

Naeser Laser Home Treatment Program

for Children with Cerebral Palsy and Motor Developmental Delay*

In an ideal situation when treating cerebral palsy, start treatment 2 weeks post-birth, with a 5 mW red-beam laser, Continuous Wave, for only 5 - 10 seconds per acupuncture point (Lidicka & Hegyi, 1991, see reference, below). Starting at age 2 years is considered late, start as soon as possible post-birth. No medical claims are made.

For a 4-year old child, for example, using the 5mW red-beam ITO laser pen, Continuous Wave, for about 30 seconds per acupuncture point. The 4-year old child we worked with liked to practice reciting the alphabet (about 30 seconds) per acupuncture point, while the mother was treating a point with the laser. Treat 3 – 6 times per week. Try to treat for only 10 minutes. Treat for years. Ito Laser, 5mW, 670 nm, Lhasa Medical, Weymouth, MA 800-722-8775, www.LhasaMedical.com \$118.00, replace two AAA batteries after three hours of use.

The pediatric Chinese Herbal Medicine formula, Liu Wei Di Huang Wang is often used with children with developmental delay.

There are two basic sets of points (Extra Meridians), which are alternated between the treatments (Set A and Set B). Note the following, regarding the sequence of points to be treated:

On a male child, treat the Master Point first, on the left side, only.

On a male child, then treat the Coupled Point, on the right side, only.

On a female child, treat the Master Point first, on the right side, only.

On a female child, then treat the Coupled Point, on the left side, only.

Set A (Governing Vessel)

Master Point – SI 3; Coupled Point – BL 62
TW 5

Set B (Dai Mai)

Master Point – GB 41; Coupled Point –

Note: The Yang Chiao Mai is also helpful to increase strength and agility in the feet, used with Motor Developmental Delay. Master Point - BL 62; Coupled Point - SI 3.

General Points to also Treat Every Day or Every Other Day

GV 15, and 16 (very important)

LI 11, and 4

BL 23, and 17

GB 41 and TW 5 are the most important points to treat for long-term use

ST 36

LIV 3

If child is agitated – LIV 3 and LI 4 (bi-lateral)

If leg turns outward – SP 5, KI 2, KI 6

If wrist turns outward – PC 6

If leg turns inward – GB 40, BL 62

If wrist turns inward – TW 5

Ear Points: (Treat ear points for less time). Corpus Callosum, Hypothalamus, Laterality Point, L; Oscillation Point (R and L).

Yamamoto New Scalp Needle Acupuncture Points: (Bilateral) Brain Point; Liver Point, temple area

Other Points: BL 57 (for spasms)

ST 40

GV 14

GB 34, and 39

KI 3

*Dr. Michaela Lidicka, Prague, Czechoslovakia and Dr. Gabriella Hegyi, Budapest, Hungary. Papers presented at ICMART Meetings, Munich, Germany, June 14-17, 1991.

Summarized in Naeser MA, Wei XB. Laser Acupuncture – An Introductory Textbook for Treatment of Pain, Paralysis, Spasticity and Other Disorders. Boston, Boston Chinese Medicine, 1994, p. 77. mnaeser@bu.edu

Additional Reference

Acupuncture or Laser Acupuncture to Treat Cerebral Palsy in Babies and Children

Asagai Y, Kanai H, Miura Y, Ohshiro T: Application of low reactive-level laser therapy (LLLT) in the functional training of cerebral palsy patients. Laser Therapy, 1994; 6: 195-202.

This study from the Shinano Handicapped Children's Hospital, Nagano, Japan involved 150 patients with spastic cerebral palsy, ages 10 months to 20 years. Two gallium aluminum arsenide diode, 60 mW or 100 mW, continuous wave, 810 nm wavelength (infrared) lasers were used for 15 to 30 seconds per point. The points chosen were standard points used for acupuncture or nerve blocks; local points on muscular hyperspasm were also used. All children received real LLLT, no sham treatments were administered.

In the majority of cases, spasm was successfully suppressed by LLLT, with the notable exception of those patients suffering from severe joint contracture. In 42 cases whose hands were normally involuntarily clenched, 34 cases (81%) were able to open their hands with less effort following LLLT.

The authors quote Kamikawa et al. (1982) who hypothesize that LLLT may cause vascular dilatation through the sympathetic nervous system, and reduce tonic muscle spasms in muscles which had been in a hypoxemic state. p. 200

"...Compared with conventional methodology, laser therapy has proved to be a simple, reliable and noninvasive method which enabled painless suppression of spasm...The effect of LLLT lasted from one to several hours in patients with severe spasticity...the authors feel that LLLT is particularly useful as a supplementary or adjunctive therapeutic modality to improve the overall efficacy of physical rehabilitation and functional training in children with cerebral palsy." p. 195

Kamikawa K, Ohnishi T, Suzuki M, Kanetani G, Shibamoto H: Laser therapy of pain.
The Journal of Japan Society for Laser Medicine, 1982: 3: 345-348.