Recommended anti-inflammatory dosage for Low Level Laser Therapy

Laser classes 3 or 3B, 904 nm GaAs Lasers (Peak pulse output more than 1 Watt)

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

Diagnoses

Tendinopathies	**Points or cm2**	**Joules 904nm**	**Notes**
Carpal-tunnel	2-3	4	Minimum 2 Joules per point
Lateral epicondylitis	1-2	1	Maximum 100mW/cm2
Biceps humeri cap.long.	1-2	2	
Supraspinatus	2-3	3	Minimum 2 Joules per point
Infraspinatus	2-3	3	Minimum 2 Joules per point
Trochanter major	2-3	2	
Patellartendon	2-3	2	
Tract. Iliotibialis	2-3	2	Maximum 100mW/cm2
Achilles tendon	2-3	2	Maximum 100mW/cm2
Plantar fasciitis	2-3	3	Minimum 2 Joules per point
Arthritis	**Points or cm2**	**Joules 904nm**	
Finger PIP or MCP	1-2	2	
Wrist	2-3	3	
Humeroradial joint	1-2	2	
Elbow	2-3	3	
Glenohumeral joint	2-3	6	Minimum 2 Joules per point
Acromioclavicular	1-2	2	
Temporomandibular	1-2	2	
Cervical spine	2-3	6	Minimum 2 Joules per point
Lumbar spine	2-3	10	Minimum 4 Joules per point
Hip	2-3	10	Minimum 4 Joules per point
Knee anteromedial	2-4	6	Minmum 2 Joules per point
Ankle	2-4	6	

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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