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YOUR “ARCH” ENEMY

By Myles Rubin Samotin, MD - Board Certified Orthopaedic Surgeon, Fellowship Trained in Foot and Ankle



The signs and symptoms of flatfoot problems can include lower leg pain and weakness, pain around the inside ankle, sometimes with swelling.

You may have weakness inverting (pointing the toes inward) the foot. You may find that you have uneven shoe wear and notice that your regular shoes seem to be collapsing. You may also find that you have the inability to stand on your toes. Some-

times flatfoot can contribute or exacerbate other problems such as plantar fasciitis, posterior tibial tendonopathy, achilles tendonitis, shin splints, bunions, stress fractures and calluses.

So how should you treat this?

First, you should be properly evaluated by a Foot and Ankle Orthopaedic Specialist who will review your medical history and examine your feet, and if necessary, your gait.

Why an orthopaedist?

Simple!! The foot has twenty eight bones that need and should be evaluated by a bone doctor!!! Be sure to bring your regular shoes so that these may be examined. X-rays of both feet should be done for comparison and to determine, if it exists, the severity of the flatfoot. Muscle and tendon strength should be evaluated by your Orthopaedic Foot and Ankle Specialist.

Treatment can vary depending upon the cause. Conservative treatment can include shoe modifications, arch supports and custom orthotics. An injection of corticosteroid may be used to calm an inflammatory pain in your flatfoot. Resting and icing the involved extremity can help. Physical therapy may be necessary to strengthen and stretch the surrounding tissues, helping to alleviate the stress placed on to your affected foot.

However, frequently the only way to correct your painful foot is through surgery. Surgical procedures can help reduce or eliminate the pain and can improve bony alignment. They can include Arthrodesis, or welding (fusing) two bones together, Osteotomy or cutting or reshaping a bone to correct alignment, Excision or removal of extra bone or spurs, Synovectomy or cleaning the sheath of a tendon, and/or Tendon Transfer, to replace a worn or ruptured tendon.



Having flat feet can be a very serious matter. If you are experiencing foot pain and think it may be related to flatfeet, see an Orthopaedic Specialist as soon as possible. This is a problem that often worsens over time with treatment becoming more and more complicated. With 28 bones in your foot, you need to be evaluated by a Board Certified Orthopaedic Surgeon with a Sub-specialty, Fellowship Trained in Foot & Ankle surgery. In fact I am the only surgeon with these qualifications in our area. I believe this makes me uniquely able to deal with these problems in a state-of-the-art atmosphere and method that will keep you in good hands and provide you with the most desired result.

Myles Rubin Samotin M.D.

Board Certified Orthopaedic Surgeon
Fellow Foot & Ankle

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We will treat you like family and will do our best to give you the best care possible.

Look down at your feet right now! Do they seem different from ten years ago? Does your foot arch look the same as it did, or are you imagining that it has changed? Does your arch seem flatter to you? Well, maybe it has become flatter. And quite possibly that flatness may result in a lot of severe foot problems for you.

First, try the wet test. Wet your feet, then go and stand on a flat, dry surface that can leave an imprint of your foot. A normal footprint has a wide band connecting the ball of your foot to the heel, with an indentation on the middle, inner side of your imprint. A foot with a high arch has a large indentation and a very narrow connecting band, and conversely, a flatfoot leaves a nearly complete imprint with almost no curve.

There are several reasons for having flatfeet. They can be present at birth (congenital), caused by ongoing stresses to your foot, obesity, diabetes, Osteoarthritis, Rheumatoid arthritis, hypertension, or traumatic injury to your foot or ankle.

You may have flatfeet and be pain free. But you must understand that the arch in your foot is there to help distribute your weight across your entire foot. Painless flatfeet can deteriorate over the years and become painful. By that time, it may be too late to treat conservatively.

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Debunking the MYTH of Cankles

By Joseph Magnant, MD, FACS, RPVI

The issue of cankles (where the calf and ankle appear to have merged as one) was discussed several years ago on the daytime MD entertainment talk show "Dr. OZ" and confusion still exists as to the relationship of this condition to venous insufficiency. Unfortunately, venous insufficiency was not included in the possible causes of cankles and this distressed me. I have seen many patients with similar appearing calves and ankles which have been self described as their Grandma's ankles or stovepipe legs. As I caught the last segment of the show, I found it odd that Dr. Oz was missing VENOUS INSUFFICIENCY, as well as other causes, in the differential diagnosis list. Pregnancy, fatty foods and heart and kidney problems were identified as potential causes although the mechanisms were not well described. I saw many

patients that day that had no obvious signs of varicose veins, heart failure or kidney failure, nor were they pregnant but most had what I refer to as "cankles". All patients had ultrasound evidence of severe superficial venous insufficiency.

With an estimated 35-40 million adults in the U.S. affected by treatable superficial venous insufficiency, a significant number of patients may present with atypical signs, such as the above referenced "cankles". Patients may have to urinate frequently at night, often have to loosen their shoes as the day progresses and may note restless legs when they lie down at night. Elevation eventually relieves their discomfort as the fluid in the legs returns to venous circulation. This returned fluid is then processed into urine by the kidneys, stored in the bladder and often necessitates frequent nighttime trips to the bathroom (nocturnal diuresis). This straight forward cycle repeats itself daily with increased venous pressure in the ankle area due to leaky vein valves, resulting in seeping of serum (water and protein) out of the thin-walled veins into the surrounding skin and fat (appearance of "cankles") which progresses over the course of the day, until elevation and rest are possible.

I agree with Dr Oz that effective conservative therapy includes exercise, as this helps the calf muscles pump at least some of the extra fluid back up to the jugular vein. However, unless the most common and treatable underlying cause of "cankles" (venous insufficiency) is scientifically ruled out with duplex ultrasound examination, I would not encourage any of my patients to have liposuction of their "cankles". Venous insufficiency should be considered and ultrasound evaluation completed earlier in the assessment of swollen ankles rather than as a last result. Venous insufficiency is treatable with a minimally invasive procedure called endovenous ablation. With 15 years of clinical experience, endovenous ablation is an effective and safe outpatient procedure which has dramatically changed the way patients with venous insufficiency.



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Stop Overlooking Signs of Incontinence

Dr. Carl Klutke

Urinary incontinence is a common medical condition that affects over 40 million Americans, yet it often goes untreated or unrecognized. The reason for this trend is multifactorial, spanning from embarrassment to speak about this topic to dealing with more acute or morbid conditions that require focused attention.

Nevertheless, it is a treatable condition that frequently affects the quality of life of patients. Incontinence is classified as stress, urge, mixed and overflow.

In this article we will address some particular issues about urge incontinence.

Urinary urge incontinence (UI) is defined as a sudden uncontrollable urge to urinate with or without frequent urination and associated leakage of urine. With urge incontinence, the bladder contracts and squeezes out urine involuntarily. Accidental urination can be triggered by:

- sudden change in position or activity
- hearing or touching running water
- drinking a small amount of liquid

Patients with overactive bladder symptoms, such as urinary urgency, frequency and nocturia, may have associated incontinence over 60% of the time. Though more common in women than men overall, after the age of 70 the prevalence in both sexes is about equal.

There are two bladder abnormalities that are associated to UI: neurogenic overactivity and detrusor overactivity (DO).

Neurogenic bladder occurs when there is interruption in the normal nerve conduction from the brain or spinal cord above the sacrum to the bladder, and results in loss of bladder sensation and motor control. Conditions associated with neurogenic bladder include the following:

- Alzheimer's disease
- Multiple sclerosis
- Parkinson's disease
- Intervertebral disk disease
- Cerebrovascular events
- Diabetes
- Traumatic brain or upper spinal cord injury
- Brain or spinal cord tumors

DO can occur due to multiple conditions, and many times as a sequelae of others; frequently, it may be idiopathic. Dysfunctions of the detrusor muscle or nerve pathways are the culprits for the bladder over-activity. Conditions that can lead to DO include:

- Bladder polyps and tumors
- Urinary tract infections
- Bladder calculi
- Bladder outlet obstruction from BPH or stricture disease

Medications, such as diuretics, increase the urgency and frequency of urination in some people, especially the elderly and bedridden. Dosage modification may ameliorate the bothersome symptoms. Dietary habits may lead to significant voiding symptoms. Caffeine (e.g., in coffee, tea, chocolate), carbonated beverages, spicy foods and tomato-based foods can irritate the bladder and cause detrusor instability, resulting in urge incontinence. The treatment and management of urge incontinence includes nonsurgical and surgical modalities. An important factor, however, is identifying the potentially morbid or life-threatening conditions that may lead to incontinence, such as bladder cancer, recurrent UTI or neurogenic disorders.

Anticholinergics have been shown to be very effective in the treatment of both neurogenic and idiopathic cause of UI. As a class, side effects include

confusion, dry mouth, constipation, dizziness, visual changes and urinary retention to name a few. Beyond medications there are simple yet effective treatments.

Advanced treatment modalities for refractory patients to conservative therapy and anticholinergics are available in the urologic armamentarium. Urological evaluation of these patients will most likely include a cystoscopy, urine cultures and urine cytology to rule out bladder pathology and bladder malignancies. As well, a detailed, computerized assessment study of bladder function called urodynamics may help the clinician in establishing the best treatment option.

Neuromodulation, either via sacral nerve pathways (Interstim) or peripheral nerve pathways (Urgent PC), have been shown to be very effective in the treatment of UI in patients with refractory disease. These modalities are safe, FDA approved, minimally invasive and provide, through neural pathways, improvement in bladder function. Urgent PC is an outpatient, office-based, nonsurgical therapy that affects the sacral nerve plexus through retrograde pathways (posterior tibial nerve). Interstim utilizes the sacral nerve S3 to provide parasympathetic inhibition, thereby decreasing bladder over-activity. It is based on pacemaker technology, and effective in about 70% of refractory patients.

Injection of botulinum toxin (Botox) into the bladder muscle (intravesical injection) is an experimental treatment for refractory urge incontinence. This treatment has been shown to successfully reduce the instability that leads to urgency in both idiopathic and neurogenic patients.

Surgical urinary diversion is an invasive therapy used mostly for severe patients refractory to all other therapies.

Urinary incontinence is a common but overlooked problem. Urologic evaluation is warranted in refractory patients, or in patients in whom underlying bladder pathology or anatomic abnormalities, such as prolapsed, need to be addressed as well. Intervention beyond medications will significantly improve the quality of life of these patients.



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CT Screening for Early Detection

No One Deserves Lung Cancer

Lung cancer has a bad reputation as the leading cause of cancer death among Americans. Lung Cancer is the second most diagnosed cancer in both men and women and accounts for more than 30 percent of all cancer deaths, killing more than 150,000 Americans each year. A five-year survival rate of less than 16 percent continues to be substantially lower than that seen for other major cancers such as breast, colon and prostate cancer, each at 90 percent or greater.

What's worse is that lung cancer carries a negative connotation as a smokers' disease, befalling people who often became chemically addicted to nicotine as adolescents by the voracious marketing of cigarettes and somehow "deserve" to have their bodies ravaged. Yet not all lung cancer is caused by smoking. Radon exposure in homes is the second-leading cause of lung cancer. Genetics also play a role. For some cases of lung cancer, especially in young women, the cause is never identified. Ongoing research by the Lung Association and others may help to identify these causes.

For over 100 years, the American Lung Association has been a champion for those affected by lung disease. The American Lung Association is well known and trusted by the public, and well regarded for basing its prevention, education and advocacy actions on good science. Today the American Lung Association is a nationwide leader in increasing visibility and awareness of lung cancer.



Turning the Tide on Lung Cancer

No one should die from lung cancer. Fortunately, new research provides some much-needed hope in the fight against lung cancer. Results of the National Lung Screening Trial (NLST) released in

August of 2011 showed that screening with low-dose spiral computed tomography (CT) scans compared to chest X-ray reduced lung cancer deaths among older heavy smokers by 20 percent. Improved detection at earlier stages, when lung cancer is much more easily treated, is key to increased survival.

American Lung Association Recommendations

- The best way to prevent lung cancer caused by tobacco use is to never start smoking or to quit smoking.
- Low-dose CT screening should be recommended for those people who meet NLST criteria:
 - Current or former smokers aged 55 to 74 years
 - A smoking history of at least 30 pack-years
 - No history of lung cancer
- Individuals should not receive a chest X-ray for lung cancer screening
- Low-dose CT screening should NOT be recommended for everyone
- Patients should be referred to a facility that uses "best practices" for CT screening

The complete report can be found at www.Lung.org.

The report provides a comprehensive review of the available evidence on both the benefits and risks of lung cancer screening, as well as highlights areas where more research is needed. Experts acknowledge that cancer screening is associated with both benefits and risks and, unfortunately, the NLST could not answer a number of questions on the advantages and safety of screening in the general population. In spite of this, the Lung Association hopes its recommendations will guide the public on this very important personal and public health issue, and will be invaluable to the tens of millions of people at risk for lung cancer.

Lung Cancer Screening: Is It Right for Me?

Screening for cancer means testing for cancer before there are any symptoms. Now there is a test that can reduce death from lung cancer through early detection. The test is not recommended for everyone and it has risks as well as benefits. Here is a discussion to help you decide.

Q: Am I a candidate for lung cancer screening?

A: If you are:

- a current or former smoker
- and in the age group from 55 to 74 years
- and with a smoking history of at least 30 pack-years (this means 1 pack a day for 30 years, 2 packs a day for 15 years, etc.)

You are in the group at highest risk for lung cancer and screening for lung cancer is recommended for you.

Q: Should I get a CT scan to screen for lung cancer?

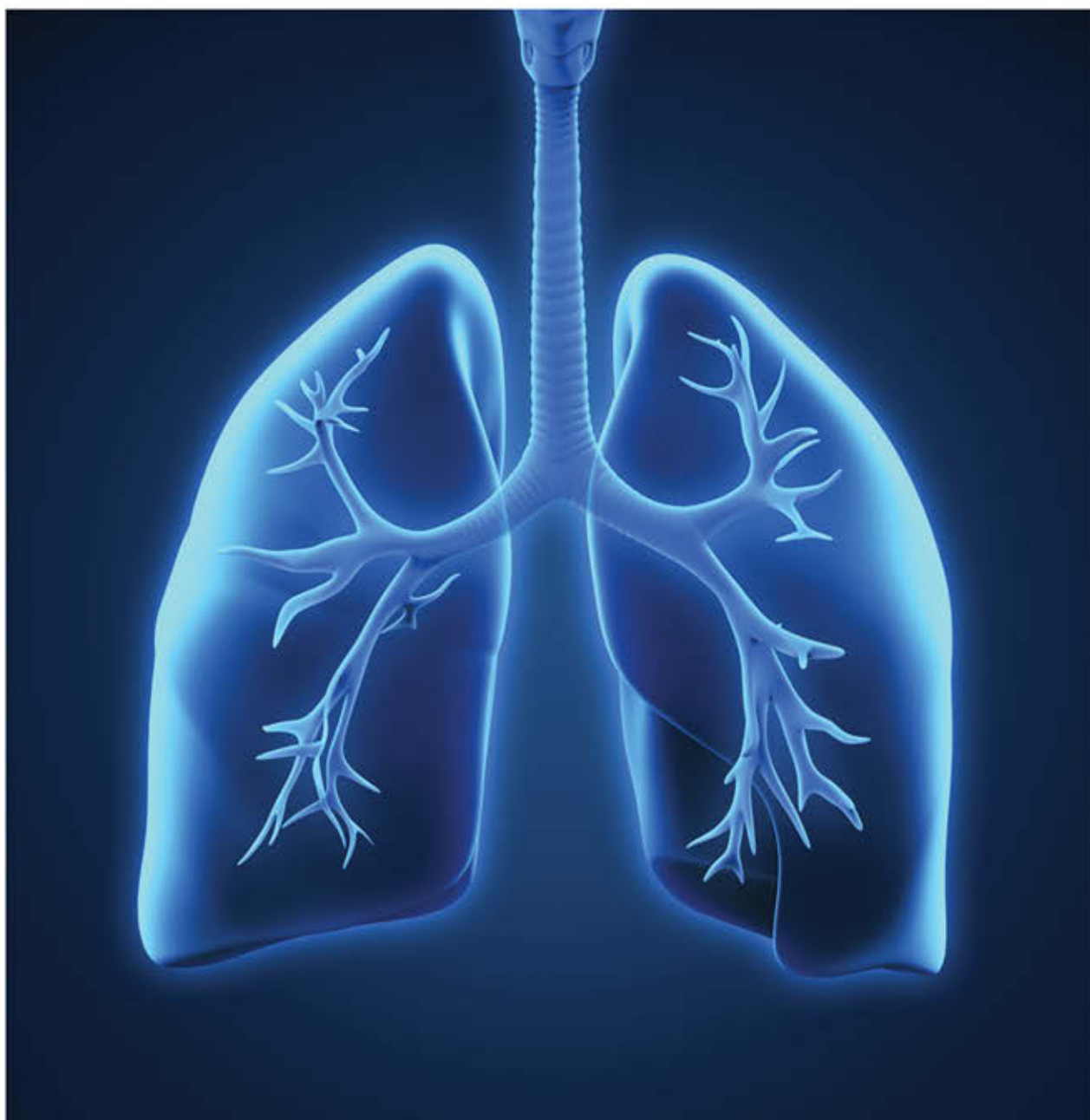
A: Talk to your own doctor about getting a CT scan to screen for lung cancer. Screening for lung cancer may save your life. Discuss your complete health history and ask for a clear explanation about the possible benefits and risk. There are some risks and not everyone should be screened for lung cancer. Only low-dose CT scans are recommended for screening. Chest X-rays are not recommended for lung cancer screening.

Q: What happens if I choose to get a CT scan for lung cancer?

A: There is some radiation risk with a CT scan and you may need to have additional tests and procedures. You should go to a hospital or screening center that has a team of experts who will clearly explain the procedure to you. The team should tell you about all the risks and benefits of the screening. They should also discuss what the results can mean and how they will follow up with you after the initial screening.

Q: What does it cost to have a CT scan for lung cancer?

A: The cost is usually \$300 to \$500. Health insurance companies and Medicare may not cover the cost for a CT scan to screen for lung cancer at this time. Be sure to check with your insurance plan to see what is covered. Ask your doctor and the facility doing the CT scan to carefully and clearly explain all costs that you may possibly be charged and not just the cost of the CT scan alone.

**Q: What do the results mean?**

A: A "suspicious" result means that the CT scan shows something is abnormal. This could mean lung cancer.

It could also mean some other condition. You may need to have additional procedures to find out exactly what is abnormal. If you do have lung cancer or some other condition, your doctor and the team of experts should discuss all possible treatment options with you. A "negative" result means that there were no abnormal findings at this time on this CT scan. It does not mean you absolutely do not have lung cancer. It does not mean that you will never get lung cancer. Your doctor should discuss when and if you should be tested again.

Remember: The best way to prevent lung cancer is to never smoke or to stop smoking now. If you are still smoking, talk to your doctor about ways to help you quit smoking.

Q: Where can I get more information about lung cancer and lung cancer screening?

A: If you would like more information or have any questions concerning lung cancer screening, please call Advanced Imaging at 941-235-4646. Our experienced physicians and friendly team are available to answer any questions you might have.



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The Discovery of Liquid BioCell™

Liquid BioCell is a result of research that was being done on an ingredient called hyaluronic acid or HA, which was thought to be associated with longer life spans. The medical community, including Harvard University researchers did everything possible to make ingestibles and injectables based upon the science. The issue they had was that the natural state of HA was too large for the body to absorb.

That's where Jusuru stepped in. After discovering a unique natural source of HA, and that coexisted with collagen and chondroitin sulfate, as it does in the human body. The team tested and developed this raw material into something that when you ingest it, it would actually reach your tissues. This was a complete breakthrough in the industry. We were awarded 7 US and international patents, and called it BioCell Collagen. This is what became the inspiration behind Jusuru.

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How I Believe Liquid BioCell™ Works.

Liquid BioCell very closely resembles our own connective tissue, and has a liquid delivery system that allows absorption to begin immediately. To understand how Liquid BioCell™ works, it is necessary to understand that every organ system in our body is composed of HA (hyaluronic acid), chondroitin sulfate, collagen, a number of different elements, and water.

Jusuru researchers discovered in the early 2000's a matrix of collagen type II, HA, and chondroitin sulfate that very closely resembles our own connective tissue. This source was originally produced in a powder form. It is noted that in the powder form (capsule) it has to pass through two portals before being absorbed into the circulatory system. It must first pass through the intestinal barrier and then make its way to the liver where it may be altered. This is known as the "first-pass" effect of metabolism.

In 2008 after years of additional research, a liquid form of this powder was produced. This brought about a quantum leap in bioavailability. Liquids have certain advantages over pill, capsule, or other oral administration in that it is more direct, it is often faster, and it ensures that the substance will risk degradation only by salivary enzymes before entering the bloodstream. Liquid BioCell begins to be absorbed immediately as we drink it via the blood vessels in the mouth and under the tongue.

Liquid BioCell's patented hydrolysis process produces an ideal molecular weight for increased bioavailability. Another unique quality of Liquid BioCell makes it recognizable to our body for ease of assimilation. Liquid BioCell is a complex patented molecule composed of naturally occurring HA, chondroitin sulfate, and collagen type II that undergoes a patented hydrolysis process by which collagen peptides, and all other constituents, including hyaluronic acid and chondroitin sulfate, are broken down to low molecular weight forms resulting in: 1) increased bioavailability, 2) stimulation of multiple types of collagen (I, II, and III). The undenatured forms of collagen do not have the same ability due to its high molecular weight. Molecular weight comparison: Liquid BioCell (1.5 - 2 kDa) vs. undenatured (200 - 300 kDa).



Liquid BioCell's patented matrix of hydrolyzed collagen type II, hyaluronic acid, and chondroitin sulfate mirror the joint's natural composition so the body readily accepts it.



Louis P. Brady, M.D.

Board Certified Orthopedic Surgeon, Associate Clinical Professor at the University of Central Florida College of Medicine

"As orthopedic specialists are recommending Liquid BioCell to their patients, I can see the incidence and severity of one's joint problems, as we know it today, gradually declining. By improving joint health, you can prevent deterioration that comes with athletic activity, strenuous work, and aging. Liquid BioCell is the most remarkable nutraceutical for joint support that has ever been introduced to the market."



Jon M. Grazer M.D., M.P.H., F.A.C.S.

Board Certified Plastic Surgeon, Assistant Clinical Professor Department of Plastic Surgery at the University of California, Irvine

"By drinking Liquid BioCell, hyaluronic acid increases in the body. This translates to a decrease in wrinkles from the inside-out. Liquid BioCell brings tone, elasticity, and moisture back to the skin, and even goes a step further, it helps reduce the enzyme, hyaluronidase, that can make your skin age. Liquid BioCell is a stand alone in the world of nutraceuticals and is pioneering the 'beauty from within' concept."



Joosang Park, Ph.D.

Cancer Biology, Stanford and Cancer Vaccine Research at Harvard Medical Center, Vice President of Scientific Affairs at BioCell Technology

"The ingredients in this dietary supplement are substantiated by solid scientific research and offer multi-layered benefits for healthy aging. Liquid BioCell Life supports both joints and skin through replenishing hydrolyzed collagen, HA, and chondroitin sulfate in highly bioavailable forms, and is the only nutraceutical to offer Liquid BioCell."

Hyaluronic acid (HA) is an integral lubricating component of natural synovial fluid in the joints and is important to overall joint function and health. We begin to lose HA the day we are born and begin to absorb free radicals at the same time. Beginning in our late twenties or early thirties we also begin to lose collagen. The congruent decline of both HA and collagen brings about the changes that we recognize as aging, namely wrinkling and drying out of our skin, degradation of our joints, as well as a host of other changes.

As an orthopedic surgeon, I am excited about what we are seeing happen to our joints with the use of this nutraceutical. From birth until our epiphyses (growth plates) close, at about 15 in girls and 19 in boys, all of our joints are nourished by the blood. After this physical maturity, and for the rest of our lives, there is no blood circulation to the joints. The health and nourishment of all the joints are then dependent on the amount and quality of the synovial fluid produced by the synovium (lining capsule) of every joint. Synovial fluid composed of hyaluronic acid (HA), is secreted into the joint cavity to increase the viscosity and elasticity of articular cartilage and to lubricate the surfaces between the synovium and cartilage.

As we age a couple of things come into play: 1) the effects of unremembered joint trauma, 2) the diminished quality of the synovial fluid. Just as our skin wrinkles, a similar process is going on in our joints. Liquid BioCell is clinically shown to increase HA levels in our bodies, help promote healthy cartilage, and I believe, improve the quality of synovial fluid.

I believe "bone on bone" is a misnomer. Another consideration that I believe, is the term "bone on bone", that is frequently used to explain the x-ray appearance of joint discomfort, is a misnomer. There is always a thin layer of cartilage present or the joint would be full of blood. In the worst hip or knee that I have ever operated on, there was always twenty to forty percent of fairly normal looking cartilage but slightly rough to feel. It is this same cartilage that I believe Liquid BioCell can support.

Liquid BioCell Life is like nothing else we've seen. To this point I've been discussing Liquid BioCell, the ingredient, and would like to further comment on the product, Liquid BioCell Life. In order to make it easier to understand, Liquid BioCell Life consists of three components: 1) Liquid BioCell, 2) resveratrol, 3) 13 antioxidant superfruits. The first, Liquid BioCell, and the most important, is the complex patented molecule consisting of hydrolyzed collagen type II, HA, and chondroitin sulfate.

The second, resveratrol, comes from the skin of red grapes. It's known for its antioxidant and cardiovascular health benefits, and believed to be responsible for the French Paradox. The term French Paradox was coined by Serge Renaud, a scientist from Bordeaux University in France. Where wine is drunk like we should drink water, the French have the lowest incidence of heart disease and obesity despite their very rich diet. There are numerous studies supporting its beneficial qualities. Not all resveratrols are the same. Trans-resveratrol is the form used in Liquid BioCell Life, which is the pure, active, ultra-beneficial form of resveratrol.

The third, 13 antioxidant superfruits include mangosteen, açai, nopal, maqui, pomegranate, gogi, blueberries, cranberry, noni, jujube, grapes, strawberry, and apple. Harmful compounds called free radicals can be caused by a number of forces such as the sun, aging, alcohol, or even exercise. Because of their instability they cause cell damage. Antioxidants help neutralize free radicals.

I want to close by asking you to remember the three things that I believe make this product so unique and like nothing else we have seen to date, and, that it will be many years if ever before it can be duplicated.

The source of the collagen in this product closely resembles our own connective tissue, thus allowing the body to recognize it. The size of the molecule is so small that it is easily absorbed starting in the mucous membrane of our mouth. What I have called the "Genius of Jusuru" is these three world class clinically-studied substances--patented Liquid BioCell, resveratrol, and 13 antioxidant superfruits-- have been combined into a delicious nutraceutical that synergistically help each product work better than if taken alone. More about Dr. Louis P. Brady

Dr. Louis Brady is a graduate of Emory University's School of Medicine and is Board Certified in Orthopedics. He is an Associate Clinical Professor at the University of Central Florida, College of Medicine. Dr. Brady's work in the area of orthopedics spans over four decades. According to Dr. Brady, Liquid BioCell Life is the "most remarkable product to have ever been introduced for joints and the aging process." Dr. Brady believes that as orthopedic specialists begin recommending Liquid BioCell to their patients, "we may see the incidence and severity of one's joint problems, as we know it today, gradually declining."

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And it's been featured on:

NBC, Good Morning America, and Fox News



Underlying Reasons for Limb Swelling

By Alyssa Parker

Many people may experience complications after an operation due to the significant amount of trauma your body endures. Whether it's cancer related, non-cancer related, or a minor surgery, patients may develop post-operative symptoms such as swelling in a limb or a particular area of the body. Swelling in the limb which may appear to be temporary can later lead to chronic swelling known as lymphedema.

How the Lymphatic System Works

What does edema have to do with your lymphatic system? The lymphatic system serves as one of the body's main highways. Through its network of vessels and ducts, it works as a filtration system for body fluid entering into the blood stream. This fluid is referred to as "lymph" fluid, which is the interstitial fluid consisting of proteins, wastes, and a collection of white blood cells. The kidneys, skin, lungs, or intestines then eliminate the wastes that have been filtered out of the lymphatic vessels.

What is Lymphedema?

Lymphedema is a degenerative condition which means it will only get worse over time without treatment. There is no cure for Lymphedema. Once a lymph node has been damaged, your lymphatic can become compromised. Over the years, as you get older, you may incur irreversible damage to the lymphatic system through medical procedures, injuries, or infection. Examples include cancer radiation, surgical lymph node removal, joint replacements, scarring of the lymphatic vessels through reoccurring infections i.e. cellulitis, or other health problems relating to gall bladder, kidneys, intestines, or reproductive organs. When an obstruction has occurred, a blockage in the lymph nodes can occur. The limb begins to swell with fluid because the lymphatic system is blocked/impaired, unable to move the fluid back into the circulatory system.

Compression Pump Treatment

One recognized treatment is using a compression pump. This is a safe and effective way to assist your body's lymphatic system in moving the lymph fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds,



heaviness, and discomfort decreasing your mobility. The compression pump is a gentle massaging technique that compresses in a rhythmic cycle, similar to that of a normally functioning lymphatic system that has not been damaged.

Possible Symptoms of Lymphedema

- Swelling in your legs or arms
- A feeling of heaviness or tightness
- A restricted range of motion
- Aching or discomfort
- Recurring infection/cellulitis
- Hardening or thickening of the skin on your arms or legs

It is important to rule out other causes of edema including nutritional issues, allergies and reactions to medication you may be on. True Lymphedema should not be treated with Diuretics as they draw from the Venus system not the Lymphatic system. Removing fluid from the body in this fashion takes away the wastes' only means of transport and can lead to serious recurrent infections or cellulitis since the lymph waste is now trapped in the limb and has no place to go. If symptoms return when you cease Diuretics, you should be asking questions and seeing a specialist immediately. This is where choosing a physician experienced in recognizing and treating Lymphedema is critical.

Some Good Questions to Ask Your Physician Include:

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



Specialists in Acute Wound Care

Remember, ANY swelling is an indication of an overloaded Lymphatic system. Acute Wound Care, LLC is a highly focused local provider of wound products and compression pumps working with select area physicians highly versed in this condition. For more information and articles on this topic, Google "Acute Wound Care," visit www.AcuteWoundCare.com, or call 239-949-4412 and speak with a specialist. Remember, nothing heals faster than an educated patient.

ACUTE WOUND CARE

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

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and speak with a specialist.

Hearing Care is Health Care

By Dr. Noël Crosby, Au.D.

There are many reasons to be concerned about hearing loss; which is one of the most common untreated health conditions in older adults. A study by researchers at Johns Hopkins Medicine suggests that elderly people with compromised hearing are at a higher risk of developing cognitive problems with memory and thinking much sooner than those without hearing loss. The study was led by Dr. Frank Lin, a hearing specialist and epidemiologist who over the past several years has documented the extent of hearing problems in older people and their association with falls and the onset of dementia. In this study, Dr. Lin looked at 1,984 older adults who participated over many years in the Health ABC Study, a long-term study of older adults conducted in Pittsburgh and Memphis. Participants' mean age was 77; none had evidence of cognitive impairment when the period covered by this research began. In 2001 and 2002, they received hearing tests and cognitive tests; cognitive tests alone were repeated three, five and six years later. The tests included the Modified Mini-Mental State exam, which is administered through an interview and yields an overall picture of cognitive status, and the Digit Symbol Substitution Test, a paper-only exercise that asks people to match symbols and numbers, which can reveal deficits in someone's working memory and executive functioning.

Dr. Lin's study found that annual rates of cognitive decline were 41 percent greater in older adults with hearing problems than in those without. This finding was based on results from the Modified Mini-Mental State Exam. A five-point decline on that test is considered a "clinically significant" indicator of a change in cognition. Results from the Digit Symbol Substitution Test showed the same downward trend, though not quite as steep: older people with hearing loss recorded a yearly rate of cognitive decline 32 percent greater on it than those with intact hearing. Using this information, Dr. Lin found that elderly people with hearing problems experienced a five-point decline on the exam in 7.7 years, compared with 10.9 years for those with normal hearing. In both cases, the results showed an association or link only; there was no proof of causality.



One consequence that may help explain Dr. Lin's findings is social isolation. When people have a hard time distinguishing what someone is saying to them, as is common with many older adults, they often stop attending dinners or parties, concerts or classes, or going to family events. Over time, this social withdrawal can become a self-fulfilling prophecy, leading to the loss of meaningful relationships and activities that keep older people feeling engaged with others. Another potential explanation for Dr. Lin's findings lies in a concept known as "cognitive load". This concept assumes that "we only have a finite amount of cognitive resources, and if we expend a lot of those resources processing sensory input coming in as sound it's going to be processed more slowly by those who have hearing loss, and understood and remembered less well". In other words, when your brain has to work hard to hear and identify meaningful speech from a jumble of sounds, you will have less mental energy for higher cognitive processing.

For older adults the bottom line is "pay attention to hearing loss." Most people seek help for hearing loss 10 to 20 years after they first notice a problem, because there's a stigma about hearing loss and people really don't want to wear a hearing aid. This means that years of struggling

with the consequences of hearing impairment without help that can make a difference, can increase the risk for increased cognitive decline, dementia and alzheimers.



PROFESSIONAL BIO

Dr. Noël Crosby, Au.D., owner and audiologist at Advanced Hearing Solutions in Englewood, FL is a licensed professional whose 26 year career has been devoted to helping people of all ages hear and understand more clearly. Dr. Crosby received her BS and MS degrees from FSU and her Doctorate in Audiology from UF. Her credibility as an authority grew during her tenure as the Director of Audiology at the Silverstein Institute in Sarasota, FL from 1991-1998. Today, in addition to managing a successful audiology practice, Dr. Crosby is involved in creating hearing loss awareness through her jewelry and accessory company AuDBling.com. She has served and is serving on various professional boards and committees and was president of the Florida Academy of Audiology in 2000 and 2010. She has been married to Michael for 23 years and has one daughter.

For more information contact Noël's office at 941-474-8393 or you can visit her website at www.advancedhearingsolutions.net.

Yollo Wellness Center Fort Myers Florida

By Yollo Wellness

Wendy Law is everything one would want in a Wellness Provider; she is direct, straightforward, extremely knowledgeable, approachable and demanding. She has a definite presence and her passion for her work is visible in her. Wendy, her husband Rodney, and their two daughters Amber and Paige are the owners of the YOLLO Wellness Center in Ft. Myers. YOLLO, of course, is the short acronym for You Only Live LIFE Once, the Center's mantra. This is a serious healing center and they are educated and equipped to change your life.

YOLLO Wellness Center offers services to both support and accelerate recovery and maintain a high level of wellness. Their mission statement says that they "provide modalities of healing for the mind, body and spirit". The range of work that they offer moves the patient's healing to a deeper, physical level. All of the work they provide is performed with the highest quality FDA-approved equipment for the most precise results.

Wendy comes from a teaching background and has a Master of Science degree in Secondary Education, with her major in Physical Education. She had just completed her Bachelor of Science degree, studying to be a coach and teacher when the car she was driving was hit head-on by a drunken drag-racer. She suffered life threatening injuries with survival odds less than 2%. Wendy had a large tear in her descending aorta, a ruptured spleen, the left side of her face had been shattered and the right side of her body broken into many pieces from her hip to her toes. However, Wendy feels strongly that there was a spiritual component to her experience. "The doctors did all that they could do," she says, But I believe that the power of the Lord is just as Important. God had another plan." There were three counties holding prayer vigils immediately following the accident. After 19 surgeries she was mostly put back together. She had completed her education, became engaged and was married. She even accomplished her "goal" of walking down the aisle with her father.

Wendy got somewhat better and tried to move on with her life. She and Rodney had two wonderful healthy daughters. Her doctors, post-accident, had been definite that she would neither walk again nor bear children. There is a strong fighting spirit in Wendy.



She sought help with her pain and movement issues in a variety of facilities, but nothing provided any real relief. Doctors continually told her how lucky she was to be alive, as though her desire for a return to her level of wellness she enjoyed prior to the accident was an unreasonable request. Their prognosis for her was not optimistic. The doctors felt compelled to emphasize that Wendy's physical condition was likely to decline and her current levels of pain might be the best she would ever feel.

She finally consulted with one of the original doctors that had saved her life and he sent her to the Mayo Clinic in Minnesota. At the Clinic she discovered that her red blood cells and her white cells were "unhappy". Her liver was mildly functioning and her joints, muscles and nerves were deteriorating. This began the second phase of her healing process. Her journey introduced her to the various therapies she now offers at YOLLO Wellness. Many of the treatments have been known for decades but widely used. The protocols were demanding but brought about a level of health that Wendy had not experienced since her accident. This was not just

about reducing her level of pain, although that was certainly a great relief, it was about healing on a deep physiological level including mental clarity and improved quality of living.

The Digital Infrared Thermal Imaging (DITI) test is one of the services offered by YOLLO Wellness. This is a painless, non-invasive scan that is frequently used as an adjunct to a mammogram. It covers a larger area, including below the breasts, and also covers vascular and lymphatic activity which can be an indication of a developing pathology. It is particularly useful as a visual view of the patient's area of pain, identifying areas prior to them magnifying into bigger issues. It uses thermal imaging and feels as if you are in a photoshoot. It takes approximately 15 minutes for the breast imaging and 30 minutes for the whole body.

The Hyperbaric Oxygen Therapy (HBOT) is rapidly gaining recognition throughout the World as an aid in healing and recovery. It is a process by which increased oxygen is diffused into blood, tissue, blood plasma and cerebral fluids. It is also

painless and non-invasive and it's reported to decrease recovery time from by 33%. The Law family became aware of the healing properties that HBOT offers when Wendy's daughters were playing competitive soccer. One of the girls had nerve damage in her leg and the other daughter was suffering from a concussion. They used an HBOT unit for the injuries and were able to play again after three sessions.

YOLLO Wellness offers ALCAT (Antigen Leukocyte Antibody Test) – which is the gold-standard for checking an individual's nutritional needs. This test is for food sensitivities and intolerances. ALCAT measures our body's cellular response to foods, additives, colorings, mold, environmental chemicals and medication. This is significant in that it shows where a patient has chronic activation of their immune system due to food intolerances. A plan designed to meet each individual's food tolerances and food sensitivity issues can provide a major change in how the body feels and operates. Certified nutritionists Deb, Wendy and Amber specialize in individualizing a program just for you.

YOLLO also offers additional services including ImPact Concussion Test, micro-nutrient testing (vitamin, amino acid, and mineral profile test), PRP and Vitamin Rich Hyaluronic rejuvenation programs for the face. Although the primary focus of these therapies has been to return to health and wellness, the healing applies to all aspects of your physical and mental well-being. The combination of having your body function more efficiently and the absence of pain can provide a marked rejuvenation effect on an individual. Wendy states "It's like baking the perfect pie: You can't leave out key ingredients and expect it to come out perfect. One's mind, body and spirit need Oxygen, Proper Vitamins, Proper Nutrition and peace in your life.

YOLLO Wellness has a strong support team. Wendy's husband Rodney and youngest daughter Paige work in the community and surrounding areas educating physicians on hyperbaric oxygen therapy and proper nutrition and how they can be added as an adjunct to their in house protocols. Amber is her oldest daughter and her passion is in the field of psychology and enjoys intake and new consults. She holds her training certifications in hyperbaric oxygen therapy, ImPact Concussion Testing, and Nutrition. Deb Re is Wendy's counter balance. Some call them the Mutt and Jeff Show. Their energy working together is vibrant and synergetic. Deb and Wendy's certifications and educational background are in Nutrition, weight loss and weight gain, hyperbaric oxygen therapy, Live Cell Analysis, ImPact Concussion Testing, PRP and Vitamin Facial Rejuvenation.



Marsha Newton is an avid volunteer. She is very passionate about sharing her testimonial on how she was able to get herself off several medications, heal and restore quality of life from the therapies offered at YOLLO Wellness. A medical director oversees all the protocols.

Wendy talks about the personal nature of her work and how it is not the path for everyone. The majority of her work is not covered by any insurance and frequently, the protocol requires a commitment to change old behavior patterns and replace them with unfamiliar new ones. This is often the most difficult part of the healing, but Wendy is adamant that her patients understand how crucial this is. Everyone must go through an initial consult to determine "IF" YOLLO Therapies are right for them. The results produce such a profound change in wellness that her clients are astonished and thankful that their quality of life has been restored.

YOLLO Wellness

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WHAT IS MACULAR DEGENERATION?

By Oren Z. Plous, MD

Macular degeneration is the damage or breakdown of the macula of the eye. The macula is a small area at the back of the eye that allows us to see fine details clearly. When the macula doesn't function correctly, we experience blurriness or darkness in the center of our vision. Macular degeneration affects both distance and close vision, and can make some activities - like threading a needle or reading - difficult or impossible. Although macular degeneration reduces vision in the central part of the retina, it does not affect the eye's side, or peripheral, vision. For example, you could see the outline of a clock but not be able to tell what time it is.

Macular degeneration alone does not result in total blindness. People continue to have some useful vision and are able to take care of themselves.

WHAT CAUSES IT?

Many older people develop macular degeneration as part of the body's natural aging process. The two most common types of age-related macular degeneration (ARMD) are "dry" (atrophic) and "wet" (exudative). Most people have "dry" macular degeneration, caused by aging and thinning of the tissues of the macula. Vision loss is gradual. "Wet" macular degeneration accounts for about 10% of all cases. It results when abnormal blood vessels form at the back of the eye. These new blood vessels leak fluid or blood and blur central vision. Vision loss may be rapid and severe.

WHAT ARE THE SYMPTOMS?

Macular degeneration can cause different symptoms in different people. Sometimes only one eye loses vision while the other eye continues to see well for many years. But when both eyes are affected, the loss of central vision may be noticed more quickly. Here are some common ways vision loss is detected:

- Words on a page look blurred;
- A dark or empty area appears in the center of vision;
- Straight lines look distorted or wavy.



HOW IS IT DIAGNOSED?

Many people do not realize that they have a macular problem until blurred vision becomes obvious. A medical eye doctor can detect early stages of macular degeneration during a comprehensive eye exam that includes the following:

- Viewing the macula with an ophthalmoscope;
- A simple vision test in which you look at a grid resembling graph paper;
- Sometimes special photographs, called angiograms, are taken to find abnormal blood vessels under the retina. Fluorescent dye is injected into your arm and your eye is photographed as the dye passes through the blood vessels in the back of the eye.

HOW IS IT TREATED?

In its early stages, "wet" macular degeneration can be treated with laser surgery, a brief and usually painless outpatient procedure. Laser surgery uses a highly focused beam of light to seal the leading blood vessels that damage the macula. Although a small, permanently dark "blind spot" is left at the point of laser contact, the procedure can preserve more sight overall.

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Treatment focuses on helping a person find ways to cope with visual impairment. Side vision is usually not affected; therefore, a person's remaining sight can be very useful. Often, people can continue with many of their favorite activities by using low-vision optical devices such as magnifying devices, closed-circuit television, large-print reading materials, and talking or computerized devices



Normal Vision



The same scene as viewed by a person with age-related macular degeneration.

PREVENTION IS THE BEST MEDICINE

Regular eye examinations are important in detecting macular degeneration, as the symptoms of the disease often go unnoticed. Early detection of macular degeneration may prevent further vision loss, since treatment is only effective when started early. Regular exams are especially important for older adults and persons who have family members with a history of retinal problems.

To learn more about Macular Degeneration or other services offered at Frantz EyeCare visit www.bettervision.net or call the Punta Gorda office of Frantz EyeCare at 941.505.2020.

Oren Z. Plous, MD, is a Retina Specialist in the Punta Gorda office of Frantz EyeCare, the offices of the offices of Jonathan M. Frantz, MD, FACS. The team of doctors at Frantz EyeCare offer a broad spectrum of patient-focused comprehensive care from eye exams and eyewear to bladeless laser cataract removal, treatment of eye diseases, bladeless Wave-Light LASIK, and eyelid surgery and facial cosmetic procedures with office locations in Fort Myers, Naples, Cape Coral, Punta Gorda, and Lehigh Acres.

Safety First

Contrary to what Hollywood portrays, aging can be a wonderful thing. Getting to see our children grow up into mature adults and live out their goals is a very rewarding process. One of the main purposes on this earth, besides our own happiness, is to pass our knowledge and wisdom to the next generation. "Leave this place better than we found it" is a great slogan to live by. However, as we age, even simple tasks may become more daunting and even risky to our health.

Although moving to an assisted living facility can be beneficial to you and your family, it is usually viewed as the last resort. Most people prefer to stay in their own home for as long as possible. Making the home safe for you or an elderly relative can help extend a lifestyle that is both familiar and comfortable. Sometimes it is hard to come to terms with difficult facts, but the number one cause of death for seniors is falling. A broken hip bone can have a difficult time healing due to the age of the individual; which can lead to further complications. In order to keep "home" a safe place, there are definitely some basic changes that must be made.

In case of a fire, it is important to keep an escape route clear of obstacles. Like all home safety plans, this is always at the top of the list, because it can be the most extreme emergency we can encounter. Next, keep all the fire alarms in working order with good batteries. Our sense of smell can diminish over time, so the ability to detect fire on our own is at risk. When night falls, being able to see is crucial. Even in a familiar house, adding light switches for more convenience is helpful. There are lights that can be turned on and off by a clap reducing the amount of time searching in the dark for a switch. Nightlights in high travel areas are a simple solution to avoiding furniture while getting up for a midnight feast or bathroom trip.

You can decrease the risk of falling by getting rid of loose or slippery carpets. If an elderly person uses a cane or walker, you can add or clean the rubber at the bottom to keep firm resistance. Non-skid floor wax is a good addition to tile or wood floor. Loose wires should also be straightened up and kept out of the way. All these changes might seem small, but every accident is usually caused by something small and overlooked.

These safety tips have been brought to you by Banyan Assisted Living. Their main goal is to see that everyone stays in their home in a safe and responsible way. However, if you or a loved one are ever in a position to seek out alternative living arrangements, please contact them at **(941) 412-4748**. Their facility revolves around safety and comfort and is located in Venice at 100 Base Avenue East. You can also visit their website at **www.abanyanresidence.com**.



A Banyan Residence has the following features to do so:

- Custom Shuttle
- Monthly Newsletter
- Spa Day
- Walking Club
- Physical Therapy Room
- TV satellite service
- Movie theatre popcorn
- Family & Friends BBQ
- Tropical Garden
- Fruits & Vegetable Garden
- Walking Club
- Waterfall
- Physical fitness activities
- Salon Room
- Custom Shuttle Bus
- Koi Fish & Duck Pond
- Butterfly Garden
- Special Events: Annual Red Carpet Fashion Show



Annette Neumann, D.O.
Board Certified Family Medicine

Stop letting extra pounds hold you back. IF NOT NOW, WHEN?

In today's high-paced, high-stress society, we are accustomed to treating health problems after they negatively impact our lives, rather than proactively caring for our bodies. Unfortunately, waiting until a problem develops, such as weight gain or chronic pain, puts your overall health at risk. Poor nutrition, fatigue, stress and pain can send your body on a downward spiral, leaving many patients feeling hopeless and frustrated. A whole body approach to wellness is different and very effective at preventing unwanted health conditions. This approach helps patients get healthy and stay healthy for life.

There are multiple plans for medical weight loss. One plan is the Fast Track Program, which involves receiving HCG medically prescribed injections of a hormone produced during pregnancy that can spur rapid long-lasting weight loss. It also involves receiving appetite control medication and Lipo injections, which not only help you to lose weight, but can have a positive impact on other conditions such as diabetes and heart disease. Another plan is the Lifestyle Change Program.

Medical Weight Loss Diagnosis

Taking a medical approach to weight loss will ensure that you safely lose weight and keep it off for years to come. During your initial consultation your medical history is reviewed to help determine the best weight loss plan, whether that plan ultimately involves the HCG medically prescribed injections, appetite suppression medication or Lipo injections. Your medical history will include weight and current diet as well as your mental status and history.

After your consultation, a basic examination is performed, taking note of your current height, blood pressure and pulse. The doctor may also examine your thyroid, heart and lungs depending on how healthy you are and your current age.

The information gleaned from your medical history and physical examination is used to determine whether or not you need further testing to choose the best weight loss plan. Thyroid testing may be done to see if your thyroid is over or under active. If you have a history of heart disease or a family history of cardiac disease, you may undergo an EKG.



Once your examination and diagnosis are complete, the doctor will be able to develop the best medical weight loss plan for you. If you need to lose weight rapidly the Fast Track Program may be suggested, which involves daily medically prescribed injections. For some people, appetite suppression medication or Lipo injections may be a better fit. Before prescribing injections, or any other medication, the doctor will educate you on the risks and benefits of using them.

Weight Loss with Clear Results

At Toledo Blade Weight Loss center, we take the mystery out of weight loss using our program based on Dr. Simeon's protocol "Pounds & Inches." Our medical weight loss programs can help you lose up to one pound a day for up to 45 days – and most importantly – keep it off.

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Ready to take control of your life? Schedule your consultation and diagnostic appointment today at Toledo Blade Weight Loss in Port Charlotte / North Port. It's a great day to change your life.

Dr. Annette Neumann, owner of Toledo Blade Weight Loss, recently moved to Port Charlotte with her husband from her native state of Michigan. She has been in the healthcare field in various capacities since 1979. Originally, Dr. Neumann began her health related career in nursing then moved on a few years later to become a chiropractor. As her children grew up and left home, Dr. Neumann once again made a career shift to become an osteopathic physician. After residency, she became board certified in family medicine and opened her own office. In the fall of 2013, Dr. Neumann required a total hip replacement, which started her thinking of a new path she might take in medicine. This, along with the fact that many of her patients struggled with being overweight, was the impetus for her interest in medical weight loss management. Dr. Neumann's goal is to help people lose weight and maintain the weight loss for the rest of their lives. Her plan is to do this with lifestyle change, counseling, exercise, appetite suppressants, lipotropic injections and/or HCG injections.

*HCG has not been demonstrated to be effective adjunctive therapy in the treatment of obesity. There is no substantial evidence that it increases weight loss beyond that resulting from caloric restriction, that it causes a more attractive or "normal" distribution of fat, or that it decreases the hunger and discomfort associated with calorie-restricted diets.

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NO NEED TO JUST "SHRUG" OFF SHOULDER PAIN

As the elderly population expands, so do age-related orthopedic disorders. This is of particular concern in the field of shoulder pathology, as both osteoarthritis and rotator cuff disease are degenerative conditions that increase in the aging population.

Arthritis is a debilitating and painful condition that affects many people of all ages and all parts of the body. (In concern) People with shoulder arthritis, who suffer from inflammation, inflexibility, rigidity and pain in the shoulders, need to know that there are many medical treatments and options depending on the type of arthritis that an individual has.

According to the Arthritis Foundation, shoulder pain could potentially be caused by certain arthritis conditions. These conditions include rheumatoid arthritis, juvenile arthritis, gout, reactive arthritis, lupus, but most commonly osteoarthritis. According to Dr. Caroline Chebli, a fellowship trained and board certified shoulder and elbow surgeon, from Kennedy-White Orthopedic Center, Osteoarthritis can affect any joint in the body, including the shoulder. "Osteoarthritis in the shoulder is caused by cartilage breakdown at the end of bones where joints are formed, and is often initiated from a shoulder injury," claims Dr. Chebli. "The shoulder is arguably the most crucial joint in the body due to it being the most movable joint in the body".

Arthritis in the shoulder can be extremely painful and can completely paralyze a patient's day to day living and quality of life if it goes undiagnosed or untreated. "The key to treatment is an early diagnosis and a comprehensive plan to manage symptoms. Pain and difficulty associated with moving ones arms can grow so severe that daily tasks and sleep can become difficult. If medication and physical therapy aren't enough, shoulder

replacement surgery is a common next step," explains Caroline Chebli, MD. "A surgical procedure improves range of motion and reduces pain in nearly all cases, especially for those with intact rotator cuffs."

To further reiterate what Dr. Chebli says, a recent study by the Mayo Clinic found that that 93 percent of rheumatoid arthritis patients who underwent a total shoulder replacement -- in which both sides of a shoulder joint are replaced -- needed no further surgery on the joint a decade later. The same was true for 88 percent of those undergoing a partial shoulder replacement.

According to the Arthritis Foundation, in order to diagnose osteoarthritis of the shoulder, the patient's medical history, physical examination, and x-rays are considered. The doctor will look for certain signs and symptoms during the physical examination including:

- muscle weakness or atrophy;
- tenderness to the touch and pain when pressure is applied to joint;
- range of motion -- both assisted and self-directed;
- signs of injury to muscles, tendons and ligaments around the shoulder.



Dr. Chebli, reminds all, "Osteoarthritis and related shoulder pain and conditions doesn't have to be debilitating, there are many great surgical options and post rehabilitation options that can greatly improve ones quality of life... the earlier the detection the better. There truly is so much hope."



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CERVICAL INSTABILITY: A Consideration in Post-Concussion Syndrome

HAVE YOU SUFFERED A HEAD OR NECK INJURY that has left you with chronic pain and debilitating, baffling symptoms that continue to worsen? Finding a specialist in cervical instability may provide answers.

Cervical instability occurs when the ligaments are lax and elongated from injury, allowing for an inefficient protective barrier. The cervical vertebrae are held in proper position by ligaments, helping to protect the spinal cord, brain stem, and nervous system from excess movement in the cervical spine. Damage to these soft tissue structures of the cervical spine can cause many more problems than just pain in the neck.

Cervical instability can provoke irritation of both the vertebral and sympathetic nerves. Damage to ligaments and ensuing irritation to the surrounding nerve endings may alter the firing patterns from these nerve endings, which may cause increased activation of the sympathetic nervous system. Even minor damage to ligaments can cause an over-stimulation of the sympathetic nervous system. (See Figure 1.)

Symptoms of cervical instability

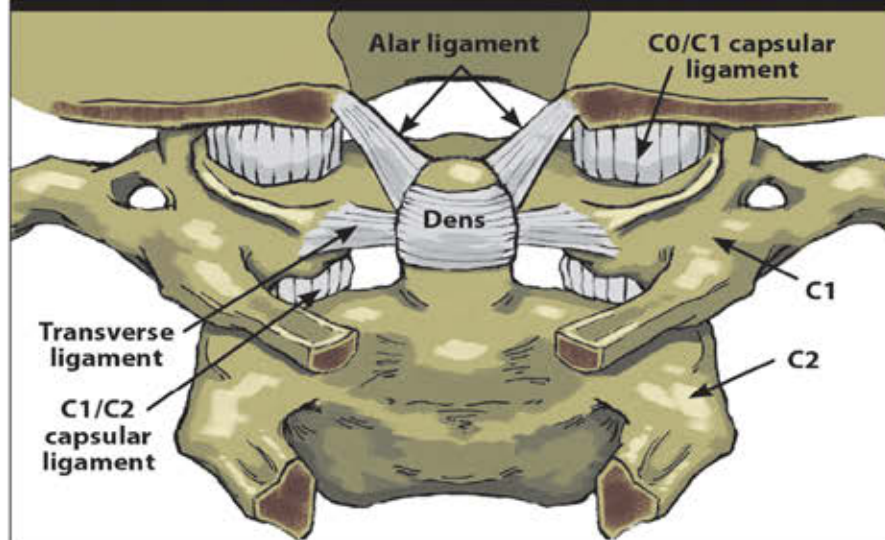
When the capsular ligaments of the neck become unstable, several things occur. For example, instability in the lower cervical spine (C3-C7) can cause muscle spasms, crepitation, and/or paresthesias in addition to chronic neck pain. Instability of the upper cervical spine (C0-C2) can cause numerous symptoms including, but not limited to, nerve irritation and vertebrobasilar insufficiency (VBI) with its associated symptoms of neck pain, headaches/migraines, dizziness, drop attacks, vertigo, difficulty swallowing and/or speaking, and auditory and visual disturbances. (See Figure 2.)

Symptoms from cervical instability can occur even after time has lapsed post-trauma, because the spine is destabilized. The destabilization causes aggressive, accelerated degeneration of the cervical spine affected by the trauma. Destabilization of the cervical

Impingement of cervical sympathetic ganglion from cervical instability. Capsular ligament laxity causes anterior cervical instability when the person flexes their neck causing impingement of the cervical sympathetic ganglion. Barré-Liéou Syndrome accounts for much of the chronic neck pain, headaches, migraines, vertigo, tinnitus, blurry vision, forgetfulness, and dizziness that people get after neck trauma.



Schematic of upper cervical region from posterior view. Facet joints of C0-C2 are stabilized by capsular ligaments. It is these ligaments that are primarily strengthened by Prolotherapy to stabilize the spinal segments.



MRI of neck showing disc bulge at C5-C6 causing effacement of the subarachnoid space (arrow). **3**

While this sounds and looks bad, physical exam revealed normal spinal cord function. This person's symptoms of neck pain, headaches, swallowing difficulties, sinusitis, balance issues, and a host of other symptoms were due to cervical instability. They have responded quickly to the spinal stabilizing effects of Prolotherapy.



Prolotherapy of cervical facet joints. Prolotherapy is the treatment of choice when cervical instability is the cause of a person's chronic neck pain, headaches, migraines, vertigo, ringing in the ears and other symptoms of Barré-Liéou Syndrome. Prolotherapy by stabilizing the cervical vertebral motion, resolves the impingement of the cervical sympathetic ganglion and the resultant symptoms.



spine can be accompanied by severe neurological sequelae such as those seen in instances of Post-Concussion Syndrome (PCS).

Post-concussion symptoms frequently occur following a concussion or mild traumatic brain injury (MTBI). Symptoms can include headaches, chronic neck pain, difficulty with concentration, sleep disturbance, irritability, memory deficits, sensitivity to noise, dizziness, vertigo, blurred vision, anxiety and depression. Symptoms notably similar to those of cervical instability. When this cluster of symptoms persists, the condition is then called Post-Concussion Syndrome. PCS symptoms can range in severity from being slightly annoying to becoming an overwhelming disability. In fact, symptoms have been reported to persist for 15 years or more after the injury. (See Figure 3.)

PCS, Cervical Instability and the Autonomic Nervous System

Due to the non-specificity of the symptoms of PCS, treatment can be complex. However, it is important to take into account the structures that may have been injured as a result of the jarring motion of the head.

The acceleration-deceleration forces involved in the trauma do not just affect the brain, but also create a significant whiplash injury to the neck and the base of the skull. Within these areas lies the brainstem, an area of the brain that controls our balance and coordination, and supplies nerves to the muscles that control the eyes, ears, face, and portions of our autonomic nervous system (ANS).

The autonomic nervous system controls the bodily processes that occur automatically in the body, including breathing, heart rate, saliva formation, digestion, pain control, and of course, blood flow. Those with refractory PCS have a dysfunction of the ANS, as their physiologic functions fail to return to normal. A head injury resulting from a twisting mechanism or direct trauma to the upper cervical/posterior skull region may damage this ANS regulation.

Regenerative Therapy Treatments for Post-Concussion Syndrome Caused by Cervical Instability

The cervical spine should be carefully assessed for tenderness, spasm, and range of motion. If cervical instability is diagnosed, treatment would involve correcting the alignment and stabilizing the cervical spine. This can be accomplished with Regenerative Medicine treatment, such as Prolotherapy.

Prolotherapy injections reduce the excessive flexion and extension translation of the cervical spine. It does so by stimulating the repair of damaged structures, such as the ligaments of the cervical vertebrae, and the occipital and sub-occipital regions. (See Figure 4.) This regenerative injection therapy can provide hope and long-lasting, positive therapeutic relief from persistent symptoms associated with Post-Concussion Syndrome caused by cervical instability. Information and research on Prolotherapy for cervical spine conditions is available at AboutProlotherapy.com.

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Immunizations

By Justin Long, Director of Housing and Residence Life at Florida SouthWestern State College

As many people enter college, they are filled with excitement and anticipation for the new adventure they are about to embark on. When thinking back of their college years, most recall the memories they made with friends, roommates, professors and more. However one memory no one wants to have is of being sick. There are so many ways to protect yourself from the many germs and diseases that everyone should, and in some cases must, take advantage of.

As students enter college, they are sometimes required to have proof of their immunization records, and this is important since "College presents a new world of opportunity, and a new world of risks. Communal living spaces, less-than-sanitary conditions, and irregular sleeping habits all can leave students vulnerable to disease." Protecting your health is a priority and some colleges require that students provide proof that they have received certain shots before admission to the institution and college run housing. If a person's values or belief is one that does not support immunizations, then they must sign a waiver acknowledging that they are aware of the risks they are taking by not being vaccinated.

<http://www.webmd.com/vaccines/features/vaccines-for-college-students>

Here at FSW, we require proof that students who move into LightHouse Commons, the on-campus housing facility in Fort Myers, have received meningitis and hepatitis B shots. These two are the most common immunizations that are requested by colleges across the country, and sometimes other colleges and universities may require additional shot records such as tetanus, diphtheria, and pertussis vaccine.



Meningitis and hepatitis B viruses are highly contagious, so it is important for students to have these vaccines to help ward off these illnesses and prevent the spread to others. When college students live in close quarters, such as residence halls or apartments, it is much easier for the bacteria from these two diseases to spread. Being vaccinated is the best protection to ensure that you remain healthy and enjoy your college experience. Meningitis is typically an infection that causes the membranes covering the brain and spinal cord to become inflamed, and if not treated can result in serious injury or death. Hepatitis B is a virus that infects the liver and can lead to severe liver damage if not treated quickly and properly.

Another vaccine to consider is the seasonal flu vaccine, which "protects against the three or four flu viruses that research indicates will be most common during the upcoming season." By receiving the flu vaccination you can reduce flu illnesses, doctors' visits, and missed work and school due to flu. http://www.vaccines.gov/who_and_when/college/

As children, we receive immunization shots for various diseases that can wear off over time, so it is wise to check with your primary care physician to see if there are some vaccines that you need to update. We live in a global society, so the opportunity for exposure to various types of diseases is greater than ever. By ensuring that you are up to date on your vaccines you can "prevent getting and spreading serious diseases that could result in poor health, missed work, medical bills, and not being able to care for family."

Sometimes cost can be an issue for individuals to get up-to-date on their vaccines, but there are still many resources and options to help offset this concern. If you carry insurance, these vaccines are typically included in most policies, even with a minor co-pay. "Under the Affordable Care Act, insurance plans that cover children now allow parents to add or keep children on the health insurance policy until they turn 26 years old." Contacting the local health department is another option, as they may offer the vaccines at more affordable rates. Some colleges and universities have student health centers on site, so it is recommended to check with those facilities as well in case they offer free or discounted vaccines.

http://www.cdc.gov/vaccines/adults/rec-vac/index.html?s_cid=cs_650

Contracting any of these diseases or viruses can result in missing work or school, and that could impact your ability to be successful in those areas. Your health is your responsibility, and it is vital that you evaluate all the options to protect yourself and prevent the spread of these highly contagious diseases.

For more information about the vaccines required and recommended for college students, please visit <http://www.acha.org/topics/vaccine.cfm> or <http://www.cdc.gov/vaccines/events/niiw/ed-resources/partner-resources.html>

Information resources for this article include:

http://www.cdc.gov/vaccines/adults/rec-vac/index.html?s_cid=cs_650

http://www.vaccines.gov/who_and_when/college/

<http://www.webmd.com/vaccines/features/vaccines-for-college-students>

<http://answers.webmd.com/answers/1181776/what-is-meningitis>

<http://www.webmd.com/hepatitis/hepb-guide/hepatitis-b-topic-overview?page=2>



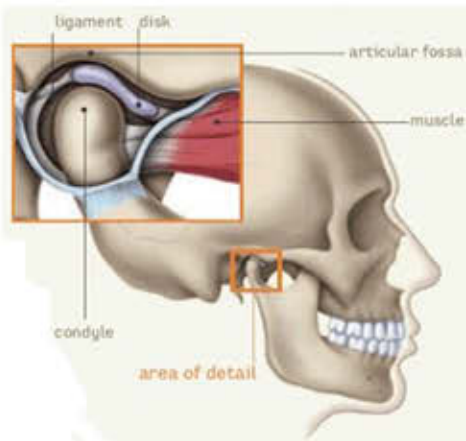
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The Daily "Grind"

By Dr. Joseph Farag

Too much stress can contribute to a wide range of health problems. From a dental perspective, stress often plays a role in the development of Temporomandibular Disorders, or TMD. Grinding of teeth which causes headaches, jaw soreness and pain, among many other symptoms can be exacerbated during times of high stress. The temporomandibular joint (TMJ) is the hinge joint that connects the lower jaw to the temporal bone of the skull, which is immediately in front of the ear on the side of your head. The cause of TMD is not clear, but dentists believe that symptoms arise from problems with the muscles of the jaw. Severe cases can be caused by injury to the jaw. In more common cases, grinding or clenching of the teeth puts a lot of pressure on the TMJ and people feel tooth sensitivity, earaches, and neck tension and pain.



Treatment Options

If stress is causing you to grind your teeth, ask your doctor or dentist about options to reduce your stress. Also, avoid foods and drinks that contain caffeine, alcohol, and do not chew gum. Relax your jaw muscles at night by holding a warm washcloth against your cheek. When these

options do not relieve your pain, your dentist can offer a variety of treatment modalities for your specific case. An occlusal guard, often called a nightguard, can be fabricated by your dentist to allow your muscles to rest and protect your teeth from further wear.

Patients who present with TMD should also have an occlusal analysis

This helps determine if there are any bite discrepancies that may be corrected with a simple procedure to reshape how the teeth come together when you bite. Medications such as over the counter ibuprofen are helpful because they reduce inflammation to aid in the healing process. Occasionally, a mild muscle relaxant may be prescribed for a few days or weeks to help relieve pain. Surgery for TMD should only be considered after all other treatment options have been tried and you are still experiencing severe, persistent pain.

Relaxation Techniques May Help Alleviate TMJ Symptoms

Simply becoming more aware of tension-related habits — clenching your jaw or grinding your teeth — will help you reduce their frequency. Because stress can contribute to TMJ disorders, relaxation techniques like yoga, meditation and deep breathing may also help alleviate TMJ symptoms.

This season, survive the holiday grind with a little planning, prioritizing and perhaps a trip to your dentist. To learn more about TMD or to schedule an appointment, please call Dr. Joseph Farag at Port Charlotte Dentalcare, 941-764-9555.



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Helping Your Child Cope with Back-to-School Anxiety

Anxious feelings are normal and expected during times of transition or change. This is especially true for children and teens going back to school, or for first-timers starting kindergarten. This transition can be stressful and disruptive for the entire family! Prior to the first day of school, your anxious child may cling, cry, have temper tantrums, complain of headaches or stomach pains, withdraw, and become sullen or irritable.

Worries are Common. Anxious children and teens worry about many different school-related issues, such as teachers, friends, fitting in, and/or being away from their parents.

Some common worries include:

- *Who will be my new teacher?*
- *What if my new teacher is mean?*
- *Will any of my friends be in my class?*
- *Will I fit in?*
- *Are my clothes OK?*
- *Will I look stupid?*
- *Who will I sit with at lunch?*
- *What if I miss the bus?*
- *What if I can't understand the new schoolwork?*
- *What if something bad happens to mom or dad while I am at school?*

How To Deal With Back-to-School Worries

Below are some general strategies parents can use to deal with back-to-school worries, followed by a schedule leading up to the first day of school.

Look after the basics.

Nobody copes well when they are tired or hungry. Anxious children often forget to eat, don't feel hungry, and don't get enough sleep. Provide frequent and nutritious snacks for your child. During this time, you also need to build in regular routines, so that life is more predictable for your child. These routines can involve the morning and bedtime habits, as well as eating schedules.

Encourage your child to share his or her fears.

Ask your child what is making him or her worried. Tell your child that it is normal to have concerns. Before and during the first few weeks of school, set up a regular time and place to talk. Some children feel most comfortable in a private space with your undivided attention (such as right before bed, or during mealtime). Teens often welcome some sort of distraction to cut the intensity of their worries and feelings (such as driving in the car, or taking a walk).

Avoid giving reassurance...instead, problem-solve and plan! Children often seek reassurance that bad things won't happen in order to reduce their worry. Do not assure them with "Don't worry!" or "Everything will be fine!" Instead, encourage your child to think of ways to solve his or her problem. For example, "If (the worst) happens, what could you do?"



or "Let's think of some ways you could handle that situation." This gives you the opportunity to coach your child on how to cope with (and interpret) both real and imagined scary situations. You will also be giving your child the tools he or she needs to cope with an unexpected situation that might arise.

Role-play with your child. Sometimes role-playing a certain situation with your child can help him or her make a plan, and feel more confident that he or she will be able to handle the situation. For example, let your child play the part of the demanding teacher or bullying classmate. Then, model appropriate responses and coping techniques for your child, to help them calm down.

Focus on the positive aspects! Encourage your child to re-direct attention away from the worries, and towards the positives. Ask your child, "What are three things that you are most excited about on your first day of school?" Most kids can think of something good, even if it's just eating a special snack or going home at the end of the day. Chances are that the fun aspects are simply getting overlooked by repetitive worries.



Pay attention to your own behavior. It can be anxiety-provoking for parents to hand over care and responsibility of their child to teachers. Children take cues from their parents, so the more confidence and comfort you can model, the more your child will understand there is no reason to be afraid. Be supportive yet firm. When saying goodbye in the morning, say it cheerfully – once! Ensure you don't reward your child's protests, crying, or tantrums by allow him or her to avoid going to school. Instead, in a calm tone, say: *"I can see that going to school is making you scared, but you still have to go. Tell me what you are worried about, so we can talk about it."* Chances are, your child is anxious about something that requires a little problem-solving, role-playing, planning, and/or involvement from the teacher.

Timeline Leading Up to the First Day of School (You may not need to take all of these steps)

At least one week before:

- Start your child on a school-day routine – waking up, eating, and going to bed at regular times. Explain that everyone in the family needs to adjust to the new schedule, so he or she doesn't feel alone with these changes.

- For older children who having troubles getting up and out of bed, give them a "big person" alarm clock, and let them practice using it.
- Ask your child to help plan school lunches for the first week.
- Create a list of school supplies together and plan a fun shopping trip.
- Teach and practice coping skills to use when feeling nervous, see "How to Do Calm Breathing" and "Developing and Using Cognitive Coping Cards" on the anxietybc.com website.

A couple days before school:

- Go to school several times – walking, driving, or taking the bus. For young children taking the school bus, describe and draw out the bus route, including where the bus goes and how long it takes to get to school. Talk about bus safety.
- For new students, take a tour of the school. Show your child the classrooms, the cafeteria, and the bathrooms. If possible, meet your child's teacher with your child present.
- Ask your child to help choose the outfits for the first week of school. Let your child wear his or her favorite outfit on the first day.
- Together with your child, pack up the schoolbag the night before, including treats.
- For younger children who are nervous about separating, suggest taking a special object to school that reminds him of home. A reassuring note in a child's lunch can also help ease separation anxiety.

The first day of school:

- Have your child go to school with a friend for the first couple of days.
- Tell the teacher that your child is having some separation anxiety – most teachers are experts in this area, and have years of experience!
- Most importantly, **praise and reward your child for brave behavior!**

Source: anxietybc.com

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IS A TRUST RIGHT FOR ME?

By James W. Mallonee

For the most part, a trust, whether operable during life or after death is generally used to give its creator the ability to control the flow of a person's property to beneficiaries following death while attempting to minimize if not avoid estate taxes. In today's world, it might not make sense to have a trust instrument because of the \$5.0 million applicable exclusion (increased for inflation) for a single person or \$10.0 million for a married couple.

With the increase in the Federal Estate Tax exclusion, a trust instrument (like a Last Will and Testament) can provide assurance that a person's assets actually flow to the beneficiaries of their choice and in manner to protect a beneficiary from themselves. However, with every benefit that comes with a trust, there are also issues that need to be addressed that often times are forgotten. This article will cover why you might consider a trust instrument as well those situations where it might not make sense. The major issue covered by this article is controlling where assets go after a person's death and any tax implications that may need considering.

Assume that we are dealing with a married couple (Spouse1 and Spouse2). This is the second marriage for Spouse1 and Spouse2 and both spouses have children from former marriages. Let's also assume that the combined assets of the marriage are approximately \$500,000.00 excluding the value of the couples Florida homestead property. Both spouses want to be sure that their children by birth are each afforded a portion of their estate following Spouse1 and Spouse2's death. Because the marriage is in excess of 10 years, the assets have long since been co-mingled. Spouse1 is now terminally ill and wants to know how he or she can provide for his or her children regardless of Spouse2's needs.



A simple solution is to separate some of the couples' assets into accounts in the name of Spouse1 and his or her children's names with right of survivorship or pay on death. But this is fraught with possible consequences such as the account being exposed to the creditors of Spouse1 and his or her children as well as the possible withdrawal by one of Spouse1's children without the knowledge of the others. Moreover, at Spouse1's death, Spouse2 may need those funds for his or her medical needs which won't be available if Spouse1's children withdraw the funds and divide it among themselves. Lastly, Spouse1's estate may be exposed to gift tax issues (although this is unlikely given the size of the estate in this example and today's current federal gift tax laws).

The other possible solution is to create a trust (either in Spouse1's Last Will and Testament or outright via a Revocable Trust). If Spouse1 (the ill spouse) re-titles a portion of the married couples joint assets into Spouse1's trust, those assets are possibly exposed to his or her creditors in the event of a catastrophic event not covered by insurance. The trust assets exposed to creditors will largely depend upon the type of asset re-titled in the name of Spouse1's trust.

Spouse1's trust could contain provisions that fund a separate trust ("Credit Shelter Trust" or "Marital Trust") which can provide income to Spouse2 for his or her life. At Spouse2's death, the remaining principal from the Credit Shelter Trust can be paid

out to Spouse1's children. Should there be a need for additional funding to assist Spouse2 during his or her remaining life (e.g. health needs), the Trustee could provide those funds from remaining assets that Spouse1's children would eventually receive. Given the size of Spouse1's estate in this example no Federal or Florida estate tax would be due under the current laws. So far everything seems to be great.

But, suppose Spouse2 lives another 10 years and the value of assets that make up the Credit Shelter Trust grow 10 fold (from \$250,000.00 to \$2.5 million). Because the Credit Shelter Trust asset had a basis increase at the death of Spouse1 to \$250,000.00, and such estate assets were not transferred outright to Spouse2, the children of Spouse1 will not get an additional step-up in basis when Spouse2 dies. When Spouse1's children eventually get the remaining principal balance from the Credit Shelter Trust, they will ultimately be responsible for the capital gain increase from \$250,000.00 to \$2.5 million upon the sale of those assets. Obviously not what was desired.

As an alternative, Spouse1's assets could be moved to a By-Pass Trust upon his or her death with an independent Trustee taking control of the distributions. Income generated by the By-Pass Trust along with principal could be paid out to Spouse2 at the discretion of the Trustee. At the death of Spouse2, the remaining assets placed in the By-Pass Trust will receive a step-up in basis

when paid out to Spouse1's children. The only downside here is that the assets placed into Spouse2's By-Pass Trust will be included in his or her gross estate for purposes of Federal Estate Tax calculation. Given the size of this estate example and the current laws in effect, no estate tax would be triggered.

Other considerations should be taken into account when deciding the type of testamentary documents that are best for you. One of those considerations is the overall expense of purchasing a Last Will and Testament versus that of a Trust. In the author's opinion, if you have an estate where the gross assets are less than \$300,000.00, a trust instrument may not make sense, unless you want to be certain that your children (from a previous marriage) receive something following your death and you are willing to risk having your assets exposed to creditors while you and your spouse are living.

No doubt deciding whether a trust is right for you is not a simple exercise and your best option is to visit the attorney of your choice to discuss what you and your spouse want to accomplish upon death. Your attorney can discuss with you the changing estate laws and try to design a plan that will fit your desires and yet be flexible enough to remain valid in the event Congress changes the current I.R.S. income and estate laws. It could be the best investment of time you make.

This article is intended for informational use only and is not for purposes of providing legal advice or association of a lawyer - client relationship.

About the Author:

James W. Mallonee (Jim Mallonee) is a graduate with a B.A. degree from the University of South Florida and a Master of Science degree from Rollins College in Winter Park, Florida. He obtained his Juris Doctorate from the University of the Pacific, McGeorge School of Law in Sacramento, California. Prior to returning to Florida to practice law, Mr. Mallonee was employed by Intel Corporation for 22 years in such locations as New Jersey, Florida and California.

In addition to being a member of the Florida Bar since 2003, Mr. Mallonee serves on the Charlotte Community Foundation Committee for asset allocation and teaches Business Law at State College of Florida. Mr. Mallonee is also on the Board of Directors for the Military Heritage Museum located in Charlotte County, Florida.

His firm practices law in the following areas: Probate, Wills & Trusts, Guardianships, and Litigation in the areas of Real Estate, Guardianships and Estates. The firm has two locations in Venice and Port Charlotte, Florida.

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AGING IN PLACE – SAFETY MODIFICATIONS TO YOUR HOME

A term or concept that is becoming more and more popular these days is "aging in place" - being able to stay in one's homes as one grows older. Most likely the aging of a large group of baby boomers has a lot to do with this.

More and more people are concerned about their ability to live comfortably in their homes as they age. In fact, even while they are physically able to maneuver well in their bathrooms and handle their stairs efficiently, they are beginning to plan ahead for days when they may not be able to do so.

Safety in the Bathroom

A Home Safety Council survey revealed that homeowners consider the bathroom the second most dangerous room in the house? Bathroom remodeling for aging in place can help increase safety in the bathroom, and make the bathroom space more usable and comfortable. As for safety, falls are the greatest risk for seniors, so making changes to help prevent them in the bathroom is important.

Walk-in bathtubs and barrier free showers alleviate many of the problems where safety and accessibility are a concern, thus giving people a better chance to age safely and comfortably in their homes.



Healing Benefits of a Walk-in Tub

- Calms high blood pressure
- Eases muscle tension and back pain
- Moisturizes skin conditions like rashes, psoriasis, and eczema
- Reduces inflammation of varicose veins, hemorrhoids, and tendonitis
- Soothes carpal tunnel syndrome & fibromyalgia
- Recommended for rehabilitation from accidents, traumas, and strokes
- Relieves sinus pressure, dry throats, and asthma
- Helps detoxify the body and stimulates the lymphatic system
- Aids digestive problems
- Improves sleep quality and remedies insomnia
- Helps lift depression and anxiety
- Reduces stress, aiding weight loss & immunity

Benefit From Peace of Mind

For those who experience difficulty using a normal bathtub, and who dread slippery shower floors and impossible glass doors, a bliss walk-in therapy tub can be the answer. In addition to the safety benefits, a warm bath brings relaxation, renewed energy and relief from discomfort.

Cardio Benefits

A recent Mayo Clinic study found that soaking in a warm bath increases heart rate while lowering blood pressure. This means you can get some of the health benefits of exercise, but with less strain on your heart. According to the study, warm water immersion can protect the heart from arrhythmias and improve the strength of the heart muscle.

Benefits for Arthritis

According to an Arthritis Foundation publication, warm water therapy offers a gentle setting for exercising your joints. A walk-in tub can help restore strength and delay further damage to sensitive joints.

Back, Hips, and Knees

Warm water therapy and hydro massage are renowned for treating muscles aches, tension and stress. Our massage spa therapy will soothe sore muscle and increase blood flow while the weightlessness of buoyancy allows the body to focus on repair.

Sleep Benefits

Soaking in a warm bath can help easy sleeping disorders, offering you a rich full night's sleep. Unlike over-the-counter remedies, a walk-in tub lets the body naturally prepare for deep sleep, leaving you refreshed and energized the next morning.

Benefits for the Skin

The strategically placed air jets are designed to gently caress and exfoliate the skin. You will enjoy the refreshing sensation of a full body scrub with Bliss air jet therapy that gives your skin a breath of fresh air by opening the pores, helping to give you a radiant complexion.

Aroma & Chroma Therapy

The benefits of aromatherapy are both simple and profound. Our sense of smell is one of the strongest forms of memory and stress relief, so only a tiny drop of fragrance can stimulate the mind and reinforce the body's natural defenses. Research has revealed that light, natural or artificial, can aid mood and circadian rhythm imbalance, lifting depression. Both options can easily be included in your Bliss Walk-in Bathtub.

Whether you're remodeling due to a disability or just planning for the future, keeping safety and accessibility in mind are always necessary. Your safety is our first concern when analyzing home modifications for aging in place. At Curtis Allen Designs, we are fully qualified to help you regain your independence at home.

AGING IN PLACE

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The GAME CHANGER

By Alex Anderson, Senior Associate Pastor at Bayside Community Church

One morning I was praying in my study at home and asked God for His help on something that is very important to Him and me. In my prayer, I was asking Him for specific things.

Shortly after my prayer, I was preparing to head to my office at Bayside Community Church and I had these thoughts come to me. *Do you want my blessing or yours?* In an instant, I recognized that God was trying to help me differentiate between the size of His blessings and the size of the blessing I had asked for in prayer.

Then this verse came to mind.

Now to Him who is able to do immeasurably more than all we ask or imagine, according to his power that is at work within us, to Him be glory in the church and in Christ Jesus throughout all generations, forever and ever. Amen!

Ephesians 3:20-21 NIV

Immeasurably more than all we could ask or imagine stood out in my mind. Then I thought, Do I want my size blessing or a God-sized blessing on my morning's prayer request?

Well, I was born at night, but not last night. I quickly said, "Lord I want your size of blessing, because I cannot think your way or as big as you think." It's true. I can think pretty big and imagine a lot. But I cannot begin to touch the fringes of God's ability to imagine or to dream. One look into a vast winter sky can tell us that.

In the book of Genesis, in chapter twenty-seven we read a very sad story. It's about an old and almost-blind father, Isaac, giving his younger son Jacob a blessing that was intended for his older son, Esau. Once Isaac realized that he had been tricked by Jacob to get Esau's blessing, he was heartbroken and sad. Later Esau found out and begged his father for the blessing, but Isaac could not give the same blessing to two sons. Esau wept bitterly.



Why all the sadness over a simple prayer from a father to his son? It was the blessing. God was the one who was responsible to back up this blessing and make it actually happen. God gave Abraham, Isaac's father, a special promise, a blessing. This blessing would follow to whomever it was transferred. That's what all the crying and bitterness from Esau was about.

The blessing was not just the largest inheritance portion of Isaac's estate going to the one being blessed (which was huge) it also included God's help with life--the Blessing of God.

The blessing of God is the game-changer as far as I am concerned.

I believe those who worship the God of Abraham, Isaac and Jacob can have a blessed life. I believe this for two reasons, and here is the first one.

The New Testament of the Bible says so.

He (God) redeemed us in order that the blessing given to Abraham might come to the Gentiles through Christ Jesus, so that by faith we might receive the promise of the Spirit.

Galatians 3:14 NIV

The game-changer in the promised blessing for us today is God's spirit--The Holy Spirit or The Spirit. He, the Spirit, is the blessing. He is the one who changes the game for all of who believe in God's son. And I'm not just talking about going to Heaven (which will be mind-blowing all on it's own), but I'm talking about everyday life.

Imagine this. You have this person who lives with you 24/7, knows everything, is all powerful, can be anywhere at anytime all the time and loves and wants to help you--no matter what kind of knucklehead you may be. I'm not saying He's a genie, I'm saying He is a person who can make life very good for you. And if you think wanting a good life is being selfish and not of God, then you should try Him first before really you decide. Because...what if I'm right (and I am)? Then you have nothing to lose but an unblessed life.

The second reason I believe those who worship the God of Abraham, Isaac and Jacob can have a blessed life is...we have a bunch of them a Bayside Community Church. I know this because I am one of them.

So anyway, I'm running out of word space. But it's true; Holy Spirit is the game-changer for all Christ followers. He is the blessing. Christ followers have problems in life like everyone else, but we also have a person to help us, and He is amazing at it.

To your spiritual health,

Alex E. Anderson

Author of the book, *Dangerous Prayers*
www.dangerous-prayers.com

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