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CONTACT US

OWNER / ACCOUNT EXECUTIVE
Cristan Gensing
cristan@gwhizmarketing.com

OWNER / CREATIVE DIRECTOR
Sonny Gensing
sonny@gwhizmarketing.com

EDITOR EDITOR
Lisa Minic Lorrie Ritchie



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Swollen, achy legs? It could be your veins.

By Joseph Magnant, MD, FACS, RPVI

Jean,

a 45 year old cath lab scrub tech had been suffering with progressive leg swelling for at least 15 years. Although she did have a history of varicose veins in her sister, she initially did not have any signs of varicose veins, and had been told by a number of medical professionals that her excess weight was the main problem. Compression hose offered temporary and incomplete relief. Exercise was difficult due to the heaviness, achiness and discomfort she had after standing all day in the cath lab. Other symptoms included heaviness in the legs, night time leg cramps and frequent nighttime urination. Ultrasound evaluation confirmed severe bilateral great saphenous vein insufficiency and subsequent radiofrequency endovenous ablation was performed on both legs 2 weeks apart with excellent results. She was seen for her 9 month follow-up the other day and was elated with the relief of her heaviness and resolution of her night time urination.

Heart failure, kidney failure, excess salt intake and obesity are typically at the top the list of causes of swollen and achy legs. However, when one looks across the spectrum of patient ages, the most common cause and most treatable cause of lower extremity swelling and achy legs is venous insufficiency, or venous reflux disease. For many years venous insufficiency was typically referred to as “varicose veins” and if no varicose veins were present the possibility of venous insufficiency was not further considered.



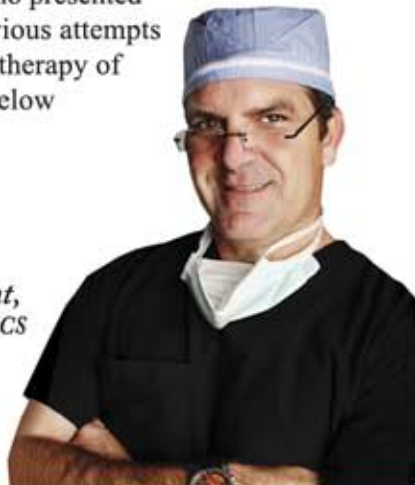
Unfortunately for many patients this is often still the case today. The diagnosis of venous insufficiency as the potential cause for patients’ swollen and achy legs should not be dismissed based solely on the absence of visible varicose veins. To further clarify this point, let it be plainly stated that all patients with varicose veins have some degree of venous reflux disease or venous insufficiency, but not all patients with venous reflux disease or leaky vein valves or venous insufficiency have varicose veins. What this means for the average patient with

swollen, achy legs is that the most common cause of their problem, from a statistical perspective, is venous insufficiency, not congestive heart failure, kidney failure, lymphedema, excess salt intake or any other obscure cause. Common things affect people commonly. With approximately 40 Million adults in the USA affected with severe superficial venous insufficiency, many of these patients may have edema or swelling based on increased venous pressure in the legs without “obvious” external signs such as varicose veins, skin color changes or ulcers.

Leaky valves in the superficial veins of the legs lead to increased venous pressure downstream in the calf region. The thin walls of the veins in the legs are only built to withstand 10-15 mm of mercury (mm Hg) pressure, and when the valves are faulty, pressures of 50-70 mm Hg may exist for prolonged periods (8-12 hours/day for many years), resulting in the accumulation of fluid and protein in the skin, fat and muscles of the calves. This fluid and protein actually leaks through the thin walls of the veins into the soft tissue of the legs. Patients may complain of heaviness, achiness or tiredness in the calves usually worse at the end of the day and improved with elevation and rest. Others may also complain of swollen ankles, tight fitting shoes and problems with their legs swelling after long auto or plane trips which make take 3-5 days to resolve. Over time patients may notice that a constant swollen state exists. When one considers that the amount of time we spend upright, either sitting or standing, greatly exceeds the amount of time we spend lying down (as in sleeping), there is a gradual build up of fluid in the legs of patients with venous reflux disease or venous insufficiency. This may also lead to damage of the lymphatic channels in the legs (secondary lymphedema) which may be errantly diagnosed as primary lymphedema. The lymphatic channels normally serve a scavenging function, returning this type of leaked fluid back to the venous circulation via the complex system of lymphatic channels which coalesce into the thoracic lymphatic duct which joins the left internal jugular vein just deep to the left medial collar bone. The build up of protein-rich fluid (serum) in the skin from any cause may lead to an orange skin appearance of the leg skin ("peau d'orange" in French).

Another good example of a patient with swelling as their primary sign of venous disease is a 35 year old healthy woman who presented with multiple previous attempts at injection sclerotherapy of her spider veins below the knee.

*Joseph Magnant,
MD, FACS*



On brief visual inspection, her legs appeared to be "tubular" below the knees. She reported pain, heaviness and achiness at the end of the day and worsening of these symptoms during her menstrual cycle. Her family history was positive for severe venous disease in her mother manifest as terrible varicose veins. She underwent ultrasound evaluation and was found to have severe, correctable superficial venous insufficiency without the more obvious varicose vein presentation. Teachers, nurses, homemakers, auto mechanics, pharmacists, retirees, students may all be affected by leg swelling and aching caused by undiagnosed venous insufficiency merely because they do not have the classic "varicose veins" which many primary and specialty physicians still believe is a requirement for the diagnosis of venous insufficiency. The take home advice for the general public is to remember that lack of varicose veins does not mean lack of venous insufficiency. So if you have swollen achy legs, unexplained lymphedema (usually unilateral), heavy and fatigued legs worse at the end of the day and improved with elevation and rest, night time leg cramps (especially after in bed), restless leg syndrome or nocturnal urination, insist on a venous insufficiency evaluation by a dedicated and well trained vein specialist. A run of the mill ultrasound looking only for clots will not suffice. Venous insufficiency can and should be effectively evaluated and stratified by location and severity by specially trained vascular ultrasound technologists. The modern treatment of venous insufficiency with endovenous

sealing using LASER or radiofrequency energy is an effective, minimally invasive and time tested technique which continues to offer hope for millions of patients with symptomatic superficial venous insufficiency. The diagnosis needs only be first considered in those many patients without varicose veins.

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UTI's

By Harry Tsai, M.D.



Urinary tract infections are the most common condition treated by urologists in the United States. It is estimated that 150 million UTIs occur yearly around the world and account for \$6 billion in health care expenditures. It is diagnosed and treated in the outpatient setting with oral antibiotics.

UTIs are classified as "complicated" or "uncomplicated." Uncomplicated UTIs are the most common and occur in healthy individuals who have normal anatomy and have no other related health issues. Complicated UTIs are those that are recurrent and have failed conventional antibiotic therapies. In addition, complicated UTIs can result from kidney or bladder stones, indwelling catheters, neurological deficits (spinal cord patients, multiple sclerosis, stroke) or anatomical abnormalities.

Most UTIs are treated with a short course of oral antibiotics ranging from 3 to 5 days. The majority of UTIs consists of E. Coli (80%) and staphylococcus saprophyticus (10%) bacteria. Bactrim has been the first line treatment but with resistance, Ciprofloxacin has been used more as the agent of choice.

Urinary tract infections are diagnosed by a urine culture which differentiates the kind of bacteria and the sensitivities for treatment. A new urinary test is now available through PathoGenius R which analyzes the microbial DNA extracted from the patient's urine, tissue sample or even catheter tip. The DNA sample is then evaluated using molecular diagnostic methods. The report given will contain information about the pathogenic organism detected and the antibiotic which should be given for treatment. There is also capability of analyzing for fungal infections.

Lastly, we can also now make available antibiotic solutions to be instilled in the bladder based on the results of the DNA testing which can help those with difficult and complicated UTIs.



Harry Tsai, M.D.

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Preparing for Joint Replacement Surgery

By John C. Kagan, M.D.

Joint replacement surgery can have a great impact on your comfort and your ability to live a full and active life. Because joint replacement surgery can be scheduled far in advance, there are many things you can do to prepare for surgery to make your recovery as quick and painless as possible.

Before you plan the surgery, consider the amount of time it will take to recover. You should plan to either have someone at home to assist you with your day-to-day activities, or plan to move temporarily into a rehabilitation hospital or skilled nursing facility during your recovery, so make sure you can clear your calendar of work or travel plans for several weeks following the surgery.

Once you and your surgeon decide to schedule the procedure, ask lots of questions to make sure you understand the risks and benefits. Some questions to ask include:

- How long will I be in the hospital?
- What type of anesthesia will be used?
- What kind of prosthesis or implant will be used?
- How long will my recovery take?

Because the planning process can be intensive and sometimes overwhelming for patients, it may be a good idea to bring a friend or relative to your appointment to take notes and make sure all of your concerns are addressed.

Once you've set a date for the surgery, it's time to prepare your body physically. It's a good idea to exercise as much as possible ahead of the surgery, which can dramatically speed up the recovery process. If you will need a cane or walker, you may wish to focus on your upper body strength.



Also consider your lifestyle choices and how they affect your overall health. If you're a smoker, it's a great time to quit. Smoking can prolong the recovery and healing process significantly. If you're overweight, make an effort to shed some pounds before the surgery in order to reduce the strain on your new knee or hip and reduce the risk of post-operative complications.

Now that you've considered your physical health, look around your home and think about how it will affect your recovery. Is there lots of clutter between your bedroom and bathroom, for example, which could pose trip or fall hazards? If you live in a home with stairs, consider setting up a temporary bedroom on the main floor so you won't have to go up and down stairs during your recovery. You may also want to install safety rails in the bathroom near the shower and toilet to further reduce the risk of falls. And make sure whatever you will need – phones, TV remotes, coffee makers – is within reach before you head to the hospital, so it will be ready and reachable when you return.

If you do not currently have a disabled parking permit and will need to drive during your recovery, you may want to apply for one ahead of time.

In Florida, your doctor can sign a form requesting a temporary disabled parking permit to cover the duration of your recovery. Forms are available online and at local DMV offices.

Finally, since a successful recovery requires physical therapy, talk to your doctor about learning the stretches and exercises you will need to perform before the surgery. Some local hospitals now offer pre-surgical physical therapy training for patients planning joint replacement surgery. If you are familiar with what will be expected, the exercises will be easier to perform.

With proper preparation, you can recover quickly from joint replacement surgery. Once your recovery is complete, you can enjoy all the benefits of increased mobility and reduced pain, and you will be able to live a more active lifestyle for years to come.



JOHN C. KAGAN M.D.
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Dr. John C. Kagan and his staff are happy to answer your questions about joint replacement surgery. Dr. Kagan has more than 30 years of experience as an orthopedic surgeon treating patients in Southwest Florida. He specializes in treating patients with knee, shoulder and hip pain, as well as general orthopedics and hand surgery. For more information go to www.kaganortho.com or call 239-936-6778.



COPD Care at Home

According to the National Heart, Lung and Blood Institute, an estimated 12 million adults have been diagnosed with Chronic Obstructive Pulmonary Disease (COPD), and many more may be living with the disease without knowing it. While there is no cure for COPD, there are treatments that can effectively ease symptoms, cut the risk of complications, and improve a patient's quality of life. Visiting Angels is experienced at working with COPD patients and their family members to manage symptoms and ensure that the patient's home is a safe and symptom-free environment.

Visiting Angels is committed to teaching patients with COPD the skills they need to manage their disease at home. Our Angels are dedicated to improving patients' quality of life and preventing repeated hospitalizations due to COPD exacerbation. This involves the coordination of nursing and occupational therapy visits with COPD patients in their home.

Our experienced Angels administer respiratory needs. They also educate patients and their families on nutrition, medication and offer additional resources that can help them manage the disease.

The therapy component to our COPD home care service entails experienced Angels educating patients on breathing techniques that will minimize shortness of breath and other COPD-related signs of distress. Providing patients with energy conservation training and helping them organize their activities for daily living minimizes fatigue and maximizes independence. The home environment is also an important element that is taken into consideration in our COPD home care service. By administering home assessments, Visiting Angels is able to evaluate the home setting (e.g. furniture set-up, layout of rooms and walking paths) and make recommendations to improve in-home safety and make the home environment an easier terrain for homebound COPD patients.



Visiting Angels believes people with COPD can lead active and full lives. By diagnosing the disease early, treating symptoms, reducing the risk of complications and educating patients and families about COPD, our home care staff aims to improve patients' quality of life. Our goal is to help people with COPD take charge of their breathing and regain or maintain control of their lives by becoming actively involved in the management of their disease.

Contact Visiting Angels to learn more about the benefits of in-home care for individuals with COPD.

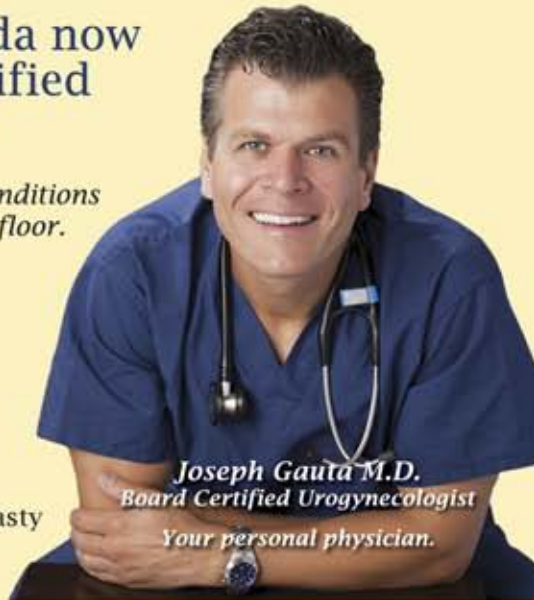
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Prevent Surgery with Knee Injections

The knee is notorious for pain and injury, Knee pain can occur from an injury or a condition like osteoarthritis, and can impact activities of everyday life. There are many remedies for this condition, including rest, anti-inflammatory medications and using knee braces. For individuals whose knee pain progresses or does not respond to other types of treatment, injections may be an option to help relieve pain and discomfort without requiring surgery.

When regular treatments are not working well enough such as medication management with nonsteroidal anti-inflammatories along with physical therapy, intra-articular injections can be a great option.

There is a substance known as hyaluronic and that is naturally found in the synovial fluid of human knee joints. It works to lubricate and cushion the knee joint, being the human equivalent of "motor oil". In 1997 the FDA approved the first hyaluronic acid preparation made from rooster combs for usage in knee injections for osteoarthritis.

Currently there are multiple FDA approved hyaluronic acid preparations, which are all extracted from rooster combs. They have trade names such as Hyalgan, Synvisc and Orthovisc. While each company counts the benefits of their individual product, research studies have shown that all of them work consistently well while no one particular brand has shown superiority.

These injections are also called viscosupplementation as they restore the normal visco-elastic properties to synovial fluid. This can help protect cartilage, lubricate the joint and improve the shock absorbing effect of the knee. It is also suspected that hyaluronic acid injections may protect cartilage cells and actually promote the formation of more cartilage. This is the subject of a lot of speculation and has not been definitively proven.

Numerous clinical studies have been performed regarding the effectiveness of hyaluronic acid formulations. One of the largest studies in the US showed beneficial effects in 80% of patients for over six months it appears that the combination of joint lubrication along with the anti-inflammatory effects that both come from hyaluronic acid work together to create such effective results.

Knee injections are typically extremely effective. Specifically, hyaluronic acid injections have shown over 80% satisfactory results as well which was maintained for over a six-month time period. These results are often good enough to delay the need for a knee replacement surgery or avoid it altogether.

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Diabetes and Healing Naturally

By Yollo Wellness

Food intolerance induces inflammation, the excessive generation of toxic free radicals increases the occurrence of metabolic, chronic and degenerative diseases such as diabetes. In contrast, a "True" allergy may induce anaphylaxis, whereas the magnitude of exposures to intolerable foods, despite its less dramatic flair, causes greater morbidity and mortality.

IgE allergy to food has been recognized for centuries. IgE-mediated food allergies are true food allergies involving an abnormal response of the immune system to one or more specific foods. These reactions are associated with the rapid onset of symptoms usually within a few minutes to a few hours after the ingestion of the offending food.

The first recorded anaphylactic reaction to egg occurred in the sixteenth century and fish induced allergy was reported in the seventeenth century. However, the more recent development of other non-allergic adverse reactions to foods, including food intolerance, only began receiving recognition following the work of Chicago-based allergist Theron Randolph in the 1950's.

The link between food intolerance, chemical sensitivity and the dramatic increase in degenerative diseases is clear, with consumption of foods with no nutritional value, grown with pesticides and stuffed with dyes, additives and colorings. When avoided, inflammation resolves, weight normalizes, and a number of other inflammatory based health problems subside.

Food reactions may cause *toxic* or *nontoxic* reactions. Toxic reactions occur in anyone, given sufficient exposure. Nontoxic reactions occur in susceptible



individuals and may result from chemicals occurring in aged cheese, chocolate, and may involve either immune mechanisms (*allergy or hypersensitivity*) or non-immune mechanisms. The former are referred to as, "hypersensitivities;" the latter, "intolerances." **Food intolerance** reactions are exacerbated by poor digestion. Addressing these underlying issues can result in tolerance of moderate quantities of the food.

Various serum tests exist, but are of questionable value. Whereas testing serum levels of allergen specific IgE is useful for classical allergy, it is of limited value for identification of foods and chemicals associated with intolerance that are not IgE mediated.

Previously, childhood diabetes was exclusively of the Type 1, auto-immune based type. The consequence: high blood sugar levels and tissue degeneration. Perhaps this is just the tip of the iceberg. Now, due to over activation of the innate immune system due to food intolerance, so called, "adult onset" diabetes occurs even in children.

Adult onset diabetes is not auto-immune per se, but occurs when insulin receptors on muscle, liver and brain, lose effectiveness. Insulin resistance is the hallmark of metabolic syndrome. Initially, insulin is produced, but it cannot sufficiently facilitate the uptake of glucose because of the insensitivity of the insulin receptors. The pancreas then produces increasing quantities of insulin, but of lower quality. Hence, blood sugar levels increase.

The most probable link between food intolerance and metabolic syndrome is that Interleukin 6 and tumor necrosis factor alpha block insulin receptors. Glucose is stored in adipocytes which, in turn, produce these very same mediators and perpetuate-obesity, inflammation, and degeneration.

Solutions

The frontline treatment for Type 2 diabetes in overweight children and adults should be dietary, rather than pharmacological, emphasizing healthy natural, nutritious food along with exercise, stress management, and intestinal health. Foods that act as triggers

require proper identification and avoidance. Testing of white blood cell reactions, particularly the neutrophils, following in vitro challenge of whole blood, is independent of any single or limited number of mechanisms. It, thus, reflects pathological responses to foods that are mediated by immunologic, non-immunologic, pharmacologic, as well as toxic pathways. Whole blood analysis offers the additional advantage of reflecting in vivo response more accurately. The ALCAT Test exhibits the highest degree of correlation with blinded challenges and is the most accurate. Symptom resolution, normalization of weight, and broad clinical correlation affirm this as a useful tool to be added to the arsenal of integrative approaches at YOLLO Wellness.

What food WAS is not what food IS.

Wellness Consultants and certified Nutritionist have formulated a protocol for several food causing diseases such as diabetes. With the dietary changes based on your ALCAT results, proper digestive aids, supplementation recommendations for specified diseases such as diabetes, mild Hyperbaric Oxygen treatments along with live blood cell analysis to monitor progression our clients have greatly improved and have cleansed their body of the disease. Protocols are for those who are ready to make changes and want to put their health first. It's a 30 day commitment at YOLLO Wellness and a lifetime commitment on your own. Other testing which is available is a timed test panel using Thermographic Imaging. This test will indicate specific digestive issues as well as micronutrient panels to indicate exact levels of vitamins and minerals and how much you should be supplementing on a daily basis. Live Cell analysis is a great way to monitor how healthy your blood looks.

Get ready to feel good- You Only Live Life Once!

30 day program for diabetes and digestive health \$2,500.00

- ALCAT testing
- ALCAT testing analysis
- Weekly consultations
- Blood lab fees
- Food plans for daily meals
- DVD on the science behind food intolerances,
- Book about food healing the body and how it may harm us
- 30 mild hyperbaric oxygen treatments
- (package value \$5,000.00) - **%50 SAVINGS!**
ALCAT panels prices start at \$99.00.

YOLLO Wellness

3840 Colonial Blvd, Suite 2, Ft. Myers, FL 33966

(239)275.0039

www.YOLLOWELLNESS.com



Life Care Center of Estero Wellness Tip of the month: Get off the couch this football season!

LET THE HEALING BEGIN.

A recent study in the August 2014 issue of Medicine and Science in Sports and Exercise looked cardiovascular disease risk factors in two groups. The first group sat for 3 hours straight with no standing compared the second group, which sat for the same 3 hours but with 3 short walks throughout this period. The results showed significant higher cardiovascular disease risk factors in the group who sat for 3 hours straight. Another study from the University of Texas Southwestern Medical Center in Dallas found that sitting for 2 hours negated the effects of 20 minutes of exercise. Take home message: don't sit for prolonged periods, it's bad for your health! Try to take walking breaks with prolonged sitting activities like:

- Doing office work
- Taking long car rides
- Reading
- At the movies
- Air travel
- Watching the Big Game!

Paul Burns, PT, CSCS

Preferred Reserve Program at Life Care Center of Estero

Making the transition to rehab following a scheduled surgery can be a stressful process. Requesting a room reservation at Life Care Center of Estero prior to your hospital stay makes it easier to stay focused.

You can pre-plan your rehab in several ways!

By phone: Call our director of admissions Chris Flores today at (239)495-4001. To start the conversation, just tell us you have a planned surgery and want to request a private room reservation.

In person: Come by for a guided facility tour. Let us know you have a surgery coming up and are pre-planning your recovery.

Online: Request your reservation online at www.lifecarecenterofestero.com by clicking on the Preferred Reserve icon, completing the information and sending the form. Then, we'll contact you.

7 Reasons why you should choose the Orthopedic Program at Life Care Center of Estero

1. Private, comfortable and beautifully designed rooms
2. First of its kind program developed from the parent company of Life Care Center of America with Preferred Reserve Program
3. Estero is located between two major centers for orthopedic surgery-Naples and Fort Myers
4. State of the art equipment including AlterG® Anti- Gravity Treadmill®, AlterG® Bionic Leg and the Biodex Balance System
5. Excellent therapists with latest techniques to rehabilitate patient following total joint replacement and other orthopedic surgeries. These techniques include manual therapy, therapeutic taping, manual therapy and functional strength
6. The care team trained in following physician protocols and the use of post operative equipment
7. Education that empowers patient by informing them about their specific surgeries along with educational packets which include handouts, anatomy diagrams and home exercise programs



Whether your choice of convenience is by phone, in person or online, our team will be there to answer your questions along the way. If admission requirements are met, we will confirm the reservation with you, and we will look forward to helping you pre-plan your rehab!



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Don't Let the Lights Outshine You This Holiday Season



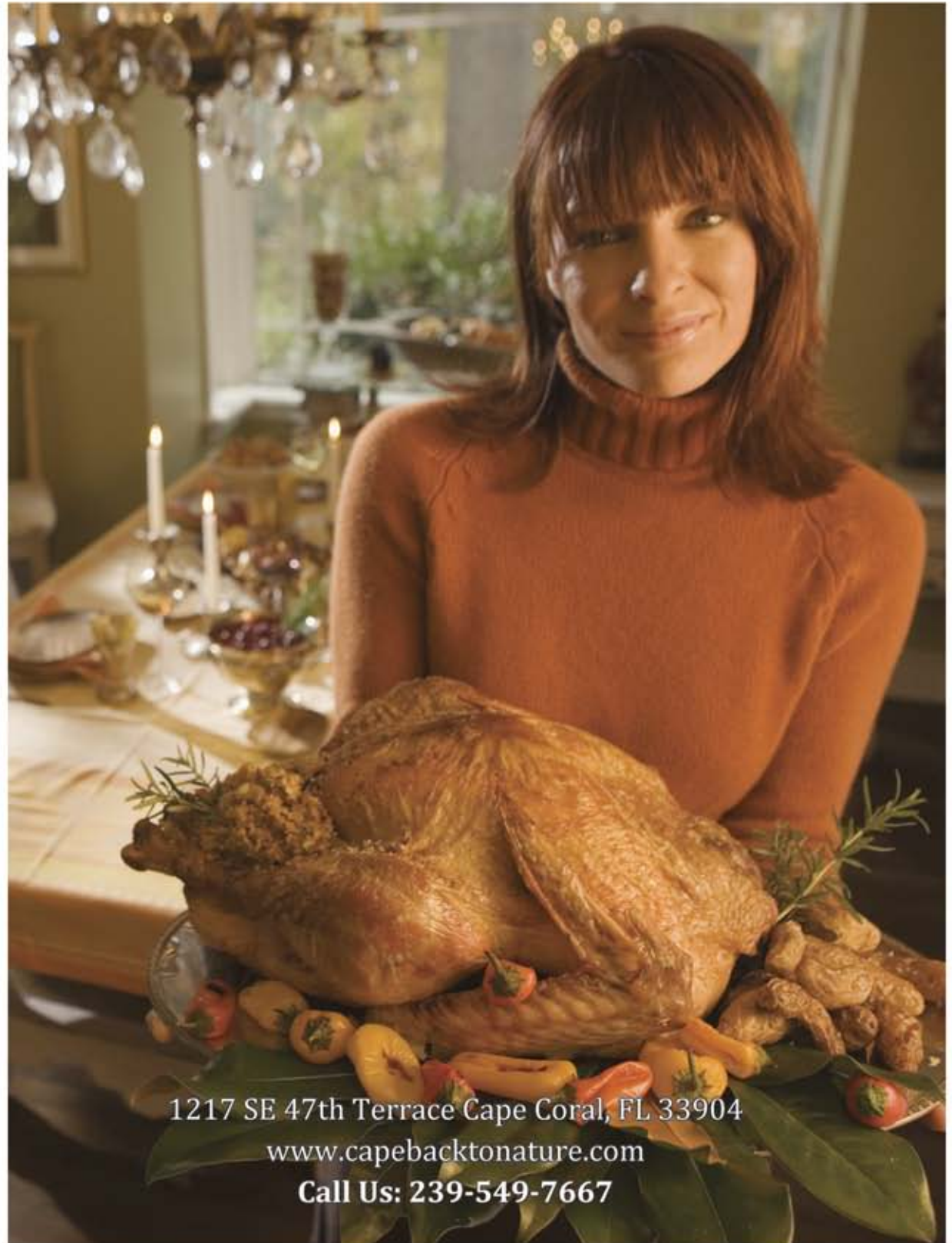
The holidays are finally upon us, and you know what that means; people, parties, and food, food, food. It is also the time of year when the possibility of weight gain is looming in the back of everyone's mind. Don't get caught in the seasonal rut. Instead, try something different and use food to bring your natural beauty to a whole new level.

Eat more fatty acids from fish. Colder weather is always a catalyst for dry hair and skin. Good thing omega-3 fatty acids (particularly EPA) can help to regulate oil production in your skin. Not only does it hydrate the skin on your face, but on the top of your head as well. These nutrients fight against a dry, flaky scalp, ensuring lustrous hair. Consuming omega 3's can also combat the over abundance of omega 6's that we consume in our standard diet, which can lead to inflammation in the body. Choosing a good quality omega supplement is always best. Look for fish oils that are preserved with natural vitamin E, listed as d-alpha tocopheryl, as opposed to synthetic E's listed with a dl-prefix, which can be harmful for your body.

Use apple cider vinegar. Turns out cider is great for more than just your mug. Apply apple cider vinegar as a toner after you wash your face at night. This natural peel will break up skin impurities and open pores, allowing them to breathe. It also puts a protective layer on the skin, preventing it from getting too dry. ACV also contains beta-carotene which works to banish cystic acne, brighten dark spots, and counter damage caused by free radicals, giving skin a healthy complexion.

Plump things up with cinnamon. It's cinnamon season, and while this spice adds fun flavor to most holiday desserts, it can also add volume to your lips. Start with a base moisturizer, such as a vitamin E oil or Shea butter. Then add a couple of drops of cinnamon leaf oil. Some skin types are more sensitive than others, so adding a drop of cinnamon at a time, until your personal balance is reached is recommended.

Beauty does not have to mean continuously applying chemicals to the skin. Natural remedies can be just as effective, not to mention much lighter on the pocket-book. Use food to your advantage, and look your best this holiday season.



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Call Us: 239-549-7667

Living with COPD

You may live with it, and not even know it!

Nurse On Call, joins the National Heart, Lung, and Blood Institute's COPD Learn More Breathe Better® campaign in observance of National COPD Awareness Month, this November, by hosting a series of educational workshops and screening. COPD (chronic obstructive pulmonary disease) is a serious lung disease that over time makes it difficult to breathe. Also known as emphysema and chronic bronchitis, the disease develops slowly and worsens over time — causing many to dismiss symptoms and delay seeking diagnosis and treatment until COPD is in its late stages. According to the Centers for Disease Control and Prevention, COPD is now the 3rd leading cause of death in the United States, COPD is estimated to affect 24 million people nationwide, yet as many as half remain undiagnosed.

"We often see symptoms of COPD, such as a chronic cough or shortness of breath, mistaken as a normal sign of aging or being out of shape. That is why this November, during National COPD Awareness Month, Nurse On Call is providing community seminars and screenings to raise awareness of COPD and encourage individuals who may be at risk to talk to their health care provider," said Denise Handlin, Respiratory Therapist for Nurse On Call.

Many people who suffer from COPD may visit their doctor regularly but not mention the symptoms — either because they don't think it matters or they forget they even have the symptoms. Raising awareness of the signs and symptoms of COPD is critical to getting patients and providers talking in the exam room — and ultimately to facilitating earlier diagnosis and treatment.

Symptoms of COPD include shortness of breath, chronic coughing or wheezing, producing excess sputum, or feeling unable to take a deep breath. COPD most often occurs in people age 40 and over with a history of smoking (either current or former



smokers). However, as many as one in six people with COPD have never smoked. Long-term environmental exposure to things that can irritate your lungs as well as certain genetic conditions can also play a role.

Nurse On Call is so committed to COPD and other respiratory ailments that they added a Respiratory Therapy Team. This is a non billable service designed to improve the quality of life and patient outcomes. Nurse On Call is one of the very few Home Health agencies in the country who has a full time RT to assess and individualize patients needs based on diagnosis and disease process. The therapist helps patient with breathing techniques, medication management, educating caregivers, teaching caregivers on trach patients and troubleshooting bipap/cpap patients. Therapist can even perform pulmonary rehab in the home for the COPD patient.

The Pulmonary Rehab and education management process may include a variety of different disciplines along with the Respiratory Therapist such as, Home Nursing, Psych Nursing, Physical and/or Occupational Therapy visits and Social Services. For more information about Nurse On Call's COPD specialty services please contact your local branch at:



239.90.3016

HHA: 299991763

Comprehensive Care for HIP PROBLEMS

By Peter Curcione, D.O.

Problems with your hips can be caused by diseases such as osteoarthritis or avascular necrosis. Other hip problems are attributed to injuries such as sprains, bursitis, dislocations and fractures. Treatments for hip problems range from basic pain management techniques to sophisticated medical treatments to cure disease and repair injuries.

Resurfacing vs. Replacement

Depending on the amount of damage, a surgeon may recommend hip resurfacing or total hip replacement surgery to a patient.

If hip resurfacing is an option, the surgeon will simply reshape the damaged surface of the femoral ball and then cover it with a round cap. The limitation here is that the procedure only works for bone that is not too damaged by arthritis. Generally speaking, surface replacements are not performed on patients with serious arthritic conditions, because if the bone is not strong enough, there is a small but real risk of fracturing. Therefore the average age of resurfacing patients may be 50 years or younger. Statistically, the resurfacing operation is an option for about 7 out of a 100 patients.

For a total hip replacement, the surgeon will remove degenerative cartilage and bone from the hip joint and replace them with prosthetics. This surgery is used to accomplish long-term pain relief and increased mobility.

With total hip replacement, the removal of the diseased ball gives the surgeon many more options in material choices, for example polyethylene, cobalt-chrome alloy and ceramics. There are also additional choices in various ball diameters and cup designs that resurfacing does not have. Thus total hip replacement is a far more common procedure than hip resurfacing and has a much longer history worldwide.

Hip replacement surgery is performed over 300,000 times each year in the U.S. to repair severe hip damage. In a hip replacement, the surgeon removes degenerate cartilage and bone from the hip joint and replaces them with prosthetics.



The design of the implant offers you renewed stability and function. Hip replacement can relieve pain, help your hip joint work better, and restore normal walking and other movements. Hip replacement surgery has a very high success rate, and can offer an incredible quality of life improvement to some patients.

Minimally Invasive Option

Improvements in technique and surgical instrumentation allow today's surgeons to insert prosthetic hip and knee joints using shorter skin cuts with less surgical trauma, resulting in fewer days spent in the hospital, smaller scars and shorter rehabilitation. These most recent trends in hip replacement surgery focus on improved rehabilitation and pain management to accelerate post-surgery recovery. Employing new surgical techniques to reduce the size of the incision and damage to soft tissue has been the primary advance toward this goal.

While the implants used for the minimally invasive hip replacement procedures are the same as those used in conventional procedures, surgeons do use specially designed instruments.

The surgical procedure itself is very similar with slightly less soft-tissue dissection. A single minimally invasive hip incision may measure only 3 to 6 inches. Comparatively, two-incision hip replacement involves a 2- to 3-inch incision over the groin for placement of the socket and a 1- to 2-inch incision over the buttock for placement of the stem.

Although the general idea of hip replacement is the same today as it was decades ago, we now have better implants, improved instruments, computer navigation technology and robotics, and vastly improved anesthesia techniques that have radically changed joint replacement surgery.

Despite these improvements, it is still important to choose the right MIS surgeon. In experienced hands, these procedures have superb short-term outcomes, with faster recovery, less pain, and shorter down time. But not all surgeons can deliver these results.

The Joint Academy at Lehigh Regional Medical Center's Comprehensive Orthopedic Care

The Joint Academy at Lehigh Regional Medical Center's orthopedic specialists handle everything from a torn muscle or broken bone to total joint replacement and minimally invasive surgery. Lehigh Regional Medical Center offers comprehensive, multidisciplinary care in an environment where patients come first.

Advances in medical technology have made joint replacement therapy a highly effective option to treat chronic joint pain from arthritis and other degenerative joint diseases or injury. The Joint Academy at Lehigh Regional Medical Center's multidisciplinary orthopedic care team includes orthopedic doctors, surgeons, pain management specialists and physical therapists who provide comprehensive care. Dr. John C. Kagan has hospital privileges.

Part of our comprehensive care includes preparing our patients properly before surgery, as well as helping them recover their mobility. You'll know what to expect before, during and after surgery. Our orthopedic care professionals are focused on providing exceptional care from diagnosis through recovery.



Peter Curcione, D.O.
Board Certified,
Orthopedic Surgery

Athletic Orthopedics &
Reconstruction Center

The Joint Academy
This specialized unit is for
total knee and total hip
replacements. The Joint
Academy consists of small

groups of patients focusing on pre-surgical education, hospital stay and rehabilitation. For more information please contact us at (239) 368-4534.

Offices: Fort Myers & Lehigh Acres
bone-fix.com/drcurcione
239-368-8277



SNORING OR SLEEP APNEA?

We probably all know someone who snores. Who can forget the rumbling, tumbling, and even gasping sounds in the middle of the night? Snoring is something that can contribute to many problems for sufferers, the effects can even last into the next day. There are various reasons why we snore, and why it is more common among men. There is also a more dangerous type of snoring that is called sleep apnea. The sound that we hear originates from the vibration of the soft tissues in our throat. The uvula is a bag shaped object in the back of our throat that vibrates when we take a breath.

There are certain contributing factors that can increase the likelihood of snoring. We all have different body types; some, unfortunately, can make us more susceptible to snoring. If you happen to have a thicker neck, your airways have a greater chance of becoming constricted. This is one of the reasons that men are more likely to snore; they are usually more muscular and therefore have more mass surrounding their airways. Another thing to think about is our eating habits. Poor eating habits can lead to weight gain; which will also increase the size of one's neck. Excessive drinking of alcohol is one more. Alcohol use will relax the muscles in your body, including the ones around your mouth, nose, and throat. So, yes, drinking at bedtime can help you fall asleep faster, but not without a price. The problem is that the price is usually paid for by your spouse!

Many times, snoring can be so problematic that eight hours of rest can end up feeling like four. When someone wakes up numerous times a night and does not remember it, it may be accredited to sleep apnea. Sleep apnea is when there are actual pauses in one's breathing during sleep. These pauses might be only a few seconds long, but have the ability to stretch on for longer periods of time. Once breathing is "restarted", it usually begins with a loud choke or gasp. It can be very unsettling to hear. These pauses can occur dozens of times every hour. With sleep apnea, it can be



challenging getting a good night's rest, because you drift in and out of deep sleep. Having headaches and being groggy for an extended period of time is not uncommon for those with these nightly breathing complications.

For the basic light snorer, there are a few remedies that can be implemented at night. Taking a hot shower to clear the sinuses, drinking enough fluids to stay hydrated, and using "over-the-counter" nose strips can help. To someone who snores heavily or experiences sleep apnea, these simple solutions probably won't offer much assistance. For these sufferers, advanced treatment may be in order. Continuous positive airway pressure (CPAP) therapy involves using a positive air pressure mask that covers the nose. It maintains a constant air flow into the nasal passageways, ensuring no disruptions in breathing. When used properly, they are very efficient and effective. Specially formatted dental appliances are another option. These devices, which are FDA-approved, are simple to use. They are custom fit and reposition your lower jaw. Adjusting the placement of the jaw relieves any potential blockage. Many sufferers prefer this device, because it is less invasive.

If you or a loved one suffers from snoring or sleep apnea, call Pelican Landing Dental at (239) 948-2111. They are located in Bonita Springs at 23451 Walden Center Dr #100 and have been helping many patients with these conditions.

SCHEDULE A
**COMPLIMENTARY
CONSULTATION**

WITH DR. RICH GILBERT TO DISCUSS THIS IMPORTANT SUBJECT SO YOU CAN RETURN TO HAVING A RESTFUL NIGHT'S SLEEP. CALL 239-948-2111.



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WHEN ONE GLASS OF WINE IS NOT ENOUGH

HOW DO YOU KNOW IF YOU HAVE A DRINKING PROBLEM?

By Lynn Schneider, Park Royal Hospital

The development of a drinking problem is rarely an intended goal for a person; nor is it something that creeps up on an individual overnight. Many people will have a glass of wine with a meal or enjoy a cocktail or two in social situations. However, some people take the consumption of alcohol to another level and eventually find themselves in a situation wherein functioning seems impossible without a drink in hand. When this is the case, a person is most likely suffering from an alcohol addiction. But why and how does this happen? What does this type of addiction do to a person's health? And lastly, what can be done to help individuals who are battling an alcohol addiction?

Extensive research on addiction has concluded that there are certain risk factors that can make a person vulnerable to the development of a drinking problem. Having a family history of substance abuse or addiction, personally struggling with a mental health condition, lacking appropriate coping skills, and being in environments or situations in which stress is prevalent are examples of such risk factors. When these risk factors are a part of a person's life, there is an increased likelihood that alcohol will be abused. The Centers for Disease Control and Prevention (CDC) estimates that 38 million Americans report drinking too much. Of that number, it is speculated that 17 million people in the United States struggle with an alcohol abuse problem. Many, if not all, of these individuals were vulnerable to alcohol abuse due to the aforementioned risk factors.

Another important bit of information to know is that the development of an alcohol abuse problem is not solely reliant on just risk factors. The reasons why a person drinks can increase a person's likelihood for developing an alcohol abuse problem as well. When an individual drinks to cope with stress or uses alcohol as a way to escape or avoid unpleasant feelings and/or emotions, the probability of a drinking problem is higher. Additionally, those with a drinking problem will drink for these reasons and continue abusing alcohol despite consequences that occur. Examples of such consequences that can happen when drinking alcohol becomes the center of a person's world can include academic failure, loss of employment, demise of relationships, and interaction with the legal system.



Additionally, those with a drinking problem may experience withdrawal symptoms when not under the influence of alcohol. These symptoms can include shakiness, increased anxiety, rapid heartbeat, fever, and, in some cases, seizures. These symptoms can be life-threatening and require medical attention in many cases. Furthermore, problem drinking can render the following risks to a person's health if the abuse of alcohol is long-term:

- Increased risk for alcoholism – physical dependence on alcohol
- The development of cirrhosis of the liver
- Vital organ damage
- The development of certain types of cancer
- Compromised immune system
- Increased chance for heart disease
- Irreversible brain damage

Death is another potential risk that is probable for a person with a drinking problem. In fact, statistics have concluded that nearly 90,000 Americans die each year due to alcohol-related causes, making it the third leading cause of preventable death in this country.



 **PARK ROYAL**
Behavioral Health Services

239-985-2760

www.parkroyalhospital.com

If you feel that your drinking has spiraled out of control to the point where you are experiencing adverse effects in your life and withdrawal symptoms or have been told by a medical professional that you are experiencing the health risks associated with an alcohol addiction, there is help available that can free you from the grips of alcohol addiction.

Park Royal Hospital, a leading provider of mental health and chemical dependency treatment, offers effective and comprehensive care for adults and seniors who are battling addiction and other mental health concerns. Our detox services are monitored by experienced medical staff, who diligently work to minimize the risk and pain of withdrawal. Psychiatrists are available to supervise medication if it is deemed necessary for mental health treatment, and compassionate mental health professionals provide ongoing support for the duration of each patient's stay at our hospital. Because of these elements, Park Royal is where individuals battling addiction and mental illness can achieve true healing and recovery. Our holistic approach to treatment and varying treatment modalities, which are woven into all of our programs, have ultimately produced countless success stories for many people.

If you or a loved one would like to take that first step towards recovering from alcohol addiction, contact Park Royal to discuss treatment options. The phone line 239-985-2760 is answered 24 hours a day, 7 days a week.

TIPS FOR TALKING TO YOUR DOCTOR ABOUT PELVIC FLOOR DISORDERS

It can be difficult to talk about problems such as incontinence or vaginal bulges, even with a doctor. But doctors are used to talking about these problems, and it's worth asking about your symptoms because they can be treated. Your doctor may refer you to a urogynecologist – an expert in treating these problems – if your doctor thinks a specialist can help. Here are some tips to get the conversation started.



WHAT SHOULD I TELL MY DOCTOR?

1. My last pelvic exam was _____ (days, weeks, months, years) ago.
2. I have _____ child(ren) and delivered _____ (vaginally/by cesarean section).
3. I'm having some or all of the following symptoms:
 - Pain, pressure or a bulge “down there”
 - Trouble urinating or passing a bowel movement
 - “Leaking” or needing to use the bathroom often
 - Pain during urination
4. My symptoms started _____ (days, weeks, months, years) ago.
5. I have these symptoms _____ (daily, a few times a week, sometimes, etc.).
6. I want to find ways to treat or cure these symptoms.

Also, be sure to tell your doctor about any medicines you are taking and any allergies you may have.

WHAT SHOULD I ASK MY DOCTOR?

1. Do you think I have symptoms of a pelvic floor disorder?
 - If so, what kind of pelvic floor disorder(s) do I have?
2. What is causing my symptoms?
3. Will my symptoms get better?
4. What can I do to lessen or end these symptoms?
5. Do you see a lot of other patients like me?
6. Do you know of any doctors who specialize in treating my symptoms, such as urogynecologists?
7. If so, can you refer me to someone you would recommend?
8. Will you work with the specialist to make sure he or she knows about my medical history?
9. Can I contact you again to ask your advice after seeing a specialist?
10. What should I do next?
11. If I think of more questions later, can I call or e-mail you?

*Joseph Gauta M.D.
Board Certified Urogynecologist*

Dr. Gauta is now the first physician in S.W. Florida dual board certified in Urogynecology and Obstetrics and Gynecology. Dr. Gauta's practice, The Florida Bladder Institute, is solely dedicated to Urogynecology.



One out of every six women suffers from overactive bladder and half of all women will suffer from pelvic organ prolapse. A challenge for women seeking treatment is that they would go to a urologist for one problem, a gynecologist for another and a gastroenterologist for another. Dr. Gauta explains “A Urogynecologist has the skill and experience to assess the entire pelvic region including the uterus, bladder, vagina, rectum as well as the muscles, ligaments, connective tissue and nerves that support those systems. Evaluating your pelvic system as a whole ensures the best treatment and outcome”. Some of the newer treatment options include biofeedback, electrical stimulation, Botox, and minimally invasive outpatient surgery. In addition to providing the most advanced medical care for his patients, Dr. Gauta is a preceptor for Boston Scientific, Medtronic and Olympus and trains other physicians from around the world on how to do the most advanced Urogynecology procedures. He is the recipient of the prestigious Castle Connolly's Top Doctors award, and is amongst the top 1% of physicians in the country who are honored with the Patient's Choice Award for 5 years in a row. Dr. Gauta received his training at Tulane University in New Orleans mentored by world renowned Urogynecologists David Herbert M.D. and Thomas Elkins M.D.

Cutting Edge Technology and Science Meet to Make You Look Years Younger!

Swan Age Reversal Centers specializes in aesthetic procedures that help their clients look younger, thinner, and more vibrant. Due to huge year round demand for their services, a new Naples office is opening August 2014 and a Sanibel location is opening October 2014. Swan Centers services hundreds of clients and does thousands of procedures annually and have a 98% approval rate. They offer non-invasive, safe, pain-free treatments utilizing State of the Art Devices found exclusively only at Swan Centers. Whether you are interested in anti-aging skin treatments, skin tightening, wrinkle reduction, cellulite smoothing, or fat reduction, Swan Age Reversal Centers offers a unique and pleasant experience that delivers results.

They offer body contouring treatments that stimulates weight loss and fat reduction with most clients seeing instant results. They also offer skin rejuvenation and anti-aging treatments to help restore your natural glow and slow the aging process. Swan Centers offer a wide range of customized services to help our clients look younger, thinner and more vibrant. Many of the services that they offer can only be found only at Swan Age Reversal Centers because they use custom manufactured devices, proprietary serums and exclusive products.

Swan Age Reversal Centers takes body enhancement where it was meant to be, combining health and beauty with cutting-edge science and impeccable service. They're driven by innovation in aesthetic beauty and are able to deliver an intimate and relaxing experience, complete with all the perks that only a premium establishment can offer. They specialize in laser, radio frequency, ultrasonic anti-aging and fat reduction technologies, and offer a complementary assessment to all first-time customers.



SWAN TREATMENT OPTIONS

SKIN TIGHTENING

Swan-Freeze™

Swan-Freeze™ is a state-of-the art, Skin Tightening, Wrinkle Reduction, Cellulite Smoothing device that is exclusive to only Swan Age Reversal Centers. Swan-Freeze™ creates radio frequency waves to penetrate and tighten your skin, reduce wrinkles, and has numerous anti-aging benefits. This non-invasive, pain free technology offers

impressive results in as little as 6-10 treatments, however, many clients notice a difference after the first treatment.

Swan-Freeze™ treatments use radio frequency to consistently and uniformly heat the skin from the inside out. The collagen fibers heat up resulting in skin tightening to attain exceptional results.

Swan-Freeze™ treatments are non-invasive and painless, with many clients comparing the treatment to a hot-stone massage! Swan-Freeze™ treatments are effective in circumference reduction, improving the appearance of cellulite, skin tightening and reducing the appearance of wrinkles. They deliver a safe, pleasant, pain-free experience in treatments for the body including arms, belly, hands, thighs, buttocks, neck and face.



FAT REDUCTION

Let's face it. Most of us wouldn't mind losing a few inches around the belly, love handles, buttocks or arms. Swan Age Reversal Centers has the answer! They are excited to offer 2 Exclusive fat reduction options only found at Swan Centers. Swan-Lipo™ utilizes state of the art laser technology and Swan-Cavi™ is fat reduction with the use of ultrasound. They can use one or both of these exclusive devices to treat you, based on what your specific fat reduction needs are.

Swan-Lipo™ and Swan-Cavi™

Swan-Lipo™ and Swan-Cavi™ are used to reduce fat to specific targeted body parts and transforms bodies with remarkable results, with clients seeing incredible results



Anti-Aging • Fat Reduction • Skin Tightening
Wrinkle Reduction • Cellulite Smoothing

1-800-965-6640

www.SwanCenters.com

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141 10th Street South
Naples, FL 34103

with inches lost off their waist, belly, back, arms, hips and thighs. Swan-Lipo™ and Swan-Cavi™ are safe and effective way to lose inches of fat without surgery, no pain, no bruising or recovery time! Swan-Lipo™ and Swan-Cavi™ help to contour your body, lose inches and reduce stubborn body fat without having painful plastic surgery procedures! Swan-Lipo™ and Swan-Cavi™ works by painlessly creating a small pore in the wall of the fat cells to start the inch loss process. While the cells remain healthy and alive, the fat is emptied out of the cells through the open pore. Our bodies then safely and naturally eliminate the fat using the lymphatic system which causes you to lose inches in the waist, hips, arms, back and thighs.

Swan-Lipo™ and Swan-Cavi™ treatments are quick and painless. Treatments generally take 45 minutes or less and unlike other plastic surgery procedures, Swan-Lipo™ and Swan-Cavi™ allows you to continue your daily activities without any interruption.

SKIN RENEWAL

Swan Ultrasonic™

Swan Ultrasonic™ is an exclusive and unique state-of-the-art treatment system that produces amazing results on all skin types. Swan Ultrasonic™ utilizes low frequency sound waves in a two-stage process to repair skin at a cellular level regardless of skin concerns such as acne, rosacea, wrinkles, hyper pigmentation, dry skin or blemishes. Swan Ultrasonic™ can be done as a stand-alone treatment option or to achieve more dramatic results, Swan Ultrasonic™ can be combined with other treatments.

Swan Ultrasonic™ offers an easy 20 minute two step application.

1. Deep Exfoliation – Removes dead skin cells and impurities by cavitating pores with a gentle sound wave. The skin is cleaned deeply and exfoliated allowing it to receive nourishment at a cellular level.

2. Antioxidant & Serum Infusion – With the proper frequency and consistent potheyr density, antioxidants and proprietary topical collagen products deeply penetrate, instead of simply lying on top of the skin where they provide little to no benefit. This treatment will penetrate the skin to boost collagen, giving your clients a fuller and more youthful appearance.

Swan Ultrasonic™ helps to reverse the signs of aging on the face, neck, décolleté and hands with no pain or downtime!

Swan Ultrasonic™ treatment systems provide superior deep pore cleansing, gentle exfoliation, cellular Rejuvenation and deeper penetration of Serums than other skin renewal products. The benefits of Swan Ultrasonic are clear and immediate improved skin appearance that will be noticed after the first treatment.



An Evolving Future of Disease

By Patrick R. Handley, EMS Clinical Coordinator,
Florida SouthWestern State College, Charlotte Campus

Ebola has been an extremely hot topic in the news during the last month. The media loves to sensationalize just about every hot topic that enters the forefront of our minds. Is Ebola another over-sensationalized topic? Or is there merit to the perceived concerns to this "emerging" disease? What is the chance that outbreaks will emerge in our country? What is the fatality rate of this "deadly" disease? There seems to be more questions than answers --especially one that has been around since the 1970s, but has not really "knocked on our door" until now. Let's examine some of the facts.

The first case of Ebola occurred in 1976 in what is called the Democratic Republic of Congo, near the Ebola River, hence its name. It is currently unknown as to what the source host was, but based on current research, it is believed to have come from fruit bats in the area. There are five different strains of the virus. Four of the five strains currently exist in primate hosts, including humans, apes and monkeys. Since its emergence, there have been many outbreaks in different countries, including Gabon, South Sudan, Ivory Coast, Uganda, South Africa and Liberia.

How do we identify this disease in others? Initial symptoms of this disease present with fever, weakness,

muscle pains and aches, headache, and sore throat. These symptoms are not much different from any influenza contracted currently and generally occur within eight to 10 days following exposure. The next symptoms to develop include abdominal pain, vomiting and diarrhea. Then the late signs of coughing up blood, bloody diarrhea, blood oozing from the gums, eyes, nose and ears occur late in the disease process.

Laboratory findings in blood work generally discover a low white blood cell count, a low platelet count and an increased liver enzyme count.

Transmission of Ebola occurs through direct contact with broken skin or mucosal membranes by the infected patient's blood or body fluids (i.e. - urine, saliva, sweat, feces, vomit, breast milk and semen). Contaminated needles can also be the vehicle of transmission. Given these routes of transmission, healthcare workers can best protect themselves by utilizing medical masks, goggles, gloves, gowns, safe injection practices, thorough hand washing and good general hygiene.

There is no current vaccine or medication that has been FDA-approved for the treatment of Ebola. With a



fatality rate of approximately 50 percent of all cases, it is imperative that we find a treatment. There are currently, however, two potential vaccines being worked on that are currently in the human safety testing phase. For now, treatment that produces the best survival rates are early re-hydration of fluids, electrolytes and general symptomatic treatment.

Hopefully you can derive a sound judgment on this disease based on the facts presented in this article. Despite the sensationalistic personality of our media, it would appear there is sound evidence to be concerned about this disease. High fatality rates, no medication, no vaccine and flu-like symptoms early in the disease process all add up potentially devastating results. Our best defense for now may be accurate information about the disease and keeping abreast of movements and outbreaks of Ebola. Stay informed.

Florida SouthWestern State College (FSW) **OPEN HOUSE** week from 3-6 p.m. on November 3, 5 and 6.

All events are free to attend and will be held at FSW's four locations. Attendees are encouraged to register online at www.FSW.edu/openhouse to ensure a quick check-in process. The dates and locations are:

November 3 – Hendry/Glades Center, 1092 E Cowboy Way, LaBelle, Building A

November 3 – Charlotte Campus, 26300 Airport Rd., Punta Gorda, Bell Tower

November 5 – Collier Campus, 7505 Grand Lely Dr., Naples, Building M

November 6 – Thomas Edison (Lee) Campus, 8099 College Pkwy., Fort Myers, Building U

Biography Center for Disease Control website, www.cdc.gov/vhf/ebola

WebMD website, www.webmd.com/a-to-z-guides/evola-fever-virus-infection

World Health Organization website, www.who.int/mediacentre/factsheets/fs103/en/

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November is Diabetic Eye Disease Awareness Month

DIABETIC EYE DISEASE - A LEADING CAUSE OF BLINDNESS AND VISION LOSS

By Jonathan M. Frantz, MD, FACS

Diabetic Retinopathy, a condition occurring in people with diabetes, causes progressive damage to the retina, the light sensitive lining at the back of your eye. It is a serious sight-threatening complication of diabetes.

Local Ophthalmologist Jonathan M. Frantz, MD, FACS, joins the American Academy of Ophthalmology in reminding those who have diabetes or are at risk for the disease—especially people with black, Latino, Native American or Pacific Islander heritage — that having an annual dilated eye exam is an important step toward protecting your eyes and vision, along with proper medical care, careful glycemic (blood sugar) control, and other lifestyle choices that reduce the health impacts of diabetes.

According to Dr. Frantz, medical director of Frantz EyeCare, “The earlier diabetes is caught and appropriate lifestyle changes and treatment begin, the better the chance of avoiding vision loss and other health consequences.”

Symptoms of diabetic retinopathy include:

- Seeing spots or floaters in your field of vision
- Blurred vision
- Having a dark or empty spot in the center of your vision
- Difficulty seeing well at night



Dr. Robert Sherman and Dr. Oren Plous, retina specialists at Frantz EyeCare, work closely with the other doctors at Dr. Frantz’s practice and area primary care doctors to provide quality, patient-focused eye care that is so important to patients with diabetes. Prolonged periods of high blood sugar may lead to the accumulation of fluid in the lens inside the eye that controls eye focusing.

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239-418-0999
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To make an appointment, visit www.bettervision.net or call the main office of Frantz EyeCare at 239.418.0999.

This changes the curvature of the lens and results in the development of symptoms of blurred vision. The blurring of distance vision as a result of lens swelling will subside once the blood sugar levels are brought under control. Better control of blood sugar levels in patients with diabetes also slows the onset and progression of diabetic retinopathy.

An eye doctor is an important member of the diabetes health care team. Often there are no visual symptoms in the early stages of diabetic retinopathy. Part of living with diabetes and successful eye care is having a comprehensive dilated eye examination on at least an annual basis – more often for people with existing eye issues or more serious retinopathy. Early detection and treatment can limit the potential for significant vision loss from diabetic retinopathy.

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Jonathan M. Frantz, MD, FACS, is named in The Guide to America’s Top Ophthalmologists. He and his team of doctors at Frantz EyeCare offer a broad spectrum of patient-focused comprehensive care from eye exams and eyewear to bladeless laser cataract surgery, treatment of eye diseases, bladeless LASIK laser vision correction, and eyelid surgery with office locations in Fort Myers, Cape Coral, Punta Gorda, Lehigh Acres, and Naples.

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GERD Awareness Week Nov. 23-29, 2014

Did you know ...

GERD is more
than **HEARTBURN**

GET EDUCATED
about the symptoms and complications

GET EVALUATED
to find out if you have GERD

GET TREATED
Learn about treatment options
for GERD

GET STARTED
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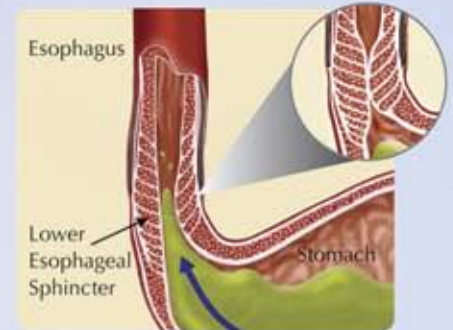
FAST FACTS



GERD affects
up to
1 in 5
U.S. adults!

About
40% of patients on GERD
medication **still**
have symptoms!

CAUSE



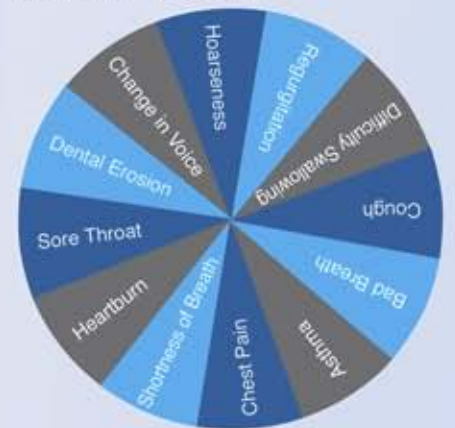
GERD is caused by a weak muscle in the esophagus called the lower esophageal sphincter (LES).

**Medications do not address
the cause** of GERD
or prevent GERD.



SYMPTOMS

Heartburn is the most common symptom of GERD, but **not the only one**. Which symptoms do you suffer?



RISKS

Complications of GERD can include:

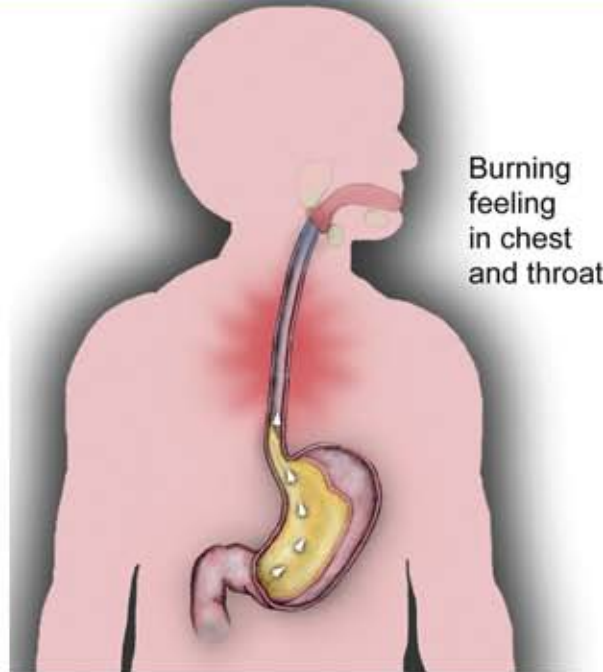
- ▶ Esophagitis ◀
- ▶ Stricture ◀
- ▶ Barrett's esophagus ◀
- ▶ Esophageal cancer ◀

16TH ANNUAL NATIONAL GERD AWARENESS WEEK NOVEMBER 23-29TH GERD IS MORE THAN HEARTBURN

National GERD Awareness week takes place every year during the week of Thanksgiving – a time when many Americans may experience heartburn associated with over-eating. However, if heartburn occurs more frequently, or is associated with symptoms other than heartburn, it may be gastroesophageal reflux disease (GERD), a lifelong disease that affects up to one in five adults in the United States.

GERD is caused by a weak valve that allows acid, bile and stomach contents to flow back from the stomach into the esophagus, creating pain (heartburn) and often causing damage to the lining of the esophagus. Heartburn is the most common symptom, but not the only one. Some GERD sufferers experience other symptoms, such as regurgitation, hoarseness, persistent cough, asthma, bad breath, sleep disturbance and tooth erosion. Medications can help with the heartburn symptoms, but do not address the actual cause of GERD, the weak valve.

Get Educated. Get Evaluated. Get Treated.



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Dr. Denk with GI Surgical Specialists "Diagnostic testing performed by a healthcare provider specializing in diseases of the esophagus is the only way to definitively diagnose GERD. I urge patients suffering from GERD to seek help from a GERD specialist who can provide an accurate diagnosis and discuss the latest treatment options to ultimately give these patients their lives back."

"Many people don't understand that GERD is a serious disease that can really impact every facet of a patient's life – I see patients that haven't had a good night's sleep in years." said Dr. Denk.

"If someone finds themselves having symptoms despite taking medication, or if they develop new symptoms or nighttime reflux, it's time to get a thorough evaluation," commented Dr. Denk.

GI Surgical Specialists is located at 13710 Metropolis Ave. #101 in Ft. Myers and in Naples at 8340 Collier Blvd. #205. The practice specializes in minimally invasive - Reflux, Bariatric and General Surgery.

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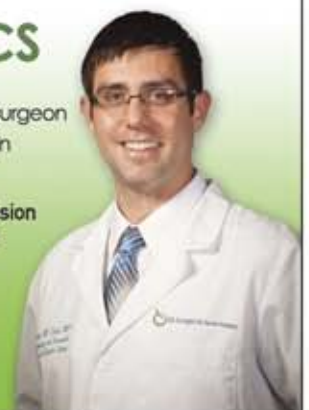
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New Advances in Compression Therapy for Limb Swelling

By Alyssa Parker

A common challenge faced in the medical field is finding the cause of an individual's limb swelling. Any limb swelling may be your body's way of letting you know there is a potential underlying condition that can cause even more damage if left untreated. When swelling in a limb becomes chronic, pinpointing the origin is vital to getting proper treatment. Some of the most common diagnosis are venous insufficiency and lymphedema.



Fluid accumulation can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility. Recent studies show that nearly 7 million people in the United States suffer from venous disease. While 2 to 3 Americans suffer from secondary lymphedema.

Chronic venous insufficiency (CVI) is when blood is unable to circulate from the lower limbs back to the heart. CVI is caused by incompetent valves and venous hypertension, in both parts of your venous system. The venous system is comprised of two parts, deep circulation and superficial circulation which are interconnected by perforating veins. Your venous system is an important component to delivering blood to the heart, then passing it through the lungs to obtain oxygen. The oxygenated blood is then delivered to the lower limbs.

Venous hypertension leads to secondary Lymphedema from the lymphatic system's inability to keep up with an abnormally high demand of protein rich fluid. Lymphedema is chronic swelling from protein-rich fluid accumulation in the tissue. Lymphedema occurs secondary to CVI when the lymphatic system is obstructed causing damage, blockage, or abnormal development. Primary Lymphedema can be hereditary or congenital, where an individual is born with a compromised lymphatic system.

Risk Factors

Once your circulatory system has been obstructed leading to venous insufficiency or lymphedema this may lead to an interruption in the venous and lymphatic flow. Both diseases are manageable and treatable however there is no cure for either one.

Risk factors may include:

- Unknown swelling of a limb
- Family history
- Invasive surgical procedure i.e. radical cancer surgery
- Chronic open wounds
- Decreased mobility
- Infections such as cellulitis/ lymphangitis
- Skin changes such as discoloration or hardening



Management: Compression Pump

Understanding the ongoing management of both venous insufficiency and lymphedema are important in preventing irreversible damage to the body. Compression therapy along with proper nutrition a healthy diet and exercise are the foundation of a treatment plan. Compression stockings are often difficult to get on with little results for chronic swelling. Diuretics may be harmful for long-term treatment. Compression devices are widely recognized and highly effective treatment. 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.

A pneumatic compression device mimics the muscle contraction that naturally occurs when performing a cardiovascular activity. A compression device is used for both acute care (short term in the hospital) as well as chronic care (long term in the home). The compression pump increases blood flow and lymphatic flow. By increasing the circulation in the affected limb many painful symptoms will be alleviated. When compression treatment is used on a limb the excess fluid is removed and worked back into the lymphatic system the natural way. For patients with chronic ulcers using a compression device will help heal the wound from the inside out, by increasing the circulation in the return of the blood from the heart. The heart delivers oxygen rich blood back to the legs and the tissue speeding the recovery time.

For patients who many have Chronic venous insufficiency a test called a vascular or duplex ultrasound may be used to examine the blood circulation in your legs.

The compression pump is approved by Medicare and covered by many commercial insurers; Actual coverage varies with individual commercial insurance policies. Acute Wound Care, LLC is a highly focused local provider of wound products and compression pumps working with select area physicians highly versed in treating swollen limbs and chronic wounds.

Contact Acute Wound Care today by calling 239-949-4412 to learn more about the benefits of compression devices and the other in-home services available.



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.

Health Insurance – 2015 Open Enrollment and Annual Election Periods can be very confusing this fall.

By Dee Merritt

Medicare enrollment period is now called **Annual Election Period** which runs **October 15th to December 7th 2014 for January 1st 2015 effective date.** Medicare is for adults that are 65 or older, or others that are on Medicare due to disability. In September each year Medicare Advantage Plan Member 's and Medicare Part "D" Prescription Drug Plan member's receive a copy of their upcoming year summary of benefits and any changes that are being made to their current plan. During this time you should review the new plan and make sure it still suits your needs. You can compare plans, if you make changes your last selection you made by the end of the day on December 7th, this will be your new plan for the following year. Some agents represent multiple insurance carriers and will reduce the amount of time you will need to compare 2015 plans. If you miss this window you can dis-enroll from a Medicare Advantage Plan and go back to regular Medicare and a Prescription drug plan Jan. 1st – Feb. 15th 2015, then you are in a lock-in period until next year unless you have a special election period (i.e. loss of group coverage, move out of service area, carrier plan cancels, Low Income Subsidy, Dual Eligible, etc.) please visit www.Medicare.gov for more information.

For others that are not on their employers group plan or mediocre there is now also an enrollment period. The law under the **Patients Protection and Affordable Care Act (PPACA)** - (Obama Care) the **Open Enrollment Period** is **November 15th to February 15th**, those that enroll between **November 15th to December 15th** will have a **January 1, 2015 effective date; Dec. 16th – Jan. 15th eff. Feb. 1, 2015; Jan. 16th – Feb. 15th Mar. 1st 2015.** After that you will not be permitted to purchase health insurance that meets the government standards that avoids the tax penalty unless you have a special election period, please visit. <https://www.healthcare.gov> for more information. The PPACA plans have no medical under writing; short term policies are still available but currently still require medical underwriting which means you might be turned down if you have pre-existing conditions.

I am finding that many people think that the Affordable Care Act is only for people that are seeking government subsidy and that is not correct. The law affects just about every type of health insurance in the USA. In order to qualify for government subsidy you need to go through the Market Place or if the insurance carrier offers seamless applications through their platform it can be done that way as well.



To see if you qualify for tax credit you can check the IRS website at www.irs.gov/uac/The-Premium-Tax-Credit. If you do not qualify for subsidy you can still purchase your plan through the Market Place or the Insurance Company. If you have an insurance policy for many years and drop that plan you will not be able to get it back as the plan will no longer exist to be re-purchased. Many insurance carriers are allowing their policy holders to keep their current plan. Before you cancel what you have make sure that you check your doctors and totally understand the plans summary of benefits. Cost is important but not only the cost of the plan you choose but also make sure you can afford the out of pocket cost when you need to use the plan, sometimes raising the premium a little it may make it easier to visit the doctor more often as needed. There is a lot to know and I would recommend that you work with a licensed insurance professional that is Market Place Certified that can help you through the enrollment process and explain the different insurance policies available to you in your area.

*To learn more about Health Care Reform or schedule an appointment contact:
Dee Merritt - Logical Insurance Solutions at 239-362-0855
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The Lost Art of Play

By Tara Moser, LCSW, RPT-S

Your child comes home and is full of energy. Homework needs done, you have work to do, the laundry is waiting, and you feel as if your child is going to destroy the house with the tornadic energy being experienced. Our society has become so fast paced and full of multi-tasking that play no longer seems to come naturally to adults or children, let alone seem important. Most schools have cut out recess and other outlets in which energy could be expelled to add more time for test preparation. Therefore many homes have reduced extracurricular sports and activities as well as free play in the neighborhood to make room for homework and tutors. It is important to incorporate play into daily activities.

Many parents and caregivers have admitted to not knowing how to play or feeling as if they do not play properly with their children. In order to engage in playing with those loved ones, it is important to consider your definition of play. There is no right or wrong answer to this and I encourage you to take a minute while reading this to stop and write down your definition before continuing to read.

Ok, now that you are back with your definition, I will share with you what the Oxford definition of play is: a verb; to amuse oneself, sport, frolic, or employ oneself in a game. My definition, as a counselor practicing play therapy, is: play is a child's work where toys are utilized as tools--in children; it is supposed to be a pleasure filled activity.

There is much that can be learned to understand play, such as the two different categories (recreational/free play and structured/filial play) and four types of play (imaginative, constructive, creative, and physical). Good toys are an important issue to discuss because "good toys" are not the latest X-Box® or mini-motorcycle. Toys must be able to fit in small hands, be durable, be manipulable, and appeal to the senses. As a parent, ask yourself "will I play with it?" If the answer is "no" or "I'm not sure", then don't buy it. Expensive is not always the answer and sometimes the play can come in the crafting of the toy. For example, making your own noisemaker by filling a bottle with beads appeals to three senses of the child and



also allows a process of creation and pride toward the toy being created. Toys can be made with everyday items in the home, such as cardboard boxes, paper towel rolls, and baking products (to make things like slime and play-doh).

Keep in mind, that there is not always one correct way to do something. I have found that this thought is one of the hardest for parents to accept because it causes disorder—and most people do not like disorder. Toys come with directions and games with rules, which lead many people to believe that is the only way to use the toy and game. Learning that you can stop caring about realism while engaging in play with your child is one of the best lessons to be learned. What does it hurt to use a play vacuum on the table or wall instead of the carpet? Why can't a doll wear one sock and two different shoes? Children learn and grow through play and will begin to feel restricted and unable to please their parents if parents cannot let go of the need for perfection and correct use of toys. If the game or toy is age appropriate and a lesson can be learned from it, such as a game of memory that encourages learning of the alphabet or numbers, then teach them to play, however be open to allowing other times of play where everyone can change the rules to appeal to each individually.

The final tip I have for parents is to not lead during playtime. Children unconsciously copy adults and older children while playing and tend to not always use their imagination if that opportunity is restricted. I would like to encourage you, as the parent, to refrain from giving an opinion, even if the child seeks it. For example, if a child asks her mother if she should paint the tree blue or green, the mother should ask her daughter which color she would like to paint the tree and encourage

self choice. Children ask questions such as these because parental approval is important to them. It is important to remind ourselves that the child already knows what they want to color the tree, but wants to make sure approval is there or she will not go with her original instinct.

By allowing your inhibitions to go and scheduling play time with children, you will increase your closeness and encourage self expression. At times you may learn something through your child's play that they haven't told you. Please do remember that children spend most of their day in structured learning activities, so it is important to play at home before doing homework. Please take time to play as an adult, with other adults as well and this will increase your own energy and value toward your child's play.

.....
Tara Moser, LCSW, RPT-S specializes in working with children, adolescents, and families. She has a Master's Degree in Social Work from the University of Central Florida, is a Licensed Clinical Social Worker in the State of Florida (#SW8379), and a Registered Play Therapist Supervisor through the Association for Play Therapy. Tara also specializes in Play Therapy with children 2 -18 years old, as well as incorporates pet-assisted play therapy into some of her clinical work utilizing her two dogs Abbey and Bode.

Tara has worked in a variety of therapeutic roles including foster care, non-profit family counseling, non-profit individual counseling, elementary school based counseling programs, adolescent drug prevention/intervention, behavioral therapy with autism, domestic violence counseling, and supervised visitation, in addition to her private practice.

Tara's counseling approach is client centered in that each session is unique to meet the client's needs and utilizes tools that are most effective for the client such as play, music, pets, and art. More often with the younger children, non-directive and directive modalities of play therapy are utilized. Cognitive-behavioral approaches and family system approaches are also utilized.

Learn more on our website at
www.deltafamilycounseling.com
Tara Moser, LCSW, RPT-S
239-540-1155

HOW SWEET IT ISN'T

By W.L. "Hunter" Huntley, III, HAS., BC-HIS

The month of November is designated as American Diabetes Month. This month is designed to raise awareness of this silent, but atrocious disease. Diabetes can cause a multitude of physical complications. Elevated glucose levels can cause a plethora of problems on the endocrine system; adversely affecting numerous areas of the body; which may result in poor circulation, neuropathy, sexual dysfunction, internal organ damage, blindness, hearing loss and amputation. People with diabetes, especially individuals over the age of 60, are twice as likely to suffer from hearing loss versus people that maintain normal glucose levels.

Some of these afflictions can be treated effectively; however some maladies have to be endured for the rest of their lives.

Individuals suffering from hearing impairment can usually be successfully fit with hearing instruments. The effectiveness of digital hearing devices is better than ever. Digital technology now allows hearing instruments to be prescription-fitted with computer chips. Changes in vision require purchasing a new prescription. Unlike vision when an individuals hearing changes; the current hearing devices computer chips can be re-programmed to compensate for additional decline in a persons hearing.

This gives the hearing instruments two to three times the life of traditional analog devices, which are basically obsolete.

Directional microphones now allow the instrument wearer to pick up sounds in front of them, but not amplify ambient noises from behind; improving speech understanding in noise. Automatic telephone response allows wearers to put the telephone up to their ear with no more "squeal". In addition, multi-memory allows the user to change the program of their devices with the simple push of a button; depending on what kind of listening environment they are in. Instruments can be turned up for ease of listening from a distance at church, or for watching television, to keep the volume of the T.V. at "normal" listening levels. This way, the television doesn't have to be "blasting" everyone else in the room.

Another program can be set to turn down the devices, in case a person encounters an environment that is excessively noisy. The ambient noise is not as pronounced, providing a more pleasant overall listening experience.

The most important thing an individual can do is address the issue as soon as possible. Early detection many times is the key to be fitted successfully with hearing instrument; by keeping the auditory portion of the brain stimulated "properly" which will help a person stay sharp mentally over time.



A study by Johns Hopkins Medical University and the National Institute on Aging found that individuals with hearing loss are much more likely to develop dementia and Alzheimer's disease. Those with severe hearing problems, the study reports, were five times more likely to develop dementia than those with

normal hearing. This occurs due to lack of "proper" stimulation to the auditory portion of the brain that interprets speech. Even mild hearing loss doubled the risk of dementia. That risk, says Dr. Lin, a co-author of the study, appeared to increase once hearing loss began to interfere with the ability of the individual to communicate. A prime example would be a noisy restaurant, or anywhere else ambient noise is present.

Obtaining hearing assistance is as simple as wearing glasses or contact lenses. You should hear what you've been missing. **Call 997-8288 to schedule your FREE, no obligation hearing evaluation today.**



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W.L. "Hunter" Huntley, III, HAS, BC-HIS, Board Certified

W.L. "Hunter" Huntley, III, HAS, BC-HIS, Board Certified, attended Edinboro State College, Edinboro, PA, on a football scholarship and finished his education at the University of FL before entering training with Beltone Electronics in Chicago, IL. He was a Beltone hearing instrument dispenser from 1986 to 1992. Hunter is also a 2 time brain cancer survivor in 1993 & 1994. He has operated Leonardi Hearing Center, Inc., since 1994. Voted one of the best Hearing Healthcare Professionals in the Nation by the Hearing Review magazine for 2012 & 2013. He is also a Hearing Healthcare member in good standing with the International Hearing Society for 20 years.

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Make Sure Your Feet Are Covered

By Christopher M. Cole, L.Ped

Did you know that more than 65,000 lower limbs are amputated annually due to complications from diabetes? And after an amputation, the chance of another amputation within three to five years is as high as 50 percent! With these staggering statistics, proper care of the feet, early recognition, and regular foot screenings for someone with Diabetes are *absolutely imperative*.

Are my symptoms associated with diabetes?

Unless you are routinely checking your blood sugars, or performing a neurologic or vascular assessment, you may not know that you are developing some of the common symptoms associated with diabetes. In many cases, some of these early signs will develop in the feet and legs.

It is the neurologic and vascular changes that create the greatest "feet" risks for those that develop diabetes. If there is poor circulation (vascular impairment) to the feet, you may develop changes such as skin color changes, swelling of the foot or ankle, numbness in the feet or toes, pain in the legs, open sores on the feet that are slow to heal, ingrown and fungal toenails, bleeding corns and calluses, and dry cracks in the skin, especially around the heel. The above changes (or symptoms) can become more troublesome if the impaired circulation is complicated by what is known as a diabetic peripheral neuropathy.

When you have a diabetic peripheral neuropathy, you have impaired or loss of sensation (neurologic changes). By loss of sensation, this means that you cannot feel what the average person feels. An example of a diabetic with a peripheral neuropathy and vascular impairment is that you could have something as simple as a seam on your shoe irritate a portion of the foot without your knowledge and this can easily progress to much more serious problems such as infection, amputation, and even loss of life. These problems become life threatening because you are not aware that they are affecting you.

These areas of concern can easily be checked by your Podiatrist, and the potential risks can be significantly reduced.

Proper footwear is key to lowering risks of potentially severe feet problems for diabetics.

When it comes to diabetic footwear, it can be confusing when trying to determine which products are best for you. The knowledgeable and experienced staff at Foot Solutions of Estero can help you determine what footwear you need.

Foot Solutions Estero offers the largest selection of diabetic footwear in the area, including: shoes, inserts, socks, slippers, sandals, and compression hosiery. Brands like Dr. Comfort, New Balance, Brooks, Aravon, Dunham, are arguably some of the best fitting, finest quality therapeutic footwear available for diabetics. These styles provide the utmost comfort and quality, and have stylish looks that appeal to everyone. This footwear is designed to keep your feet healthy today and in the future.



The cost of your therapeutic footwear may be covered!

Part of your prevention and care if you have diabetes is to ensure you are wearing the proper diabetic footwear. When shopping for shoes, socks, and other footwear, make sure that you go to an approved provider for Medicare's Therapeutic Shoe Bill. This bill is designed to help prevent amputations due to complications from diabetes. At Foot Solutions of Estero, eligible clients can receive diabetic appropriate shoes and insoles at greatly reduced or no cost.

Medicare's diabetic footwear benefit provides proper footwear and inserts for people with diabetes who qualify under Medicare Part B. This program was designed to prevent complications such as lower limb ulcers and amputations for individuals who are diagnosed with diabetes. At Foot Solutions, we believe you can achieve better health through your feet.

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The staff at Foot Solutions of Estero will be providing free pedorthic diabetic foot checks. The foot checks will include a thorough check for any sores or complications that can result from diabetic neuropathy. In addition, the checks will include a pressure map reading of the feet, a balance and gait analysis and fittings for diabetic footwear.

Foot Solutions is next to Publix in the Corkscrew Village plaza on the corner of U.S. 41 and Corkscrew Road. For those who have physical limitations which prevent them from coming into Foot Solutions, licensed pedorthist Chris Cole may be available to make "house calls" at no charge, to perform foot checks and diabetic shoe fittings at the person's home. To make reservations for this free event or to schedule an in-home visit, call 495-8911.

Christopher M. Cole, L.Ped



Chris is a Licensed Board Certified Pedorthist and owner of Foot Solutions Estero, a BOC Accredited Facility. Chris graduated from Clemson University and has taken advanced course study in Mass Position Theory, CAD/CAM Technology for Prescription Foot Orthotics, Pedorthic Care of Diabetic Foot, Heel Pain Syndrome, Obesity among older Americans, Fall Prevention, and Shoe Construction and Modification.



RECOVER with Confidence™

You have enough things on your mind. Your hair loss shouldn't be one of them.

By LaDonna Roye, Hairstylist

Diabetes and Hair Loss

Do you know that hair loss can be a consequence of Diabetes? Most people know that people with diabetes, either type 1 or type 2, are more likely to have damage of the nerves, kidney, eyes, heart and blood vessels, but another result of diabetes may be hair loss.

Diabetes can cause a hormonal imbalance in the body. Just like the hormonal changes during pregnancy and menopause, this imbalance may result in hair loss.

The circulatory system can be affected by diabetes causing less blood to circulate to the extremities, for example, the feet and the scalp. If the scalp is not receiving nutrients and oxygen from the blood, the result will be hair loss. In addition, this lack of circulation will prevent new hair growth.

Diabetes can weaken the immune system leading to susceptibility to conditions such as ringworm or fungal disease. These disorders can cause hair to fall out.

Skin rashes and thyroid dysfunction may result in massive hair loss as diabetes sufferers often experience autoimmune disease.



Healing and rejuvenation time is usually slower in people with diabetes. This may manifest in hair loss as diabetics cannot maintain a normal growth cycle of hair.

The growth phase of hair is called the anagen phase. The resting phase of hair is termed the telogen phase. In normal people only 5-15% of the hair is in the telogen phase at one time. Diabetes related hair loss is often attributed to telogen effluvium. Telogen effluvium is a disorder resulting when a physiologic stress or hormonal change like diabetes causes a large number of hairs to enter telogen at one time leading to diffused hair shedding.

Some drugs used to treat diabetes lead to hair loss. Talk to your doctor to see if your prescription can be modified. Do not discontinue your medicine without discussing it with your medical professional.

It is important to seek medical advice if you are experiencing unusual or extensive hair loss. For many people, hair loss begins before the actual diagnosis of diabetes. If your hair loss comes with other signs and symptoms, such as frequent urination, dry mouth, excessive thirst, low energy, or sudden eyesight issues, then the primary reason could be high blood sugar.

After you find out what is causing your hair loss you may want to consult a hair loss professional about the options available to camouflage your thinning hair.

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Recover with Confidence, a nationwide group of dedicated hair loss professionals, provides products and services to women who have been afflicted with hair loss due to cancer. **LaDonna Roye Hairstylist** is proud to be its local partner and provider in offering patients individualized products and support to aid in their recovery process.

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CIRCUMSTANCES FOR UPDATING ESTATE PLANS

By Steven J. Gibbs, Esq.

Hello Friends & Colleagues!

I was recently chatting with a colleague who is an outstanding divorce attorney about the "revocation" of a revocable living trust following a divorce. This reminded me of the different life changes that occur and how they require changes to your estate plan?

By "estate plan" I am talking about your estate planning documents such as your wills, durable powers of attorney, advance medical directives and guardianship documents. You may also have a revocable living trust as part of your plan and this is atop the list of documents that may need to be updated due to changes in circumstances.

So below are the 10 most common circumstances which are not in any order of importance and which to my knowledge most often give rise to updating your estate planning documents.

1. DIVORCE

In the event of divorce, a new revocable living trust is needed due to substantial changes in the estate plan. The updated plan must recognize the changes in the estate assets as well as changes in the beneficiaries upon death and the change may require removal of the former spouse's beneficiaries. Also, a change in your fiduciary appointees is also often necessary due to the former spouse's role in the estate.

2. DEATH OF DISABILITY OF ONE SPOUSE

Often times an additional successor trustee due to the inability of the spouse to serve as successor trustee or to accommodate a change in distributions upon the surviving spouse's death. Often distributions that have been made due to the first spouse's death so future distributions would not include those same beneficiaries.

3. BIRTH OR ADOPTION OF CHILDREN OR OTHER DEPENDENTS

New children tend to arrive on the scene and the documents should generally be updated to reflect this joyful change in either natural birth or adoption situations. Changes can also become an issue in the cases where grandchildren have been adopted directly by grandparents due to the adult child's inability to care for their children. Similarly, if there is a new adult dependent such as an elderly parent who merits consideration in the plan, the revocable trust may need to be updated to accommodate their care.

Steven Gibbs founded the Gibbs Law Office in January 2009, committed to providing client-centered legal services.



Steve as he would rather be called, is not your typical attorney. If you appreciate the staunch egotistical mannerism of most firms, you will be delighted with Steve's unpretentious approach to educating and then assisting his client. Instead of giving you his complacent and lofty ideas, he would rather pursue your expectations with professional conversation about resolving your concerns under the Law. It's your life and it's his job to make your legal expectations come true while using years of his guidance and knowledge.

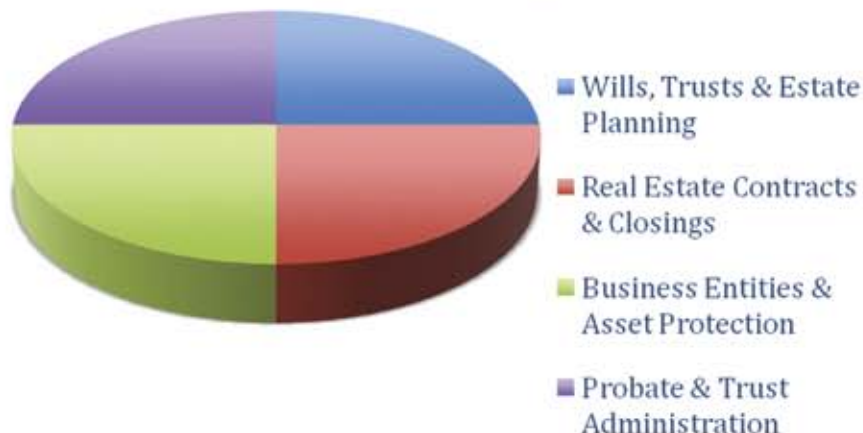
Steve was admitted to the Minnesota Bar in 1999, the Florida Bar in 2007 and was recently admitted to the California bar. Keeping abreast of law changes in these three States, as well as the United States, assists him in all aspects of the types of law the firm practices.

Along his career path, he was an associate attorney for an insurance defense law firm; an in-house real estate negotiator for Target Corporation; and corporate counsel for Civix, LLC and Vice President for North American Properties where he was responsible for various real estate transactions, including legal issues and negotiating unresolved business issues. Prior to opening Gibbs Law Office, PLLC, he was an associate with the firm of Roberts & Engvalson, P.A. where he gained his knowledge of trusts, estate planning and Wills. He opened his own firm in 2008 and now focuses on laws that will enrich the needs of his clients throughout their lives and those of their children. The firm has developed a practice dealing only with Trusts and Estate Planning, Wills, Medicaid Planning, Elder Law, Real Estate, Business Law and Probate.

Quoting from Steve "I decided to practice in areas that families will need as they progress down life's path. To help them with a solid foundation that will carry them throughout there lives is a rewarding experience for me and my staff."

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4. RELOCATION TO A NEW HOME STATE OF RESIDENCE

For a new Florida resident, it is important to realize that the old estate planning documents may at best be difficult to interpret in and enforce under Florida law. At worst, old documents may be simply unenforceable where there are attestation problems and/or witnesses cannot be located. Forms like Durable Powers of Attorney are subject to unique state laws and should be reviewed for compliance with Florida law and in any event these documents should be updated regularly.

5. ADULT CHILD FACING ADDICTION OR PERILOUS FINANCIAL CIRCUMSTANCES

If an adult child would be harmed due to receiving an outright sum of money because of their personal life circumstances, there are trust options that can be adopted to protect that sum of money by holding it in trust for their benefit.

6. CHANGES IN YOUR FINANCIAL CIRCUMSTANCES

If you win the lottery or receive an inheritance, your old estate plan may be rendered obsolete. Substantial estate tax planning will need to be looked at to avoid a financial disaster. If you've recently suffered financially, a simplified plan with new fiduciaries may be in order.

7. CHANGES IN ASSET HOLDINGS OR NEW BUSINESS OR INVESTMENTS

If you've started a new business venture, there will be numerous succession planning concerns that must be addressed such as who is authorized to sell or continue the business. Another common update is to assure that your company shares have been transferred to your revocable trust.



8. DEATH OR DISABILITY OF A FIDUCIARY APPOINTEE

If your old trustee or power of attorney is no longer able to serve, this change must be made to your estate plan or your plan will not work.

9. PET ADOPTION

Many retirees with empty nests now have a household that includes a lovable pet. There are trust options available to make sure your little friend is well cared for and this may necessitate changes to your current plan.

10. CHARITABLE INTENTIONS

Your charitable organization of choice would need to be specifically added to your plan and it is important make this clear for all parties concerned.

Suffice to say, life changes of any nature often necessitate updates to your estate plan and it is advisable to explore what is needed at each pivotal stage of life.

As always friends, please contact us with any questions. I hope this is helpful.



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GUM DISEASE AND DIABETES

By Dr. Ricardo S. Bocanegra, DDS

The more severe form of gum disease is called periodontitis. When you reach this stage, your gums begin to pull away from your teeth. Pockets form between your teeth and gums. These fill with germs and pus, and deepen. When this happens, you may need gum surgery to save your teeth. If nothing is done, the infection goes on to destroy the bone around your teeth. The teeth may start to move or get loose. Your teeth may fall out or need to be pulled.

Is There an Association Between Gum Disease and Diabetes?

For the nearly 26 million Americans who have diabetes, many may be surprised to learn about an unexpected complication associated with this condition. Research shows that there is an increased prevalence of gum disease among those with diabetes, adding serious gum disease to the list of other complications associated with diabetes, such as heart disease, stroke and kidney disease.

Is There a Two-Way Street?

Emerging research also suggests that the relationship between serious gum disease and diabetes is two-way. Not only are people with diabetes more susceptible to serious gum disease, but serious gum disease may have the potential to affect blood glucose control and contribute to the progression of diabetes. Research suggests that people with diabetes are at higher risk for oral health problems, such as gingivitis (an early stage of gum disease) and periodontitis (serious gum disease). People with diabetes are at an increased risk for serious gum disease because they are generally more susceptible to bacterial infection, and have a decreased ability to fight bacteria that invade the gums.

The Surgeon General's Report on Oral Health states that good oral health is integral to general health. So be sure to brush and floss properly and see your dentist for regular checkups.



If I Have Diabetes, am I at Risk for Dental Problems?

If your blood glucose levels are poorly controlled, you are more likely to develop serious gum disease and lose more teeth than non-diabetics. Like all infections, serious gum disease may be a factor in causing blood sugar to rise and may make diabetes harder to control.

Other oral problems associated to diabetes include: thrush, an infection caused by fungus that grows in the mouth, and dry mouth which can cause soreness, ulcers, infections and cavities.

How Can I Help Prevent Dental Problems Associated with Diabetes?

First and foremost, control your blood glucose level. Then, take good care of your teeth and gums, along with regular checkups every six months. To control thrush, a fungal infection, maintain good diabetic control, avoid smoking and, if you wear them, remove and clean dentures daily. Good blood glucose control can also help prevent or relieve dry mouth caused by diabetes.

What Can I Expect at My Checkup? Should I Tell My Dental Professional About My Diabetes?

People with diabetes have special needs and your dentist and hygienist are equipped to meet those needs - with your help. Keep your dentist and hygienist informed of any changes in your condition and any medication you might be taking. Postpone any non-emergency dental procedures if your blood sugar is not in good control.

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Developing Discipline

By Dr. Ray Underwood

Here's a question for you: What is one thing in your life that you are not doing, that if you started doing on a regular basis would make a tremendous positive difference in your life?

Here's a follow-up question: why are you not doing it?

Answer: most of us are not doing it because we lack discipline.

In ancient times there was once a king named Solomon. The Bible says that he was the wisest man who ever lived. People would come from miles to hear his wisdom and we are fortunate because many of his wisdom is collected in the book of Proverbs in the Old Testament.

In Proverbs 28:25 Solomon says, "A person without self-control is like a house with its doors and windows knocked out." Discipline is pretty important, huh?

You see this virtue of discipline touches every fiber of our lives. Discipline is the indispensable tool to making your life work: our life, our health, our happiness, our wealth, our family life, our success is all rooted in our discipline. Discipline helps us to get to where we want to go.

You ask any great athlete and they will tell you about the importance of discipline. You ask any successful business man or woman and they will tell you about the importance of discipline. You ask any accomplished musician, actor, writer, salesperson or leader and they will tell you about the importance of discipline.

Spiritually speaking, the same is true: our relationship with God is largely determined by our discipline. You ask any godly man or godly woman and they will tell you about the importance of discipline. Spiritual discipline is the habit of making wise decisions and then living in alignment with them. Our behavior needs to be in alignment with our thinking and that takes discipline.

Prov. 10:17 says, "People who accept discipline are on the pathway to life, but those who ignore correction will go astray." NLT

Here are three "Disciplines of Being Disciplined".

1. Persistence - "Never Give Up"

Prov. 12:24 "Work hard and become a leader; be lazy and become a slave." Discipline always starts from within; we grow and develop our self-discipline by growing and changing our attitude towards it.



2. Advance Decision Making - "Say No Now"

Prov. 13:16 says, "A wise man thinks ahead, a fool doesn't and even brags about it." Be prepared in advance to make the right choices. Don't wait until it's too late.

3. Delayed Gratification - "Putting Pain before Pleasure"

You do the difficult now in order to enjoy the benefits later. The Apostle Paul reminds us that, "No discipline is enjoyable while it is happening--it is painful! But afterward there will be a quiet harvest of right living for those who are trained in this way." Heb. 12:11 NLT

So... let me ask you: What is one thing in your life that you are not doing, that if you started doing on a regular basis would make a tremendous positive difference in your life? And why are you not doing it?

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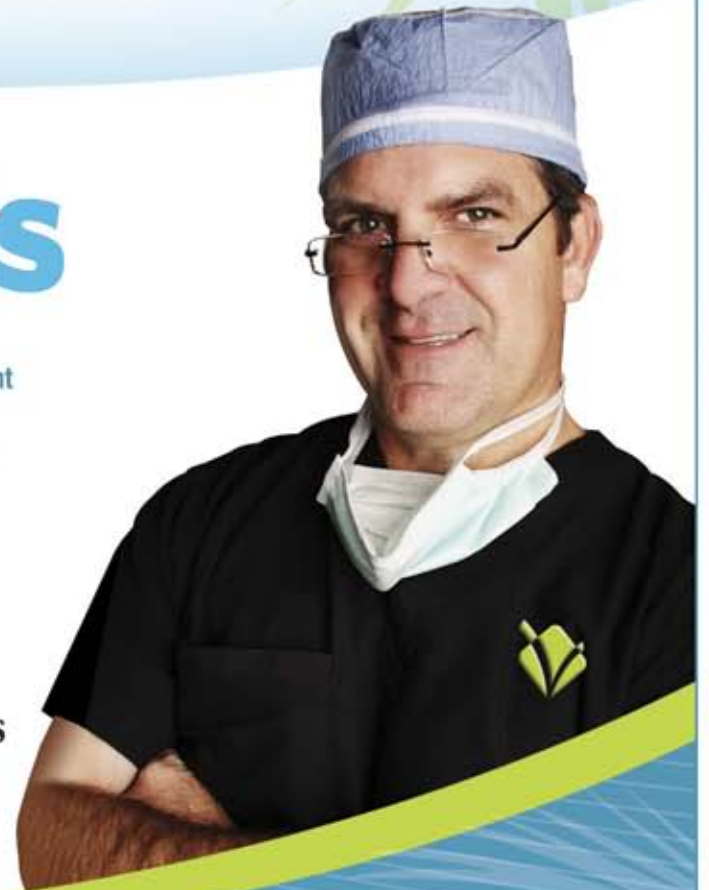
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