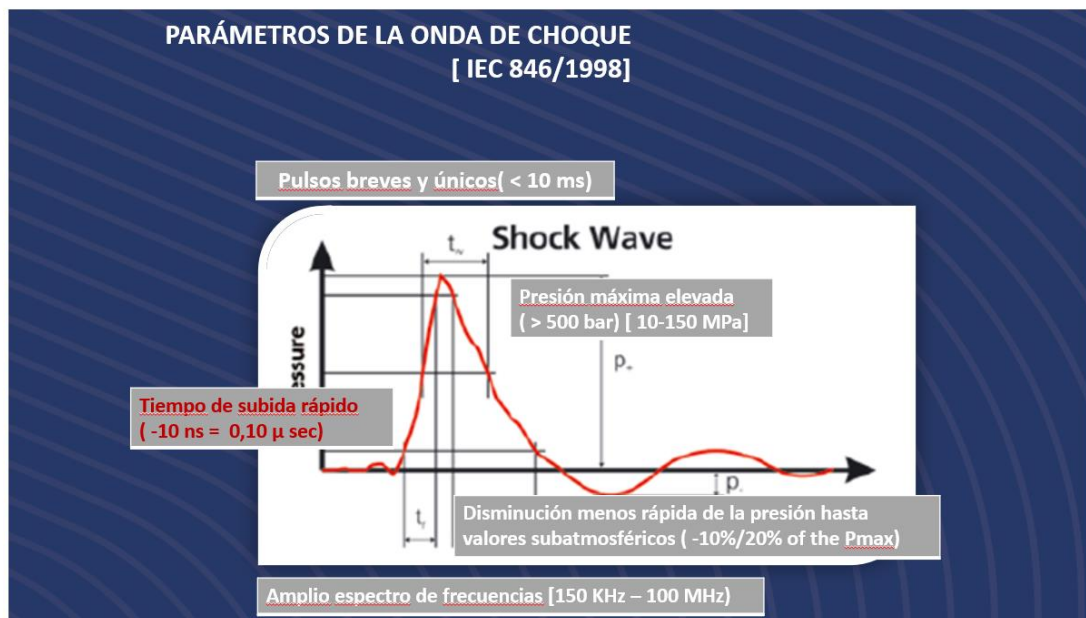
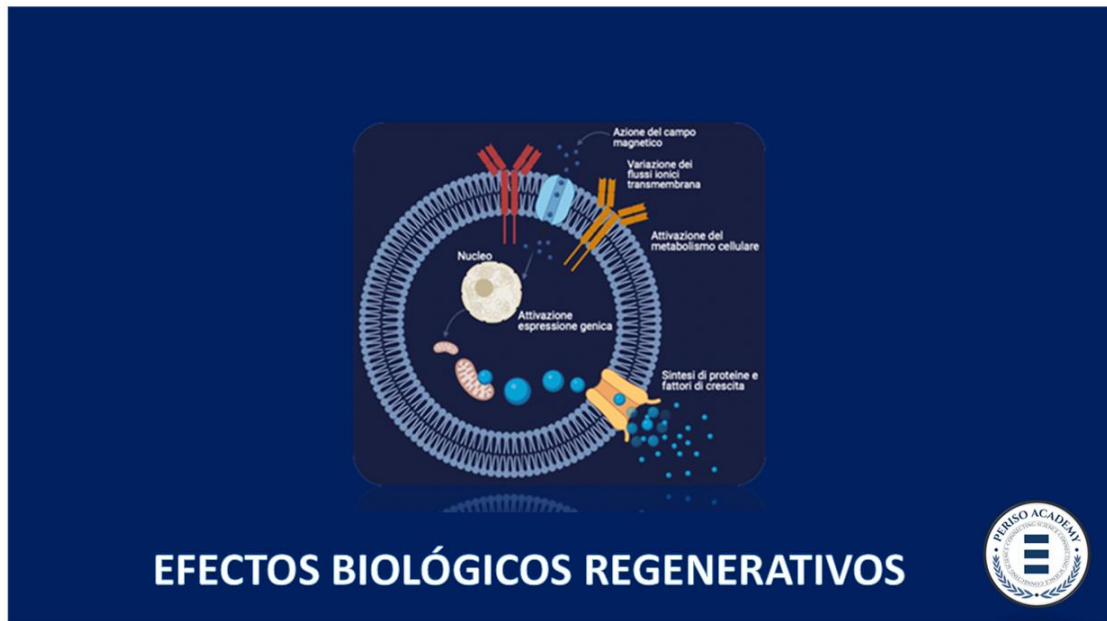
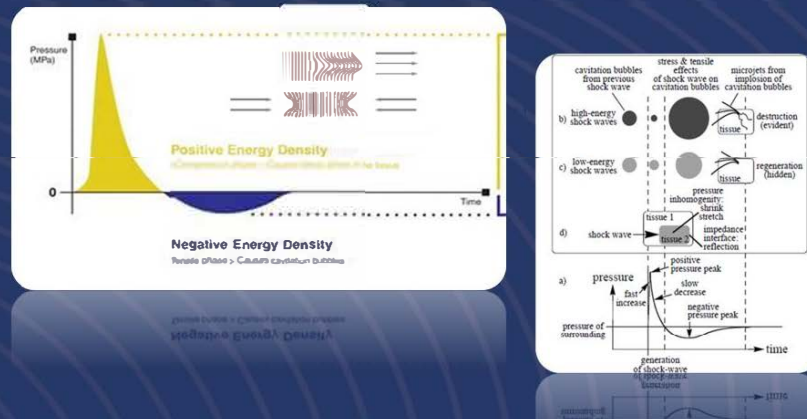


Onda de Choque Diamagnética CTU S Wave



Tanto la fase positiva como la negativa del pulso sónico focalizado transfieren a nivel molecular cierta cantidad de energía.



International Journal of Surgery 24 (2015) 171–178

Contents lists available at ScienceDirect

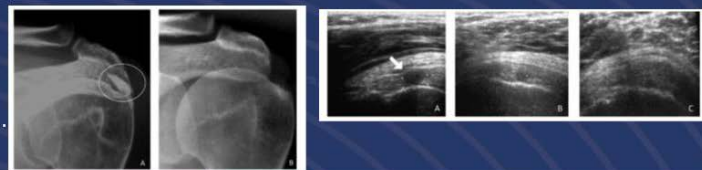
International Journal of Surgery

journal homepage: www.elsevier.com/locate/ijss

Review

Current knowledge on evidence-based shockwave treatments for shoulder pathology

Daniel Moya ^{a,*}, Silvia Ramón ^b, Leonardo Guiloff ^c, Ludger Gerdesmeyer ^d



ALTA ENERGÍA PARA TENDINOPATÍA CALCÍFICA

Table 2
ESWT evidence on shoulder tendinopathies (calcified and non-calcified).

Authors	Article	Statements
Systematic review		
Huistege	Manual Therapy 2011	Only high-ESWT is effective for calcific BC tendinosis. No evidence for non-calcific tendinosis.
Bannuru	Ann Intern Med 2014	High-ESWT is effective for improving pain and function in calcific tendinitis, and can result in complete resolution of calcification (compared to low-ESWT and placebo)
Meta-analysis		
Verstraeten	Clin Orthop Relat Res 2014	High ESWT is more likely to improve function and resorption of the deposits compared with low-ESWT
Systematic review and meta-analysis		
Ioppolo	Arch Phys Med Rehabil 2013	ESWT improves shoulder function, reduce pain and is effective dissolving calcific multilaminar at 6 months.
Loewerens	J Shoulder Elbow Surg 2014	From minimally invasive therapies, high-ESWT is safe and effective in chronic calcific tendinopathy of BC.

(ESWT): Extracorporeal Shockwave Treatment.

Bone marrow lesions of the knee : longitudinal correlation between lesion size changes and pain before and after conservative treatment by extracorporeal shockwave therapy

Valente SANNAIRE (1,2), Emanuele MAIORANI (1), Valerio PASCAL (1), Paolo BOMBARDI (1)

	Pre-trattamento	6 mesi post-trattamento	Differenza
WOS-Pain	55,36 ± 11,50	88,08 ± 6,56	34,70 ± 11,90 (p<0,001)
BML area (mm ²)	833,39 ± 349,32	111,86 ± 170,78	721,53 ± 347,33 (p<0,001)

Corrispondenza tra riduzione dell'Area di BME e riduzione del dolore



EDEMA DE MÉDULA ÓSEA

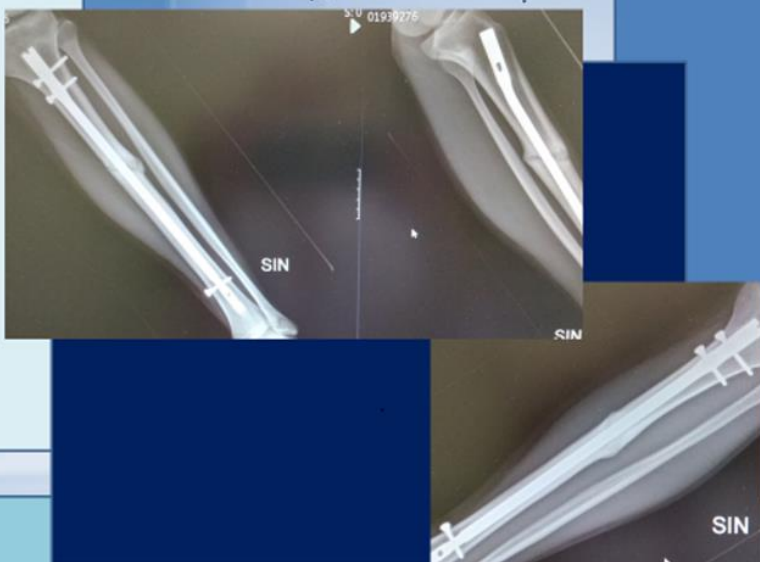
I- II y III grado Kellgren-Lawrence



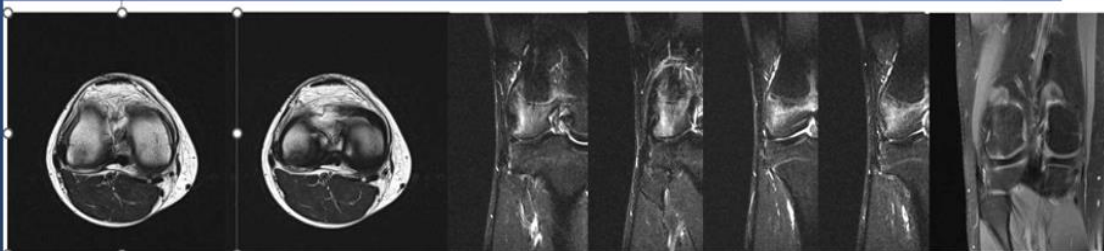
OSTEOARTROSIS (rodilla)

CTU-S-WAVE EXPERIENCE





OSTEOCONDritis - Edema de médula ósea



3 sessions weekly - 180 sh -03,-0,40 mJ/mm2

MRI at 45 days. No pain

