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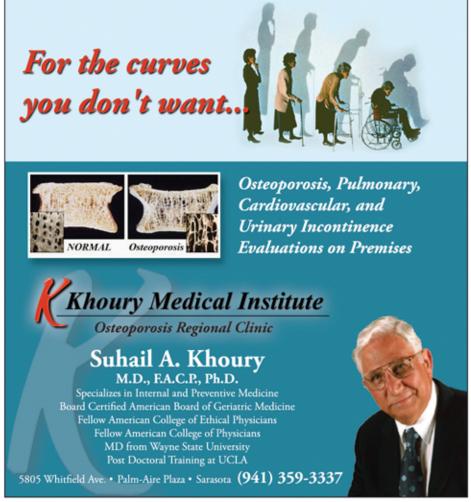
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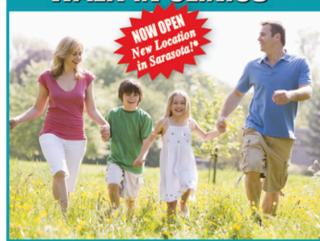
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STRESS THE ELEPHANT IN THE ROOM



n my day to day life as a cardiologist, I spend a great deal of my time meeting with patients, discussing with them their symptoms, examining the physical body, running tests, and digesting a great deal of information, all for the purpose of coming to an accurate diagnosis, and moving forward with appropriate recommendations for management of the cardio-vascular needs of the patient at hand. In each interview with a new patient, we establish the basics—you know, those questions you've heard your doctor ask over and over-what are your symptoms, which diseases and surgeries make up your medical history, do you smoke, what are your allergies and medications. One question doctors often never ask is, "How is your stress?" Your doctor will ask you about whether you are having chest pain or shortness of breath, but will rarely stop to ask you if you are happy, whether you are at peace in your heart, or whether you've been anxious or worried about things.

In actuality, these questions are often the proverbial "elephant in the room"—the unacknowledged huge deal. Most people are unaware that the emotional state of a person plays a considerable contributory role in the health and wellbeing of the physical body. In my work as a cardiologist, I do my best to help my patients understand the role their own personal emotional health plays in the overall health of their bodies. Unless a person understands that their stress levels are directly affecting their health, they often do not feel motivated about doing something to improve the quality of their emotional wellbeing.

What most patients don't realize is this-your stress and your emotional health contributes significantly to your overall cardiovascular health. In actuality, studies show that there are countless ways in which emotional stressors affect the cardiovascular system. For example, it has been long known that the "Type A," hard-driving personality is often a risk factor for heart attacks. Recent studies have shown that long-standing anger may make a person more likely to have a stroke. Stress has been shown to increase rates of heart attacks, strokes, arrhythmias, and elevate blood pressure. Chronic stress is known to be related to increased markers of inflammation in the body and slow down wound healing. Depressed patients, not only seem to have heart disease at higher rates than their counterparts, but they also appear to respond less to treatments than others who may not be depressed.

More and more, doctors and patients are coming to learn how important a role that managing stress is as a means to managing overall health. When talking with patients, I often find that they believe that as long as the unpleasant things are occurring in their daily life, they have no choice but to be stressed about them. But, the reality is that stress is not about what is happening to you—it is about how you are responding to what is happening to you. It is a rare person who has no unpleasant or upsetting things in their day-to-day life, so, to wait for life to be free of stressors is not realistic. The solution is to find ways to minimize your response to the stressors, to find ways to be happy anyway.



Here are some of the tips I give to my patients for managing stress:

- Make your happiness a priority. Until you can recognize that your degree of happiness is directly affecting your health, you will be unlikely to place your happiness as a priority.
- Find out what you enjoy and do more of it. I am often surprise at how many people I meet don't even know what makes them happy. Do you like to fish? Do you like to crochet? Read a good book? Walk

on the beach? Play with your grand kids? Find out what it is in your life that makes your heart sing and find the time to do it!

- Make time for gratitude. Make an effort to focus on the positive aspects of your life experience. Keep a journal of what you are thankful for and of the great things that make your life happy.
 Focusing on the good somehow always makes more good stuff appear.
- Get a good night's sleep. It will surprise you how important a good night's sleep is to your overall physical and emotional health. Getting a good night's rest can help lower blood pressure and improve your mental focus.
- Stay physically active. Exercise has long been shown to improve mood and mental focus. A daily dose of exercise will go a long way in to helping quiet a restless mind and improve mental focus.
- Take up yoga. Yoga is an excellent practice for quieting the mind while having the added benefit of improving the physical health of the body. Yoga practitioners often find that, following a yoga session, they have a sense of improved relaxation and a calmer and quieter mind.
- Learn to meditate. Meditation is a practice where one learns to purposefully still and quiet the mind. Regular meditators can tell you that meditation instills a sense of mental clarity and wellbeing, significantly reducing symptoms of anxiety or worry. As an added benefit, meditation has been shown to lower blood pressure in regular practitioners.

The benefits of managing your stress are numerous. As a cardiologist, I can tell you that stress plays a huge role in the diseases I manage in my practice, including heart attacks, heart failure, high blood pressure, and arrhythmias. I encourage you to seek out ways that you can lower your stress, live a happier life, and reduce your cardiovascular risk as well!



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Jessica Babare, DO



Jessica Babare, DO, is board certified cardiologist who recently completed her training as an Interventional Cardiologist. In looking for a post-fellowship cardiology position, Jessica had a specific idea of the type of cardiology practice and

colleagues she wanted to join, and has happily found that match with Dr. Gino Sedillo, Stacey Royce, PA-C, and the rest of the CardioVascular Solutions Institute team members.

Dr. Babare planned to attend the University of Illinois Medical School with an emphasis on training rural family practitioners. However, during the application and interview processes something drew her interest and attention to Nova Southeastern College of Osteopathic Medicine in Fort Lauderdale, a place where she could train to be an osteopathic physician. Osteopathic Medicine is a medical approach which emphasizes treating the "whole patient," an approach to health care that Dr. Babare has found key to her success as a physician. She holds board certifications in Internal Medicine, General Cardiology, Integrative and Holistic Medicine, and is board eligible in Interventional Cardiology.

Becoming a highly skilled Interventional Cardiologist has long been one of Dr. Babare's goals, and she is thrilled to have crossed this recent milestone. Dr. Babare believes the ability to adequately diagnose and treat patients with cardiovascular diseases begins with her own personal wellness. She uses meditation, voracious reading, a plant-based diet, yoga, and exercise to help accomplish this. She is a doctor whose truest desire is for every patient to be restored to his or her fullest potential for wellbeing.

Where's the Nearest Restroom?

By Theresa Jenkins, ARNP

rinary incontinence (UI) and overactive bladder (OAB) are among the top 10 chronic conditions effecting American women today. For millions, incontinence is not just a medical problem. It is a problem that also affects emotional, psychological and social wellbeing. Many people are afraid to participate in normal daily activities that might take them too far from a toilet. Unfortunately, many of those with UI or OAB suffer in silence unnecessarily. They choose not to participate in various activities, which ultimately prevents them from living the life they want to lead. Incontinence issues oftentimes leave sufferers feeling embarrassed. Many are under the false presumption that these conditions are a natural part of the aging process and that there is no effective treatment available. In reality, incontinence is successfully managed and treated in nearly everyone who seeks help. The following information should help you discuss this condition with your urologist and learn what treatment options are available to you.

Incontinence occurs because of problems with muscles and nerves that help to hold or release urine. The body stores urine - water and wastes removed by the kidneys - in the bladder. The bladder connects to the urethra, the tube through which urine leaves the body. Some people may lose a few drops of urine while running or coughing. Others may feel a strong, sudden urge to urinate just before losing a large amount of urine; many experience both symptoms.

Women experience UI twice as often as men. Pregnancy and childbirth, menopause, and the structure of the female urinary tract account for this difference. Both women and men can become incontinent from neurologic injury, birth defects, stroke, multiple sclerosis, and physical problems associated with aging. A common misconception is that incontinence is inevitable with age. UI is a medical problem with treatments and solutions. No single treatment works for everyone, but many women can find improvement without surgery.

There are various treatment lifestyle changes that can help manage incontinence. Be mindful of limiting your intake of things that tend to act as



stimulants for the bladder (carbonated beverages, spicy foods, citrus, alcohol). Smoking and excess weight can cause incontinence; so quit smoking if you do and maintain a healthy weight. Eliminating caffeine intake two to three hours prior to bedtime can reduce incontinence during the night. Also, establish a pattern of voiding every two to three hours to decrease the amount of stored urine in your bladder.

Other treatment options include Botox, Kegel exercises, biofeedback, and tibial nerve stimulation. Botox can also be injected into the bladder

wall to increase bladder size and alleviate incontinence associated with uncontrolled frequency. When performed correctly, Kegel exercises rehabilitate the pelvic floor muscles through isometric contractions. Biofeedback uses instrumentation to provide information on how well the bladder is performing to control urgency incontinence, displayed in a form that the patient understands. Biofeedback bladder training plans, generally consist of 45 minute visits for six weeks. Tibial nerve stimulation is another alternative whereby the tibial nerve is stimulated with a tiny needle connected to a low voltage to help manage incontinence.

In addition to the treatment methods discussed above, oftentimes medications are used, especially in those with urgency and frequency of urination. Stress incontinence (loss of urine with activity) is surgically corrected with outpatient 20-minute surgeries that use small incisions. These surgeries, known as "sling" procedures, utilize revolutionary artificial support tapes that compress and support the urethra to prevent leakage. Patients often resume normal activities in less than one week in most cases.

Injection therapy using bulking agents or Botox is another option available, as well as sacral nerve stimulation. All treatment options need to be discussed with your urologist to determine which would be the best for you.

If you are suffering from urinary incontinence or overactive bladder, please call Urology Partners at 941-792-0340 today. Don't spend another day on the sidelines, letting life pass you by. You can successfully manage and treat your condition and get back in the game of life!



Theresa Jenkins, ARNP

Theresa "Terri" Jenkins received her Bachelor of Science Degree in Nursing at Austin Peay University, Clarksville, Tennessee in 1986. She earned her Master of Nursing, Advanced Registered Nurse Practitioner at Andrews University, Berrien Springs, Michigan in 1998 the area of Adult Health.

Terri worked for 13 years at Sarasota Memorial Hospital, with 11 years on the Urology floor and two years on the Medical Surgical wing. She expanded her urologic knowledge base by contributing another 10 years of her career to Florida Urology Specialists in Sarasota.

With over 20 years living and working in the Manatee – Sarasota area, Terri has dedicated the last 4 years to Urology Partners assessing, diagnosing and treating patients with urological problems using the most advance diagnostic and treatment technologies available.

Terri's areas of special interest include urinary incontinence, recurrent urinary tract infections, interstitial cystitis, female voiding dysfunction, female sexual dysfunction, bladder and pelvic pain.



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Seeing Things Differently Living with Low Vision

magine loosing something that you have been dependent on since the day that you were born. Sight is one of the senses that we become the most dependent on, and as we age it's one of the senses that is compromised the most. Many people with low vision have macular degeneration. The disease is common in people over 70 years old. Other leading causes of low vision are glaucoma, cataracts, and diabetic retinopathy. Vision impairment itself isn't the end of the world with the appropriate vision rehabilitation and tools. The largest problem is that people have difficulty admitting their challenges because they are afraid it means they are going to have to move (or go through some dramatic change).

The term vision rehabilitation is replacing low vision services. The focus today is not just on low vision devices but also on training patients to use their remaining sight and other senses so they can function as independently as possible and continue to enjoy things that give them pleasure. Patients who qualify for Medicare home health, can have a certified vision specialist/ occupational therapist come into the home and do a home evaluation and train the patient on techniques and devices that helps one live as independent and safe as possible within their home. The Occupational Therapist, first interviews the patient to see how partial sight has affected their lives and what their goals are for rehabilitation. One person may want to be able to cook and read the newspaper again, while another may want to know what services are available to them to stay social and engage outside the home.



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The Occupational Therapist teaches patients and their families about adaptations they can make at home, the importance of proper lighting and the benefits of contrasting colors for the purpose of improving a home's safety and enhancing independence. Some additional tips and adjustments that can be made for safety purposes are:

- 1. Pour coffee into a white mug.
- Avoid glass plates and drinking glasses because they may appear invisible.
- Wrap colored tape around pot handles.
- Put safety tape on edges of stairs and paint landings a color that contrasts with the stairs.
- Set a dark colored chair against a light colored wall.
- Give away the coffee table or drape it with a brightly colored cloth.
- Float a bright yellow rubber duck in the bathtub to see when the tub is full.

In addition to occupational therapy, there are licensed social workers that can come to the home to help the patient arrange transportation, resources and support groups for someone newly diagnosed. Physicatric nursing services are also available to someone who needs help emotionally adjusting to living with visual impairment.

Although the loss of vision may be gradual, it can lead to significant changes in daily routine and can become overwhelming and lead to depression, loneliness and a fear of losing independence. Early intervention when it comes to therapy and knowledge is essential in maintaining the highest level of independence as possible. If you or a loved one would like more information on home health, outpatient services, or community resources please call your local Nurse On Call branch at 230-590-3016.



Cancer.

By Jessica L. Clark, APR, Public Relations and Marketing Associate Studio FSW – Florida SouthWestern State College

t is a word that is far too common in our society today. During the month of October, breast cancer awareness is highlighted to remind everyone about the importance of regular check-ups and to be aware of any changes. Those with a family history of breast cancer are reminded to be vigilant with monthly check-ups and annual exams. I am one of those individuals with a strong family history of breast cancer, as well as other types of cancer. I have been very lucky and blessed that I have not personally had to fight this disease, but I have watched as family members have fought it, with some winning and some not.

Because of this, I have regular discussions with my doctor about what to look for, as well as what preventative measures I can take.

On my father's side of the family, my grandmother battled breast cancer twice. The first time she had it she was able to beat it. I remember visiting her in the hospital and at the time I was so young that I didn't know why she could beat it once and not twice.

As I got older I learned that my great-grandmother on my father's side had also fought breast cancer and had ultimately had both breasts removed. Still, it wasn't enough to defeat the disease.

Historically my family history with breast cancer was only on my father's side of the family. In 2011 my aunt (mother's sister) was diagnosed with breast cancer. She had two surgeries to determine if it had spread. Following the surgery she is pretty much cancer free, but still visits her radiologist and oncologist every six months. This was the first time that breast cancer had made an appearance on my mom's side.



Jessica with mother Deborah Clark My mother had thyroid cancer and had her thyroid completely removed in 2000. She just noticed that a large lump had formed on her neck, and she made an appointment to have it checked. The doctors needed to do surgery to biopsy the lump. Once they started surgery, they decided it was best to remove the entire thyroid as a precaution, and the results determined it was cancer. Afterwards she underwent radiation therapy, and since then she has been cancer-free for 14 years. Once she was cancer free for five years, she purchased a separate cancer insurance policy because at the time she did not have one in place, and relied on her primary insurance which was still beneficial. But extra coverage never hurts.

But cancer is such a tricky disease, in that you never know if and when it could return. This is why it is critical to have regular exams and doctor appointments to be aware of your health, and discuss your family history if there is one. This can help you determine the best course of action to help prepare and defend against cancer of any kind. Due to my family history it was recommended that in addition to the regular check-ups with my doctor and being aware of any changes, that I start mammograms at age 35. I took this suggestion very seriously and made my appointment. I am happy to report that all is well and with this initial appointment we now have a baseline of what is normal moving forward. I also made sure in my 20s to secure a separate cancer insurance policy so that it allows me to pursue other areas of treatment if I were ever diagnosed with cancer that my primary insurance may not cover.



Jessica with Aunt Sheila Ezell



Jessica as a child with Grandmother Doris and father Ken Clark

Remember, cancer doesn't discriminate. It can strike anyone at any age at any time. We live in a fast paced world with commitments to family, work, and our communities, but we need to stop and make sure that we take care of ourselves and have regular checkups. Be aware of your health, not just in October, but year round and report any changes to your doctor. Have frank discussions with your physician to determine your cancer risk, preventative measures you can take, and what you should look for between doctor appointments. If you have questions or notice a chance, see your doctor as soon as possible.

Be healthy!



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ESOPHYX:Offers Non-Invasive, Lasting Relief from GERD Without Medications

By Gary M. Bunch, M.D., F.A.C.S.

eartburn, acid reflux, and GERD—these terms are interrelated, but are not similar. Heartburn is the symptom which you will feel when the acid in the stomach moves up to your esophagus. This movement is known as acid reflux which happens when there is an over-secretion of gastric juices in the stomach and the valve or LES which blocks the food and acid from coming up is not functioning properly. Prolonged exposure to acid reflux leads to GERD or gastroesophageal reflux disease. To get help with heartburn it is imperative that you understand the what, why, and how of these symptom, condition and disease.

Almost everyone has experienced heartburn and acid reflux. The frequency may differ from one person to another, but the symptoms are the same. Help with heartburn is available if you know what triggers it. A full-size meal of fatty, spicy, and acidic foods prompt acid reflux and heartburn. If occurrences come far and in between, a tablet or two of antacid will relieve the pain.

Now, if you are experiencing acid reflux repeatedly, like twice in one week, chances are you are already suffering from GERD. At this stage, you need sophisticated help. You have to consult a physician because if GERD is not attended to immediately, serious consequences might happen.

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Warning Signs of GERD

It is easy to get help with heartburn if you always experience acid reflux. However, heartburn is not the only symptom of GERD. A child under twelve years old can have GERD, but does not suffer from heartburn. So what signs should you watch for? If you always feel like there is food blocking your esophagus, it is likely that you have GERD. Other indications of GERD are difficulty in swallowing, unrelenting dry cough, chest pain, gruffiness of voice in the morning, and bad breath. These are some of the manifestations of GERD.

What causes GERD

Although there are a number of ways to deal with heartburn, the root cause of GERD is not clearly established. What is known is that acid reflux happens when the lower esophageal sphincter or LES is weakened and cannot function suitably in keeping food and acid inside the stomach. GERD can also occur when there are irregularities in the body like hiatal hernia. This is a medical condition where the upper portion of the stomach and LES shift over to the diaphragm. With this condition present, acid reflux will more than likely happen and can lead to GERD if left untreated.

Most susceptible to GERD are obese people, smokers and pregnant women. Inclination to fatty and fried foods, chocolates, spicy treats, garlic and onions, tomato-laden meals, mint flavorings and alcohol and caffeine-rich beverages also contribute to GERD development. Getting help with heartburn can only be effective if accompanied by dodging away from these acid reflux triggers.

Complications of Untreated GERD

Getting help with heartburn is very important in thwarting the more serious effect of GERD. If not attended to immediately, GERD can lead to some acute complications. Constant acid reflux may cause the esophagus to swell and damage the linings, leading eventually to bleedings or ulcers known as esophagitis, conditions which may require serious treatment. Although the wound will heal, the scars left can result to the narrowing of the esophagus which will impede swallowing. If help for heartburn is not applied immediately, the esophageal lining may take an irregular form and discoloration. Eventually, these scars can lead to esophageal cancer. It is a known fact also that GERD can aggravate or play a part in the development of asthma, persistent coughing and pulmonary fibrosis.

Non-invasive Treatment Now Available

GERD is often treated with lifestyle changes, medications, surgery, or a combination of these. When lifestyle changes and medications don't eliminate the symptoms, surgery is recommended to prevent permanent damage. Until recently, GERD patients requiring surgery had to deal with incisions. Fortunately for local patients suffering with GERD, there is a non-invasive surgery now available that eliminates symptoms, erosion of the esophagus, and breathing problems associated with repeated acid reflux. This new non-invasive, relatively quick surgery procedure provides relief from acid reflux.

Many, many people suffer from GERD, and a lot of them are examined with an endoscope every year to watch for pre-malignant changes. We have a new procedure using the EsophyX device, which is placed over an endoscope and inserted down into the stomach through the patient's mouth. The EsophyX then creates a new valve at the bottom of the esophagus. Using the endoscope, surgeons are able to perform the procedure without making any incisions, minimizing the risk for complications and recovery time.

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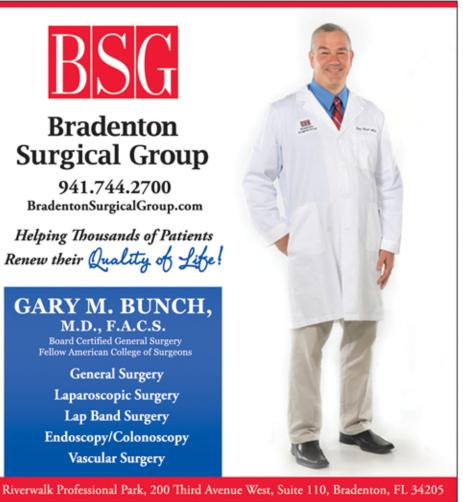
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dure takes approximately thirty minutes and patients are generally free to go home the same day. Many GERD patients who have had this procedure enthusiastically report noticing positive changes within days. Following the procedure, it is highly likely that a patient who has been relying medications to minimize effects of GERD will no longer require them. So many patients have been on these medications for twenty or thirty years, and then they get this procedure done and they say, "Wow, I should have had that done a long time ago."

The EsophyX proce-

Is EsophyX the Answer for You?

The staff at Bradenton Surgical Group preforms an evaluation on each patient to determine if they are a candidate for the procedure. Generally, patients with large hiatal hernias (greater than 3.5 - 4 cenimeters) are the only patients unable to take advantage of the EsophyX procedure.

It has been my pleasure to be able to provided relief to upwards of 100 patients using the EsophyX procedure. Because of my success with the procedure, I frequently find myself in the teacher role, responsible for assisting physicians from around the country to learn how to use the EsophyX device.



Dr. Gary M. Bunch, M.D., F.A.C.S.

Gary M. Bunch, MD, FACS has over ten years of experience as a general and vascular surgeon. He is board certified by the American Board of Surgery and is a Fellow of the American College of Surgeons, as well as a member of the American Society of Physicians and Surgeons, and the Manatee Medical Society. Dr. Bunch served as an associate professor of surgery at East Tennessee State University and is a graduate of the University of Kentucky College of Medicine. He completed his surgical residency at the University of Tennessee Health Sciences Center in Memphis.



Osteoporosis the Most Common Metabolic Bone Disease

By Suhail A. Khoury, M.D., F.A.C.P., Ph.D.

t is characterized with low bone mass and deterioration of bone microstructure leading to a decline in bone strength and increased risk of fracture. It affects women significantly more than it does men. 10 to 15 million Americans have been diagnosed with osteoporosis and more than 1.7 million osteoporotic fractures occur in US annually. Consequences of osteoporosis may be devastating. These include increased mortality, pain, physical limitation, loss of independence, poor self image, and depression. The financial impact is also sizable; the estimated annual cost in US exceeds 15 billion dollars.

Risk factors for osteoporosis include genetics (such as baseline bone mass and family history of osteoporosis), previous osteoporotic fractures, race (Caucasian, Asian), gender (female), age (more than 50) sedentary life style, smoking, excessive alcohol (more than 2 drinks per day), excessive caffeine (more than 2 cups per day). Osteoporosis may also occur secondarily, as a consequence of other illnesses (thyroid disease, rheumatoid arthritis, diabetes, kidney disease, some cancers, (multiple myeloma), celiac disease and others), or it may occur due to medications (cortisone, thyroid supplements, anti-seizure drugs, immunosuppressants).

Bone is metabolically active tissue. It is undergoing continuous growth and repair. Bone mass continues to build and increase from birth to about 25 to 30 years of age. From there on, the rate of bone loss exceeds the rate of bone building, causing a slow decline in bone mass (estimated annual decline of 0.5%) until menopause, at which time the rate of bone loss increases to about 3 to 5% per year for 3 to 5 years.

Bone is an active tissue being constantly repaired from the continuous wear and tear. Two types of cells are involved in this process: one cell dissolves the injured tissues, the other makes new bone to replace the dissolved bone. These two cells do not work at the same rate. At a young age the building cells work faster and lead to increases in bone mass. Later in life, the dissolving cells work faster and lead to net bone loss. Many factors contribute to the numbers and metabolism of these cells. Sex hormones (estrogen and testosterone) among other factors decrease the population of dissolving cells and increase the number and activity of the rebuilding cells. Hence with low estrogen levels, which occur at menopause, dissolving bone is accelerated and leads to net bone loss and eventual development of osteoporosis.



Multiple diagnostic methods are available to measure bone density. The golden standard is the dual energy xray absorptiometry (DEXA) of the lumbar spine and of the hip. Measurement of bone density at peripheral sites (heel, finger and wrist) may be used for screening, but not for diagnosis or follow-up. DEXA is simple test, does not require disrobing, takes a few minutes, has minimal xray exposure and is inexpensive.

Bone loss is measured in standard deviations, defined as T score. A T score of up to minus one standard deviation of bone mass is acceptable as low fracture risk. Loss of 2.5 or more standard deviations, establishes the diagnosis of osteoporosis. Bone loss between this range (minus 1.0 to -2.5 standard deviations) is known as osteopenia. Other risk factors mentioned above in addition to the T score are used to calculate another parameter called the FRAX score. The FRAX algorithm gives the 10 year probability of an osteoporotic fracture and assists the Physician in treatment decisions.

Treating osteoporosis should begin with prevention; by encouraging exercise, proper nutrition, and calcium intake during the growing years. This should continue throughout life. The average adult requires 1200 mg of calcium daily and 1000 to 2000 units of Vitamin D daily. Weight bearing exercises are necessary in stimulating bone growth. Fall prevention in the elderly decreases the risk of fracture.

Multiple medications are currently available for the treatment of osteoporosis. Those may be taken orally, injected under the skin, or given intravenously to treat osteoporosis. All but one of these agents work by decreasing the rate of natural bone deterioration, allowing bone building to exceed bone loss leading to an increase in bone mass. Teriparatide, (Forteo) is the only anabolic agent that works by increasing the rate of building cells.

The side effects of the available medications are rare, and generally speaking the advantages far exceed the risks. Choosing a medication is done on an individualized basis.

Osteoporosis should no longer be accepted as an inevitable component of ageing. We have the knowledge and the agents to properly treat it.

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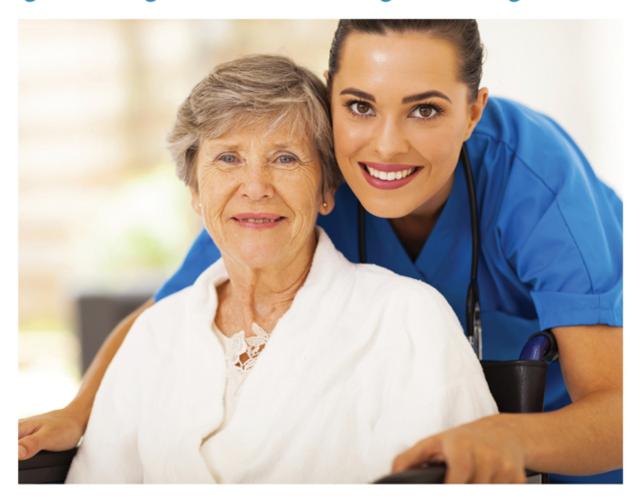
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Breast Cancer Facts

What you need to know

Can I prevent breast cancer?

The causes of breast cancer are not fully understood. Although it is clear that age, gender and lifetime exposure to estrogen and other factors play an important role. Because no one knows exactly what causes breast cancer to develop in a certain person at a certain time, there are no sure ways to prevent it. However, there are steps that you can take that may reduce your risk. These include maintaining a healthy weight, adding exercise into your routine, limiting alcohol intake and postmenopausal hormones, and breastfeeding if you can. For women at higher risk, taking tamoxifen or raloxifene may reduce the risk of estrogen-receptor positive breast cancer.

Who gets breast cancer?

Anyone can get breast cancer. For example, did you know...

- the older a woman, the more likely she is to get breast cancer?
- young women can get breast cancer, even in their 20s?
- white women are more likely to get breast cancer than women of any other racial or ethnic group?
- African American women are more likely to die from breast cancer than white women?
- men can get breast cancer? Out of every one hundred cases of breast cancer, one will occur in a man.

Am I at risk for breast cancer?

All women are at risk for breast cancer. Known risk factors like having a family history of breast cancer, starting menopause after age 55 or never having children account for only a small number of new breast cancer cases every year.

That means that most women who get breast cancer have no known risk factors except being a woman and getting older.

I have a family history of breast cancer. Does that mean I'll develop breast cancer, too?



Just because other family members have had breast cancer doesn't mean that their disease was inherited. In the U.S., only about 5 to 10 percent of all breast cancers occur because of inherited mutations.¹

If I am diagnosed with breast cancer, what are my chances of surviving?

In general, pretty good. In the U.S., the 5-year survival rate for all women diagnosed with breast cancer is 90 percent. This means that 90 out of every 100 women with breast cancer will survive for at least five years. Most will live a full life and never have a recurrence. Your chances of survival are better if the cancer is detected early, before it spreads to other parts of your body. In fact, when breast cancer is found early and confined to the breast, the 5-year relative survival rate today is 99 percent. Early detection and effective treatment are the reasons for improvements in survival.

1 American Cancer Society, Cancer Facts & Figures 2012.

For more information, call Susan G. Komen for the Cure® at 1-877 GO KOMEN (1-877-465-6636) or visit www.komen.org.

Your best defense

The best way to find breast cancer early is to get screened. Talk to your health care provider about what screening tests are right for you.

A mammogram is an X-ray of the breast. It is the best screening tool used today to find breast cancer early. A mammogram can find cancer in its earliest stages, even before a lump can be felt. All women age 40 and older should have a mammogram every year. If you are younger than age 40 with either a family history of breast cancer or other concerns, talk with your health care provider about when to start getting mammograms or other screening tests, like MRI, and how often to have them.

A clinical breast exam is done by a health care provider who checks your breasts and underarm areas for any lumps or changes. Many women have a clinical breast exam when they get their Pap test. Women should have a clinical breast exam at least every 3 years between the ages of 20 and 39 and every year starting at age 40.

Know what is normal for you

The signs of breast cancer are not the same for all women. It is important to know how your breasts normally look and feel. If you notice any change, see your health care provider.

Advanced Imaging of Port Charlotte opened in 2005 with the objective of providing residents of Port Charlotte and the surrounding area with the highest quality of medical imaging possible. Since that time, Advanced Imaging has continued to grow and evolve with the newest technology available. Advanced Imaging has a dedicated Women's Imaging Center.

For your convenience Advanced Imaging is open Monday thru Saturday from 7-7. **941-235-4646**

Are you at risk?

Most women have more than one known risk factor for breast cancer, yet will never get the disease. Some risk factors are things that you do not have any control over, while others can be changed. What are the most common risk factors for? Simply being female and growing older. But remember, there is no *one* cause of breast cancer. If you are concerned about your risk, talk with your health care provider.

Here is a list of some known risk factors:

- · being a woman
- · getting older
- having an inherited mutation in the BRCA1 or BRCA2 breast cancer gene
- · lobular carcinoma in situ (LCIS)
- · a personal history of breast or ovarian cancer
- · a family history of breast, ovarian or prostate cancer
- having high breast density on a mammogram
- having a previous biopsy showing atypical hyperplasia
- starting menopause after age 55
- · never having children
- having your first child after age 35
- radiation exposure, frequent X-rays in youth
- high bone density
- being overweight after menopause or gaining weight as an adult
- postmenopausal hormone use (current or recent use) of estrogen or estrogen plus progestin

For more information about these and other risk factors, visit www.komen.org/risk

Related fact sheets in this series:

- · Breast Cancer in Men
- · Breast Cancer Risk Factors
- · Breast Density
- Healthy Living
- · Racial & Ethnic Differences

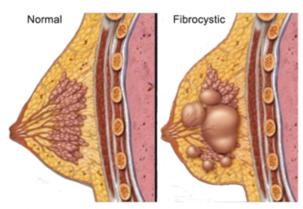
Susan G. Komen for the Cure is not a health care provider and does not give medical advice. The information provided in this material is not meant to be used for self-diagnosis or to replace the services of a medical professional.

Developed in collaboration with the Health Communication Research Laboratory at Saint Louis University. ©2012 Susan G. Komen for the Cure. Item No. KOMEED007500 9/12

Fibrocystic Breast Causes, Symptoms, and Relief

Written by Carolyn Waygood, Certified Natural Health Professional and Plexus Ambassador

October presents a wonderful opportunity to focus our attention on breast health, and reprioritize our awareness of how our breasts look and feel. While most October efforts emphasize breast cancer - and a hope for a cure - many natural health professionals urge consumers to start thinking about prevention, and reducing one's risk of developing breast cancer and other breast diseases.



Fibrocystic Breast Disease is one such disease that has become so commonplace, experts estimate over 60% of women suffer from some level of this often painful condition. Fibrocystic breasts are characterized by lumpiness, tenderness, sometimes shooting pain in the breast tissue, and usually causes discomfort in one or both breasts. The associated lumps are due to small masses or breast cysts. The condition is very common and benign, meaning that fibrocystic breasts are not malignant (cancerous). Fibrocystic breast disease (FBD) is now referred to as fibrocystic changes or fibrocystic breast condition, because it is no longer thought of as a

Factors that are Linked to Fibrocystic Condition

- Levels of estrogen & progesterone
- · Levels of Prolactin, Growth Factor & Thyroid Hormones
- Levels of Insulin & Glucose
- Amount of Fat Cells in the Breast Tissue & Elsewhere
- The Amount of Secretion Produced by the Breast Cells
- The Body's Ability to Re-Absorb Breast Cell Secretions
- The Body's Ability to Breakdown & Clean Up **Unnecessary Breast Cells**
- The Body's Normal Inflammatory Response
- The Number of Menstrual Cycles
- The Body's Normal Detoxification Ability

"disease". Fibrocystic condition primarily affects women between the ages of 30 and 50, and tends to become less of a problem after menopause. Unfortunately, breast health specialists have recently reported seeing fibrocystic conditions in younger women - in one reported case, as young as 12 years old!

In some women, the symptoms of fibrocystic breast condition may cause severe discomfort, especially during the time just prior to menstruation. As a woman approaches menstruation, hormonal changes occur, the most important of these being an increase in the body's production of estrogen and progesterone. These two hormones directly affect breast tissue by causing cells to grow and multiply. Other substances also play a role in fibrocystic breasts, including prolactin (a hormone released from the pituitary gland that stimulates milk production), growth factor (a protein molecule made by the body which helps regulate cell division), insulin (a hormone produced in the pancreas which helps cells utilize glucose), and thyroid hormones (responsible for regulating metabolism) - all substances that are produced outside the breast tissue, yet act in important ways on it! Like estrogen and progesterone, high levels of these hormones stimulate rapid cell division of breast cells which can lead to the development of fibrocystic symptoms.

It is also important to note that rapid replication of breast cells is also thought to increase the risk of cellular mistakes (genetic mutations), and thus increase the risk for breast cancer. As reported by the National Institute of Health, "experimental evidence indicates that prolactin can promote cell proliferation and survival, increase cell motility, and support tumor vascularization", and continues to state that studies show significant association between plasma prolactin levels and breast cancer risk.

In addition, fat cells in the breast also produce hormonal by-products that contribute to the symptoms of fibrocystic breast condition. But it's not just about the amount of fat cells in the breasts; fat cells in other parts of the body also produce estrogen-like by-products which increase the overall levels of estrogen in the body. Together, all these hormone-like factors share a common effect on breast cells: stimulating breast cells to grow and multiply, more rapidly than they otherwise would.

Even when the breast is not stimulated to produce milk, some secretions are produced by the secretory cells of the breast. These secretions are normally reabsorbed "downstream" in the milk ducts. However, when there has been tissue damage and scarring (fibrosis) in the breast, these secretions may be trapped in the ducts, thereby leading to the formation of fluid-filled sacs called cysts. In some areas of the breasts, there may be excessive fluid secretions also due to stimulation by the above mentioned hormone-like substances, possibly leading to the development of large-sized cysts.

A Natural Breast Health Protocol



Plexus Body Cream provides the healing benefits of spirulina algae, a blue-green algae known to help neutralize acidic conditions, and restore healthy tissue pH levels. Clinical thermographic screenings have shown that the daily application of Plexus Body Cream to fibrocystic breasts helps reduce inflammation, reduce irregular vascular patterns, and reduce breast tenderness and pain.



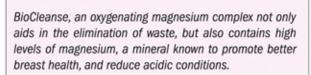
Plexus Slim & Accelerator/Boost were originally formulated to help diabetics better manage blood glucose & insulin levels resulting in long-term weight loss. By helping the body maintain healthy blood sugar levels, the ingredients in the Plexus products help regulate insulin levels, improve

insulin sensitivity, and inhibit fat storage.

It has been proven that reducing excess weight helps significantly reduce risk of breast and other cancers, and by reducing fat cells in breast tissue - fibrocystic symptoms can also be reduced. While maintaining healthy weight levels is important for breast health, keeping insulin levels low can also reduce the associated stimulatory effect on breast cells.



Plexus ProBio5 & BioCleanse were formulated to support complete digestion and healthy intestinal flora, as well as improve the muscular health of the GI tract and aid in the elimination of waste. The elimination of unwanted toxins helps prevent dangerous xenoestrogens from being re-absorbed back into the body. When struggling with fibrocystic symptoms, reducing levels of estrogen and other stimulatory hormones through the intestines can reduce symptoms and the risk of future disease, therefore making regular elimination an important function in breast health.



"Certain hormonal (endocrine) abnormalities, such as diabetes or thyroid dysfunction", advises Carolyn Waygood, Certified Natural Health Professional and Breast Health Specialist, "are also known to contribute to fibrocystic breast condition." Diabetes involves aggravating symptoms such as elevated glucose and insulin levels, while thyroid dysfunction often involves irregular fluctuations in metabolic hormones. "Since these conditions may aggravate the symptoms of fibrocystic breast condition", continues Ms. Waygood, "they should be identified and treated. Thermography is a reliable screening option that can help identify fibrocystic conditions, which I recommend to all of my breast health clients."

Fibrocystic condition likely results from a cumulative process of repeated monthly hormonal cycles and the accumulation of fluid, cells, and cellular debris within the breast as breast tissue is "built up" then "torn down" each month. The good news is that after menopause, when this monthly cellular cycle stops, fibrocystic breast condition becomes less of a problem. The bad news is that once a woman experiences fibrocystic symptoms, she is usually challenged by these throughout her lifetime unless she is able to make some lifestyle changes.

Fibrocystic Conditions Do Not Imply Breast Cancer, But....

The most significant problem with fibrocystic breast condition is the confusion or fear of breast cancer. Fibrocystic breast condition is itself benign (noncancerous). However, the nature of repeated rapid cellular replication, and the recurring monthly damage that occur in breast tissue, may result in an increased risk of breast cancer. Fibrocystic conditions can also make it difficult to detect breast cancer during screenings. "With extremely fibrocystic breasts", notes Ms. Waygood, "mammograms may be very difficult to interpret making thermography more helpful." The probing, squishing, x-raying and routine biopsies that many women experience due to the fibrocystic structure of their breasts may also result in more trauma and increase the risk of developing malignancy. "I urge all women with fibrocystic symptoms to learn more about the option of thermography, and how natural therapies, such as the natural wellness products from Plexus Worldwide, may help alleviate fibrocystic symptoms."

To Do and Not To Do

"Knowing what we do about the cumulative factors that contribute to fibrocystic condition, we can clearly deduce natural and reliable ways to relieve fibrocystic symptoms and reduce one's potential risk of further breast disease" suggests Ms. Waygood. "For example, we have the ability to balance breast cell stimulating hormones. We also have the ability to lower glucose and insulin levels. Daily exercise, certain arm and shoulder stretches, and frequent massage - along with proper hydration - can help detoxify breast tissue. Prevention is, indeed, possible." For a FREE copy of Ms. Waygood's e-book entitled "Restoring Breast Health for Fibrocystic Sufferers", contact her at Carolyn@BetterBreastCheck.com, or call (941) 713-3767.

Thermography as a Screening Option

Although thermography has been an available technology since the 1950's and breast thermography since the 70's, few people understand what a significant tool it can be in identifying health issues before they become serious health threats. "Simply put", explains Ms. Waygood, "thermography monitors blood flow and circulation, using infrared imaging to take a snapshot of heat patterns inside the body." Blood vessels tend to form specific patterns, producing heat along with possible inflammation, which can signal an abnormality for early detection. "The evaluation of these patterns", she continues, "can determine potential risks as well as imbalances of hormones, such as estrogen, that can lead to fibrocystic symptoms and other health problems."

In 1981, Michel Gautherie, Ph.D., and his colleagues reported on a ten-year study which found that an abnormal thermogram was ten times more significant as a future risk indicator for breast cancer than having a history of breast cancer in your family.[1] "The most promising aspect of thermography", notes Ms. Waygood, "is its ability to indicate something is 'wrong' years before a tumor is present."

For more information about breast and other health benefits associated with the Plexus products, visit www.WAYGOOD.MyPlexusProducts.com, or www.BetterBreastCheck.com. Ms. Waygood provides FREE health education seminars to groups of all sizes, addressing natural health alternatives to better breast health, weight loss & healthy weight management, digestive & elimination health, and more. Contact her today to schedule a 45-minute health seminar for your office, church, or civic group!

1. M. Gautherie and C. M. Gros, "Breast Thermography and Cancer Risk Prediction," Cancer, vol. 45, no. 1 (January 1, 1980), pp. 51-56.

Come visit with Carolyn at these local events throughout the month of October!

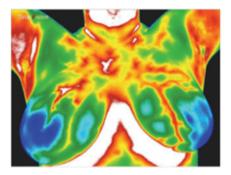
Sat., Oct. 4th at The GAL EXPO Bradenton Convention Center - TheGalExpo.com

> Sun., Oct. 12th at The Bridal Expo St. Pete Coliseum

Tues., Oct. 14th at The Senior Expo St. Pete Coliseum

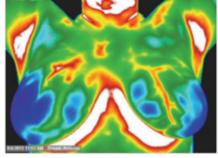
Wed., Oct. 29th at The USF Health Fair St. Petersburg Campus

Sat., Oct. 25th at the Plexus Super Saturday Event from 3-4 PM at 3405 Cortez Rd., W., Bradenton R.S.V.P. for any event and receive a FREE GIFT for attending!



Initial Screening

Patient complaining of fibrocystic symptoms showed signs of inflammation & vascular irregularities. Patient was instructed to apply Plexus Body Cream to the area twice daily, and drink plenty of water. Patient also received daily oral doses of Hawaiian spirulina blue green algae, which is the same strain of algae found in the Plexus Body Cream, and received regular Acupuncture and other nutritional support to help promote healing.



90 Days Later

Patient showed significant improvement in breast inflammation, and reported a reduction in pain. "Acupuncture was pivotal in opening up the pathways and strengthening the immune system in order to facilitate the healing process", notes Dr.



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- Better Nutrition & Stronger Immunity
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- Reducing Chronic Inflammation & Pain

Carolyn Waygood | 941.713.3767 | www.BetterBreastCheck.com



No Flu for Me – Prevention is Key

By Eric M. Folkens, M.D., Family Medicine, Bradenton/Lakewood Ranch/Sarasota Urgent Care Walk-In Clinics

ith cold and flu season quickly approaching, it is important to be reminded of simple tips that are well known but oftentimes overlooked. There are no known cures for colds and flu, so cold and flu prevention should be your goal. A proactive approach to warding off colds and flu is apt to make your whole life healthier. Antibiotics act only on bacteria, and flu is caused by a virus. So antibiotics do not work on a virus. Research has proven that the most effective way for preventing the flu is to get the flu shot. Even though it is highly recommended some people still choose not to get a flu shot. The following tips will help prevent you from getting the dreaded flu. Everyone should apply these strategies on a daily basis, especially if you chose not to receive a flu shot.

1. Wash Your Hands

Most cold and flu viruses are spread by direct contact. Someone who has the flu sneezes onto their hand, and then touches the telephone, the keyboard, a kitchen glass. The germs can live for hours -- in some cases weeks -- only to be picked up by the next person who touches the same object. So wash your hands often. If no sink is available, rub your hands together very hard for a minute or so. That also helps break up most of the cold germs. Or rub an alcoholbased hand sanitizer onto your hands.

2. Don't Cover Your Sneezes and Coughs With Your Hands

Because germs and viruses cling to your bare hands, muffling coughs and sneezes with your hands results in passing along your germs to others. When you feel a sneeze or cough coming, use a tissue, then throw it away immediately. If you don't have a tissue, turn your head away from people near you and cough into the air.

3. Don't Touch Your Face

Cold and flu viruses enter your body through the eyes, nose, or mouth. Touching their faces is the major way children catch colds, and a key way they pass colds on to their parents.

4. Drink Plenty of Fluids

Water flushes your system, washing out the poisons as it rehydrates you. A typical, healthy adult needs 1.5 litres of fluids each day. How can you tell if you're getting enough liquid? If the color of your urine runs close to clear, you're getting enough. If it's deep yellow, you need more fluids.

5. Do Aerobic Exercise Regularly

Aerobic exercise speeds up the heart to pump larger quantities of blood; makes you breathe faster to help transfer oxygen from your lungs to your blood; and makes you sweat once your body heats up. These exercises help increase the body's natural virus-killing cells.



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Sarasota Urgent Care

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6. Oxidative stress - Don't Smoke

Statistics show that heavy smokers get more severe colds and more frequent ones.

Even being around smoke profoundly zaps the immune system. Smoke dries out your nasal passages and paralyzes cilia. These are the delicate hairs that line the mucous membranes in your nose and lungs, and with their wavy movements, sweep cold and flu viruses out of the nasal passages. Experts contend that one cigarette can paralyze cilia for as long as 30 to 40 minutes. Nicosolven Co-enzyme Q10 liquid capsules decrease oxidative stress if taken daily.

7. Cut Alcohol Consumption

Heavy alcohol use suppresses the immune system in a variety of ways. Heavier drinkers are more

prone to initial infections as well as secondary complications. Alcohol also dehydrates the body -- it actually takes more fluids from your system than it puts in.

If you can teach yourself to rest and relax, you can activate your immune system on demand. There's evidence that when you put your relaxation skills into action, your interleukins -- leaders in the immune system response against cold and flu viruses -- increase in the bloodstream. Train yourself to picture an image you find pleasant or calming. Do this 30 minutes a day for several months. Keep in mind, relaxation is a learnable skill, but it is not doing nothing. People who try to relax, but are in fact bored, show no changes in blood chemicals.

9. Consider getting the flu vaccination

Whether or not you get a flu shot is a personal decision but information from the Centers For Disease Control and Protection recommend that certain groups of high-risk individuals receive a flu vaccination every year. Those people include:

- · People who are 65 years old or older and anyone who lives in a nursing home
- · People with chronic heart or lung conditions that are 6 months or older
- · People with diabetes, chronic kidney disease, a compromised immune system, or anyone who needs regular medical care that is 6 months or older
- Children from 6 months to 18 years that are on long term aspirin therapy and all children who are 6 months to 23 months old
- · Women who will be pregnant during the flu season
- · People who routinely come in close contact with people in the high-risk group, such as health care professionals
- · People with a condition that has the possibility of compromising their respiratory function such as a brain injury, brain disease, spinal cord injury, seizure disorders and other nerve or muscle disorders that make it difficult for a person to breathe or swallow

If you do get a flu shot the best time to receive it is from the latter part of September through the middle of November, although getting a flu shot almost any time during the season will still give a person some protection from the flu or influenza. But the flu shot doesn't give a person protection or effectiveness against the flu for about two weeks after receiving it. And in order to receive the maximum protection from the flu a person needs to get a flu shot every year.



National Mental Health Week is October 5 through 11

FOCUS ON MENTAL HEALTH

By Lynn Schneider, Director of Community Relations, Park Royal Hospital

ental health refers to our psychological and emotional well-being; it affects how we think, feel, and how we behave. An individual's mental health can affect his or her daily life, relationships, and even physical health. Just like other disorders, mental health conditions can make it difficult for a person to cope with the demands of everyday life.

Each year, in the United States alone, there are millions of Americans who are trying to cope with a mental health disorder. According to the National Institute of Mental Health (NIMH), approximately 57.7 million Americans suffer from a mental health disorder each year, which is about 26.2% of adults. This comes down to one out of every four adults, and one out of every five children and teens, that will experience a mental health problem each year. More specifically, when thinking about the most common mental health disorders, depression affects 6.7% of the adult population, anxiety affects 18.1%, bipolar disorder affects 2.6%, and schizophrenia affects 1%. There are also a number of other disorders that are not regularly talked about that can have just as much of an impact on an individual as the ones listed above.

October 5 through 11 is National Mental Health Week in recognition of the National Alliance on Mental Illness's (NAMI) determination to raise mental health awareness. Since being established by Congress in 1990, mental health care advocates have come together with other communities in order to sponsor activities that educate individuals about mental illness. During this week, NAMI and other participants nationwide will bring awareness to mental health issues, fight the stigma associated with mental illness, provide support for those who are struggling with mental health conditions, educate the public, and advocate for equal care. By highlighting these issues during this week each year, it provides people with a time to come together and show support of those who are trying to help improve the lives of people affected by mental illness.



When mental illnesses are ignored, or not properly treated, it can have a devastating impact on not only the individuals suffering from them, but on society as a whole. People who are not provided with options for receiving treatment run the risk of becoming homeless, getting into legal and financial troubles, or even facing an early death. Education about mental illness is extremely important because the more people know about these disorders, the better they will be able to help themselves, families, and communities to get the help they need. Early identification and treatment can make a monumental difference.

At Park Royal Hospital and Behavioral Health Services, we acknowledge National Mental Health Week because we recognize the importance of educating the community so they are not only aware of what mental health is, but how they can get help.



239-985-2760 www.parkroyalhospital.com This month, or closely thereafter, there are numerous events throughout Southwest Florida to raise awareness and support for National Mental Health Week.

- · Thursday, October 9: Southwest Florida Coalition for Optimal Behavioral Health & Aging Conference "Putting Theory into Practice" at United Way of Lee County. For health care professionals. RSVP to Kim@UnitedWayLee.org.
- · Saturday, October 11: Drug Free Coalition of South west Florida "Run for Prevention and Walkathon" at Lakes Park. Open to public. For information executivedir@drugfreeswfl.org.
- · Tuesday, October 14: Hope Clubhouse Mental Health Symposium "Helping Families in Mental Health Crisis" at Broadway Palm Theatre. Tickets may be purchased by calling 239-267-1777.
- · Friday, October 24: "Unveiling the Mask of Mental Illness" Awareness Event hosted by the Lee County Chapter of NAMI at The Heights Center. For information contact vhoward@namilee.org.
- · Tuesday, October 14: "Focus on Mental Health" at ABWA Sanibel/Captiva Monthly Meeting. Email cshap00@yahoo.com for details.

Dangers in the Home

ftentimes, living alone can prove to be dangerous for seniors. Senior citizens, like all of us, wish to stay in their home as long as possible and maintain their independence. According to an AARP survey conducted in 2011, 90% of seniors agreed. When someone is having difficulty with day to day tasks, it may seem like an easy choice to move into an assisted living facility. By doing so, seniors can live in a safe environment, maintain a social life and have their health continuously monitored. Still, looking at it from the individual's perspective, this decision can be a very difficult and emotionally draining. However, there has been a move away from the institutional feel of traditional assisted living centers. In fact, a local senior residence, Banyan Residence Assistant Living has designed their entire facility to provide safety and assistant without losing the sense of home.

First, what are some of the hazards that an aging population might experience?

- 1. Stairs. Climbing stairs can become very problematic for seniors. 30% of people over the age of 65, and 50% over the age of 80 will fall down at least once in the next year (Aging Parents Authority). Many times when a senior falls down the stairs, they suffer with a hip fracture. 25% of seniors with a hip fracture will lose their life within one year.
- 2. Shower/Bathtub. Something as simple as getting in and out of the shower/bathtub can be a challenging task for seniors. Roughly 33% of people sixty and older have trouble doing this, even with safety equipment installed (University of Michigan Health System). Many will trip, fall, and harm themselves in the process. A study has shown that bathroom injuries treated in emergency rooms rapidly increase after the age of 65 (New York Times).
- 3. Throw Rugs/Carpeting. Though, only meant for a house decoration, throw rugs can become dangerous to seniors. Without the rugs being secured safely to the floor, it is easy to catch your foot on one and trip. Falling is a leading cause of unintentional injury for seniors over the age of 65. Research has shown that throw rugs and carpeting is one of the most common environmental hazards in senior's homes. There are unsecured throw rugs in 78% of all homes. These homes will average eleven rugs that do not have nonslip backing.

While these are all hazards, being alone is the greatest danger of all. If any of these accidents were to happen, the senior would not have anyone there to help him or her. Recently, a former paramedic relayed an incident in which his crew had found a senior in her home that had been lying on the floor for three days. She had no way to contact anyone for help. Living in a residence that was staffed by trained professionals would have made all the difference. Situations like this occur more often than most of us are aware. To avoid these risks, and any concerns about safety, it may be time to consider a change in living arrangements.



Banyan Residence Assisted Living Resort was created with the principals of safety and security in mind. However, it was important to the designers to accomplish this without losing the senior's sense of freedom and mobility. To avoid the "caged in" feeling, all of the apartments are located in a one story building. Also, beautiful gardens are scattered throughout the courtyard. Residents are free to experience the free flowing layout; while knowing that there is always assistance nearby if it is ever needed.

If you have any questions about this new approach to assisted living, please contact Banyan Residence at **(941) 412-4748** to schedule a visit.

Banyan's residents enjoy a sense of both community and independence. This home is located at 100 Base Avenue East in Venice, FL.



www.abanyanresidence.com

A Banyan Residence has the following features to do so:

- Custom Shuttle
- Monthly Newsletter
- Spa Day
- Walking Club
- Physical Therapy Room
- TV satellite service
- Movie theatre popcorn
- Family & Friends BBQ
- Tropical Garden
- Fruits & Vegetable Garden

- Walking Club
- Waterfall
- · Physical fitness activities
- Salon Room
- Custom Shuttle Bus
- Koi Fish & Duck Pond
- Butterfly Garden
- Special Events: Annual Red Carpet Fashion Show

Defeat Gum Disease

here is a silent oral disease affecting more than 80% of adults. Chances are you either have had or are currently battling periodontal (gum) disease. Unfortunately, in many cases, the disease goes undetected until painful symptoms begin occurring. At which time the disease and any adverse conditions have already set in. Because there are no early signs of periodontal disease, it often goes untreated until the physical symptoms surface and by then the concern is treatment not prevention. It is extremely important for everyone to have regular dental check ups at the recommended six month interval. Without these check ups and proper oral care, periodontal disease can silently cause not only oral health problems but can also contribute to other major health concerns.

Periodontal disease, also known as gum disease, is the chronic infection of the soft tissue around the teeth caused by plaque producing bacteria. The gums hold the teeth in place. As the gums become infected, they loosen their hold on the teeth and pockets are formed. These pockets collect debris and cause more infection and bone loss to the tooth. Gum disease is infectious and contagious. It can spread from tooth to tooth in the mouth and from one person's mouth to another through saliva.

As with other diseases, prevention is key to good oral health. It is important for everyone to practice diligent, thorough, and proper oral care by scheduling check ups every six months. At which time, your dentist will be able to detect and treat any signs of periodontal disease before symptoms begin to show and the damage is done. As mentioned earlier, most people do not know they have periodontal disease until they begin suffering from any combination of the following signs:

- · Chronic bad breath
- · Red or swollen gums
- · Bleeding gums especially after tooth brushing
- · Tender or sore gums
- · Loose or shifting teeth
- Receding gums
- · Sensitive teeth



If you have been diagnosed with periodontal disease, there are various treatment plans your dentist may recommend depending on the severity of your case. The most important action is meticulous at home daily oral care. Teeth must be brushed twice or more times each day for at least two minutes and flossed at least once per day. Other treatments include oral rinses, periodontal cleanings, and sometimes surgery.

Traditional periodontal surgery involves cutting and suturing of the gums and recovery time can be long and painful. With the advancement of modern laser technology, there is an alternative. Joseph H. Farag, DMD offers a better alternative for patients battling periodontal disease. Dr. Farag offers patients laser-assisted new attachment procedure (LANAPTM) which is a no-cut, no-sew procedure to treat mild to advanced periodontal disease. The advancements in laser surgery techniques, have made treating periodontal faster and less painful. LANAPTM is much less invasive than traditional surgery, allowing patients to return to work the next day if desired.

Even with the benefits of LANAPTM it is obviously best to practice good oral care. The most important preventative measure to avoid the insidious gum disease is to take excellent care of your teeth. Proper cleaning at least twice a day is imperative. The goal is to keep the bacteria that cause the plaque at very low levels.

If your gums are painful, red, or swollen don't ignore the signs; make an appointment today that may save your teeth and gums. Treating periodontal disease sooner is always better than later.

Benefits of LANAP™

EASY – LANAP™ is about as EASY as erasing a black-board – unlike older techniques, there is no cutting and no suturing of the gums.

MINIMAL DISCOMFORT – Both during and post procedure, the patient experiences very minimal discomfort with LANAP™ than with prior standard surgery techniques.

SHORTER PROCEDURE TIME – It takes less time to complete LANAP™ than traditional surgery. Typically it takes is two 2-hour visits to the office and two follow up visits. Traditional surgery requires four sessions of about one hour each, with subsequent visits for suture removal and additional check-ups.

LESS GUM LOSS – LANAP™ minimizes the loss of gum tissue, traditional surgery often involves involves removing a significant amount of gum tissue. This tissue loss can lead to sensitive teeth since your roots are exposed. Also, if the treatment needs to be performed again in the future, you have not removed the bone and gums during the first LANAP™ treatment. Typically with LANAP™, any gum tissue shrinkage is actually due to reduced swelling of the area that was previously diseased and inflamed.

SHORT RECOVERY - Many patients fully recover from LANAP™ within 24 hours. In most cases, patients feel just fine post surgery and daily activities are not interrupted. On the other hand, recovery after traditional surgery can take up to 4 weeks during which patients can experience considerable pain and swelling.

SAFE – LANAP™ with the PerioLase is SAFE for patients with health concerns such as diabetes, heart disease, high blood pressure or those taking medications such as Coumadin or Cyclosporine.

Dr. Joseph Farag - Port Charlotte Dentalcare 941.764.9555

3441 Conway Blvd, Port Charlotte www.Drfarag.com

PROVEN KNEE ARTHRITIS TREATMENT

By Physicians Rehabilitation

urrently, an estimated 27 million people suffer form knee osteoarthritis, making it one of the most common causes of disability in the U.S. It is estimated by the year 2030, 72 million Americans will be at high risk for osteoarthritis. Patients with chronic joint pain often think nothing can be done to help them except surgery.

A person with knee pain knows how often it gets in the way of doing the things they want and need to do in daily life. Because the knee is a weightbearing joint, knee pain affects almost everything we do that requires mobility, including those things most of us take for granted.

For many, knee pain makes it hurt to walk, stand, stoop, or get out of a chair, or to go up or down stairs. Additionally, routine activities of living, work, social and recreational activities are often inhibited, restricted or avoided because of knee pain.

If you have been suffering from constant or intermittent knee pain that just won't go away no matter how many ibuprofen you take, don't worry - there is another option.

If you have tried other treatments and have experienced little to no relief, you may still be a candidate for our treatment Program. Call (855) 276-5989 to schedule a no-cost, no-obligation consultation today!

At Physician's Rehabilitation, it's very important to understand we are not just addressing knee pain. Our goal is to give you the best chance we possibly can of Preventing Knee Replacement Surgery in the future, which is what knee arthritis frequently evolves into if left undetected and unaddressed. We are proud to offer a less invasive approach to relieving knee pain to avoid surgery.

For this reason, we encourage you to schedule an appointment to determine if you are a candidate for this FDA approved treatment for knee arthritis, you can always have more radical procedures performed later, if necessary. However, with knee replacement surgery, once done there is no turning back to a more conservative approach. Knee



Avoid unnecessary surgery! This FDA-approved treatment is proven to relieve knee pain, while eliminating the need for surgery. Treatment is safe, easy, and covered by most insurance companies, including Medicare.

replacement surgery is indeed necessary for some people with extreme conditions that our treatment is unable to help, but as we have seen with the great majority of our patients ... A Total Knee Replacement is a Very Extreme Measure To Take without considering all your options for a condition as common as knee arthritis.

Will my insurance cover this treatment?

Yes, most major insurances and Medicare will pay for this treatment.

What Are Other People Saying About It?

My knee feels great. I was told by my orthopedic surgeon that knee replacement was my only option. I did not want painful surgery, and as a retired physician at age 72, know the recovery period and pain that replacement entails. After completing Physicians Rehabilitation's treatments, I am back to living an active life...chasing my grandchildren; boating; gardening with my wife-things that were impossible for the last few years with all that pain. And the staff, physicians and therapists were excellent" -Dr. F.M.

So what are you waiting for?

Pick up the phone and call us today at (855) 276-5989 to schedule your NO-COST, NO-OBLIGATION, consultation at one of our three convenient locations (Ft Myers; Naples; Port Charlotte). The demand for this procedure has been almost overwhelming. We've added extra lines to accommodate your calls, so if our line is busy, or you are redirected to voice mail, please leave a message and call back. Living pain free and getting your life back is well worth the phone call. So keep calling -help is only a phone call away....



855-276-5989 | www.PhysiciansRehabilitation.com

Bullying Facts for National Bullying Awareness Month

Bullying directly affects students' ability to learn.

Students who are bullied often have declining grades and lose self-esteem, self-confidence, and self-worth.

(Hoover & Oliver, 1996, p. 10; Hazler, Hoover, & Oliver, 1992; Garbarino, 1999; Olweus, 1993; McMaster, Connolly, Pepler, & Craig, 1998; Rigby, 2001)

Students who are bullied report more physical and emotional symptoms such as headaches, stomachaches, anxiety, and depression.

(American Academy of Child & Adolescent Psychiatry; Olweus, 1993; McMaster, Connolly, Pepler, & Craig, 1998; Rigby, 2001)

Bullying affects witnesses as well as targets. Witnesses often report feeling unsafe, helpless, and afraid that they will be the next target.

(Pepler, Craig, Ziegler, & Charach, 1993.)

Bystanders can be powerful allies.

Students can be especially effective in bullying intervention. More than half of bullying situations (57 percent) stop when a peer intervenes on behalf of the student being bullied.

Student bystanders are often aware of situations before adults in the school; it is therefore important that all students feel empowered to intervene safely in bullying situations. A school can facilitate this behavior by cultivating a climate of respect and tolerance within the school. Students should be encouraged to stand up for one another and such behavior should be recognized and rewarded.

Since student bystanders can often intervene most effectively, it's important for schools to encourage bystander intervention by teaching skills and offering resources that support this behavior. Schools should also seek to ensure that bystanders are protected and students know not to put themselves in danger.

Bullying is not a "rite of passage" but a serious threat to student safety and well-being.

Some say bullying makes children tougher and is not a serious problem, but the reality is that students



who are bullied are more likely to be depressed and/or suicidal. Student safety is at risk, and schools and communities have an obligation to protect their students.

Students, parents, educators, and communities all have a responsibility to address bullying in schools, on line and in communities.

Students feel that the adults in their lives parents, teachers, community members - are failing to adequately address this issue.

Bullying is not exclusive to older students, male students, or popular students.

Bullying is a behavior, not an identity. Labeling a student as a "bully" can have a detrimental effect on their future and often limits their ability to change their behavior.

Students can have multiple roles: they can be the one subjected to bullying and the one who bullies. Strategies that focus on holding students accountable for their behavior - but also empowers them to change that behavior - are more effective than punitive punishments and peer mediation in bullying situations.

Any student can exhibit bullying behavior male or female, popular or not popular, students with good grades, and those who struggle academically. Teachers need to focus on a student's behavior, not their profile, when determining if bullying occurred.

Effective bullying prevention efforts involve students, parents, teachers, and community members.

Involving community members such as law enforcement officials, faith organizations, community action groups, and others allows school officials and parents to address the bigger issues of disrespect, bias, and violence that can contribute to bullying issues in schools.

A community-wide effort shows students that adults care what happens to them and that they are not alone.

Article provided by Pacer.org

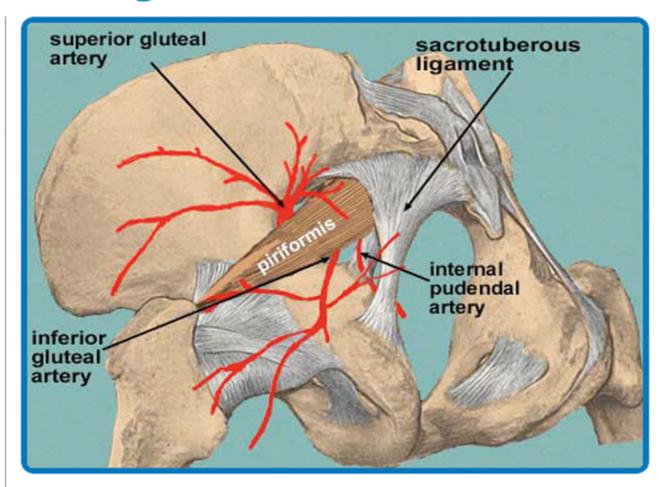
Piriformis Syndrome

Pain Management Consultants of SWFL

iriformis syndrome is a painful condition affecting 5-6% of patients referred for low back and leg pain. There are many causes of piriformis syndrome. Piriformis syndrome can occur in patients after surgery, trauma to the buttock or pelvis, or in patients with a leg length discrepancy. Trauma to the buttock can lead to inflammation and spasm of the piriformis muscle. Occasionally, an enlarged piriformis muscle can compress or irritate the sciatic nerve.

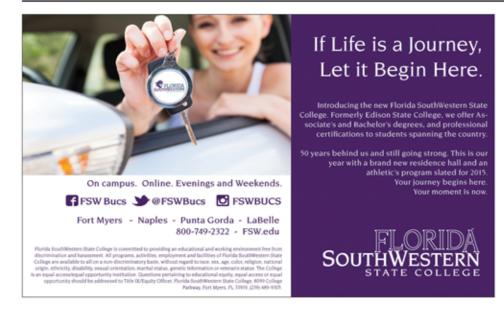
Patients with piriformis syndrome may have pain in the region of the sacroiliac joint. The pain may radiate from the buttocks to the leg and may cause difficulty in walking. Bending or lifting can also exacerbate the pain. Patients may also have a tender sausage-shaped mass over the piriformis syndrome.

The diagnosis of piriformis syndrome may be aided by obtaining a CT scan, MRI, or electromyography (EMG). Other painful conditions, which may mimic piriformis syndrome, include radiculopathy and other causes of low back pain. However, patients typically do not suffer from weakness or numbness in piriformis syndrome, unless the sciatic nerve is affected or irritated.



Treatment of piriformis syndrome includes physical therapy, muscle relaxants, anti-inflammatory agents, and other analgesics. Physical therapy may focus on correcting any biomechanical abnormalities, such as fixing posture, pelvic tilt,

and leg length discrepancies. Patients who fail conservative treatment may benefit from injection with steroid and local anesthetic. The injection may help decrease irritation of the sciatic nerve and break the pain/spasm cycle of the piriformis muscle.





Compression Devices: Effective Treatment for Limb Swelling

any individuals attempt to manage their limb swelling through various treatments such as compression stockings, exercise, diuretics, and elevation with little or no results. Limb swelling, also known as edema, may be a symptom of an underlying medical condition. Some of the most common conditions where limb swelling is the first symptom include venous insufficiency, post operative trauma, infection, and lymphedema. Clinicians may overlook the cause of your swelling; Lymphedema or venous insufficiency is not always evident in their earliest stages. It's important to seek treatment early on to prevent further complications. These conditions can be easily misdiagnosed as acute and minor swelling followed with minimal treatment. Pneumatic compression devices are one of the most highly recommended treatments for these conditions and are recognized by Medicare.



Lymphedema and Chronic Venous Insufficiency

After having a surgical procedure cancer or non-cancer related (example hysterectomy or gallbladder removal) it may take months or years

for Lymphedema to manifest because of its slow progression. It is imperative that Lymphedema is treated quick and effectively, regardless of the severity. Complications dramatically decrease when treatment is started in the earliest stage of Lymphedema. When left untreated common complications include cellulitus or lymphangitis, skin changes such as skin thickening, restricted movement of a limb, or chronic wounds. Aside

from surgical procedures and radiotherapy for cancer other known triggers include vein stripping, peripheral vascular surgery, trauma, inflammation, infection, and insect bites.

Chronic venous insufficiency is another condition that causes swelling in the legs along with open wounds. CVI occurs when the valves in the veins that normally channel the blood



to the heart become damaged which then leads to pooling of the blood in the lower extremities. Discoloration of the skin, referred to as hemosiderin staining, is identified by a reddish staining of the lower limb. From poor circulation shallow wounds may develop due to the stagnant blood that would normally return to the heart. Symptoms vary but may include swelling, aching, itching or burning, varicose veins, infection, chronic venous ulcer, and decreased mobility.

Treatment

A widely recognized and highly effective treatment is using a compression pump. This is a safe and effective way to assist your body's circulatory system in moving the excess fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility. The compression pump is a gentle massaging technique that compresses in a rythmatic cycle, similar to that of a normally functioning lymphatic system that has



not been damaged. This is a great treatment option for patients who have tried compression stocking, elevation, diuretics, or massage with little or no relief. This is a safe and effective way to assist your body's circulatory system in moving the excess fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility.

This is where choosing a physician experienced in recognizing and treating Lymphedema or CVI is critical. Some good questions to ask your physician include:

- · Does my family have a history of swelling (Hereditary Lymphedema)?
- · Stemmer's sign present?
- Pitting (push your finger into your skin and count how long it takes to return) or skin hardening?
- Hemosiderin staining (port wine skin stains or "red socks") appear from the ankles down
- · Traumatic injury or surgery potentially damaging Lymph nodes (Hip replacements, etc)?
- · Radiation to Lymph areas?

Remember ANY swelling is an indication of an overloaded Lymphatic system.

The compression pump is recognized by Medicare and covered by many commercial insurers; Actual coverage varies with individual plans.Acute Wound Care, LLC is a highly focused local provider of wound products and compression pumps working with select area physicians highly versed in this condition.

ACUTE WOUND CARE

For more information and articles on this topic, Google "Acute Wound Care" or visit www.AcuteWoundCare.com or call

239-949-4412

and speak with a specialist.

Long Term Care? Why Have It?

By George T. Leamon, CLTC - Lutgert Insurance

he baby boomer generation is becoming more aware that insurance plays a very important role in their lives. This could be one of the reasons why we are seeing an increase in the number of insurance agencies that are playing for our attention. Assisted living, rehabilitation, and life-altering illnesses are costly and can last for long periods of time. That is why it is just as important to plan for future health needs as it is for present ones.

We have all experienced the relief of using an automotive policy to repair a car. It seems that we only think of insurance as an asset when we need it. We live in a society that embraces the here and now! However, a future "here and now" can better be prepared for in advance. The main issue we have with spending money for something that hasn't happened yet is that it isn't tangible. We feel fine now, so why "waste" the money. It isn't happening now, so I would rather spend my money for an immediate gain. It is this thinking that gets so many of us into trouble. If we thought it through, paying for something in advance is the smartest thing we could do. The cost of an item in the future will undoubtedly cost much more than now. Think of inflation, alone.

Insurance makes even more sense. Take long term care, for example. Do you know what the true costs of an assisted living facility are for an extended period of time? Probably not. It is actually one of the top expenses that citizens face in their senior years. Being unprepared for that can be crippling. Assisted living centers are commonplace today, but that wasn't always the case. In the early days of our republic, asylums began to make an appearance. These institutions held people who were mentally incompetent or deemed "too old" to take care of themselves. In those days, the life expectancy of our nation's population was much lower than it is today. People in their forties or fifties were considered "senior citizens". Society has definitely evolved.

Accident insurance was first offered in the United States by the Franklin Health Assurance Company of Massachusetts in 1850. This was to protect workers on the railroad, but it slowly grew to include a variety of coverages. One of the coverages offered today is Long Term Care. This refers to the ongoing medical and social services that support the needs of people living with chronic health problems. Chronic health problems are a great financial burden on families, but Long Term Care insurance can relieve the stress that accompanies these situations. It is good to know that we have options that assist us through our senior years. Long term care insurance is one of those cushions for us to utilize.

Preparing for the future will only ensure that it is better.

For more information on long term care, please contact Lutgert Insurance at 239-280-3246. Or you can visit their website at www.lutgertinsurance.com. There are four types of People in this world. Those who have been caregivers. Those who are caregivers. Those who will need a caregiver. Those who will be a caregiver.

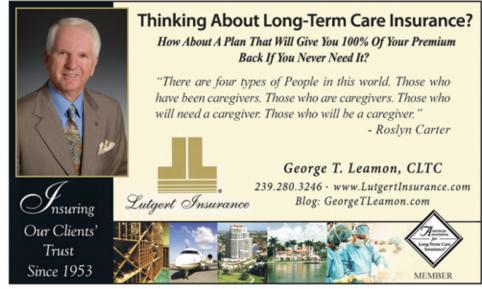
- Roslyn Carter



George T. Leamon, CLTC | 239.280.3246 Blog: GeorgeTLeamon .com www.lutgertinsurance.com

George Leamon, Life and Long Term Care Specialist with Lutgert Insurance, has been in Naples for over 35 years helping seniors with their Life Insurance. Long-Term Care, Annuities and the rapidly changing Medicare arena. When was the last time you had your insurance reviewed?







Mammary Cancer in our pets

By Dr John Rand, D.V.M.

ets, like people, develop tumors in their mammary tissue quite commonly. Very significant differences, however, exist between species, and a general understanding of certain key facts can be invaluable to current and future pet owners.

Mammary tumors in our dogs and cats are much more common than people realize. Mammary tumors are the number one cancer of female dogs, accounting for up to 52% of all cancers. In cats mammary cancer is the third most common tumor. These tumors come in many different sizes, shapes, and cellular origins; some are entirely benign while others are highly malignant. Whereas in dogs about 50% of mammary cancer is malignant, around 90% of feline mammary tumors are.

The consequences of not spaying your dogs and cats are very clear. Spaying your pup before her first heat cycle decreases her risk of developing mammary tumors to about 0.05%! Waiting until after her first heat cycle increases that incidence to 8%. That number catapults to 26% chance of mammary cancer if you wait until after her second heat for her to be spayed. Intact female cats of any age are seven times more likely to develop mammary cancer than if they were spayed. Spaying your cat before six months of age will reduce her risk of developing mammary cancer by 91%. Yes, spayed dogs and cats (and even males for that matter) can still develop mammary cancer, but that likelihood can be all but nullified if you have them spayed as early as feasible.

The most common clinical signs of mammary cancer is a lump of any size, shape, or consistency on your pet's underside.

Often no other signs exist, but some animals can be painful, lose weight, or have low red blood cell counts. A lump on your pet's underside does not automatically mean that it is a mammary mass. Your vet may want to confirm that the mass is indeed mammary tissue in origin. This can be quickly, affordably, and relatively non-invasively ascertained with a small needle to collect cells for cytology. While cytology can confirm that the mass is or is not mammary tissue, cytology alone is usually very poor at determining if that mammary tissue is benign or malignant. Most of the time to obtain a definitive diagnosis, the mass needs to be removed and sent to a lab for histopathology.

For those of you with small mammal pets, be on the lookout, too. Although mammary tumors in rabbits are rare, if they do occur, they often spread very rapidly. The good news is that they are nearly entirely preventable if the doe is spayed before she is two years old. Pet rats, male and female, have very high incidence of mammary tumors. These cancers can grow amazingly large and quite quickly. Over 90% of the time these tumors are benign and are readily cured with surgery. Just the opposite can be said of these masses in mice.

If you feel that your pets may have a lump on their underside, have them seen by your veterinarian as soon as you can. Early diagnosis can afford your pets the treatment that can be curative or be the difference in years, instead of months, of quality life.

Did I mention you should spay your pets?

Disclaimer: No article, journal, webpage, breeder, or friend of a friend can take the place of personalized, veterinary medical advice. If you have any questions, always consult with your veterinarian.





Spiritual Mellness "Just a Carpenter's Son"

By Alex Anderson, Senior Associate Pastor at Bayside Community Church

emember the line, "Bueller...(long pause), Bueller...(long pause), Bueller," from the movie "Ferris Bueller's Day Off"? The actor, Ben Stein, made that line infamous as the boring, monotone high school teacher, while he was taking the class role.

However Benjamin Jeremy Stein's real life has been anything but boring. In addition to being an actor, he is a writer, lawyer, economist and commentator on political and economic issues. He also (oddly enough) was a successful speechwriter for former presidents Richard Nixon and Gerald Ford. So Ben Stein's personal life is anything but boring.

However his successful portrayal of a boring high school teacher, along with his non-expressive long face and monotone voice, covers all of his personal and interesting successes.

Don't let this happen to you. As you go through life, let that very special and unique person God made you to be shine through in all you do. Since happiness is an inside job, what we think of ourselves will make us happy or unhappy. We are happy if we have high self-respect and self-esteem.

Apparently Mr. Stein has a lot of self-esteem and respect or he would not have tried to succeed as he has in so many different areas. How about you? What have you always had your jaw set on doing but never took the chance? Yeah, sure there are downers and critics, but don't let them stop you. If it's really in your heart then go for it. Even Jesus had to deal with a few naysayers.



In the Bible, Matthew 13:54-57 NLT,

He returned to Nazareth, his hometown. When he taught there in the synagogue, everyone was amazed and said, "Where does he get this wisdom and the power to do miracles?"

Then they scoffed, "He's just the carpenter's son, and we know Mary, his mother, and his brothers--James, Joseph, Simon, and Judas.

All his sisters live right here among us. Where did he learn all these things?"

And they were deeply offended and refused to believe in him. Then Jesus told them, "A prophet is honored everywhere except in his own hometown and among his own family."

After teaching and performing miracles, there were people even Jesus could not impress. Sometimes you just have to get new friends.

Yes your self-esteem can momentarily be boosted by power, position, money, alcohol, drugs, flattery, or by deceiving yourself. However the right and lasting way to your highest and best self is to find out who God created you to be. It's important to know that a positive, accurate self-image is based on God-given individuality: a sense of who we are and why we live our lives on the principles that mean the most to us.

So what if those you grew up with approve of you or not; why not ask your creator what he thinks? After all He created you. Happiness requires active participation in what we believe. If we know that God created each of us for a unique and special purpose, then we can live our lives out of a place of confidence and self-esteem. We can value ourselves. I love the fact that Jesus Christ came to help us live as our "best self." Take a look at this passage.

"My purpose is to give them a rich and satisfying life." John 10:10 NLT

Since Jesus is the one, according to the first chapter of John, who created all things, I believe he is uniquely qualified to help each of us to be our best self if we ask.

Shakespeare wrote in *Measure for Measure*,

Our doubts are traitors And make us lose the good we oft might win, By fearing to attempt.

So here are my closing rants. Love God and love others...as you love yourself. If you don't learn to find that something that God created you to do and celebrate it...you are going to have a tough time loving others. We all love others the way we love ourselves. It's painful to hear but it's the truth. The good news is that you can love yourself and have a huge, celebrated, healthy, self-esteem if you ask Christ to help. That's his specialty.

Here's a crazy idea. If you know of an authentic person who has a good, healthy self-esteem, I bet they have somehow connected with God in a positive and life-giving way. And you just might find one at your local church. Why don't you reach out to them and see what happens!

To your spiritual health,

Pastor Alex Anderson Author, Dangerous Prayers alex.anderson@alexanderson.org www.dangerous-prayers.com



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