Shockwave therapy

A noninvasive technology with condition-specific evidence.

THE KEY POINT

A device's name or technical sophistication does not establish a benefit for every condition. Ask what evidence matches your diagnosis.

What is shockwave therapy?

Extracorporeal shockwave therapy, or ESWT, applies acoustic energy through the skin to a selected area. It is different from PRP or a cell injection. Devices, energy settings and treatment schedules differ. [18,19]

Why might someone consider it?

Some people with persistent tendon-related symptoms want to discuss a noninvasive option alongside rehabilitation. Whether shockwave is reasonable depends on the diagnosis, previous care, device and local regulatory requirements. [18,19]

Where does SoftWave fit?

SoftWave is a brand of acoustic-wave technology within the wider shockwave field. FDA records for the OW100S identify specific intended uses; this does not establish that all shockwave devices, indications or outcomes are interchangeable. [30]

Education only. Individual care requires a qualified clinician. Clinical review pending.

Evidence, benefits & tradeoffs

Achilles tendinopathy

NICE's Achilles guidance describes inconsistent, limited-quality evidence. It calls for additional oversight, clear consent and tracking of results, or research arrangements. [18]

Calcific shoulder tendinopathy

NICE's current guidance finds efficacy evidence inadequate and recommends use only in research for this indication. This is UK guidance, not a U.S. FDA authorization. [19]

Ask about your exact device

Different devices and protocols should not be treated as interchangeable. Ask which regulatory status and studies apply to the particular device and use under discussion.

RISKS TO DISCUSS

Discuss discomfort, temporary redness, bruising or numbness. NICE also notes occasional reports of Achilles tendon rupture after treatment; rupture can also occur without ESWT, so the relationship is uncertain. Ask about your individual risk and device-specific precautions. [18]

Compare the alternatives

Depending on the diagnosis, compare rehabilitation, activity changes, appropriate medicines or other procedures. For joint symptoms, established osteoarthritis care may include exercise and physical therapy; that evidence should not be replaced by a generic device claim. [15]

Make the conversation count

1. What is my exact diagnosis?
2. What kind of device would be used, and why?
3. Which evidence supports this indication and protocol?
4. What should I expect during a session and afterward?
5. How many visits are proposed, at what total cost?
6. What is our plan if treatment does not help?

Why evaluation matters

Persistent symptoms are a reason to reassess your diagnosis and care plan. There is no universal deadline for starting shockwave therapy, and waiting for a second opinion can be reasonable.

The RegenLuma approach

RegenLuma's educational standard is to explain the technology, its evidence and its limitations in language you can use. Equipment and service availability will be stated only after confirmation.

Education only. Individual care requires a qualified clinician. Clinical review pending.

Sources & your notes

Read the original resources for context. These sources support education; they do not endorse RegenLuma or determine your eligibility for treatment.

[18] NICE (United Kingdom): Shockwave therapy for Achilles tendinopathy (HTG426) (2016 guidance; current resource)

[19] NICE (United Kingdom): Shockwave therapy for calcific shoulder tendinopathy (HTG645) (2022 guidance; current resource)

[15] NIH / NIAMS: Osteoarthritis: diagnosis, treatment, and steps to take (September 2023; current patient resource)

[30] U.S. Food and Drug Administration: SoftWave OW100S (OW100S-US): K213120 clearance and indications (October 12, 2022)

Notes for my visit

Education only. Individual care requires a qualified clinician. Clinical review pending.