



# **WALT** 2006

25 - 28 OCTOBER LEMESOS CYPRUS

**6th International Congress  
of the World Association  
of Laser Therapy**  
*in conjunction with*  
**11th Congress of the  
European Medical  
Laser Association**



**Final Programme  
and Book of Abstracts**

## Committees

### The Executive Board of the World Association for Laser Therapy (WALT)

**President**

Farouk A. H. Al-Watban

**Immediate Past President**

Aldo Brugnera, Jr.

**Secretary General**

Antonio Pinheiro

**Treasurer**

Kevin Moore

**Membership Secretary**

Jan Tuner

**Scientific Secretary**

Jan Bjordal

**Editor of Journal**

Chukuka Enwemeka

**Chairman of Organizing Committee**

Andreas Roumbas

**Congress President**

Shimon Rochkind

**Presidents Committee**

### The Executive Board of the European Medical Laser Association (EMLA)

**President:**

Zlatko Simunovic (Switzerland)

**Chief Executive Officer:**

Premysl Fryda (Czech Republic)

**Vice President:**

Jürg Waldschmidt (Germany)

**Vice President:**

Zdenko Tudjman (Croatia)

**Secretary General:**

René-Jean Bensadoun (France)

**Member EC:**

Miroslav Procházka (Czech Republic)

Ludwig Pokora (Poland)

## Organising Committee

**Chairman of Organizing Committee**

Andreas Roumbas (Cyprus)

**WALT President Elect (2006-2008)**

Farouk al-Watban (Saudi Arabia)

**President of the Congress**

Shimon Rochkind (Israel)

**Congress Secretary**

Jan Tunér (Sweden)

**Advisor to the Organising Committee**

Chris Anastassiou (Cyprus)

## Congress Organisers & Secretariat



### Congresswise Ltd

*Professional Congress Organisers*

P. O. Box 57468, 3316 Limassol, Cyprus

T. +357 22 588 179, F. +357 22 463 247

E-mail: [congresswise@louisgroup.com](mailto:congresswise@louisgroup.com)

Web: [www.congresswise.com](http://www.congresswise.com)

Member of the **Louis Group**

**WALT2006 is  
Under the Auspices of the  
Cyprus Ministry of Health**

**WALT2006 is supported by**



American Society for Laser Medicine and Surgery

38 – 60 %. They are one of the most prevalent congenital lesions in infants but their management is still a matter of debate. Traditionally, the preferred approach in Lucerne was expectant before a policy change to early laser treatment in 2003. Within 2 years we treated 28 children with typical facial hemangiomas. 10 were capillary, 7 cavernous and 6 vascular spiders (vs). All vs could be successfully treated with 1 session of NdYag laser-compression technique, the capillary hemangiomas in an average of 4 sessions. The cavernous hemangiomas were treated mainly with NdYag-laser-ice-technique, partly in addition with the interstitial bare fiber technique in an average of 8 treatment sessions. Changing Lucerne attitude to the laser approach was quite difficult but all parents were satisfied with the aesthetic and functional results. We have to accept limited scarring in one patient. The early use of laser in treatment of facial hemangiomas have the disadvantages of several procedures under GA but finally they have the advantage of a more foreseeable and preferable cosmetic and functional result in these important body area.

## 56. MANAGEMENT OF HEMANGIOMA EXULCERATION

AM Fette  
K. Yonekawa  
Paediatric Surgery, Children's Hospital Lucerne, Switzerland

Hemangiomas are one of the most prevalent congenital lesions in infants. During involution or even after treatment these hemangiomas sometimes exulcerate causing necrosis and bleeding. Management of these complications is therefore challenging because these exulceration are quite often localised in skinfolds, perianal or perineal making dressing and definite treatment difficult. Treatment options range from ointments, classical dressings, cauterisation to excision and skin graft so far. Eleven children with exulcerated or bleeding hemangiomas were treated during the last 1 ½ years in our outpatient clinic. After cleansing the affected area a hydrocolloid dressing (Varihesive®) was applied. Parents were instructed how and when to change these dressings at home. NdYag-laser therapy was applied as soon as possible according to parameter and application settings usually used for/comparable to them used for non-exulcerated one. All exulcerated hemangiomas' skin defects healed and exulceration stopped within a few days. Volume decreased with every laser session. All parents were satisfied with the results, the dressings were reported to be child-friendly and the regime was cost-effective. In conclusion, this progressive treatment regime seems to be superior to the classic one in treatment of exulcerated hemangiomas.

## 57. THE USE OF SYNCHROTRON INFRARED MICROSPECTROSCOPY FOR EVALUATION OF INFRARED LASER AND INDOCYANINE GREEN DYE IN MELANOMA TREATMENT

Ahmed El Bedewi  
Abdel Mamoon  
Egyptian Atomic Energy Authority Cairo, Egypt

Meghan Ruppel  
Randy Smith  
Thomas Tsang  
Lisa Miller  
National Synchrotron Light Source, Brookhaven National Laboratory  
Upton, NYCity, USA

Melanoma is a serious form of skin cancer and accounts for about 2% of all cancer deaths in the United States. Photodynamic therapy (PDT) is a treatment method that is currently being investigated to help combat the disease. In this study, human melanoma cells were given various concentrations of indocyanine green dye; a potential PDT agent, and then irradiated with a near infrared laser for different exposure times. The cells were stained and counted, also

showed that 75% of the cells were killed at the 60 minute exposure time. Cluster analysis of the infrared data revealed that in both the amide and nucleic acid regions (800-1900 cm<sup>-1</sup>) at 30 min and 45 min exposures clustered differently from controls. The lipid region (2600-3120 cm<sup>-1</sup>) for all exposure time points (15, 30, 45 min) clustered differently from controls. These results suggest that higher laser exposure times (30, 45, and 60 minutes) kill the most melanoma cells, having potential clinical applications, and that there are chemical changes in the amide, nucleic acid and lipid regions of the infrared spectra consistent with apoptotic changes in the cells.

## 58. ENERGY – INFORMATIONAL THERAPY FOR OSTEOPOROSIS IN DOCTOR KULIKOVCH'S CLINIC

Yuriy Kulikovych  
c.Dniepropetrovsk Ukraine

Osteoporosis is the most widely spread metabolic disease of the skeleton. It is characterized by loss of bone mass and damage of bone microarchitectonics with a consequent increase of brittleness leading to a higher risk of fractures. The importance of the osteoporosis problem is aggravated by the absence of effective, simple and harmless medicamentary therapy. The effectiveness of such treatment is rather low—only a small percentage of increase in the bone mass. We have developed our own methods of energy-informational therapy for osteoporosis using a systematic principle of influence and stimulation of the reparative process. We believe that each osteoporosis—related pathological condition has its specific causes. We are interested in both qualitative and quantitative characteristics of the organic etiopathogenesis. We identify osteoporosis, its stage and bone metabolism conditions, its causes and general conditions of the whole body, energetical conditions of acupunctural channels. After completion of the diagnostic program we get down to treatment.

Our aim:

To restore functional conditions of all systems of the body participating in calcium metabolism having pathological signs: kidneys, the endocrine system, the alimentary tract.  
To normalize regulation of the central structures of the brain, to restore neuro-endocrine and neuro-vegetative innervation.  
To stimulate cell and humoral links of the immune system.  
To activate microcirculation and changes in the metabolism of the bone tissue.

We achieve those aims thanks to our own methodology of treating chronic diseases and special methods of treating osteoporosis with an application of different types of low intensive laser and magnetic therapies, extremely-high frequency puncture, bioresonance ophthalmocolortherapy using the original equipment.

We have analyzed 176 cases of osteoporotic patients undergoing treatment in the Clinic from 1999 till 2006. We used the data of bone densitometry obtained by Dual-Energy X-ray Absorptiometry—DEXA as the criteria of the effectiveness of treatment. (Lunar DPX-MD, USA). We analyzed lumbar and proximal femur bone mineral density (BMD). The examinations were carried out before treatment and in the course of 3 years after the completion of treatment.

The results of the osteodensitometry have been analyzed in terms of the type of osteoporosis, sex, time of treatment, stage of osteoporosis, type of bone issue. Analgetical effects were being analyzed according to two scales: verbal – ranking scale and visual – analogical scale.

Conclusions:

Energy-informational therapy for osteoporosis in our clinic leads to a significant BMD growth for all types of osteoporosis - dozens of per cent of bone issue increase during half a year after completion of treatment. Bone issue increase correlates with a positive dynamics of bone metabolism markers: Cross Laps and Osteocalcin.

Pain intensity is being decreased four-fold.

None of our patients developed any fresh fractures in the course of 5 years after treatment.