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Editorial

Illuminating healing: The expanding horizons of photobiomodulation therapy

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In the rapidly evolving landscape of healthcare, the search for non-invasive, effective, and patient-friendly treatment modalities has become more important than ever. Among the emerging frontiers stands Photobiomodulation Therapy (PBMT)—a scientifically validated yet often underutilized approach that leverages light energy to stimulate tissue repair, reduce inflammation, and relieve pain.

PBMT, formerly known as low-level laser therapy (LLLT), involves the application of red or near-infrared light to biological tissues. Unlike high-intensity surgical lasers, PBMT operates at low power levels, ensuring safety and avoiding any tissue ablation or thermal injury. The mechanism revolves around the absorption of light photons by mitochondrial chromophores, particularly cytochrome c oxidase, leading to increased ATP production, modulation of reactive oxygen species (ROS), and the activation of transcription factors—all crucial for cellular regeneration and function.^{1,2}

Initially introduced in the late 1960s, PBMT has since traversed a remarkable journey from being a fringe concept to gaining solid ground in the fields of physiotherapy, dermatology, oncology, dentistry, neurology, and sports medicine.³ Its applications range from treating chronic pain, musculoskeletal disorders, and mucositis to promoting wound healing and even neural recovery in traumatic brain injuries.^{4,5}

In dentistry, and especially in implantology, PBMT is garnering attention for its role in enhancing soft tissue healing, reducing postoperative inflammation, and improving osseointegration.⁶ The ability of photobiomodulation to modulate inflammatory mediators and promote angiogenesis offers immense potential in improving outcomes for patients undergoing complex surgical procedures. As dental implants become more widespread, especially in compromised anatomical conditions, adjunctive therapies like PBMT could be the key to accelerating recovery and reducing patient discomfort.⁷

Despite its vast promise, PBMT still faces skepticism. One reason is the lack of standardization in parameters—wavelengths, dosimetry, power output, and treatment duration vary significantly across studies, making reproducibility and clinical adoption challenging. There's also the broader issue of awareness: many clinicians are still unaware of its benefits or may lack access to training and certified devices. Bridging this gap calls for greater investment in education, clinical trials, and regulatory clarity.

Furthermore, as artificial intelligence and digital monitoring become integrated into healthcare, synergistic tools that combine PBMT with real-time tissue response analytics could herald a new era of precision therapy. Imagine implant procedures where healing can be visually tracked and modulated in real-time using biofeedback-driven PBMT protocols—this is not just theoretical, but a tangible future with ongoing interdisciplinary research.⁹

As with all medical innovations, responsible adoption is critical. PBMT should not be seen as a magic bullet but as a scientifically grounded adjunct to conventional therapy. Its

*Corresponding author: Divyabharathi Selvam Email: divyabharathiselvam11@gmail.com integration into treatment protocols must be evidence-based, personalized, and monitored for efficacy and safety.

In conclusion, Photo biomodulation Therapy represents the light at the end of the tunnel—both literally and metaphorically—for patients and practitioners seeking minimally invasive, effective solutions for tissue healing and pain management. As we continue to unravel its full potential, it is imperative that clinicians, researchers, and educators collaborate to bring this remarkable tool into mainstream clinical practice. The future of healing may indeed be brighter than we imagined.

Conflict of Interest

None.

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