

1,000 Voices: *Res ipsa loquitur* - The Research Speaks for Itself

By Fred Kahn, MD, FRCS(C)

Research on LILT – Low Intensity Laser Therapy – is challenging. Why? Very simply, we’re researching the interaction between photon light and cellular structures. Because photon irradiation is a fundamental process involved in healing so many pathologies, we risk the ‘panacea effect’ in our research data: Conversely, the stronger the data, the greater the lag in its acceptance. Once again, we offer dramatic results from our recent tracking of 1,000 patients at the Meditech Laser Rehabilitation Clinic in Toronto...

Even though a patient rarely asks to see the data their experience supports, it’s our job to acquire and share it – for the benefit of both patients and our peers in healthcare. As practitioners, we can be using a therapy—but not sufficiently supporting it by collecting, analyzing and sharing data. Albeit, patients have their own version of ‘research’—which is their subjective relief, their own before-and-after; but our work requires continuing support by data.

A recent review of the world literature, comprising over 300 articles and abstracts, including double blind clinical trials published between January 1998 and November 2001, reveals an *overwhelming amount of evidence supporting the positive effects of LILT.*

Numerous scholarly papers are presented worldwide every year, but too frequently these conclude that “Low Intensity Laser Therapy is a novel approach that shows promise.” *The gap between ‘novel’ and ‘established’ is directly related to the effort we make to document and share data on our successful treatments.*

This article presents a summary of Dr. Kahn’s review of the results of 1,000 consecutive patient discharges at the Meditech Laser Rehabilitation Clinic. It attests to the dramatic and safe use of this therapeutic approach, once again proving its efficacy.

As the accompanying chart shows, the majority of cases involve repetitive motion injuries, arthritis, sports injuries and trauma. The significant improvement/cure rate is in excess of 90% after an average of 9.68 treatments. The case has clearly been made and these conclusions apply.

1. Modern medicine can benefit significantly from the wider adoption of Low Intensity Laser Therapy in many pathologic conditions.

2. It would be appropriate for all practitioners of medicine to review methods of current medical practice and institute changes minimizing the utilization of pharmaceuticals and increasing the application of better alternative methods.

3. There’s cause for a complete re-evaluation of the use of pharmaceuticals, i.e. benefits versus dangers. In our experience, virtually everyone who is referred to the clinic over the age of 70 is on 2-15 medications. The negative aspects of this type of situation are clearly apparent.

4. All medical therapists should review the benefits of incorporating Low Intensity Laser Therapy into their practice.

5. Dr. Kahn’s protocols for good health:

1. Inherit good genes
2. Avoid stress
3. Eat a balanced diet
4. Exercise daily
5. Add appropriate vitamins and supplements
6. Do not smoke and use alcohol moderately

6. Lifestyle and preventive medicine should be the key essentials consistent with good medical practice, in addition to the incorporation of better and safer technologies.

Meditech Laser Rehabilitation Clinic

Clinical analysis of 1,000+ consecutively discharged patients at the Meditech Clinic (3 Studies)

Study	#1	#2	#3
# of Cases Evaluated	151	286	576
Avg # Tx's	11.1	9.7	9.68
% Improvement	90	91.1	93.6

Case Breakdown	# of Cases		
Sports Injury	22	89	258
Degenerative	48	108	140
Repetitive Stress	28	35	93
Trauma	36	48	66
Other	17	6	19
Total	151	286	576

% Improvement			
Degenerative	86.3	87.6	88.3
Repetitive Stress	87.8	88.7	94.3
Trauma	95.6	93	96
Sports Injury	94.4	96	96.1
Other	90	91.1	96.3
SUM	90	91.1	93.6

Average # Tx's			
Degenerative	12.55	11.5	11.31
Repetitive Stress	11.5	10.7	9.59
Trauma	10.7	8.9	9.37
Sports Injury	9.34	7.8	9.17
Other	11.2	11.1	7.5
SUM	11	9.7	9.68

For an expanded version of this article, please contact Meditech, 416 251 1055 or contact us at info@meditech-bioflex.com

INSIDE

PAGE 2

- **Back in Business** – Relief for older patients with degenerative disc Includes: Managing an Expanding Practice
- **Back in the Saddle After Serious Riding Injury** – A young rider recovers from “permanent” hip damage

PAGE 3

- **2nd Annual International Laser Therapy Conference Held in Toronto** – Overview of presentations delivered by distinguished guests

PAGE 4

- **Registration for 2004 Seminar Series** – Register now by e-mail

Back in Business

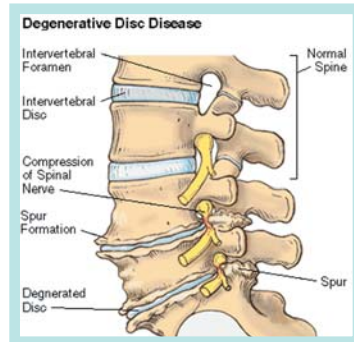
Maybe we should have just stayed in the trees. (As a species, that is.) Because complaints of back pain are as old as walking upright. Yet we've never been in a better position to offer relief than we are now. Dr. Guy Pelletier of Brant Chiropractic in Brantford, Ontario agreed to share his experience using the BioFlex system on a specific group: Age 60+ with an existing diagnosis of degenerated discs...

Why did Dr. Pelletier choose this group for controlled observation? Two reasons: *Back pain is the primary reason that brings patients into clinics for help. Secondly, in an aging population, degenerating discs mean that manipulations available to younger patients are steadily ruled out as time goes by.*

Older patients living with unrelieved pain report a common and discouraging situation to Dr. Pelletier. They've been repeatedly told, "You'll have to live with it" or "You're getting older and this is part of aging."

A typical patient has localized lumbosacral pain that radiates into posterior thigh, hip, groin, sometimes as far as the foot. Conditions vary from acute, to chronic, many in excess of 20 years.

Meditech's Dr. Fred Kahn confirms Dr. Pelletier's observations in his paper on *Low Intensity Laser Therapy in Clinical Practice*. "35% [the largest group] of the patients fall into the category of degenerative osteoarthritis. The majority of these involved the



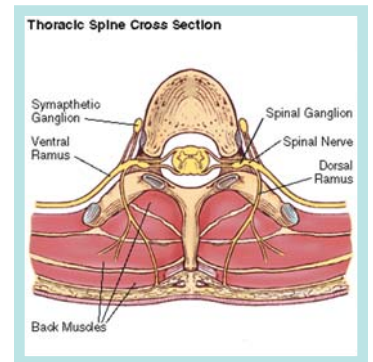
lumbo-sacral spine and over 60% of these were accompanied by degenerative disc disease, bulging discs, nerve root compression, and/or stenosis of the spinal canal." In other words, a major pain in the back... and leg.

In treating these patients prior to using BioFlex, Dr. Pelletier found that there was an *increased risk of irritating the area* after treatment. Patients had *difficulty moving around the table*, and he had to modify treatments to accommodate this. "Normal" treatments weren't always possible. Pain was also a factor,

and that made treatments unpleasant and patients apprehensive. The consequence of these factors was that treatment results were slow and limited.

Enter BioFlex Low Intensity Laser Therapy. Says Dr. Pelletier, "I observed that my patients could first of all **sit comfortably, relax, read a book**. The treatments **didn't elicit any pain**--the very pain we were working to alleviate. Instead of working with decreased expectations of results, I noticed **satisfactory improvement after three or four treatments, sometimes fewer**. Another significant improvement was that **I could treat multiple areas at one time**."

Conclusion: *In older patients, laser can become almost the only alternative that is suitable and safe.* Older patients do not have to accept living with pain. Laser is—in non-clinical language—the pain-buster alterna-



tive. Says Dr. Pelletier about his trial group of age 60+ patients: "We're able to help those who have been suffering and haven't been able to get help anywhere else."

The treatments were effective enough that Dr. Pelletier issued a press release to his local newspaper, resulting in a feature article in the Health section. While this doesn't qualify as hard data, it's impossible to keep patients from talking to friends about the relief they've experienced. Press materials are just the media's version of word-of-mouth.

How did Dr. Pelletier incorporate laser treatments into his schedule? With one chiropractic room and two laser rooms, he staggers the treatments 40 minutes apart, and can handle 24 treatments comfortably in a day.

Back in the saddle after serious riding injury

It was a competitive sports injury of sorts: Horse – 1 Rider – 0

Hilary is a 17 year old equestrienne whose horse rolled on her, applying a generous portion of its thousand pound weight to her hip joint. The injury left her with a limp, steady and severe pain, and an audible and visible click with each step. This was her condition when she came into the Meditech Laser Rehabilitation Centre for an assessment, accompanied by her admittedly sceptical mother...

Hilary's mother scanned around the clinic and saw the grateful testimonials and celebrity athletes' photos. Her first thought was, "Why is all this necessary? Why are they trying so hard to convince me this works?" Each previous specialist who had examined her daughter had pronounced her case "unique"—meaning wholly unprecedented and without any established treatment protocol. *After varied, unsuccessful treatment attempts, Hilary was left to get on with her life, accompanied by painkillers.* Eventually, she was also given antidepressants to try to alleviate her sense of hopeless-

ness. An understandably discouraging outcome for an active young person.

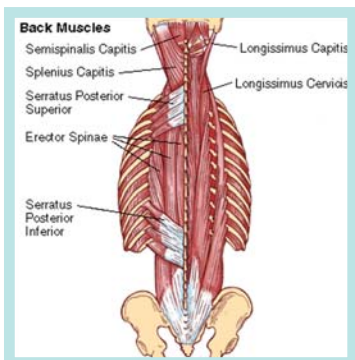
Dr. Fred Kahn describes his assessment of Hilary: "There was extensive soft tissue damage in the hip and thigh area, and the joint capsule of the hip was damaged such that the head of the femur almost popped out with every step. Orthopedic surgeons hadn't been able to heal this injury. It's always sad to see a young person—or any person—given a heavy load of pharmaceuticals. While I didn't promise her mother any guaranteed outcome, I did tell her that I was sure we could improve Hilary's quality of life."

After four treatments, there was such a significant improvement in Hilary's pain that she quit her meds. Her limp was also improving and sceptical Mom noticed "a bounce in her step" when she walked to the car from the clinic one day—something she hadn't seen since before the riding accident.

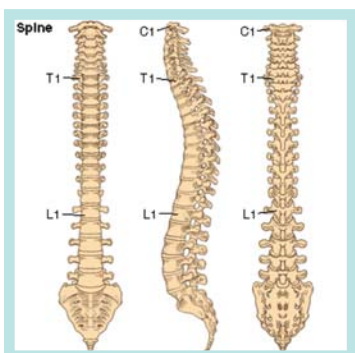
Dr. Kahn concludes, "Hilary continued treatments three times a week until she achieved 100% of her normal gait and has remained free of medication. Indeed, she's resumed a completely normal existence."



"Final word goes to Mom: "As a parent, it's very difficult to see your child in pain; to see her limping and having difficulty taking stairs. Hilary had been treated as a lost cause because of her non-response to other forms of therapy. What do I say to sceptics? Only that I have no problem giving my own testimonial now and having it displayed. I saw an amazing and dramatic improvement in such a short period of time...it's incredible."



This brings up a corollary issue: Once a practitioner establishes the efficacy of LILT in the treatment of back pain, the management and administration of the practice will have to change. For resource on handling this, please see *Managing an Expanded Practice*, right.



Managing an expanded practice

Fortunately, therapists are now sharing info on incorporating LILT therapy into their practices. With thanks to George Gonzalez, DC, from the September 2003 Issue of *Chiropractic Economics* [<http://www.chiroeco.com>], we offer some advice on managing your expanded practice. Dr. Gonzales also shares his experience in developing the natural inclination of patients to talk about their therapy:

- **Expect more referrals.** Because it's fast and effective, patients talk about it.
- **Study your practice style and office accommodations.** A practitioner who would incorporate laser therapy for neuro-rehabilitation, myofascial release, and therapeutic exercises, would benefit from a hand-held laser. But a therapist who has a room to dedicate to laser therapy might select a stationary model.
- **Think of LILT as a 'Body saver'.** The laser prepares the patient for treatment. It quickly softens tissue and increases range of motion, so you won't have to use as much strength.
- **Plan for your own training.** Investigate the cost and frequency of advanced training programs to gain additional skill.
- **Network.** Share stories of the results that you've seen and experienced.
- **Tell active patients.** Describe the effects of laser therapy, and its science. Make your explanation simple enough for the patient to repeat to their family and friends.
- **Ask for referrals.** As your patients get results, ask them if they know anyone that has been injured and wants to heal faster or to recover from a traumatic sports injury or auto accident.
- **Inform inactive patients.** Send them a letter explaining your new laser service and invite them in for a demonstration.
- **Treat a local sports team.** Provide laser therapy to your local high school or college team. Athletes will applaud the treatment and their families will share in their education about the therapy.

2nd Annual International Laser Therapy Conference Held in Toronto

On February 13 and 14, Meditech held a seminar dedicated to the education of medical professionals with regard to LILT. Experts from Canada, the U.S., and the U.K. spoke on *Basic Research, Clinical Application and Economic Benefits*. Here's a brief recap of what went on...

To use a digital analogy, the two days were an extended download of a huge and powerful program. Each attendee's mental disk space was filled to capacity.

Day One was devoted to presentations on *Current Status and Physiological Aspects of LILT*. Day Two's presentations were on *Clinical Research and Clinic Management Focus*.

Keynote speaker *Dr. Fred Kahn* opened the seminar with a presentation on *The R&D of the BioFlex Professional System for Low Intensity Laser Therapy*.

Dr. Mary Dyson got under the skin with *The Pathophysiology of Tissue Repair—What should happen after injury and what can go wrong*. Dr. Dyson observed that in the case of chronic wounds, *LILT functions to return the chronic wound to an acute wound state—and then to accelerate the resolution of acute inflammation*



Guest Presenters: Dr. Mary Dyson, Dr. Ethne Nussbaum, Dr. Len Rudnick with Dr. Fred Kahn, keynote speaker

through the normal cycle of proliferation and remodeling. (And this was all before morning coffee break.)

Dr. Dyson returned in the afternoon for two more sessions, one on *The Role of LILT in Improving the Rate and Quality of Tissue Repair*, and another on *Uses of LILT in management of pain—Speeding it up and putting it right*.

Dr. Chukuka Enwemeka followed with an explanation of the *Mechanism of Light Induced Tissue Repair*. Dr. Enwemeka's second presentation later in the day was on *Photo Engineering of Collagenous Tissue Repair*.

As pain management is a key benefit of LILT, *Dr. Len Rudnick* gave an extensive presentation on *Pain Management and LILT*, broken into two afternoon sessions.

Day one of the conference wrapped up with Meditech Therapists Slava Kim and Matt Stott explaining the *Professional BioFlex System Technology*. This included



Chukuka Enwemeka, PhD
Dean, School of Allied Health & Life Science, NY, NY



Dr. Joe Johnigk from Illinois with his case photos and Dr. Zhou from Beijing

information on the functionality of the Practitioner Software and key patient benefits.

Meditech Chief Engineer Mark Slonchka supplemented his colleagues' presentations with the *Current Regulatory Status for the BioFlex Professional System*.

Experts Presenting at 2nd Annual Laser Therapy Conference

Chukuka Enwemeka, PhD, FACSM. Dean, School of Allied Health & Life Sciences, NY, NY, USA. Leading authority in LILT. Author of numerous publications associated with rehabilitation and world wide lecturer.

Mary Dyson, BSc, PhD, Emeritus Reader in Tissue Repair Biology, Kings College, University of London, UK. Internationally recognized specialist in tissue repair, LILT and medical ultrasound.

Fred Kahn, MD, FRCS(C), President and Founder, Meditech International Inc., Director, Laser Rehabilitation Clinic, Toronto, Canada.

Leonard Rudnick, BSc, DC. Director, 'Laser Therapeutics of Southern Arizona', Tucson, USA <http://www.laser-therapeutics.net/>

Ethne Nussbaum, BSc(PT), MEd, Ph D., Associate Professor, Dept. of Physical Therapy, University of Toronto, Rehabilitation Services, Mt Sinai Hospital, Toronto, Canada.

Guy Pelletier, DC, Director, Brantford Rehabilitation Clinic, Brantford, Ont. Canada.

Charles Mooney, BSc, Head Trainer, Toronto Raptors Basketball Club, Toronto, Canada

Day Two of the conference again opened with Dr. Fred Kahn sharing his conclusions from Three Clinical Studies of over 1,000 Consecutive Patient Discharges, as well as Typical Cases from the Clinic. The clinical data presented was powerfully indicative of the efficacy of LILT. Ten patients attended the conference and gave testimonials on the efficacy of LILT and the quality of life the therapy returned to them. In some cases, the patients gave heart-rending accounts of their experience: A former competitive ballroom dancer danced with his wife again; a young father could play with his kids once more; and a young girl could skate with her friends.

Dr. Guy Pelletier's Clinical Case Analysis of LILT and Degenerative Disc Disease is covered in this newsletter [Please see "Back in Business" page 2]. Dr. Pelletier also briefed attendees on his experience with operating a LILT Clinic in a small Canadian town—in his case, Brantford, Ontario, a town of 86,000.

Dr. Ethne Nussbaum spoke on Best Practice Guidelines- A Review, followed by Dr. Len Rudnick's overview of a diversified laser therapy practice in Arizona. Day two wrapped with a Clinical Practice – Data from the Field by Meditech Executive Leslie Perrin, BA, MSc.

Enthusiasm was so powerful that the second day's proceedings concluded with spirited, personal contributions on the success of LILT and the BioFlex System developed by Dr. Fred Kahn. Contributors included Dr. Len Rudnick, BSc, DC. (AZ), Dr. Joe Johnigk, DC (IL), Dr. Robert Perlman, MD (QC) and Dr. Brian Bennett, MD (AB) sharing clinical practice success and outstanding patient recovery experiences.

An optional Day Three opened Toronto's Meditech Laser Rehabilitation Clinic to the attendees for a 'day in the life' of a busy and successful LILT practice.

To those who attended: See you next year! To those who didn't attend: See you next year!



Dr. Fred Kahn, President and CEO, Meditech Laser Rehabilitation Clinic



Dr. Joe Johnigk, Patricia Heflin, Dr. Len Rudnick

Are you registered?

Meditech International Inc. Spring and Summer Season 2004

Meditech International Inc. promotes the correct, medical application of Low Intensity Laser Therapy with regular monthly seminars. The clinic also holds an annual International Seminar on Recent Advances in Low Intensity Laser Therapy [see report in this issue 2nd Annual International Laser Therapy Conference Held in Toronto Page 3] with internationally recognized specialists in this area of treatment.

All seminars include course material, structured classroom presentations on theory, research and hands on clinical exposure. Completion of the program is a Certification of the participant's understanding and practice of Low Intensity Laser Therapy.

COURSE DATE	LOCATION	CONTENT
April 19 – 21	Meditech Laser Rehabilitation Clinic	Theory and Practice
May 14 - 16	Meditech Laser Rehabilitation Clinic	Theory and Practice
June 11 - 13	Meditech Laser Rehabilitation Clinic	Theory and Practice
July 16 - 18	Meditech Laser Rehabilitation Clinic	Theory and Practice
August 20 - 22	T.B.A.	Theory and Practice

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