabetes Retinopathy testimonials followed by clinical research

Diabetes

Robert Rumph, Given

I have been having a terrible time controlling my diabetes. I was using the cold laser (low level laser) treatment in front (going through the stomach) under the first rib and was getting nothing done- no results and couldn't figure out what might be wrong with the instrument. I went to Gillette to see my doctor and she said the spleen is in the front; to get to the pancreas; you need to laser on the back (left side) below the first rib.

I've been using the laser on my pancreas now for a week. When I started, my blood sugar was 254; she said I'll let you go for another 3 or 4 months to see if you can get your blood sugar down. But if you can't you'll have to go on insulin.

We came home and I started using the laser on my back and my blood pressure started dropping about 20 points everyday! It went from 245 to 220 down to 210 then to 180. On January 1 it was 184 then dropped to 161 then again to 153 then to 136 and after that to 133. Today it was at 96 on one machine and 121 on the other. That's down from 254 in a week's time!

Pat Weldy

22 units per day was the usual insulin usage. In two treatments using LLLT on the pancreas and an Acupressure points on the hand, she has Reduced Insulin requirements to 2 units per day. She continues to use the laser once per week because it helps her feel so good.

DIABETES MELLITUS - PROCEDURES

Diabetes mellitus was successfully treated with the use of low-energy laser in 60 clinical cases, with children from the age of 3.5 years till 15 years of age, adolescents and adults with a maximal age of 76 years. The average age of the patients was 45.5 years. Control groups of patients consisted of 3 patients for each age group.

Helium-Neon (630 nm) and infrared laser (850 - 960 nm) low-energy quantum beams were applied simultaneously (separately on different zones or in combination on the same areas) or separately at different times on different parts of the body. LLLT was performed transorganically, intravenously, trans-cutaneously in reflex zones and upon acupuncture points (laser-puncture) with the help of Russian- and Lithuanian-made quantum therapy apparatuses "LR 2000", "MILTA", and "AZOR". MILTA is manufactured in Russia by the Human Information Technologies Design and Production State Enterprise MILTA "PKP GIT", which is the conversion filial of the world-famous Russian State Cosmic Industry.

In fact, LLLT formed part of a complex, but energetically synergistic method of treatment, which is actually known as magneto-infrared-laser therapy (MILT). This form of therapy involves the influence of a constant magnetic field and LED red and infrared light irradiation, which help the infrared laser irradiation to attain penetration depths of 10 to 13 cm in the bio-tissues. This penetrative ability of the LLLI in the tissues through a complex but synergistically acting quanta-magnetic field assures the success of application of the treatment method for such internal organs as the liver and pancreas, which are directly responsible for the development and manifestation of diabetes mellitus. However, LLLT has been aimed as the major form of treatment in this complex therapeutic approach, where LEDCT is applied as a complementary, but useful and ergo-harmonizing method of treatment.

Control tests of the blood sugar level were done before and after each session of quantum therapy. The energetic and functional control of the concerned organs and systems before, during and after the treatment courses was effected with the help of various diagnostic methods, out of which the leading one has been computerized electro-meridian scanning (CEMS) or electro-acupuncture method according to Dr. R. Voll (EAV).

Treatment was essentially carried out in the morning while patients were still observing a fasting regimen. Moreover, morning sessions of MILT are more effective and cause a harmonizing influence on the central and vegetative nervous systems of the human organism, apparently being more compatible with biorhythmic changes in the body.

The period of treatment was from two weeks till 3 months, and in persistent cases, it was prolonged till 4-5 months, and only in an isolated case till 7 months. The average number of laser treatment sessions was between 9 and 36 in the majority of cases, and in laser quantum treatment sessions, amounting to more than 15 or 20, were broken down into treatment courses with an interval of not less than one month in between.

RESULTS

Amongst those patients who used hypoglycemic tablets, there were 2 adolescents and 18 adults with no children in this subgroup, whereas amongst those using actraphane insulin, there were 5 children, 6 adolescents and 29 adults.

All patients, using actraphane insulin or hypoglycemic tablets, could stop all their anti-diabetic medications by the 6th. week of laser treatment.

As a rule, significant falls by 50 till 200 mg/100 ml (average being 160 mg/100 ml) in the blood sugar level were observed after each session of laser treatment in 98.46 % of cases, except for those extreme cases of diabetes where the hyperglycemic level persisted after the treatment session in 1.54 % of cases. However, in later treatment courses, these resistant patients also reacted positively to their treatment after

having crossed a certain threshold value, and finally attained recovery. Complications due to diabetes, such as various pain syndromes, diabetic cardiomyopathy, nephropathy, neuropathy, diabetic foot with ulcers and angiopathic changes as well as obesity disappeared practically completely and even impaired erectile function was restored up to the male patient's satisfaction and surprise. It should be noted that in three cases where surgical intervention in the form of plastic surgery for skin grafting was performed for the treatment of diabetic foot ulcers, no satisfactory results were obtained. However, treatment with MILT during a period of 3 to 6 weeks resulted into complete recovery of the diabetic ulcers with full soft tissue regeneration and restoration of local blood circulation.

In all cases, independent of the type of diabetes, where the patients observed all the recommendations given to them, the blood sugar level was normalized completely, and the patients don't need any more insulin or hypoglycemic tablets. More than 60 % of them could return to a normal alimentary regimen, eating and drinking sweet products in reasonable amounts. The rest (40 %) of the patients had to observe certain diet restrictions, but they did not have to take any medications for maintaining a normal life.

In all 9 control patients who underwent the complex treatment for diabetes mellitus, there was no apparent side effect. Though the blood sugar level was initially within the normal range (60-120 mg/100 ml) for these control patients, a normalizing and stabilizing effect of quantum therapy upon the blood sugar level was noted. The blood sugar level had the tendency to go and stabilize in the range of 60 to 90 mg/100 ml. Moreover, an improvement in general health condition as well as in digestive processes was observed in these control patients. In four of them, unstability of gastro-intestinal functions, including constipation and flatulence, disappeared upon administration of laser treatment.

FOLLOW-UP

It is true that the follow-up is only a short-term one, i.e. for a period of not more than six years in all. In any case, neither a recurrence of pathological hyperglycemia nor another apparent manifestation of diabetes mellitus has been reported in any of the patients treated by the method of bioresonance information laser therapy.

CONCLUSIONS

The first most important conclusion made during this clinico-experimental study is that even in advanced cases of diabetes mellitus, the pancreas retains its ability to restore the functional possibilities of its tissues as well as their regeneration, specifically the insulin-producing β -cells of the Islets of Langerhans. Otherwise, without the functional restoration and structural regeneration of these islet cells, it would have been impossible to bring down the blood glucose level to normal values without the use of any exogenous hypoglycemic medications. It should be well noted that the common thought, that it is impossible for the pancreas to restore its function and morphology in case of diabetes mellitus, has definitely come to an end in the history of this disease and mankind.

Secondly, it has been ascertained from this study that the quantum energy of laser rays is capable of stimulating and causing the regeneration of pancreatic tissues, including the β -cells of the Islets of Langerhans, even in advanced disease states.

Comparative effectiveness of different methods of quantum hemotherapy in the treatment of juvenile diabetic retinopathy

Nedzvetskaia OV.

Effects of ultraviolet exposure of the blood (UVEB), intravenous laser exposure of the blood (IVLEB), and transcutaneous magnetic laser exposure of the blood (TMLEB) on ocular functions, microcirculation, and hemodynamics were studied in 79 patients with juvenile diabetic retinopathy. All these treatments had a nonspecific positive effect on the spatial contrast sensitivity, microcirculation, and choroid hemodynamics of the eye. Correcting mainly intravascular changes in the microcirculatory bed, quantum hemotherapy methods are pathogenetically justified in the treatment and prevention of tissue ischemia in diabetic involvement of the organ of vision. Results of noninvasive TMLEB with generalized and local effects were statistically similar to results of invasive UVEB and IVLEB.

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