



Low-Level Light Therapy: Navigating the Science and Applications of Photobiomodulation in Eye Care

 Joseph J. Allen, OD, FAAO, Dipl ABO
   Doctor Eye Health
  The Doctor Eye Health Podcast



1

Disclosures

6/6 - Independent contractor Alcon - Independent Contractor, Speaker Allergan - Advisory Board Amazon - Independent contractor ASPEX - Independent Contractor ASUS - Independent Contractor Avellino - Independent Contractor Axon Optics - Independent Contractor BMC - Advisory Board, Independent Contractor DryEyeRescue - Independent Contractor Engage Tech - Consultant, Stock Options EyeEco - Independent Contractor, EyeLove - Independent Contractor, FluoroSCENE Media - Independent Contractor GamerAdvantage - Advisory Board, Independent Contractor Google - Royalties Glaukos - Independent Contractor Mealogix - Independent Contractor MeouHealth - Independent Contractor	Meta - Royalties MYZE - Advisory Board, Independent Contractor, Shareholder Nanodropper - Independent Contractor, Shareholder OmegaQuant - Independent Contractor OmniActive - Consultant, Independent Contractor Performance Vision Technologies - Independent Contractor Randolph Engineering - Independent Contractor STAAR Surgical - Independent Contractor TCL - Independent Contractor Tarsus - Independent Contractor Tear Restore - Advisory Board, Independent Contractor, Previous Shareholder TheraTears - Independent Contractor ThinOptics - Independent Contractor Weeve - Independent Contractor Zenni Optical - Independent Contractor
--	--

All Relevant Relationships Have Been Mitigated

2



What is Red Light Therapy and Photobiomodulation Therapy (PBMT)

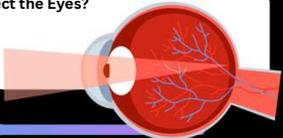
Laser Vs LED?

How does LLLT / PBMT Work?

- Understanding Protocols

How Does Red Light Therapy Affect the Eyes?

- o Retinal Disease
- o Ocular Surface Disease
- o Myopia



3

Why Are We Talking About This??



4





5



Valeda (LumiThera)
Approved by FDA on November 4, 2024

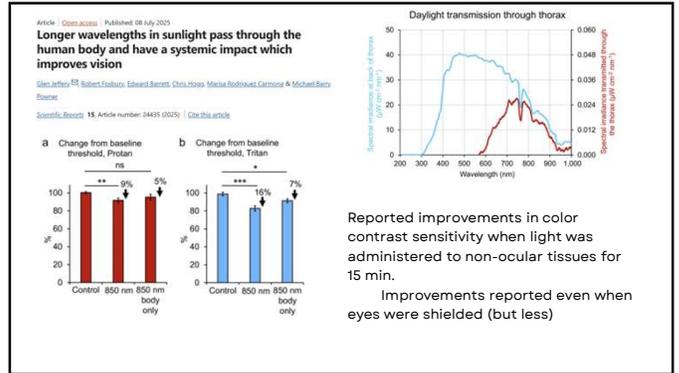


Eyerising Myopia Management Device
Eyerising International

6



7



8



Simple definition

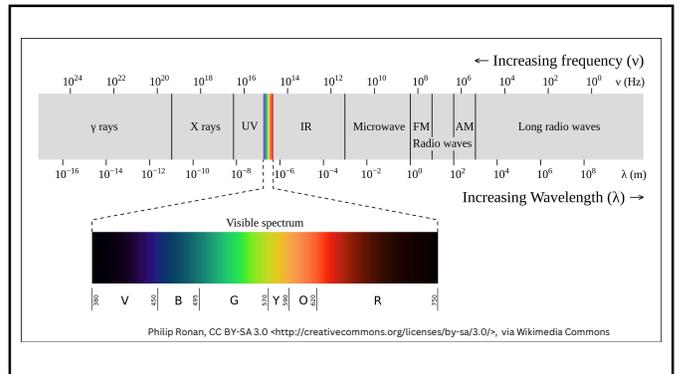
“Red light therapy” is a treatment that uses low wavelength light to help improve

- tissue health
- reduce inflammation
- treat pain
- promote healing

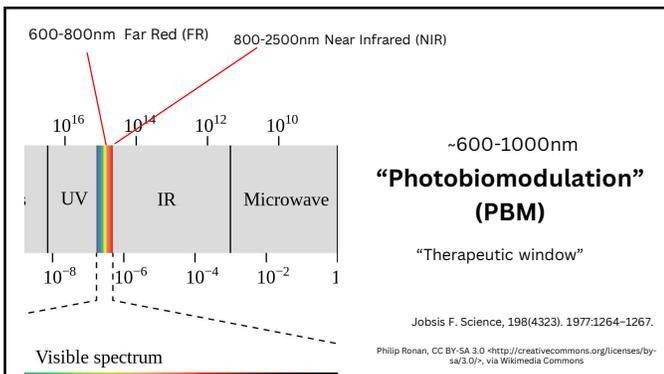
Common names

Red Light Therapy
Low-Level Light Therapy (LLLT)
Low-Power Laser Therapy
Low-Level Laser Therapy
Non-Thermal LED Light
Soft Laser Therapy
Cold Laser Therapy
Photobiomodulation Therapy (PBMT)

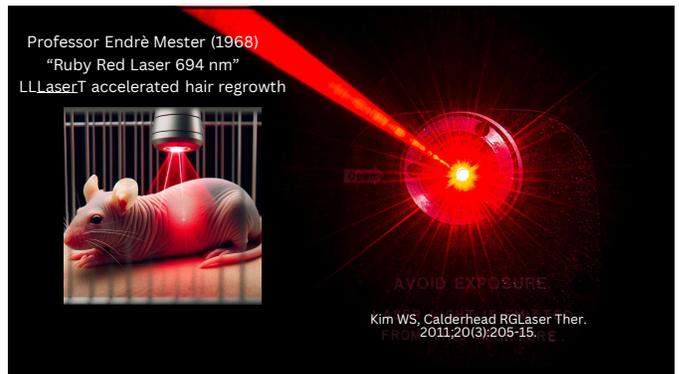
9



10



11



12

NASA LED

- less divergent
- higher power
- greater stability
- quasimonochromatic

Whelan HT, Houle JM, Whelan NT, et al. (2000). Space Tech. & App. Int'l. Forum. Space Tech. & App. Int'l. Forum: 37-43

13

LED VS LASER

PROS

- Cheaper
- Safer
- Compact and wide treatment area

Cons

- Tissue penetration?
 - debated
- less precise targeting

PROS

- Deeper tissue penetration
- More precise treatment
- Historically more studied in early research

Cons

- higher cost
- safety risks (beam intensity)
- less suitable for large treatment areas
 - (small spot size)

Hamblin MR. Photochem Photobiol. 2018 Mar;94(2):199-212.

14

WHY? RED LIGHT

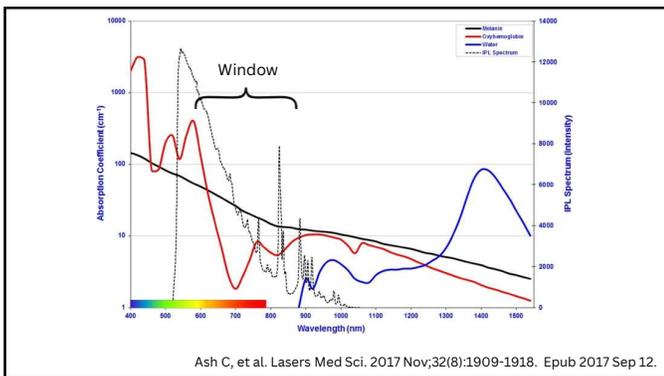
15

Below 600nm = hemoglobin will absorb

Above 950nm = water will absorb (limits penetration and creates Heat)

Ash C, et al. Lasers Med Sci. 2017 Nov;32(8):1909-1918. Epub 2017 Sep 12.
Opel DR, et al. J Clin Aesthet Dermatol. 2015 Jun;8(6):36-44

16



17

Blue LEDs

- (activate light-gated calcium channels)
- destruction of bacteria via the formation of oxygen free radicals and cytokine production

Yellow LEDs

- alters ATP production, gene expression, and fibroblast activity

Red LEDs

- activate fibroblast growth factor, increase type 1 pro-collagen, and decrease MMP-1

Combination Therapy

- Exposure to combination of LED wavelengths is **often more effective than monotherapy**

Opel DR, et al. J Clin Aesthet Dermatol. 2015 Jun;8(6):36-44
Zein R. J Biomed Opt. 2018 Dec;23(12):1-17
Ash C, et al. Lasers Med Sci. 2017 Nov;32(8):1909-1918.

18

• Medicine (Baltimore). 2025 Feb 14;104(7):e41596. doi: 10.1097/MD.00000000000041596

Clinical study to evaluate the efficacy and safety of home-used LED and IRED mask for crow's feet: A multi-center, randomized, double-blind, sham-controlled study

Sang Hyun Park ^a, Seong Oh Park ^b, Jae-A Jung ^{c*}

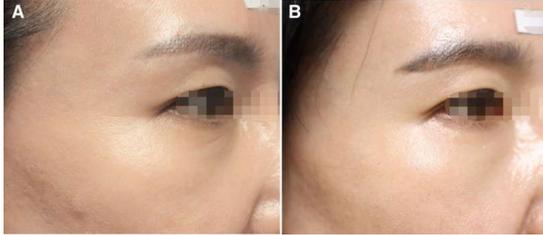


19

• Medicine (Baltimore). 2025 Feb 14;104(7):e41596. doi: 10.1097/MD.00000000000041596

Clinical study to evaluate the efficacy and safety of home-used LED and IRED mask for crow's feet: A multi-center, randomized, double-blind, sham-controlled study

Sang Hyun Park ^a, Seong Oh Park ^b, Jae-A Jung ^{c*}



20

• J Cosmet Dermatol. 2024 Sep 25;24(1):e16599. doi: 10.1111/jocd.16599

Efficacy and Safety of a Home-Use Light-Emitting Diode Neck Device for Improvement in Neck Wrinkles: A Multicenter, Randomized, Double-Blind, Sham Device, Superiority Verification, Confirmatory Clinical Trial

Seong Oh Park ^{1,2*}, Junsoo Jang ¹, Sang Hyun Park ¹, Jae-A Jung ¹, Chihwan Cha ¹, Bo Hyun Lee ¹, Junghwan An ¹



21



Variables?

22

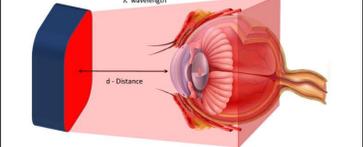
Key Parameters in LLLT / PBMT

- wavelength
- power
- irradiation time
- beam area (at the skin or culture surface)
- pulse parameters (frequency)
- anatomical location (skin color, target location, i.e. depth below skin, mitochondrial density)
- number of treatments
- interval between treatments



Jenkins PA, Carroll JD. Photomed Laser Surg. 2011 Dec;29(12):785-7.

23



3) Radiant flux = radiant power (W)
Irradiance received by a surface integrated over time

E: Irradiance = Radiant flux/surface area (W/cm²)
Irradiance received by a surface

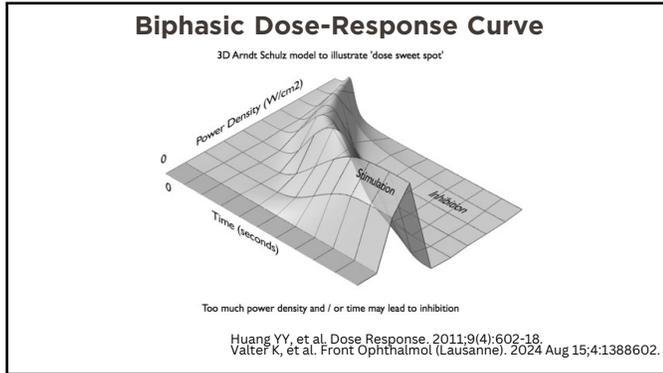
H: Radiant exposure = Radiant fluence (J/cm²)
Irradiance received by a surface integrated over time

Photo credit Valter K (2024)

irradiance (W/cm²) X exposure (seconds) = [radiant exposure] (J/cm²)

Valter K, et al. Front Ophthalmol (Lausanne). 2024 Aug 15;4:1388602.

24



25

Ideal settings???

26

Ideal settings???

27

Ideal settings???

Research is ongoing

Tissue dependent

Huang YY, et al. Dose Response. 2011;9(4):602-18.
Valter K, et al. Front Ophthalmol (Lausanne). 2024 Aug 15;4:1388602.

28

Acne	Crescentic glomerulonephritis	Liver regeneration	Periodontitis
Achilles tendinitis	Delayed hypersensitivity	Lung fibrosis	Peritonitis
Acute pain	Dentin regeneration	Lung hemorrhage	Pleurisy
Acute respiratory distress syndrome	Depression	Lung inflammation	Pressure ulcer
Adipose tissue inflammation	Dermal abrasions	Lung injury	Radiation injury
Age-related macular degeneration	Diabetic kidney	Lymphedema	Restenosis
Allergic asthma	Diabetic eyes	Mastitis	Retinitis pigmentosa
Allergic contact dermatitis	Diaphragm muscle dysfunction	Methanol toxicity of retina	Rheumatoid arthritis
Allergic rhinitis	Eardrum perforation	Morphine withdrawal	Sarcopenia
Allodynia	Endophthalmitis	Multiple sclerosis	Sciatica
Alzheimer's disease	Exercise performance	Muscle injury	Spinal cord injury
Anisotropic lateral sclerosis	Haemarthrosis	Myocardial infarct	Stroke
Aneurysm	Hair loss	Myonecrosis	Submandibular gland inflammation
Arthritis	Heart failure	Myopathy	Surgical wound infection
Atherosclerosis	Hearing loss	Nerve injury	Teeth re-implantation
Atrophic gastritis	Hyperalgesia	Neuropathic pain	Tendinopathy
Auditory neuropathy	Hypertension	Oral mucositis	Thrombocytopenia
Bone fracture	Kidney fibrosis	Oral ulcer by formocresol	Tinnitus
Bone grafts	Kidney injury	Osteoarthritis	TMJ inflammation
Burn injury	Laryngitis	Osteomyelitis	Tracheal incision healing
Cancer	Ligament injury	Osteoporosis	Traumatic brain injury
Colitis	Listeria infection	Parkinson's disease	Wound healing
COVID	Liver cirrhosis	Paw edema	

Heiskanen V, et al. Photochem Photobiol Sci. 2018 Aug 8;17(8):1003-1017

29

But how does it work?

- Alters Inflammatory Response
- Enhances Tissue Repair
- Pain Modulation

30

How Does It work?

~660nm & ~800nm directly activates & absorbed by **cytochrome c oxidase (Complex IV)** within mitochondrial membrane

- Increases **ATP** and **cAMP**
- nitric oxide (**NO**)

NO - increases

- anti-apoptotic pathways
- cellular metabolism

OpenStax College, CC BY 3.0 https://creativecommons.org/licenses/by/3.0/, via Wikimedia Commons
de Freitas LF, et al. IEEE J Sel Top Quantum Electron. 2016 May-Jun;22(3):7000417

31

How Does It work?

- Retrograde signaling**
 - (Alters Gene Expression within nucleus)
- Activation of light sensitive ion channels
- Activation of transcription factors
- May have direct cell-free light-mediated effects on molecules

Karu TI, et al. Photochem Photobiol. 2008;84(5):1091-1099
de Freitas LF, et al. IEEE J Sel Top Quantum Electron. 2016 May-Jun;22(3):7000417

32

Reduction in inflammation

- inhibiting prostaglandin E2, COX-1 and COX-2
- modifications on histones
- influence the expression of cytokines and chemokines

Cytoprotection

- can delay or inhibit methanol and cyanide toxicity
- can reduce amyloid- β -peptide in Alzheimer's disease

Lim W, et al. Photochem. Photobiol. 2013;89(1):199-207.
Chen C, et al. Mediators Inflamm. 2014;1-13, 2014.
Balis JI, et al. Proc. Natl. Acad. Sci. U.S.A. 2003;100(6):3439-3444.
Zhang H, et al. Cell. Signal. 2012;24(1):224-232

33

Proliferation

- keratinocytes and fibroblasts which aid in collagen synthesis and wound healing
- vascular endothelial cells (decrease in VEGF)
- osteoblasts

Migration

- migration of tenocytes for tendon healing (Achilles tendon)
- migration and vitality of melanocytes
- fiber sprouting and neuronal cell migration

Sperandio FF, et al. J. Biophotonics. 2014;
Szymanska J, et al. J. Physiol. Pharmacol. 2013;64(3):387-391.
Amid R, et al. J Lasers Med Sci:163-170.
Alghamdi KW, et al. Lasers Med. Sci. 2015;30(5):1541-1551.
Raj V, et al. Biophys Rev (Melville). 2021 Jun 17;2(2):021303
Zhang, P, et al. Graefes Arch Clin Exp Ophthalmol 261, 2535-2545 (2023)

34

REVIEW

PBMT

- Reduces oxidative stress
- Reduces inflammation
- Supporting mitochondrial function
- Stimulates cellular repair (through transcription & protein synthesis)
- Enhancing fibroblast activity and collagen synthesis
- Improves circulation and oxygenation of tissues
- Reduces pain by modulating nociceptors and lowering inflammation.

Chung H, et al. Ann Biomed Eng. 2012 Feb;40(2):516-33.
Zein R, et al. J Biomed Opt. 2018 Dec;23(12):1-7.
Hamblin MK, et al. Photochem Photobiol. 2016 Mar;94(2):199-212

35

How does this affect the eye?

36



Retinal Disease

- Age Related Macular Degeneration
- Diabetic Eye Disease

Ocular Surface Disease

- Dry Eye Disease
- Chalazion

Myopia

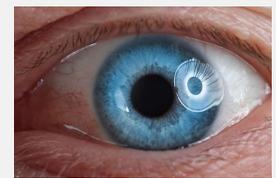
Published research also on (not covered in this talk)

- Central Serous Retinopathy
- Glaucoma
- Neuropathic Corneal Pain
- LHON
- Stargardt's disease
- Amblyopia
- spaceflight associated neuro-ocular syndrome (SANS)

37

WHY THE EYE?

- Dense concentration of mitochondria
- Vulnerability to oxidative damage and inflammation.



- Eyelid skin is extremely thin and translucent
- This allows minimal scattering or absorption.

38



Light transmission through the human eyelid: *in vivo* measurement

M.J. Moseley
Department of Ophthalmology, University of Leicester, Clinical Sciences Building, Leicester Royal Infirmary, PO Box 65, Leicester LE2 7LX

S.C. Baylis
Department of Physics, University of Leicester

A.K. Fielder
Department of Ophthalmology, University of Leicester
(Received 17 November 1987)

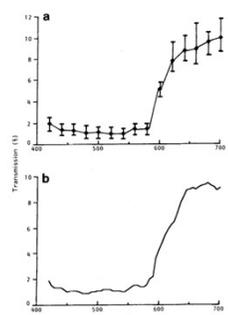
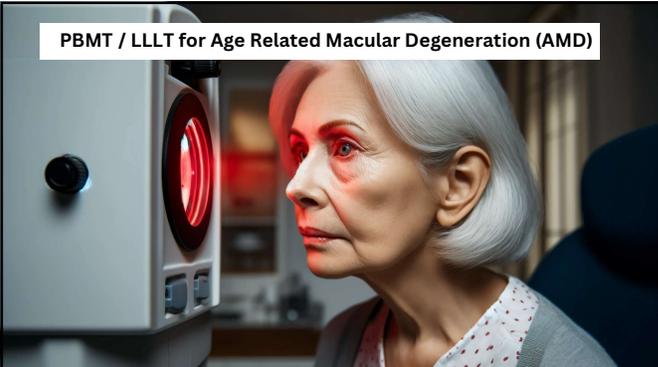


Figure 1 Light transmission through the human eyelid. (a) Mean and range obtained from three adult subjects with 20 nm resolution. (b) Mean data obtained from one adult subject with 5 nm resolution

39

PBMT / LLLT for Age Related Macular Degeneration (AMD)



40

PBMT for Age Related Macular Degeneration (AMD)

LIGHTSITE I pilot study 2018

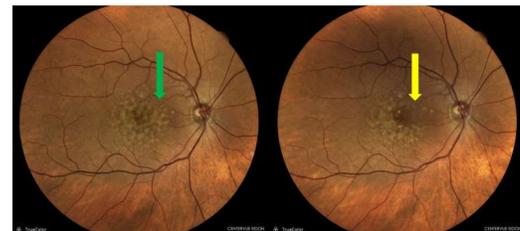
- PBMT vs Sham (30 patients with dry AMD - BCVA 20/40-20/200)
- nine sessions delivered over three weeks
 - average gain of four letters in BCVA immediately at months 1 and 7.
 - ~50% with PBT had improvement of 5+ letters vs 13.6 in sham group at 1 month
 - Statistically significant improvements were observed in **contrast sensitivity, central drusen volume, central drusen thickness, and quality of life** ($p < 0.05$)



Markowitz SN, et al. Retina. 2020 Aug;40(8):1471-1482.
Merry GF, et al. Acta Ophthalmol. 2017;95(4):e270-e277

41

PBT for Age Related Macular Degeneration (AMD)



(590 nm, 660 nm, and 850 nm)

Siqueira RC. Photobiomodulation Using Light-Emitting Diode (LED) for Treatment of Retinal Diseases. Clin Ophthalmol. 2024 Jan 22;18:215-225.

42

PBT for Age Related Macular Degeneration (AMD)



Parameter	Specifications
Light sources	Light-emitting diodes
Light emission (maximal)	590-nm output: 5 mW/cm ² 660-nm output: 65 mW/cm ² 850-nm output: 8 mW/cm ²
Beam diameter	30 mm (nominal) at treatment plane
Treatment exposure time	A total of 250 seconds (4 minutes 10 seconds). There are 4 phases: 1: 35 seconds, patient's eyes open [pulsed yellow and NIR wavelengths] 2: 90 seconds, patient's eyes closed [continuous red wavelength] 3: 35 seconds, patient's eyes open [pulsed yellow and NIR wavelengths] 4: 90 seconds, patient's eyes closed [continuous red wavelength]

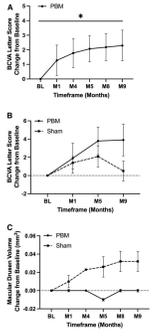
(590 nm, 660 nm, and 850 nm)

43

PBT for Age Related Macular Degeneration (AMD)

LIGHTSITE II study 2021

- PBM vs Sham (44 patients with intermediate dry AMD)
- nine treatments over a 3- to 5-week period w/ retreatment at 4 & 8 months
 - statistically significant improvement in BCVA with a 4-letter gain in the PBM-treated group versus 0.5-letter gain with sham (p < 0.1)
 - 35.3% of PBM-treated eyes showed ≥ 5-letter improvement at 9 months
 - No increase in Drusen volume with PBT vs increase in sham
 - 20% less GA growth** in the PBM group over 10 months



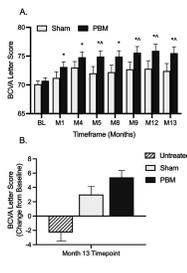
Burton B, et al. Ophthalmol Ther. 2023 Apr;12(2):953-968

44

PBT for Age Related Macular Degeneration (AMD)

LIGHTSITE III study 2021

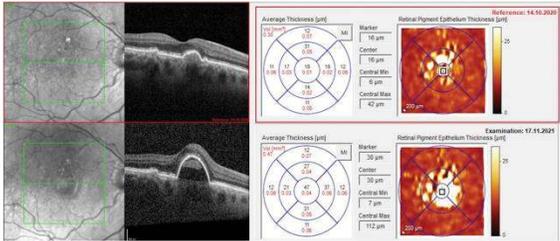
- PBM vs Sham (100 patients with intermediate dry AMD)
- nine sessions over 3 to 5 weeks every four months over 24 months
 - 55% of PBM-treated eyes showed ≥ 5 letter gain (mean 9.7 ± 3.7)
 - 26.4% showed ≥ 10 letter gain (mean 12.8 ± 2.7)
 - 5.5% showed ≥ 15 letter gain.
- favorable safety profile
- GA advanced in 9.8% of Sham-treated eyes
 - 1.1% of PBM-treated eyes**



Boyer D, et al. Retina. 2024 Mar 1;44(3):487-497.
Marion Bonifant Munk, et al. Invest. Ophthalmol. Vis. Sci. 2023;64(8):5053.

45

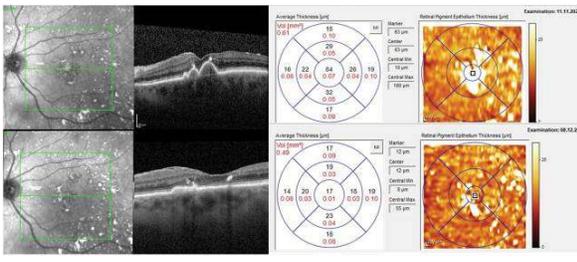
Macular Drusen with sham



Boyer D, et al. Retina. 2024 Mar 1;44(3):487-497.

46

Macular Drusen with PBT



Boyer D, et al. Retina. 2024 Mar 1;44(3):487-497.

47

PBT for Age Related Macular Degeneration (AMD)

Ophthalmol Ther. 2024 Sep 13;13(11):2855-2868. doi: 10.1007/s40123-024-01030-wj

Safety, Tolerability, and Short-Term Efficacy of Low-Level Light Therapy for Dry Age-Related Macular Degeneration

EYE-LIGHT® device
590 nm (yellow) and 630 nm (red), in both continuous and pulsed modes

A 4 PROTOCOL FOCUS

ICYOLE1™ (intermittent continuous)

M	T	W	T	F	S	S
○	○	○	○	○	○	○
○	○	○	○	○	○	○
○	○	○	○	○	○	○
○	○	○	○	○	○	○

SESSION 1 → Yellow → Yellow
3 to 4 Days Apart
SESSION 2 → Yellow → Yellow
SESSION 3 → Yellow → Yellow

ICYOLE1™ (intermittent pulsed)

M	T	W	T	F	S	S
○	○	○	○	○	○	○
○	○	○	○	○	○	○
○	○	○	○	○	○	○
○	○	○	○	○	○	○

SESSION 1 → Yellow → Yellow
3 to 4 Days Apart
SESSION 2 → Yellow → Yellow
SESSION 3 → Yellow → Yellow



Borrelli E, et al. Ophthalmol Ther. 2024 Nov;13(11):2855-2868.

48

PBT for Age Related Macular Degeneration (AMD)

B 4-IN-DEPTH SESSION SEQUENCE

Phase 1
YELLOW LMP LLLLT (PBM)

5 min (Continuous Light / Eyes Closed)

1 min (Pulsed Light / Eyes Open)

Phase 2
RED LMP LLLLT (PBM)

5 min (Continuous Light / Eyes Closed)

1 min (Pulsed Light / Eyes Open)

Borrelli E, et al. Ophthalmol Ther. 2024 Nov;13(11):2855-2868.

49

Safety, Tolerability, and Short-Term Efficacy of Low-Level Light Therapy for Dry Age-Related Macular Degeneration

Safety & Tolerability

- No signs of retinal phototoxicity
- warmth (10.5%)
- dry eye like symptoms (7.9%)
- visual perseveration (3.9%)

Results at 4 months (n=76)

- gain of five or more letters post-treatment vs sham (20.3% vs. 8.9% respectively; p = 0.043)
- statistically significant disparity in mean drusen volume changes from baseline

Borrelli E, et al. Ophthalmol Ther. 2024 Nov;13(11):2855-2868.

50

PBT for Age Related Macular Degeneration (AMD)

Article Published 19 April 2025

Photobiomodulation-induced choriocapillaris perfusion enhancement and outer retinal remodeling in intermediate age-related macular degeneration: a promising therapeutic approach with short-term results

n=60 8 sessions over 4 weeks

- significant improvements in BCVA ($\Delta +3.2 \pm 1.4$ letters, p = 0.042)
- reduction in drusen volume ($\Delta - 0.003 \pm 0.001$ mm³, p = 0.028)
- decrease in choriocapillaris Flow Deficit % ($\Delta -3.1 \pm 1.4\%$, p = 0.024)

BCVA (ETDRS) p=0.042

Group	Baseline	2 Months
PBM	~75	~80
Sham	~75	~75

MDV (mm³) p=0.028

Group	Baseline	2 Months
PBM	~0.010	~0.008
Sham	~0.010	~0.010

Viggiano, P., et al. Eye (2025).

51

PBT/ LLLT for Diabetic Macular Edema (DME)

- Significant reduction in retinal microvascular leakage
 - inner plexiform layer
 - inner nuclear layer
 - outer plexiform layer

Eells et al tested anti-VEGF alone VS anti-VEGF plus PBT. Using 670 nm-light treatment for three consecutive days per week for 8 weeks

- central retinal thickness (CRT) of **-24±5 microns and improvement of 6±5 letters in the PBT group**
- anti-VEGF alone = CRT +120 ± 97 microns gain and -3 ± 4 letters

Shen W, et al. Diabetologia. 2020;63(9):1900-1915.
Cheng Y, et al. Diabetes. 2018;67(2):291-298.
Eells J, et al. Poster presented at: 2017 ARVO Annual Meeting, May 7-11, 2017, Baltimore, MD.

52

Ophthalmol Retina. Author manuscript; available in PMC 2023 Apr 1. PMID: PMC9011341
Published in final edited form as: Ophthalmol Retina. 2022 Apr;6(4):298-307. NIHMSID: NIHMS1778118
Published online 2021 Oct 8. doi: 10.1016/j.oret.2021.10.003 PMID: 34628666

A Randomized Trial of Photobiomodulation Therapy for Center-Involving Diabetic Macular Edema with Good Visual Acuity (Protocol AE)

Judy E. Kim, MD,¹ Adam R. Glassman, MS,² Kristin Joshi, PhD,² Michele Melia, ScM,² Lloyd P. Aiello, MD,³ Carl Baker, MD,⁴ James T. Eells, PhD,⁵ Lee M. Jampol, MD,⁶ Timothy S. Kern, PhD,⁷ Dennis Marcus, MD,⁸ Hani Salehi-Had, MD,⁹ Sandeep N. Shah, MD,¹⁰ Daniel F. Martin, MD,¹¹ Cynthia R. Stockdale, MSPH,² and Jennifer K. Sun, MD, MPH²

- Participants had CI-DME and visual acuity (VA) 20/25 or better
- 670 nm at a dose of 4.5 J/cm² - applied for 90 seconds twice daily for 4 months.

safe and well-tolerated, was not found to be effective

53

Inken S, Schwahn H, Munk MR, et al. Non-invasive treatment of early diabetic macular edema by multi-wavelength photobiomodulation with the Valeda light delivery system. Invest Ophthalmol Vis Sci. 2021;62(8):1066.

54

Non-Invasive Treatment of Early Diabetic Macular Edema by Multiwavelength Photomodulation with the Valeta Light Delivery System

Published online 2023 Nov 22. doi: 10.1177/0974122423125933

PMCID: PMC1067607
PMID: 38020264

Hakan Kivimäki¹, Marco R Munk^{1,4,5}, Panbina F Tefnos⁶, Chyi-Li Crosswell⁶, Clark E Tiedford⁶, Renee Plucker⁴, and Hansruof Schwan¹

- Mean CRT at Baseline was $293.6 \pm 50.3 \mu\text{m}$ and significantly reduced at Month 1 to $284.1 \pm 39.4 \mu\text{m}$
 - IRF was completely resolved in 10/30 eyes (33.3%) following PBM treatment at Month 1 ($p < 0.0001$);
 - At Month 3, 24/30 eyes (80.0%) showed IRF ($p < 0.0001$)
 - No phototoxicity at 16 months.

Time Point	IRF Absent	IRF Present
Baseline	0	30
Month 1	20	10
Month 3	24	6

Inken S, Schwahn H, Munk MR, et al. Invest. Ophthalmol Vis Sci. 2021;62(8):1066.

55

PBT/ LLLT for Ocular Surface Disease

56

Intense Pulsed Light (IPL) VS PBMT / LLLT

- IPL:**
 - high-intensity (600nm-1200nm), polychromatic light
 - obliteration of atypical erythematous blood vessels
 - decrease in Demodex & bacterial load
 - heating of the meibomian glands and liquefaction of the meibum
 - Promotes cell proliferation, enhancing collagen synthesis, increasing local blood flow, and activating immunologic cells, reducing pro-inflammatory cytokines
- LLLT:**
 - low-power, high-fluence, and quasimonochromatic light
 - promotes cellular repair, tissue regeneration, reduction of pain, inflammation, and prevention of tissue damage
 - May decrease neutrophils and inflammatory cytokines leading to an increase in basal tear secretion
 - May improve corneal surface healing (in mice)

Castro C, et al. Cureus. 2023 Jul 5;15(7):e41386.
GoO H, et al. Med Lasers. 2019;9:50-58.

57

PMBT / LLLT FOR DRY EYE STAND ALONE

633nm
103 mW/cm²
total fluence of 110 j/cm² is applied

Effect of low-level light therapy in individuals with dry eye disease

Methods: 30 Participants with mild to moderate dry eye were recruited. 3 visits were 7 (±3) days apart and all participants received 633 nm LLLT (eye-light®) for 15 min at each visit.

- Non-invasive Keratographic Break-Up Time (NIKBTU) – ($p < 0.05$)
- Tear Meniscus Height (TMH) – $p < 0.05$
- Tear film lipid layer thickness – increased by 12.9 nm $p < 0.05$
- Eyelid temperature – increased by 7.0°C for both upper and lower eyelids $p < 0.05$
- OSDI decreased by 10.2 points $p < 0.05$
- Meibum quality score – showed significant improvement ($p < 0.05$).

58

LLLT FOR DRY EYE Pre/Post Cataract Surgery

633nm
103 mW/cm²
total fluence of 110 j/cm² is applied

Effect of Low-Level Light Therapy on Ocular Surface Parameters in Patients Undergoing Cataract Surgery: A Prospective Double-Masked Randomized Controlled Clinical Trial

Methods: 98 patients randomized to LLLT (50 patients) or sham treatment (48 patients) - 15 min tx 1 week b4 surgery & 1 week post

Time Point	LLLT	Control
Baseline	~35	~35
1 week	~25	~35
12 weeks	~25	~35

Time Point	LLLT	Control
Baseline	~10	~10
1 week	~15	~10
12 weeks	~15	~10

Time Point	LLLT	Control
Baseline	~1.0	~1.0
1 week	~0.5	~1.0
12 weeks	~0.5	~1.0

59

PMBT / LLLT FOR DRY EYE PMBT/LLLT & IPL

N= 156:

Treatment:

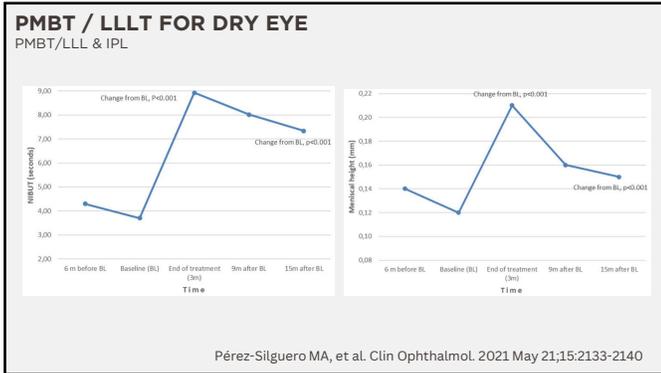
- IPL - Used Eye-light® device.
 - 4 sessions over 3 months (weeks 0, 1, 4 and 12)
- LLLT (completed immediately after IPL)
 - 633 ± 10 nm, 103 mW/cm²,
 - 15 minutes of treatment,
 - total fluence of 110 j/cm²

Time Point	LLLT	IPL
6 m before BL	~50	~50
Baseline (BL)	~50	~50
End of treatment (12w)	~25	~25
9m after BL	~25	~25
15m after BL	~25	~25

Time Point	LLLT	IPL
6 m before BL	~30	~30
Baseline (BL)	~30	~30
End of treatment (12w)	~25	~25
9m after BL	~25	~25
15m after BL	~25	~25

Pérez-Silguero MA, et al. Clin Ophthalmol. 2021 May 21;15:2133-2140

60



61

PMBT / LLLT FOR DRY EYE

PMBT/LLLT VS IPL

N=40 patients with MGD randomized to receive either LLLT or IPL

Randomized Controlled Trial | Cornea. 2023 Feb 1;42(2):141-144. doi: 10.1097/COO.0000000000002987. Epub 2022 Feb 2.

Low-Level Light Therapy Versus Intense Pulsed Light for the Treatment of Meibomian Gland Dysfunction: Preliminary Results From a Prospective Randomized Comparative Study

Giuseppe Giannaccare¹, Marco Pellegrini^{2,3,4}, Giovanna Carnovale Scalzo¹, Massimiliano Borselli¹, Domenico Ceravolo¹, Vincenzo Scorcia¹

Summary

- IPL alone is effective at improving symptoms (OSDI), and reduces corneal staining.
- IPL + LLLT leads to greater and **more sustained improvement**, especially in
 - lipid layer thickness
 - basal tear flow
 - symptom scores over six months.
- LLLT may provide added benefits by **directly stimulating the lacrimal gland** and eyelid tissues, possibly explaining the longer-lasting effects.

62

PBT for Chalazion

Epi-C mask used on 26 eyes with recalcitrant chalazion

Single 15 minute LLLT treatment = resolution in 46% of eyes within 1 month (with 100mg oral doxy coverage)

Resolution in 92% of eyes with 2 treatments

Stonecipher K, Potvin R. Low level light therapy for the treatment of recalcitrant chalazia: a sample case summary. Clin Ophthalmol. 2019 Sep 5;13:1727-1733.

63

Where Does Red Light/ LLLT fit in?

- Safe for all skin types
- Prolonged benefits for OSD
- More affordable
 - ~100-150 USD/tx
 - vs ~400USD/tx with IPL
- Comfortable/Relaxing (no zap/pain)
- Easily operated by clinical staff
- Benefits for ocular adnexa
 - Chalazia
 - Hordeolum?
 - Fine lines/wrinkles?
- Benefits pre/post Sx tx

64

MYOPIA

65

RLRL for Myopia

Repeated low-level red light (RLRL) treatment might improve blood flow and metabolism of the fundus. Reducing scleral hypoxia and restoration of scleral collagen levels

Red light treatment might signal retinal > choroid > scleral communication

via **molecular signaling** of

- dopamine
- acetylcholine
- nitric oxide

Xiong R, et al. Ophthalmology. 2023;130(3):286-296. Nickla DL, et al. Prog Retin Eye Res. 2010 Mar;29(2):144-68. Epub 2009 Dec 29.

66

The main technical indicators of the device are as follows:

1. Input power ≤ 100 VA; input voltage: AC10 V-240 V, 50 Hz/60 Hz;
2. Wavelength: **650 nm ± 10 nm**;
3. Laser spot diameter: 7 mm ± 3 mm, laser spot diameter at the observation port: 10 mm ± 2 mm;
4. Output power: **2.0 mW ± 0.5 mW, output power at a distance of 100 mm: 1.07-1.42mW.**

Considering light attenuation between the LEDs and the eye, as well as pupillary diameter, this device is expected to provide light at a power of 0.28 + 0.10 mW at the pupil,

Photo credit: Eyersing International

Jiang Y, Zhu Z, Tan X, Kong X, Zhong H, Zhang J, Xiong R, Yuan Y, Zeng J, Morgan IG, He M. Effect of Repeated Low-Level Red-Light Therapy for Myopia Control in Children: A Multicenter Randomized Controlled Trial. *Ophthalmology*. 2022 May;129(5):509-519

67

Randomized Controlled Trial | *Ophthalmology*. 2022 May;129(5):509-519. doi: 10.1016/j.ophtha.2021.11.023. Epub 2021 Dec 1.

Effect of Repeated Low-Level Red-Light Therapy for Myopia Control in Children: A Multicenter Randomized Controlled Trial

Yu Jiang ¹, Zhuoting Zhu ¹, Xingqiang Tan ², Xiangbin Kong ³, Hu Zhang ⁴, Jian Zhang ⁵, Bulin Xiong ¹, Yiyong Yuan ¹, Junwen Zeng ⁵, Ian G Morgan ⁶, Mingqiang He ⁷

- 264 children, ages 8 to 13 years with myopia
- cycloplegic spherical equivalent refraction (SER)
 - of -1.00 to -5.00 diopters (D)
 - astigmatism of 2.50 D or less
 - anisometropia of 1.50 D or less

Jiang Y, Zhu Z, Tan X, Kong X, Zhong H, Zhang J, Xiong R, Yuan Y, Zeng J, Morgan IG, He M. Effect of Repeated Low-Level Red-Light Therapy for Myopia Control in Children: A Multicenter Randomized Controlled Trial. *Ophthalmology*. 2022 May;129(5):509-519.

68

Randomized Controlled Trial | *Ophthalmology*. 2022 May;129(5):509-519. doi: 10.1016/j.ophtha.2021.11.023. Epub 2021 Dec 1.

Effect of Repeated Low-Level Red-Light Therapy for Myopia Control in Children: A Multicenter Randomized Controlled Trial

Yu Jiang ¹, Zhuoting Zhu ¹, Xingqiang Tan ², Xiangbin Kong ³, Hu Zhang ⁴, Jian Zhang ⁵, Bulin Xiong ¹, Yiyong Yuan ¹, Junwen Zeng ⁵, Ian G Morgan ⁶, Mingqiang He ⁷

- 264 children, ages 8 to 13 years with myopia
- cycloplegic spherical equivalent refraction (SER)
 - of -1.00 to -5.00 diopters (D)
 - astigmatism of 2.50 D or less
 - anisometropia of 1.50 D or less
- 69.4% reduction in axial length progression
- 76.6% reduction in myopia progression VS wearing spectacles only for 12 months

Jiang Y, et al. *Ophthalmology*. 2022 May;129(5):509-519.

69

Randomized Controlled Trial | *JAMA Netw Open*. 2023 Apr 5;6(4):e230612. doi: 10.1001/jamanetworkopen.2023.39612.

Effect of Repeated Low-level Red Light on Myopia Prevention Among Children in China With Premyopia: A Randomized Clinical Trial

Yiwei He ¹, Jingling Wang ¹, Zhuoting Zhu ², Kaiyi Xiang ³, Xinyi Zhang ⁴, Bo Zhang ¹, Jun Chen ⁵, Jiahui Yang ¹, Lihui Du ¹, Chunhui Hu ⁶, Mo Long ¹, Jianan Huang ¹, Kun Liu ¹, Heilong Guo ¹, Mingqiang He ¹, Xun Xu ¹, Z

278 children with **premyopia**

- (defined as cycloplegic spherical equivalence refraction [SER] of -0.50 to 0.50 diopter [D])

RLRL therapy BID, 3 min sessions, 5 days per week

54.1% reduction in incident myopia within 12 months among children with premyopia

He X, Wang J, Zhu Z, et al. Effect of Repeated Low-level Red Light on Myopia Prevention Among Children in China With Premyopia: A Randomized Clinical Trial. *JAMA Netw Open*. 2023;6(4):e230612.

70

BMC Ophthalmol. 2024; 24: 78. PMID: PMC10877869
Published online 2024 Feb 20. doi: 10.1186/s12888-024-03337-5 PMID: 38378527

Efficacy of Repeated Low-Level Red Light (RLRL) therapy on myopia outcomes in children: a systematic review and meta-analysis

Mohamed Asbral Yousef¹, Ahmed Ragab Shehata, Ahmed Mostafa Adly, Mohamed Ragab Ahmed, Hoda Fatmy Abo-Bakr, Rehab Mahmoud Fawzy, and Ahmed Taha Gouda

5 RCTs with 833 patients total

650 nm RLRL for myopia control in the short term of 3, 6, and 12 months follow up

3 months	6 months	12 months
AL : MD -0.16mm	AL : MD -0.21mm	AL : MD -0.31mm
SER : MD 0.33D	SER : MD 0.46D	SER : MD 0.63D
MCT : MD 34.65µm	MCT : MD 34.75µm	

Youssef MA, et al. *BMC Ophthalmol*. 2024 Feb 20;24(1):78.

71

But is it Safe?

72

> Ophthalmic Physiol Opt. 2024 Mar;44(2):241-248. doi: 10.1111/opo.13272. Epub 2024 Jan 5.

Red light instruments for myopia exceed safety limits

Lisa A Ostrin¹, Alexander W Schill¹

- Two devices shown to approach or exceed the maximum permissible exposure, depending on pupil size.
- The three-minute protocol may put the retina at risk for photochemical and thermal damage.
- Clinicians should be cautious with the use of low level red light therapy for myopia control in children until safety standards can be confirmed.



Sky-n1201a
Future Vision

Tang J, et al. Am J Ophthalmol. 2023 Aug;252:153-163. Eyering international refutes 'inaccurate claims' in University of Houston red light myopia study <https://www.insightnews.com.au/eyering-international-refutes-inaccurate-claims-in-university-of-houston-red-light-myopia-study/>

73

> JAMA Ophthalmol. 2023 Jul 1;141(7):693-695. doi: 10.1001/jamaophthalmol.2023.1548.

Retinal Damage After Repeated Low-level Red-Light Laser Exposure

Huangyu Liu¹, Yuan Yang¹, Jingli Guo¹, Jie Peng¹, Peiquan Zhao¹

bilateral vision loss lasting 2 weeks after 5-month application of RLRL (Eyering)

OCT-identified bilateral foveal ellipsoid zone disruption and interdigitation zone discontinuity

Symptoms:
complaint of abnormally bright light and prolonged afterimages
Reduced vision to 20/30 OU
Improved to 20/25 OU after 3 months

Liu H, Yang Y, Guo J, Peng J, Zhao P. Retinal Damage After Repeated Low-level Red-Light Laser Exposure. JAMA Ophthalmol. 2023 Jul 1;141(7):693-695.

74

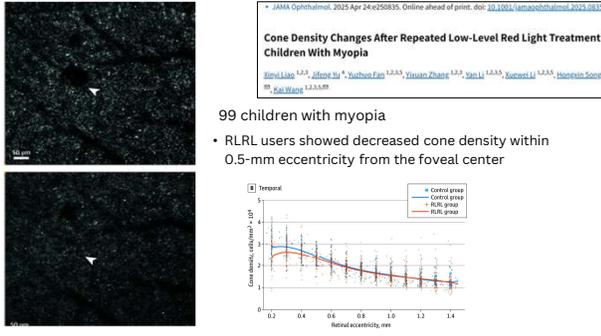
> JAMA Ophthalmol. 2025 Apr 24:e250835. Online ahead of print. doi: 10.1001/jamaophthalmol.2025.0835.01

Cone Density Changes After Repeated Low-Level Red Light Treatment in Children With Myopia

Xinyi Liao^{1,2,3}, Zhao Yu⁴, Yushuo Fan^{1,2,3,5}, Yuxuan Zhang^{1,2,3}, Yao Li^{1,2,3,5}, Xianwei Li^{1,2,3,5}, Shouren Song^{6,7,8}, Kai Wang^{1,2,3,5,8}

99 children with myopia

- RLRL users showed decreased cone density within 0.5-mm eccentricity from the foveal center



Liao X, Yu J, Fan Y, Zhang Y, Li Y, Li X, Song H, Wang K. Cone Density Changes After Repeated Low-Level Red Light Treatment in Children With Myopia. JAMA Ophthalmol. 2025 Apr 24:e250835.

75

In office  **OTC devices**

76

In office  **OTC devices**

- Quality Manufacturing
 - Accurate power/wavelength
- Based on Clinical Studies?
- Safety / Efficiency

- Questionable manufacturing
- No clinical studies / minimal reports
- Safe?
- Efficient?

77



\$1,300.00

ADD TO CART

\$1,799.99 USD

★★★★☆ 57 Reviews

\$83.21 — Sold Out

78

Ideatherapy Hotselling Portable TL09-A5 630nm 710nm 850nm 900nm 5 Spectrum High Power Rechargeable Battery Led Red Torch Light

1 - 99 pieces 100 - 499 pieces >= 500 pieces

\$32.00 \$30.00 \$28.00



79

- Red Light Therapy / LLLT is very promising for eye health
 - Macular Degeneration
 - Dry Eye
- BUT...
 - Concerns about safety
 - especially with some devices
- Full understanding of tissue specific light dosages are not established
 - For now – stick to published protocols set by manufacturers
- Be weary of OTC devices not made for the eyes
 - Follow manufacturer guidelines & protocols

80

Thank You!!




www.DoctorEyeHealth.com

Hello@DoctorEyeHealth.com



81