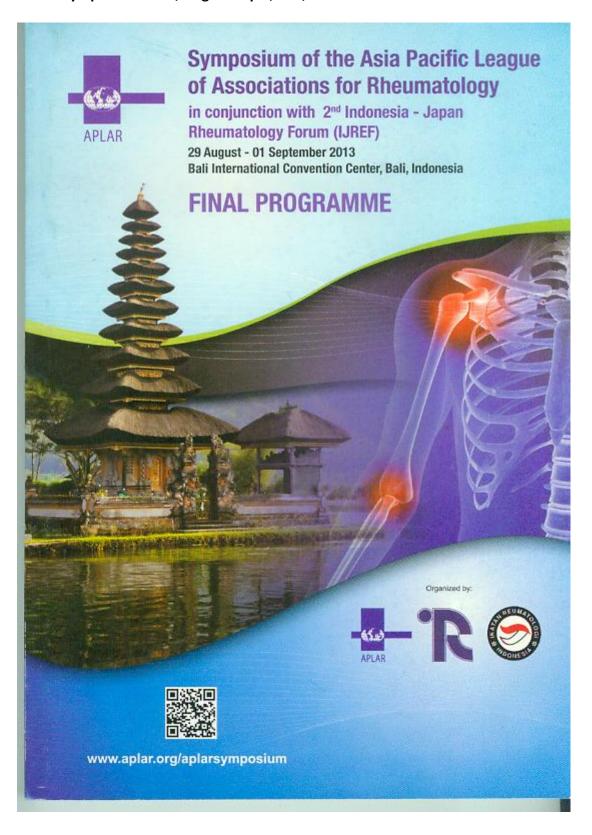
Yueh-Ling Hsieh*, Chen-Chia Yang, Fang-Chuen Huang. High-fluence Low-level Laser Irradiation Treatment Reduces TNF- α and MMP3 Expressions in Early Stage of Rat Rheumatoid Synovium. The APLAR Symposium 2013, Aug 29-Sep 1, Bali, Indonesia.



Symposium of the Asia Pacific League of Associations for Rheumatology in conjunction with 2nd Indonesia - Japan Rheumatology Forum (IJREF) 29 August - 01 September 2013 - Ball International Convention Center, Ball, Indonesia

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Allied Health Research Topics: T26 – Physiotherapy

APLAR-0295

Assessment of spinal mobility in juvenile healthy volunteers using supine and standing posture

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Introduction: Spinal mobility is commonly assessed during the evaluation of functional status and therapeutic outcomes of ankylosing spondylitis, however, performance of some measures is time-consuming and may not be feasible in clinical practice. This study were designed (1) to explore the influence factors of spinal mobility, and (2) to compare the results of spinal mobility were measured by sitting and supine posture respectively.

Materials and Methods: Initial recruitment identified 223 healthy participants (188 males, 35 females) aged 18–23 years from community residents of north and south city in China.

tenaies) aged 18–23 years from community residents of north and south city in China. Results: Statistical difference was found with tragis to wall distance, cercical rotation (sitting position), intermalkolar distance (standing position), modified SchoberOs test, fingertip-to-floor distance and chest expansion between males and females (P < 0.05). Northerners had significantly higher levels of tragus to wall distance, intermalleolar distance and chest expansion than southerners (P < 0.05). Weekly exercise volumewere positively correlated with cervical rotation (supine position), intermalleolar distance (standing and supine position) and chest expansion (P < 0.05). Height was positively correlated with intermaleolar distance (P < 0.01) after controlling for body weight and exercise. Body weight was positively correlated with tragus to wall distance and modified SchoberOs test (P < 0.05). There was statistical difference between standing and supine position intermalleolar distance (P < 0.05), and beween sitting and supine position cervical rotation in females (P < 0.05).

Conclusions: Spinal mobility was affected by gender, height, weight, exercise and geographical factors. The affecting factors should be considered when the standard of spinal mobility was formulated. The intermalleolar distance can not reflect very well activity of hip joint for the height because of differences of height. The measurement of cervical rotation by supine position could reduce the influence of shoulder rotation than sitting position, this way may be more scientific.

APLAR-0354

High-fluence low-level laser irradiation treatment reduces TNF-alpha and MMP3 expressions in early stage of rat rheumatoid synovium

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Rheumaroid arthritis (RA) is a dironic, inflammatory and systemic autoimmune disease that leads to progressive synovitis. Treatment of RA is very complex, severalstudies have investigated the use of low-level laser herapy (LLIT) in pain symptoms of RA However, it remains

unknown if LILT can modulate early stage of RA on synovits in a dose-dependent fashion. With this perspective in mind, we evaluated the anti-inflammatory effects of LILT at low and high fluences in early RA progression stage. Monoarthritis was induced in adult male Sprague-Dawley atts (250–300 g) via intraarticular injection of complete Freund's adjuvant (CRA, 50 µL) into the tibiotarisal joint. All CRA-induced arthritic (CIA) animals were notionally divided into four groups: (1) animals with CIA and treated with 660-nm GaAld's laser at high fluence [72]/cm²); (2) animals with CIA and treated with sham-high-fluence laser irradiation (0]/cm².) (3) animals with animals with sham-low-fluence laser irradiation (0]/cm².) LILT treatments were performed 3 days after CIA for 10 consecutive days. All animals were sacrificed at the 14th day from RA induction and articular tissue was collected in order to assess inflammation in synoxium by immunofluorescent studies with 5 B5, ED1, TNF-a and MMP3. We observed that LILT at a function of the consecutive synoxium by immunoractivities when compared to the other groups at early stage of RA (P < 0.05). We suggest that high-fluence ILLT is able to modulate inflammatory responses in early progression stages of RA.

APLAR-0355

Comparative effects of low- and high-intensity laser combined with intraarticular hyaluronan injection in an animal model for rheumatoid arthritis

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Puipose: Many studies demonstrated that supplement of hyaluronan (HA) could decrease hyperanalgesic, inflammation and lubricates joint. Recently, intracricular injection of HA (IAHA) for treating the unmatoid arthrisis (RA) is more common, but the efficacy was limited due to its side effects of pain at the injection site and inflammatory pain. Low-level laser therapy is the proven and recommended intervention for managing pain, but the dosage of laser therapy is still controversy on RA-related pain. The purpose of this study was to investigate the effects of combined use of low- or high-intensity laser therapy (LILT or HILT) combined with IAHA on pain and inflammation in rats with complete Freund's adjuvant-induced arthritis (CIA).

(CA).

Materials and Methods: Monoarthritis was induced in adult male Sprague-Dawley (250–300 g) via intraarticular injection of complete Freund's adjuvant into the tibiotarsal joint. The CIA animals were divided into four groups: control (no treatments), IAHA, LILT (4.51), (m²)+IAHA, and HILT (7.21/cm²)+IAHA groups. Seven days after CIA, combined use of laser therapy and IAHA were adminiscred for 8 consecutive days and once every other day respectively. Functional evaluations of pain behavior, histology, and pro-inflammatory cytokines were performed. Results: The mechanical withdrawal pain thresholk were significantly improved in HILT+IAHA group when compared with those in the IAHA LILT+IAHA and certon, groups. Both HILT and LILT combined with IAHA can reduce inflammation by suppressing TNF-a, INOS and ED1 accumulation at synowium. Conclusions: Our findings suggest that IIIIT combined with IAHA can decrease hyperanalgesia by increasing mechanical pain threshold IAHA combined with LLILT at either high- or low-intensity can modulate inflammatory mediators. Therefore, LLLT has a synergistic effect in providing greater improvement combined with IAHA on RA treatment.