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Safety and Efficacy of Treatment of Common Migrainous Headaches Applying the Low Power Laser by the Principles and Methods of Wong

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Abstract

Headache is one of man's common afflictions. Despite voluminous articles that have been written about this ailment, little is known about its etiology and pathophysiology. Thirty-two patients (10 males and 22 females), mean age 44.1 years (range from 21 to 67 years), with ongoing migraine and migrainous-type headache were evaluated. Many patients had histories and signs of muscle-tendon and ligament insertion injuries at the periosteal-osseous junctions in the head and neck from automobile accidents, sport injuries and other trauma which often cause migrainous headaches. The soft tissue injuries were aggravated by their poor posture or by prolonged desk work. Most patients had pressure and/or pulsating pain around the head and in the frontal and temporal areas. Areas of tenderness and/or edema were located along the nuchal line (NL), tips of the cervical spinous processes (SP), and the styloid processes (STY). Following informed consent, a low power diode laser (gallium-aluminum-arsenide, wavelength 830 nm) was directed at the soft tissue lesion sites using 30 to 100 mW for 1 - 2 minutes per site. Low power laser directed at these key anatomical areas along the NL, SP, and STY markedly diminished or totally abolished pain and tenderness in all patients. There was reduction of edema at tender sites and relaxation of muscles within 1-5 minutes. No adverse effects were observed. It is believed that the laser stimulated removal of noxious chemicals via lymphatics. Thus low power laser treatment at appropriate anatomic areas can effectively and safely relieve many types of migrainous headaches.