

# The Lord Said “Let There Be Light”



By Dr. W.  
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I recently welcomed the 4th International Low Intensity Laser Therapy (LILT) Conference in

Toronto. I planned to talk about the life of a syndicated medical journalist, how it had changed my life, and leave. Fortunately, I stayed and heard international experts discuss this type of light therapy.

The majority of patients treated with LILT are suffering from arthritis, back, hip and knee pain that has failed to respond to othertypes of treatment. But I was surprised to hear of the variety of other problems helped by this therapy.

Dr. Fred Kahn, founder of Meditech International in Toronto, reported that LILT can heal diabetic leg ulcers due to hardening of arteries and decreased blood supply. In view of today's epidemic of diabetes this is a huge benefit for these patients.

One diabetic patient had his right leg amputated. Later, decreased blood flow resulted in eight ulcers on his remaining foot. They refused to heal and he faced another leg amputation. After 10 treatments of LILT over a two-week period seven of the ulcers had completely healed and blood circulation of the foot improved.

Lymphedema, a swelling of the arms or feet, is often resistant to treatment. It can occur following phlebitis of the legs or after

radical surgery for breast cancer. Dr. Kahn presented cases where limbs had returned to normal size after 10 treatments of LILT.

This therapy can also be used to treat such diverse lesions as psoriasis, eczema, bursitis, arthritis, herniated disc, carpal tunnel syndrome, and rotator cuff tears.

Chuck Mooney, an athletic therapist who's treated professional basketball players, provided convincing evidence on the success of LILT. Owners who pay athletes tens of thousands of dollars a game want them quickly back in action after injury. He cited cases showing how LILT had decreased healing time and saved some athletes from surgery.

Other researchers presented data on the ability of LILT to speed the healing of herpetic lesions of the face and genital area. Lesions that usually recurred after three weeks of treatments could be delayed for 37 weeks.

Dr. Shimon Rochkind, a microneurosurgeon at Tel-Aviv University, is a world expert on nerve regeneration. His research shows that what we have always accepted as gospel truth is no longer the case.

Time and time again we've been told that some tissues of the body can regenerate, but it's impossible for spinal cord injuries. After all, Christopher Reeves of the Superman movies had the best care money could buy, but never walked again after a disastrous fall from his horse.

Dr. Rochkind showed motion pictures of a rat running around

his cage. He then excised half a centimeter of the rat's spinal cord resulting in complete paralysis of the hind legs.

During the surgery Dr. Rochkind placed a circular tube containing a biodegradable transplant based on cell tissue-engineering technology around the severed ends of the spinal cord. LILT was then administered

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to the operative area. The final picture shows the rat has recovered partial use of one hind leg allowing him to move around his cage.

This is still “pie in the sky” research for the over 600,000 nerve injuries that occur every year in North America, often with catastrophic results. But it's the first earth-moving step to restoring mobility for these victims and destroys the pervasive myth about non-regenerative nerve tissue.

One has to be cautious about new techniques, but firm evidence proves this is not another old-fashioned snake oil cure. I spoke with Dr. Mary Dyson of the Department of Physiology, University of London, England and Tiina Karu, Professor of Laser Biology of the Russian Academy of Science. They have both done extensive basic research on LILT and are convinced of its merits.

The appeal of LILT is that it's nontoxic, non-invasive and safe. It seems logical to try LILT before resorting to the possible side effects of drugs and complications of surgery. After all, the Lord said “let there be light.”