ORIGINAL ARTICLE

The Performance of the Cold Laser Therapy (GaAlAs-980nm)

ZAHRA AL-TIMIMI¹

¹Laser Physics-College of Science for Women, Babylon University, Hillah, Iraq

Correspondence to: Zahra Al-Timimi: https://orcid.org/0000-0002-3209-553X , Email: dr.altimimizahra@gmail.com, Cell: 60403241549

ABSTRACT

Cold laser therapy has been largely utilized to enhance wound healing caused by several bio stimulatory characteristics conferred via laser rays obviously capable towards stimulate the restoration of flexible tissues wounds. Notwithstanding, the performance of pro-inflammatory interleukins has not been investigated yet. Interleukin-1 beta (IL-1ß) represents an individual of largely imperative proinflammatory cytokines, which could be concerned in wounds therapeutic. The target of this work was to investigate the influence of a 980nm laser on the IL-1β expression and its secretion in wound healing in laboratory mice. Wounds with a standard-sized of 2cm have been carried out on the face of forty-laboratory mice. Animals have been divided into two groups; half of them undergo cold laser treatment at 980 nm, continuous illuminations, output power 5 W, beam spot area at the target had 0.7 cm2, and an energy density had 643 J/cm2 delivered without delay after wounds procedure. Furthermore, the other half of the animals had been set up as a control group. Next, the animals have been divided into four groups interconnected to the healing time intervals. A repairing operation area has been uprooting and further stained by the immunohistochemistry method towards identifying the appearance of (IL-1β). Cold laser therapy has proficient to amplify the appearance of (IL-1β) near the beginning of healing stages plus boosting epithelialization remodeling procedure within one to two weeks of healing time. Cold laser therapy tested in this work resulted in enlarged expressions of (IL-1β) in the laser treatment group considerably next to one week of healing time, which has an effect on wound healing.

Keywords: Laser, wounds, therapy, photobiomodulation, healing, interleukins

INTRODUCTION

Low-level or cold lasers therapy is in cooperation an intense study matter and a going up clinical healing practice. Over and above the requirement for more confirmation on the healing issues and sufficient doses including laser parameters, it is however important to elucidate the cellular tools propitiated with laser therapy^{1,2}. Cold laser therapy uses radiation intensity therefore small that it's thought that several biological consequences that transpire are because of the express influences of emission more willingly than the effect of heating^{3,4}.

Cold laser therapy influences irradiated alive tissues depend undeviating scheduled the light along with therapy parameters for example the wavelengths, beaming power, irradiated spot, moreover the e exposure e time. Commencing those parameters, it's permissible towards determine the beaming exposure otherwise the power doses^{5,6}. Wavelengths range linking (630 nm -980 nm). Healing outgrowths are described for radiating exposures from one J /cm² to other exceeding than 300J /cm² ^{7,8}. Added essential feature touches modality of the emission deliverance, it is e continuous e wave (e CW) or e pulsed e wave (e PW). The common practiced modality is CW ,that have been employed designed for complete ranges of laser medical applications^{9,10}.

Wounds therapeutic or tissue restore indicates in the direction of evidence alternative of damaged tissues through alive tissues including comprises of two fundamental parts restoration as well the repair¹¹. Isolation within both of them is anchored in the consequential tissues. During restoration, functional are substituted via the propagation of encompassing unharmed dedicated cells; while in the restore; misplaced tissues is replaced via granulation tissues that matures towards appearance scar tissue^{12,13}.

The special belongings of metabolic marks in an

assortment of e physiological transform which grades in enhanced tissues restore, more rapidly promise of the provocative reaction, along with the pain decrease ¹⁴. A largely useful expansion factors as well as e cytokines in e cutaneous wounds therapeutic are e platelet- e derived, e vascular e endothelial, e transforming, e fibroblast, e epidermal insulin-like enlargement factors in addition to interlukines^{15,16}.

IL-1 β e is a cytokine e protein that in humans is determined via gene; it's a part of interlukin 1 cytokine family; additionally acknowledged as leukocytic pyrogen or leukocytice endogenouse moderatore or mononuclear ecell efactor, lymphocyte eactivating dynamic as well as other names¹⁷. It is generated via stimulated macrophages like a proproteine that is eproteolytically concocted towards its energetic structure by caspase-1 activation. It's a necessary intermediary of the stimulating reaction furthermore; it's concerned in a multiplicity of ecellular eactions; together with cells eproliferation, differentiation, along with apoptosis¹⁸.

In the healing tissues, IL-1 β is produced fundamentally via the cells of the epithelium; moreover, exogenous IL-1 β has been submitted to expedite the epidermal healing. Nevertheless, conclusions that IL-1 β is over expressed in wounds that heal badly have thrown doubt on the actual function of IL-1 β in a healing process^{19,20}.

Interleukin 1 beta corresponds to the creation of cytokines with the intention of standardizes quite a few aspects of the resistance in addition to an inflammatory reaction. Two kinds of Ligands by way of agonist action be fond of IL-1 α which recognized also like E hematopoietic 1, and Interleukin 1 beta (IL-1 β) or leukocytic pyrogen. They have produced through a variety of kinds of cells for example neutrophils, monocytes, macrophages, fibroblasts furthermore keratinocytes^{21,22}.

Our intention was to appraise therapy effectiveness with (GaAlAs) laser diode, wavelength 980 nm to examine the influence going on the e expression e of Interleukin1 beta (IL-1 β) in eincisional ewounds therapeutic in mice's.

MATERIALS AND METHODS

Animals: Forty-laboratory mouse, male adult, with an average body weight of 25-30 g and 4-6 months old utilized in this work. The mice's had been housed inside an individual, plastic enclosure (five animals per enclosure), within a fresh environment, together with woodland echip bedding, care at 22°C, moreover provided a laboratory e diet. All procedures have been approved through the animal institute in the general Centre of e Drugs and e Researches e Committee in e Iraq. The animals have been divided into two grouping; e control collection that consists of 20 animals as well as laser treatment collection contains 20 animals.

Laser Healing System: Emission was controlled via a IeTCe/4001e/Bencehtop/eLasereDiode/eTEC eController, 1A / 96 W by Le9805eE2eP5e (GaeAleAs) with wavelength 980 nm , (CW) Output Power 5 W , Ø5.6 mm from Thorlabs Inc .

A reason for decide on the 980nm wavelength was the statement that it doesn't be in contact to whichever e CCO e absorption e band. On this wavelength, there's a great water assimilation band, creation 980nm e photons additional probable to create tissues heating e than e photochemical belongings. The novel in progress differing results in wounds therapeutic, optimistic special effects on e neuropathic e pain e relief, furthermore denial possessions on traumatic e brain e injury. Available records on the usefulness of 980nm in dealing with e skeletal e muscle e inflammation are extremely insufficient, a detail that too encouraged us to utilize this wavelength^{23,24}.

Irradiation Procedure: A surgical part had been made over check part. An e incision has been made with 2 cm distance end to end. An infrared diode laser 980 nm had irradiated the animals of laser treatment group whereas; wounds of the control collection didn't irradiate.

Animals have been divided addicted to four clusters connected towards the healing stage time. A e specimens have been engaged from individually collections; in first day, third day, one week and two weeks furthermore arranged for e histological assessment.

The laser treatment collection have been delighted by GaAlAs laser beam of 980nm achieve beginning a e laser e apparatus. The dealing practical directly subsequent e surgical process intended for 3min, 5 W (output power), beam spot area was 0.7 cm² furthermore an energy density was ~ 643 J/cm².

Laser rays have been positioned in a straight line over the mice at vertically space of 0.5cm from the edging of wounds in addition to the irradiation has been act upon at single mark towards cover up the wounds locale.

Following to e sacrifice of the e animals, wounds e area had e surgically e removed, and set in (10%) of

Neutral e buffered e formalin (NBF) solution, moreover Formalin e -fixed e paraffin- e embedded (e FFPE).

Consequently, 4µm serialized sections had been achieved moreover, ready to be marked e immunohistochemistry e test through Labeled Streptavidin Biotin (e LSA e B) Method²⁵. e Immunostaining apparel in addition to the interlukine1beta has been IL-1B / IL-1 Beta Mouse anti-Human Monoclonal (3A6) Antibody, Ascitic fluid, 0.03% sodium azide and was obtained from LSBio.

Immunohistochemistry Stain Process: A practice of e immunostaining takes in a number of stages that have been: e Deparaffinizion the tissues e sections to remove the paraffin penetrated into the tissue. Rehydration for restoring lost water. Hydrogen peroxide (H2O2) peroxidases block to block endogenous peroxidise activity. Protein blocks for reduction of nonspecific background staining. Primary antibodies to the antigen, biotinylated link for attaching biotin to proteins and other macromolecules.

Horseradish peroxidase (HRP)-Conjugated Streptavidin to utilize in the immunodetection of biotinylated proteins. Counter stain to making the stained structure easily visible using a microscope.

elmunohistochemical Stain Examination: A stain localization will be e extracellular; essentially e pleiotropic appearance. It will deliver from e neutrophils including e macrophages furthermore is in the epithelial cells of the epidermis moreover; stromal e components such as e inflammatory e cells, blood vessels fibrous and e connective tissue) as a brownish stain.

Counting scheme has been draw according to Nicklin²⁶.2-4 countryside from every part has been utilize furthermore uttered as calculate per area by mm^2 for every animal. Keep count of appearance had zero as (negative stain), one (< 10), two (10-25 %), three (25-50 %), four (>50 %).

eStatistical Analysis: Grades have been signified as a mean±standard deviation. Numerical difference has been recognized through ANOVA examination of variance followed by inferential statistic t-test. Probability which; an observed of difference P value was < 0.05 consider to be important; while P value < 0.001 was extremely considerable.

RESULTS

An Immunohistochemistry positive stain intended for Interleukin-1 beta articulated on the first day for both collections (control and laser treatment). Within the control collection, the concentration of Interleukin-1 beta on a third day had been greater than the first day but had been getting back in the decrease after one week, and increased again after two weeks .However ; within the laser treatment collection had been furthermore reduced in the third day; besides after one week, also after two weeks. Independent t-e test for Interleukin-1 beta expression designed for control as well as laser treatment collections at a changed therapeutic time as given in Table .1.

Healing time (day)	Interleukin-1 beta	Control collection	Laser Treatment collection	Pe-value	t-test	Statistical Significance
	Expression	mean e± SD	mean ± SD			
1	Epidermal	0.78 ± 0.01	0.87 ± 0.4	0.377	-0.96	not significant
	Stromal	1 ± 0.43	1.33± 0.7	0.153	-1.82	not significant
3	Epidermal	0.75 ± 0.53	0.58 ± 0.514	0.418	0.84	not significant
	Stromal	0.91 ± 0 .7	0.58 ± 0 .79	0.589	0.84	not significant
7	Epidermal	0.25 ± 0.45	0.58 ± 0 .51	0.120	-1.78	not significant
	Stromal	0.33 ± 0.65	1.08 ± 0 .7	0.017	-2.81	significant
14	Epidermal	0.71±0.51	0.58 ± 0 .51	0.693	0.44	not significant
	Stromal	0.75 ± 0 .72	1 ± 0.73	0.389	-0.91	not significant

Table.1: Independent t-e test for Interleukin-1 beta expression designed for control as well as laser treatment collections at changed therapeutic time

A count of inflammatory cells has given and presented in the **Figure.1** during a healing time. The counting value is the average of measurements done in 10 slides. The values presented are the average for all slides in the collections. A Stromal appearance of IL-1 β stain articulated in both collections had displayed within **Figure.2**

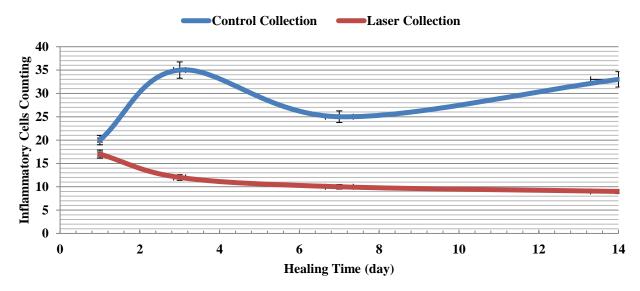
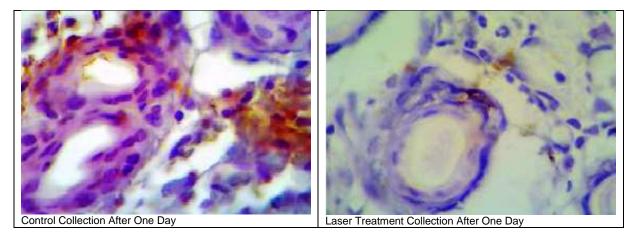


Figure.1: A count of inflammatory cells within the different collections



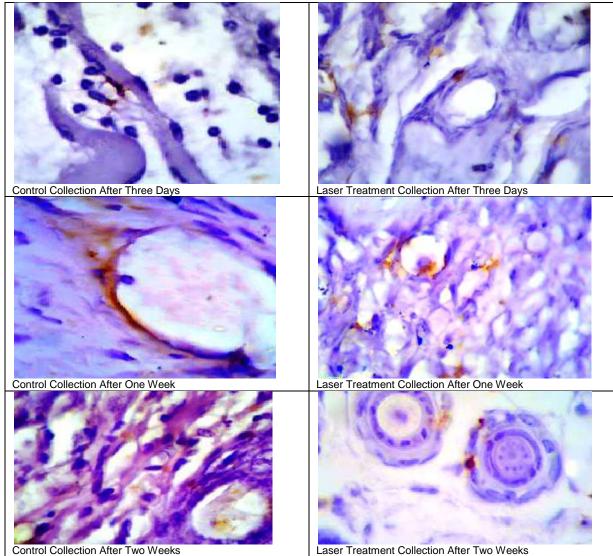


Figure.2: A Stromal appearance of IL-1β in both collections

Wound healing curves as a function for Interleukin-1 beta appearance in the Epidermal and the Stromal have been presented in **Figure.3** to considering the cold laser therapy role.

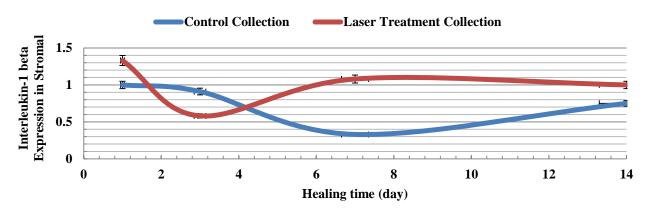


Figure.3: The wound-healing curve from IL-1β appearance in Stromal and Epidermal between control and laser treatment collections at different healing time

DISCUSSION

During this research, the epidermal appearance of Interleukin 1 beta inside a control collection has been observed in the third daytime higher than the first daytime. Here, response possibly will be described on this observation that lymphocytes gain access to the epidermis by the side of wounds locality moreover hold fast to keratinocytes that guide to the creation of mediation cells towards producing pro-inflammatory cytokines enumerating Interleukin 1 beta^{27,28}.

In addition, a sensitive waned through the first week and the appearance of epidermal Interleukin 1 beta turned in it's most minuscule might be as a result of the decrease of proinflammatory outgrowth ^{29,30}. An increase in the epidermal appearance within two weeks once more perhaps correlated directed from their apoptotic outcome of this cytokine ^{31,32}.

The stromal appearance within the control collection has observed too in an elevated stage on the first day then had turned down on the third day as well as on one week. Possibly this caused by the proinflammatory outcomes of Interleukin1 beta, furthermore, it's connected by neutrophil counts.²⁹.

Exclusively epidermal boost as well as the stromal appearance of Interleukin 1 beta, within a control collection during two weeks perhaps not connected to their proinflammatory outcome. Excluding this because of its apoptosis achieve; keratinocytes influence apoptosis; during remodelling stage of wounds therapeutic, in addition, cells administered for this macrophage ^{33,34}. These outcomes have been established through the evaluation of Interleukin 1 beta appearance involving epidermis and stromal on the first day that has been considered possibly as a result of e neutrophils' counts during the heightened stimulating stage of wounds therapeutic ^{35,36}.

Epidermal expression of Interleukin 1 beta within a laser treatment collection had been observed during the first day; furthermore, it had been reducing steadily within the third day, first week, and second week. This may be caused by a role of cold laser therapy happening on epithelium cells surface towards creating proinflammatory cytokines together with IL-1 β that are required throughout sensitive inflammations when wounds healing ^{37–39}.

Nevertheless, this achieves summarized the cold laser therapy role for anti-inflammatory specific properties are naturally associated in decrease the proinflammatory cytokines, in addition to the number of chemical mediators. Outcomes indicate that a cold laser therapy produces stimulating responses that possibly will change a transcription dynamic connected to the route for messenger RNA appearance proinflammatory cytokines ^{38,40}.

Statistics are agreed with earlier studies that recommended cold laser therapy could decrease making inflammatory mediators; in addition to actions which, supply inhibition of Interleukin 1 beta. The stromal appearance of Interleukin 1 beta within a laser therapy collection had been noticed during the first day, furthermore; it decreased on the third day. This untimely elevation in the appearance possibly caused by the effect of cold laser taking place of neutrophils as well as lymphocytes bring into being proinflammatory cytokines together with Interleukin 1 beta (IL-1 β) in sensitive inflammation period of wounds therapeutic that had been decreased during the third day of healing time ^{41,42}. Whereas the increase in stromal appearance during one and two weeks may be caused by that cold laser therapy encouraged keratinocytes construction of Interleukin 1 beta as well as which could influence wounds healing next to the encouragement of proliferative stage of therapeutic ^{33,43}.

The assessment demonstrated that the important difference involving control as well as laser treatment collections has been observed into a stromal appearance on one week of therapeutic time. Consequently, this possibly because of motivated macrophages together with fibroblasts creation of Interleukin 1 beta which, take part in a function in cell proliferation besides collagen surrounding substance deposition, pro matrix metalloproteinase during wounds therapeutic ⁴¹.

A study suggestion approved by Jurjus and etc.⁴⁴ (20) they establish that Interleukin1 absorption in the wounded tissue could achieve its top next to the sixth day, after that turn down progressively towards a link with the previous stage of therapeutic. Nevertheless, it is a conflict with Safavi and etc⁴⁵, which set up that the gene appearance of Interleukin 1 beta in addition to Interferon-gamma (IFN- γ); furthermore they were extensively suggested that the cold laser therapy could decline the quantity of irritation moreover; increases speed of the wounds healing progression.

CONCLUSIONS

Reconstructing the appearance of w genes bound on behalf of reproduction of stimulating e cytokines. Being the comprehensive examination, Interleukin 1 beta appeared on the way to influence wounds therapeutic considerably furthermore induced via cold laser therapy that involved directly post wounding.

1Declaration1of1Conflicting1Interests: The author states that do not seeking monetary benefits or individual associations that might contain come into view toward influence the performance detailed in this article.

Funding: The author did not got budgetary guidance for the investigation, investment, or conceivably distribution of this study.

REFERENCES

- 1 Allison RR, Moghissi K. Photodynamic Therapy (PDT): PDT Mechanisms. Clin Endosc [Internet]. 2013;46(1):24. Available from: http://ece.org/journal/view.php?doi=10.5946/ce.2013.46.1.24
- Willmott PR, Huber JR. Pulsed laser vaporization and deposition. Rev Mod Phys [Internet]. 2000 Jan 1;72(1):315–28. Available from: https://link.aps.org/doi/10.1103/RevModPhys.72.315
- https://link.aps.org/doi/10.1103/RevModPhys.72.315
 Webster GF. Phototherapy and Laser Therapy of Acne. In: Acne and its Therapy. 2007. p. 113–6.
- Zahra AT. Technological Advancements to Reduce the Influence of Absorption and Scattering on the Optical Imaging. Bangladesh Med Res Counc Bull [Internet]. 2020 Jun 10;46(1):64–5. Available from: https://www.banglajol.info/index.php/BMRCB/article/view/47 472
- 5 Karu TI. Biomedical Photonics Handbook. Vo-Dinh T, editor.

Biomedical Photonics Handbook, Second Edition: Therapeutics and Advanced Biophotonics. CRC Press; 2014. 187-217 p.

- 6 Sams WM. Photosensitizing Therapeutic Agents. JAMA [Internet]. 1960 Dec 17;174(16):2043. Available from: http://jama.jamanetwork.com/article.aspx?doi=10.1001/jama. 1960.03030160029007
- 7 Al Timimi Z, Jaafar, Zubir M, Jafri M. Photodynamic therapy and Green Laser blood Therapy. Glob J Med Res [Internet]. 2011;11(5):22–8. Available from: http://www.islalaser.org/wp-content/uploads/5-Photodynamic-therapy-and-Green-Laser-blood-Therapy.pdf
- Bodendorf MO, Grunewald S, Wetzig T, Simon JC, Paasch U. Fractional laser skin therapy. J der Dtsch Dermatologischen Gesellschaft. 2009;7(4):301–8.
- 9 Hamad Farhad; Jaafar Mohamad; Hamid Asaad; Omar Ahamad; Timimi Zahra; Houssein Hend. Influences of different low level laser power at wavelength 635 nm for two types of skin; dark and light. Proc 7th IMT-GT UNINET 3rd Int PSU-UNS Conf Biosci Influ. 2009;7(3):130–5.
- 10 Hend Houssein, Suhaimi Jaafar Mohamad, Ali Z, Zahra, Al Timimi, Mustafa, Ismail A. Influence of Low Power He - Ne Laser Irradiation on Hemoglobin Concentration, Mean Cellular Volume of Red Blood Cell, and Mean Cellular Hemoglobin. J Sains Kesihat Malaysia. 2011;9(2):9–13.
- 11 Samaneh R, Ali Y, Mostafa J, Mahmud NA, Zohre R. Laser therapy for wound healing: A review of current techniques and mechanisms of action. Vol. 12, Biosciences Biotechnology Research Asia. 2015. p. 217–23.
- 12 Al-Timimi J. Impact of laser (Nd:YVO4 Crystals,532nm) radiation on white blood cells. Iraqi Laser Sci J [Internet]. 2019;1(3):1–6. Available from: www.ilsj-online.org
- 13 Garcia VG, MacArini VC, De Almeida JM, Bosco AF, Nagata MJH, Okamoto T, et al. Influence of low-level laser therapy on wound healing in nicotine-treated animals. Lasers Med Sci. 2012;27(2):437–43.
- 14 Min PK, Goo BL. 830 nm light-emitting diode low level light therapy (LED-LLLT) enhances wound healing: A preliminary study. Laser Ther. 2013;22(1):43–9.
- 15 Kurach LM, Stanley BJ, Gazzola KM, Fritz MC, Steficek BA, Hauptman JG, et al. The Effect of Low-Level Laser Therapy on the Healing of Open Wounds in Dogs. Vet Surg. 2015;44(8):988–96.
- 16 Kahn F, Matthews J. Low intensity laser therapy applied in the healing of wounds. In: AIP Conference Proceedings. 2009. p. 64–71.
- 17 Dinarello CA. Interleukin-1 beta, interleukin-18, and the interleukin-1 beta converting enzyme. Ann N Y Acad Sci. 1998 Sep;856:1–11.
- 18 Warner SJC, Auger KR, Libby P. Interleukin 1 induces interleukin 1. II. Recombinant human interleukin 1 induces interleukin 1 production by adult human vascular endothelial cells. J Immunol. 1987 Sep;139(6):1911–7.
- 19 IL-1α. In: Rheumatology and Immunology Therapy. Berlin/Heidelberg: Springer-Verlag; 2006. p. 438–438.
- 20 Cheng W, Shivshankar P, Zhong Y, Chen D, Li Z, Zhong G. Intracellular interleukin-1α mediates interleukin-8 production induced by Chlamydia trachomatis infection via a mechanism independent of type I interleukin-1 receptor. Infect Immun. 2008;76(3):942–51.
- 21 Schmid M, Haslinger P, Stary S, Leipold H, Egarter C, Grimm C. Interleukin-1 beta gene polymorphisms and preterm birth. Eur J Obstet Gynecol Reprod Biol. 2012 Nov;165(1):33–6.
- 22 White CA, Dimitriadis E, Sharkey AM, Stoikos CJ, Salamonsen LA. Interleukin 1 beta is induced by interleukin 11 during decidualization of human endometrial stromal cells, but is not released in a bioactive form. J Reprod Immunol. 2007 Feb;73(1):28–38.
- 23 Arif RH, Kareem FA, Zardawi FM, Al-Karadaghi TS. Efficacy

of 980 nm diode laser and 2940 nm Er: YAG laser in gingival depigmentation: A comparative study. J Cosmet Dermatol. 2020 Oct;jocd.13733.

- 24 Farista S, Kalakonda B, Ahmed AS. Effectiveness of 980 nm Diode Laser Therapy on Recurrent Aphthous Stomatitis. Int J Laser Dent. 2014;4(3):83–6.
- 25 Thür B, Zlinszky K, Ehrensperger F. [Immunohistology as a reliable and efficient method for the diagnosis of BVDV infections]. Schweiz Arch Tierheilkd. 1996;138(10):476–82.
- 26 Nicklin MJH, Weith A, Duff GW. A Physical Map of the Region Encompassing the Human Interleukin-1α, Interleukin-1β, and Interleukin-1 Receptor Antagonist Genes. Genomics. 1994 Jan;19(2):382–4.
- 27 Giraldo S, Sanchez J, Felty Q, Roy D. IL1β (interleukin 1, beta). Atlas Genet Cytogenet Oncol Haematol. 2009;13(4):273–5.
- 28 Interleukin-1-beta New Formulation. In: Definitions [Internet]. Qeios; 2020. Available from: https://www.qeios.com/read/definition/48503
- 29 Ishida Y, Kondo T, Kimura A, Matsushima K, Mukaida N. Absence of IL-1 Receptor Antagonist Impaired Wound Healing along with Aberrant NF-κB Activation and a Reciprocal Suppression of TGF-β Signal Pathway. J Immunol. 2006;176(9):5598–606.
- 30 Renò F, Sabbatini M, Lombardi F, Stella M, Pezzuto C, Magliacani G, et al. In vitro mechanical compression induces apoptosis and regulates cytokines release in hypertrophic scars. Wound Repair Regen. 2003 Sep;11(5):331–6.
- 31 Stoof TJ, Mitra RS, Sarma V, Dixit VM, Nickoloff BJ. Keratinocyte activation following T-lymphocyte binding. J Invest Dermatol. 1992;98(1):92–5.
- 32 Fortunato SJ, Menon R. IL-1β is a better inducer of apoptosis in human fetal membranes than IL-6. Placenta. 2003;24(10):922–8.
- 33 Yu HS, Chang KL, Yu CL, Chen JW, Chen GS. Low-energy helium-neon laser irradiation stimulates interleukin-1α and interleukin-8 release from cultured human keratinocytes. J Invest Dermatol. 1996;107(4):593–6.
- 34 AL- Timimi Zahra a. Investigating the Effects of Green Laser Irradiation on Red Blood Cells: Green Laser Blood Therapy. Int J Appl Res Stud [Internet]. 2014;3(10):1–5. Available from:

http://www.ijars.ijarsgroup.com/article.php?aToken=1543843 a4723ed2ab08e18053ae6dc5b

- 35 Kreisler M, Christoffers AB, Al-Haj H, Willershausen B, D'Hoedt B. Low level 809-nm diode laser-induced in vitro stimulation of the proliferation of human gingival fibroblasts. Lasers Surg Med [Internet]. 2002 Jun [cited 2020 Feb 10];30(5):365–9. Available from: http://doi.wiley.com/10.1002/lsm.10060
- 36 Ejiri K, Aoki A, Yamaguchi Y, Ohshima M, Izumi Y. Highfrequency low-level diode laser irradiation promotes proliferation and migration of primary cultured human gingival epithelial cells. Lasers Med Sci. 2014;29(4):1339– 47.
- 37 Singh J. Laser Therapy. In: Textbook of Electrotherapy [Internet]. Jaypee Brothers Medical Publishers (P) Ltd.; 2012. p. 226–226. Available from: https://www.jaypeedigital.com/book/9789350259597/chapter /ch6
- 38 Zahra A-T. Impacts of laser energy doses in maintaining the shape and deformability of the red blood cell (morphological &physiological) in vitro. Lett Appl NanoBioScience [Internet]. 2020 Mar 10 [cited 2020 Aug 3];9(1):875–9. Available from: https://nanobioletters.com/wpcontent/uploads/2020/03/2284680891875879.pdf
- 39 Zahra AT. Biological Effects of Yellow Laser-Induced of Cell Survival: Structural DNA Damage Comparison is Undergoing Ultraviolet Radiation Photocoagulation. Int J Eng Res Gen Sci [Internet]. 2014;2(5):544–8. Available from:

www.ijergs.org

- 40 Diambri C, Incerti-Parenti S, Siviero L, Gracco A. LLLT In Vitro Effects on the Proliferation of Human Gingival Fibroblasts and on the Gene Expression of Fibronectin and Type I Collagen. Med Oral Patol Oral y Cir Bucal. 2012;S49–
- 41 Werner S, Grose R. Regulation of wound healing by growth factors and cytokines. Vol. 83, Physiological Reviews. 2003. p. 835–70.
- 42 Barrientos S, Stojadinovic O, Golinko MS, Brem H, Tomic-Canic M. Growth factors and cytokines in wound healing. Vol. 16, Wound Repair and Regeneration. 2008. p. 585–601.
- 43 Chittoria RK, Kumar SH. Low-Level Laser Therapy (LLLT) in Wound Healing. In 2018. p. 21–6.
- 44 Jurjus A, Atiyeh BS, Abdallah IM, Jurjus RA, Hayek SN, Jaoude MA, et al. Pharmacological modulation of wound healing in experimental burns. Burns. 2007 Nov;33(7):892– 907.
- 45 Safavi SM, Kazemi B, Esmaeili M, Fallah A, Modarresi A, Mir M. Effects of low-level He–Ne laser irradiation on the gene expression of IL-1 β , TNF- α , IFN- γ , TGF- β , bFGF, and PDGF in rat's gingiva. Lasers Med Sci. 2008 Jul;23(3):331–5.