

Recommended anti-inflammatory dosage for Low Level Laser Therapy

Laser classes 3 or 3 B, 780 - 860nm GaAlAs Lasers. Continuous or pulse output less than 0.5 Watt

Energy dose delivered to the skin over the target tendon or synovia

Diagnoses

Diagnoses			Inc
Tendinopathies	Points or cm2	Joules 780 - 820nm	Notes
Carpal-tunnel	2-3	12	Minimum 6 Joules per point
Lateral epicondylitis	1-2	4	Maximum 100mW/cm2
Biceps humeri c.l.	1-2	8	
Supraspinatus	2-3	10	Minimum 5 Joules per point
Infraspinatus	2-3	10	Minimum 5 Joules per point
Trochanter major	2-4	10	
Patellartendon	2-3	6	
Tract. Iliotibialis	2-3	3	Maximum 100mW/cm2
Achilles tendon	2-3	8	Maximum 100mW/cm2
Plantar fasciitis	2-3	12	Minimum 6 Joules per point
Arthritis	Points or cm2	Joules	
Finger PIP or MCP	1-2	6	
Wrist	2-4	10	
Humeroradial joint	1-2	4	
Elbow	2.4	10	
Glenohumeral joint	2-4	15	Minimum 6 Joules per point
Acromioclavicular	1-2	4	
Temporomandibular	1-2	6	
Cervical spine	2-4	15	Minimum 6 Joules per point
Lumbar spine	2-4	40	Minimum 8 Joules per point
Hip	2-4	40	Minimum 8 Joules per point
Knee medial	3-6	20	Minimum 5 Joules per point
Ankle	2-4	15	

Daily treatment for 2 weeks or treatment every other day for 3-4 weeks is recommended

Irradtiation should cover most of the pathological tissue in the tendon/synovia.

Tendons

Start with energy dose in table, then reduce by 30% when inflammation is under control (Does not apply for carpal tunnel tenosynovitis)

Therapeutic windows range from typically +/- 50% of given values Recommended doses are based on ultrasonographic measurements of depths from skin surface and typical volume of pathological tissue and estimated optical penetration for the different laser types in caucasians

Disclaimer

The list may be subject to change at any time when more research trials are being published. World Association of Laser Therapy is not responsible for the application of laser therapy in patients, which should be performed at the therapist/doctor`s discretion and responsibility

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