

Low Level Laser Treatment of Tendinopathy: A Systematic Review with Meta-analysis

Steve Tumilty, MPhty,¹ Joanne Munn, Ph.D.,¹ Suzanne McDonough, Ph.D.,² Deirdre A. Hurley, Ph.D.,³ Jeffrey R. Basford, Ph.D.,⁴ and G. David Baxter, DPhil¹

¹Centre for Physiotherapy Research, School of Physiotherapy, University of Otago, Dunedin, New Zealand

²University of Ulster, Newtownabbey, Co Antrim, Northern Ireland

³University College Dublin, Belfield, Dublin, Republic of Ireland

⁴Mayo Clinic, Rochester, Minnesota

Objectives: To assess the clinical effectiveness of Low Level Laser Therapy (LLLT) in the treatment of tendinopathy. Secondary objectives were to determine the relevance of irradiation parameters to outcomes, and the validity of current dosage recommendations for the treatment of tendinopathy.

Background: LLLT is proposed as a possible treatment for tendon injuries. However, the clinical effectiveness of this modality remains controversial, with limited agreement on the most efficacious dosage and parameter choices.

Method: The following databases were searched from inception to 1st August 2008: MEDLINE, PubMed, CINAHL, AMED, EMBASE, All EBM reviews, PEDro (Physiotherapy Evidence Database), SCOPUS. Controlled clinical trials evaluating LLLT as a primary intervention for any tendinopathy were included in the review. Methodological quality was classified as: high (≥ 6 out of 10 on the PEDro scale) or low (< 6) to grade the strength of evidence. Accuracy and clinical appropriateness of treatment parameters were assessed using established recommendations and guidelines.

Results: Twenty-five controlled clinical trials met the inclusion criteria. There were conflicting findings from multiple trials: 12 showed positive effects and 13 were inconclusive or showed no effect. Dosages used in the 12 positive studies would support the existence of an effective dosage window that closely resembled current recommended guidelines. In two instances where pooling of data was possible, LLLT showed a positive effect size; in studies of lateral epicondylitis that scored ≥ 6 on the PEDro scale, participants' grip strength was 9.59 kg higher than that of the control group; for participants with Achilles tendinopathy, the effect was 13.6 mm less pain on a 100 mm visual analogue scale.

Conclusions: LLLT can potentially be effective in treating tendinopathy when recommended dosages are used. The 12 positive studies provide strong evidence that positive outcomes are associated with the use of current dosage recommendations for the treatment of tendinopathy.

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