Amru Houssien et al., Altern Integr Med 2019, Volume 8
DOI: 10.4172/2327-5162-C1-059

The sustainable of relief back pain immediately after the first session of laser acupuncture but not after acupuncture therapy

Amru Houssien and **Dhiya Houssien**
Dhiya Centre for Rheumatism, Saudi Arabia

Background & Objectives: Low-level Laser acupuncture therapy (LLLAT) is defined as the stimulation of acupuncture points with low-intensity, laser irradiation and is widely used in treating musculoskeletal pain. The purpose of this study was to determine whether the use of a single session of LLLAT for Chronic Low Back Pain (CLBP) will result in a better outcome than using acupuncture alone.

Patients & Methods: 40 patients with CLBP were randomly assigned to two treatment groups: G1 (Acupuncture; 20 patients) and G2 (laser acupuncture; 20 patients). All patients received single session only. The Acupuncturists inserted a stainless steel needle in local low back (Du3, 4, UB23, 5, 6), distal (UB36, 40,54,7,8,60, GB30, 1, 4, Li4) and auricular points. Laser-acupuncture treatment with a 20Hz 200mW 820 nm gallium aluminium arsenide diode laser was used the same previous points. Pain intensity was assessed on a 100 mm Visual Analogue Scale (VAS). The lumbar range of motion was measured by the fingertip-to-floor method. A physiotherapist, who was blinded to treatment assignment, evaluated the patients immediately before and after treatment as well as 4, 12 and 24 weeks later.

Results: Immediately after the completion of treatment, the mean VAS dropped from 78 to 66 mm in the acupuncture group (G1) but increased at the follow-up visits to 76 mm after 24 weeks. In contrast, VAS scores decreased from 80 to 48 mm in the laser acupuncture group. Although it increased in the follow-up visits 60 mm after 24 weeks, it remained significantly better (24 mm $P<0.0001$) than at the initial assessment. The mean of fingertips and floor distance decreased significantly in G2 from 41 cm to 15 cm immediately after the completion of the first session (the difference from baseline was 26 cm) compared to a decrease from 44 to 35 after the first session in G1. Forward flexion of the lumbar spine improvement remained stable between the first assessment and the other four assessments in patients exposed to prayers with the difference between the baseline and 24-week assessments highly significant ($P<0.0001$) compared to G1 ($P>0.05$).

Conclusion: Both measures were decreased in both groups but laser acupuncture resulted in a significant improvement in functional and symptomatic outcomes in this group of patients with CLBP even after 24 weeks follow up.

Biography

Amru Houssien is pursuing his degree in Medicine in Riyadh.

dhoussien@hotmail.com

Notes: