The influence of low-level laser irradiation on spinal cord injuries following ischemia- reperfusion in rats¹

Print version ISSN 0102-8650*On-line version* ISSN 1678-2674 **Acta Cir. Bras. vol.30 no.9 São Paulo Sep. 2015** http://dx.doi.org/10.1590/S0102-865020150090000005

Amir Sotoudeh I Amirali Jahanshahi II Saeed Zareiy III Mohammad Darvishi IV Nasim Roodbari V Ali Bazzazan VI

^IAssistant Professor, Faculty of Veterinary Science, Kahnooj Branch, Islamic Azad University (IAU), Kerman, Iran. Design, analysis and interpretation of data; manuscript writing ^{II}Researcher, Elite Club, Kahnooj Branch, IAU, Kerman, Iran. Design and acquisition of data ^{III}Resident, Aerospace and Subaquatic Medicine School, AJA University of Medical Sciences, Tehran, Iran Branch, and Islamic Azad University, Tehran, Iran. Technical procedures, acquisition and interpretation of data

IVAssociate Professor, Department of Infection Medicine, AJA University of Medical Sciences, Tehran, Iran. Analysis and interpretation of data, statistical analysis

^VAssistant Professor, Faculty of Experimental Science, Kahnooj Branch, Islamic Azad University, Kerman, Iran. Analysis of data, manuscript writing

^{VI}Graduate student, Faculty of Veterinary Science, Garmsar Branch, IAU, Semnan, Iran. Acquisition and interpretation of data.

ABSTRACT

PURPOSE:

To investigate if low level laser therapy (LLLT) can decrease spinal cord injuries after temporary induced spinal cord ischemia-reperfusion in rats because of its anti-inflammatory effects.

METHODS:

Forty eight rats were randomized into two study groups of 24 rats each. In group I, ischemic-reperfusion (I-R) injury was induced without any treatment. Group II, was irradiated four times about 20 minutes for the following three days. The lesion site directly was irradiated transcutaneously to the spinal direction with 810 nm diode laser with output power of 150 mW. Functional recovery, immunohistochemical and histopathological changes were assessed.

RESULTS:

The average functional recovery scores of group II were significantly higher than that the score of group I (2.86 ± 0.68 , vs 1.38 ± 0.09 ; p<0.05). Histopathologic evaluations in group II were showed a mild changes in compare with group I, that suggested this group survived from I-R consequences. Moreover, as seen from TUNEL results, LLLT also protected neurons from I-R-induced apoptosis in rats.

CONCLUSION:

Low level laser therapy was be able to minimize the damage to the rat spinal cord of reperfusion-induced injury.

Key words: Laser Therapy, Low-Level; Ischemic, Reperfusion; Spinal Cord; Rats