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May 2016

Manatee/Sarasota Edition - Monthly

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### TOPICS FOR MAY

**NEW! MAY 1st - Advancements in Optical Products**  
Scott Han, OD; Tina Wood, LDO, ABOM

**MAY 8th - Macular Degeneration**  
Joshua Mali, MD

**MAY 15th - Bladeless Laser Cataract Surgery**  
Robert Friedman, MD; Cathleen McCabe, MD; Brian Foster, MD

**MAY 22nd - Treatments for Dry Eye Disease**  
Richard Hector, MD; Brian Foster, MD; Scott Han, OD

**MAY 29th - Advancements in Optical Products**  
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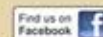


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# May: Be Aware Month

By Virginia 'Ginya' Carnahan, APR, CPRC - Dattoli Cancer Center & Brachytherapy Research Institute

If you have read my articles before, you might remember that I am a bit amused at all the “awareness” month designations and wonder who has the awesome authority to make these decisions. It is getting a little ridiculous. There are at least 13 different awareness designations for the merry month of May.

This month, among other topics, we are reminded about **Better Hearing**. Very important. I know because I get an invitation to try out a hearing aid at least once a week in my mail. We are alerted to the **Risk of Melanoma** and instructed to always wear sun screen and see a dermatologist annually for a full body exam. Yes – full body. I knew of someone who had melanoma inside his ear, which spread to his brain. Sadly, he is not with us anymore.

May is the month for learning about **Better Sleep**. I wish I could sleep better – even the new mattress I bought hasn't helped. (Do you recall that the mattress industry encourages us to buy a new mattress every eight years? Don't forget. That industry needs your repeat business!) Somewhat related to sleeping is the **Correct Posture** campaign in May. Stand up straight and sit properly to allow your brain to work well!

One of my biggest fears is highlighted in **Lyme Disease Awareness** month (yes, in May). There is not yet a **Zika Virus Awareness** month (that I know of) but we could bundle it with Lyme Disease as both of these serious diseases come to us courtesy of creepy crawly, flying pests. We must be vigilant in avoiding ticks and mosquitoes!

My real reason for addressing you this month is inspired by **Cancer Research Month**. I have worked in the health care arena for 40 years and in the field of prostate cancer for more than 15. So much progress has been made in understanding cancer, which has been called the “Emperor of All Disease,” but there are still huge challenges in the field that will require decades of research.





Before we can fully understand any of the cancers, we must recognize that “cancer” is an umbrella term for many, many diseases that can appear and invade virtually any organ of the body. And “cancer” is also big business. Each year billions of dollars are raised – and allocated – for cancer research.

When we think of raising money for cancer research, the most probable image that comes to mind is the Pink Ribbon campaign promoted by the Susan G. Komen Foundation for Breast Cancer Research. Since 1982, this one effort has generated more than \$847 million (*figure from 2014*) – and undoubtedly has changed the awareness of breast cancer forever. Many, many advancements in the diagnosis and treatment of this very common cancer have come directly from the Komen “Race for the Cure” worldwide efforts.

In 2008, film and media leaders launched “Stand Up To Cancer” – a simulcast on four major broadcast networks and 28 cable channels. Since that first effort, subsequent Stand Up programs have received “more than \$261 million” in pledges. These dollars reportedly have supported 12 teams of researchers, two transnational research teams and 25 young scientists.

Annually the federal government invests close to \$5 billion in the National Cancer Institute, one facet of the National Institutes of Health.

There are many smaller organizations that focus on a particular cancer – such as the Lustgarten Foundation that funded \$13 million for pancreatic cancer research in 2013. Who can forget NBC Today Show’s Katie Couric demonstrating the importance of colon cancer screening, following the death of her husband to this cancer?

Folks, it is all around us. It is rare to find a family that has not been visited by the specter of cancer. And many organizations and dedicated individuals are searching daily for the “magic cure.” While progress has been made in diagnosing and treating cancer, there is still a long, long way to go. Exciting things are beginning to happen in understanding how the body, under the right circumstances and stimulation, can be taught to fight its own cancer. Gene research and immunotherapy are two areas of concentrated study.



One day we may be able to take a cell sample of an individual’s cancer, analyze it in under a microscope and then create in the lab a specific drug to kill that specific cancer. Or there may be game-changing discoveries in vaccines that could prevent the growth of tumor cells in the first place.

Cancer research is an exciting place to be today – but it can also mean a lifetime of trying things that never work. I don’t think many researchers go into the field with dreams of winning a Nobel Prize. But every year there is prize given for advancements in medicine. The researchers I have known personally are amazingly dedicated humanitarians who are first intrigued by human life and feel a strong desire to contribute to the sum of knowledge about disease, its prevention and treatment.

What can we do to support their work? Those who are able can contribute funds to research entities. All of us can increase awareness of the risk of disease (especially cancer) and make changes in our personal lives to reduce risk.

Eat right (reduce consumption of red meat, processed foods, fried foods, sugars, salt; increase vegetables and fruits, lean meats, fresh fish, etc.). Watch your weight – exercise 4-5 times a week; do something to make you sweat! Monitor your blood pressure, blood sugar, etc. Take vitamins and supplements, as recommended. Get enough sleep! Enjoy the world around you!

Eliminate known cancer-causing elements from your life. **Stop smoking!** It may be the most beneficial thing you can do, no matter how long you have smoked. Get your flu vaccine annually. See your doctor once a year and get screened for those cancers that can be found early! Wear a helmet when biking. Do not text and drive. And simple things like look both ways before crossing the street. Live long –and prosper!

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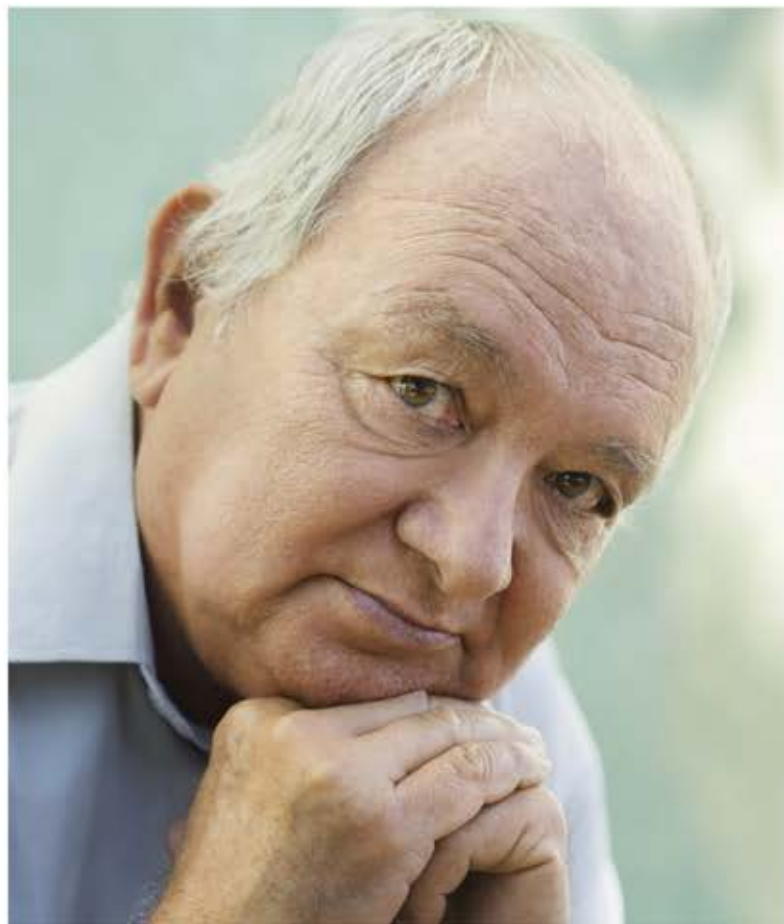


# Help For The Depressed

**A**ccording to NAMI (National Institute of Mental Illness) one in 10 Americans experience depression at some point in their lives yet only about 20 percent seek professional medical help—even though the condition is completely treatable.

*“May is National Mental Health Month,”* says Jamie Seneca, Community Outreach Director for Nurse On Call. “Why not take this month to reflect on your own mental health by answering a few simple questions? Like an annual physical, ones mental check ups are equally as important. The following are a few questions that you can answer to evaluate your mental and emotional well being.

- Have you lost interest in doing things you used to enjoy?
- Are you more sad or crying more than usual?
- Do you have low energy, motivation and drive?
- Are you sleeping more or less than usual?
- Do you feel hopeless, helpless and worthless?
- Do you have suicidal thoughts or recurring thoughts of death?



NAMI, claims that if one answered yes to any of the previous questions they may be susceptible to depression. The scary thing is that many people who suffer from depression never seek out help for a very treatable prognosis. The first step in treatment is meet with ones primary care physician to rule out any other medical conditions and if depression is the diagnosis, it can be treated in a multitude of ways, but the two most common being medication and psychotherapy. Another option for those of Medicare age and meet the requirements is psychiatric nursing services through home health. These services are provided by experienced psychiatric nurses and are designed to:

- Prevent hospitalizations
- Increase access to mental health services
- Provide follow-up treatment
- Assist families in maintaining community living and improving their quality of life

Psychiatric nurses work with your primary care physician and/or psychiatrist in planning care and also work closely with other care team members or involved community providers. Those who are most likely to benefit from Home health services are individuals who have one or more of the following conditions:

- Serious and persistent mental illness as well as risk for repeated hospitalizations
- Exacerbations of chronic schizophrenia and/or affective disorders, including major depression
- A recent release from hospital care and need of follow-up to prevent relapse
- A need for monitoring of a new psychotropic medication
- Alzheimer's Disease and other types of dementia
- Confusion following surgery, strokes, cancer treatment, or related to medications
- Chronic pain and related depression
- Anxiety and/or panic attacks
- Character/personality disorders experiencing a crisis
- Families/caregivers in need of psychosocial support and education

Nurse On Call Homecare has certified psychiatric nursing, psychiatric occupational therapy and licensed social workers that can provide a comprehensive physical, psychological, mental, cognitive, family and environmental assessment of a patient within an in-home environment. Although each individual is screened according to their need for care, some typical criteria to consider in for these services are the following: The patient needs to be home bound, under the care of a physician, and needs a skill of a registered nurse. If all the above criteria is met and you are more interested in homecare Psychiatric services contact your physician to inquire about the benefits of this service.



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# Stem Cells Break 25-year Stalemate in COPD Options for Floridians

By David Ebner - Staff Writer

Since 1990, there have been a plethora of medical breakthroughs. According to the Center for Disease Control and Prevention (CDC), heart disease is the leading cause of death in the United States even though death rates for heart disease have dropped by more than 35 percent since 1990. With the progress of cancer treatments, the cancer death rate has dropped about 9 percent. In the same period of time, chronic obstructive pulmonary disease (COPD), however, has risen from the fifth leading cause of death to the third, and its mortality rate has increased by over 30 percent. The American Lung Association states that 11 million Americans suffer from COPD, and of those, an estimated 1.4 million are Floridians.

Unfortunately, there's no known cure for COPD. Many physicians prescribe bronchodilators to help expand airways and supplemental oxygen to better regulate the diminishing blood-oxygen levels. Although these treatments help manage symptoms, they're not designed to reverse symptoms and have gone underdeveloped for decades.

Perhaps, funding for lung disease research has been limited by a stigma that patients only have themselves to blame because COPD can be a smoking-related illness. Now, people are looking beyond this stigma to find much needed help. Jim D., whose last name is abbreviated for medical privacy, is a patient of a clinic called the Lung Institute ([lunginstitute.com](http://lunginstitute.com)) and has been since 2014. Jim believes COPD, "hasn't seen the news media awareness campaigns needed to stimulate research funding."

The Lung Institute is a clinic specializing in pulmonary care. The clinic doesn't just prescribe supplemental oxygen or a variety of medications; they're conducting treatments using stem cells from the patient's own body.

Stem cells act as the body's healing system. The body alerts these cells, and they flow to the area that needs repair. However, it takes time for this process



**While the mortality rates for heart disease and cancer are on the decline, lung disease mortality has seen a sharp increase in the last 20 years.**

to happen. Stem cells are slow to react, and in the body of someone who is chronically ill, they're even slower. The physicians at the Lung Institute realized this and developed an procedure to help stem cells do their job more efficiently.

The physicians extract a patient's own stem cells from blood or bone marrow tissue, separate them and return them intravenously. The cells then travel through the heart and straight to the lungs where they are trapped in what the Lung Institute explains as the pulmonary trap. That's when the cells should do their job and could help promote healing of the lungs, potentially improving lung function.

Nationwide, the company operates affiliate clinics in Tampa, FL; Nashville, TN; Pittsburgh, PA; Scottsdale, AZ and Dallas, TX. During the past three years, they have treated over 2,000 patients suffering from lung disease. A recent research study produced

by the clinic indicated that 82 percent of patients report an increase in quality of life after stem cell treatment, and 60 percent of those who took a pulmonary function test reported an increase in lung function.

For the 1.4 million Floridians with COPD, the mortality ranking of COPD is not as significant as their struggle to breathe and live their lives. After 25 years of the growing rate in COPD diagnosis and little medical advancement, it seems like now there may finally be hope on the horizon with the emergence of clinics like the Lung Institute and stem cell therapy.

If you or a loved one suffer from a chronic lung disease, the specialists at the Lung Institute may be able to help. You can contact the Lung Institute at 800-921-4631 or visit [lunginstitute.com/health](http://lunginstitute.com/health) to find out if you qualify for these new treatments.



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Whether you are interested in anti-aging skin treatments, skin tightening, wrinkle reduction, cellulite smoothing, body toning or targeted fat reduction, Swan Age Reversal Centers offers a unique and pleasant experience that delivers results without surgery or injections.

They offer multiple targeted fat reduction options with many clients seeing very rapid results. They also offer skin rejuvenation and anti-aging treatments to help restore your natural glow and slow the aging process. Swan Centers offer a wide range of customized services to help clients ages 35 to 90, look younger, thinner and more vibrant.

Swan Age Reversal Centers takes body enhancement where it was meant to be, combining health and beauty with cutting-edge science, exclusive techniques and impeccable service. They're driven by innovation in aesthetic beauty and are able to deliver an intimate and relaxing experience, complete with all the perks that only a premium establishment can offer.

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# Snowbird Finds Unmatched Care with Family Feel at CVSI!

By Gino Sedillo, M.D., FACC  
CardioVascular Solutions Institute

Imagine receiving such personal care from your doctor's office that you get a phone call every day just to see how you are feeling. Someone from the office calls your out-of-state family member to keep everyone updated on your progress. Treating an actual person, and not just a patient number, is exactly how Dr. Gino Sedillo and his staff approach caring for their patients.

Kathleen Harmon, an Indiana native with a vacation home here in Florida, enthusiastically shares her story of extraordinary care from Dr. Sedillo and the entire office staff at Cardiovascular Solutions Institute.

When looking back on the last twelve months, Kathleen exclaims, "Dr. Sedillo saved her life and the entire staff saved her sanity. Without Cardiovascular Solutions Institute, I would not be here to share my story."

Her doctor in Indiana discovered that Kathleen had a AAA (Abdominal Aortic Aneurysm) and told her that she needed to keep an eye on it because it was growing. Knowing that she was going to be spending time at her Florida home, Kathleen was referred to Dr. Sedillo. Kathleen went for her first visit to CVSI about a year ago and truly believes that it was the best decision she has ever made. Last April, she became very ill. She lost more than 80 pounds in a short time, and always felt nauseated and constipated. Kathleen recalls she honestly believed she was dying. "It was a very scary time. Dr. Sedillo and staff did more than treat my physical health; they talked with me and helped me through my darkest days with encouragement and support. Simply put, they became my family while caring for me."

While being treated in Indiana, Kathleen was put through test after test after test. In contrast, Dr. Sedillo knew that her kidney was very fragile and couldn't take multiple tests. "Even though he is an Interventional Cardiovascular physician, Dr. Sedillo took into consideration how multiple testing and procedures would affect other areas of



my body. He took charge and coordinated a treatment plan for my whole body, which prevented double testing and resulted in phenomenal care."

Kathleen also praised the staff for maintaining constant contact with her three children, whom all live in different states. This was invaluable to Kathleen and her family. "The staff explained everything in ways that made it easy for my family to understand. My loved ones always knew what was going on with my health and treatment. Also, I did not have the responsibility of having to contact them regularly and try to explain the updates or treatment plan. I could just be the patient and get well. This alone meant the world to me and prevented unnecessary worry and frustration."

"I feel so secure with the care that I receive from Cardiovascular Solutions Institute that we are in the process of transitioning from Indiana to making Florida my primary home. It would be great if every office hired caring professionals that sincerely want to help people and not just treat it as a job."



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Kathleen's physical and mental health has improved tremendously over the last 12 months. She admitted that just last year she wrote her eulogy and was prepared to have someone read it before the year's end. "Thanks to Dr. Sedillo and the entire Cardiovascular Solutions Institute office, I am excited to say that no one will be reading it for a long time. I just love them all to pieces. They literally gave me many years of life that I truly didn't think I would have." In fact, I'm feeling so great, I'm traveling to attend my sister's 50th wedding anniversary!

After Dr. Sedillo repaired the AAA with a closed, percutaneous procedure and placed several stents in blocked arteries, Kathleen is feeling much better and enjoying a better quality of life. Visit our website at [www.cardiovascularsolutionsinstitute.com](http://www.cardiovascularsolutionsinstitute.com) or call our office for information or to make an appointment (941) 747-8789.

## Dr. Gino Sedillo, M.D. F.A.C.C.

Born in Albuquerque, New Mexico, Dr. Sedillo is Board Certified in Internal Medicine, Cardiovascular Diseases and Interventional Cardiology, and has been a member of the American College of Cardiology since 1996. After 15 years of training, Dr. Sedillo started working for the Bradenton Cardiology Center in 1995. While there he performed more than 1,000 procedures per year and he began teaching procedures and techniques to other practicing cardiologists, vascular surgeons, and interventional radiologists. He served as Director of the cardiac catheterization lab at Manatee Memorial Hospital.

Most recently, in May 2011, Dr. Sedillo founded his independent practice, CardioVascular Solutions Institute, with offices in Sarasota and Bradenton. Since then Dr. Sedillo has been named director of the Percutaneous Coronary Intervention program at Doctors Hospital in Sarasota.

When he's not seeing patients, teaching other physicians or doing clinical research, Sedillo cherishes time with his three children.

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# Low Testosterone

By Dr. Mitch Yadvén

**H**ormones are chemicals made in your body that act on another part of the body after traveling through the bloodstream. Testosterone is a hormone which is naturally produced in both men and women but is found in much higher levels in men. The majority of testosterone is made in the testicles in men, with a small portion of it being made in the adrenal glands. In women it is made in the adrenal glands and ovaries.

Testosterone has been thought to be predominantly a “sex” hormone with the function of improving sex drive and helping maintain erections in men. Recent research has now shown testosterone to also have many other functions, including effects on metabolism, maintenance of bone strength, muscle integrity, cardiovascular health and support of the brain and cognition and mood, in both men and women. Additionally, evidence suggests testosterone deficiency can lead to other hormonal changes, which may then contribute to the development of type 2 diabetes. Lack of testosterone is also associated with decreased bone density and contributes to osteoporosis and osteopenia. Anemia, muscle weakness, impaired cognitive function, decreased motivational drive, fatigue, lethargy, and an overall decreased sense of well-being can also be seen in testosterone deficiency. Low testosterone levels are associated with increased mortality.

Circulating testosterone levels do fall with age; however, the rate of decline can be quite variable among individuals. A large number of men won't have their testosterone levels fall until around 70 years of age, whereas other men's levels will decline at a much younger age. For example, 20% of men older than 55 years of age will have low levels of testosterone. Bioavailable testosterone is the active form that has actual activity on the body's organs, which is only about 2% of a person's total testosterone. When bioavailable testosterone is measured, however, 50% of men above 50 years are defined as having low testosterone. This is why it is important to measure bioavailable testosterone when making clinical decisions about testosterone replacement.



## Men May Experience the Following, Secondary to Low Testosterone:

- Decreased Sex Drive
- Impotence
- Decreased Muscle Mass and Strength
- Increased Body Fat
- Memory Dysfunction
- Decreased Appetite
- Decreased Hair Growth
- Bone Weakness
- Decreased Red Blood Cells

Once the diagnosis of low testosterone (hypogonadism) is made, further testing should be pursued to help to determine the cause of the deficiency. Some causes can be:

- Aging
- Chronic Medical Conditions
- Acute Illness
- Alcohol Abuse
- Birth Defects
- Testicular Infection
- Testicular Trauma
- Head Trauma
- Medications
- Problems with the Pituitary Gland
- Environmental Toxins
- Chemotherapy
- Type 2 Diabetes
- Sleep Apnea

There is even evidence that nutritional deficiencies can contribute to low testosterone.

The medical history for evaluating low testosterone includes questioning about sexual desire, reduced nocturnal and morning erections, loss of drive, decreased physical energy, fatigue, depressed mood and irritability and even alterations in memory. One must realize that these symptoms as well as others reported by men with low testosterone, such as depression, difficulty concentrating, irritability, and insomnia are non-specific and may be related to other medical conditions as well.

Physical examination for this evaluation may or may not be helpful in making the diagnosis, as findings of low testosterone such as muscle weakness, reduced body hair, and abdominal obesity may also be seen in men with a number of other medical conditions. Additional findings may be small testicular size or poor consistency, abnormal hair distribution, and enlarged breasts.

After history and physical examination is done, the next step in the evaluation would be laboratory testing. Historically, two early-morning blood samples, drawn prior to 10 a.m. when blood levels are highest, are used to confirm the diagnosis of low testosterone.

Testosterone measurements can also be checked via salivary and urinary levels. The total testosterone can be used to calculate the free or bioavailable testosterone that is thought to be the active form of testosterone. Low levels can prompt the need for additional lab testing to check for potential causes of the low testosterone that may be correctable without testosterone replacement.

Testosterone can be converted to other hormones by different tissues in the body. These major hormones of interest are estradiol and dihydrotestosterone (DHT).





### Estradiol

In peripheral fatty tissues testosterone can be converted by the enzyme aromatase to estradiol, which is a primary form of estrogen. This is one of the reasons overweight men may have enlarged breasts. Significantly elevated estradiol levels in men have been linked to increased mortality and to diabetes.

### DHT

Another hormone converted from testosterone is dihydrotestosterone (DHT). In adult males the two actions of DHT are on the prostate, where it causes the growth enlargement and sometimes obstruction, as is noted in the disease benign prostatic hypertrophy (BPH). DHT also affects the scalp, where it causes hair loss as is seen in male pattern baldness. The enzyme that converts testosterone to DHT is called 5 alpha reductase and it has been targeted by medications like Proscar and Avodart to reverse prostate growth. On average, Proscar and Avodart reduce prostate size by 20–30% and can greatly reduce urinary frequency and urgency in many men.

DHT levels are checked after starting testosterone replacement and if they are markedly elevated, drugs like those that inhibit the formation of DHT can be utilized to prevent urinary symptoms that are associated with BPH and an enlarged prostate.

DHEA is another hormone that has some similar effects as testosterone. The majority of this hormone is made in the adrenal glands, and it also diminishes with aging and can be depleted by chronic stress. DHEA has been shown to protect against heart disease, osteoporosis, diabetes, cancer, memory loss, lupus, and rheumatoid arthritis. It can improve energy levels, libido, memory and immunity.

### Replacement

Once the diagnosis of low testosterone has been made, replacement options can be reviewed and a decision made about how to raise testosterone levels. Unfortunately, oral testosterone replacement is not an option due to the breakdown by the liver when it is swallowed and can cause liver toxicity. Other options include IM injections, patches, pharmaceutical gels, compounded creams, and implanted testosterone pellets. Although they all will deliver testosterone to the body, they each have their own pros and cons that can be reviewed by your doctor.

In younger patients a potential “kick start” may be needed to restart the body’s own natural testosterone production, and this can be done with injections of the popular weight loss medication which is also a natural hormone, HCG, or the medication Clomiphene.

After testosterone replacement has been started, it is very important to follow up and monitor testosterone levels as well as check other bloodwork to assure no possible complications arise. One such lab is PSA, which is used as a screening test for prostate cancer.

Although there is an association between prostate cancer and testosterone, it is an old belief that testosterone administration could increase the risk of developing prostate cancer. In reality there is no evidence to support this and in fact, now the medical community is investigating an association between low testosterone levels and prostate cancer.

It is still believed that if there is active cancer of the prostate, whether localized or metastatic, testosterone can promote cancer growth. Therefore, the presence of active prostate cancer is a reason not to use supplemental testosterone.

PSA still needs to be monitored closely during testosterone replacement therapy, especially in someone with a family history of prostate cancer. In cases of localized prostate cancer years after successful treatment, with no evidence of active disease as noted by PSA and examination, it is very reasonable to initiate testosterone therapy as long as very close followup is maintained.

Testosterone is a naturally occurring hormone, and replacement with its bioidentical form to restore physiologic levels can support a normal and happy sex life as well as improve well-being and quality of life and enhance longevity.



### Dr. Mitchell Yadven

Dr. Yadven was born and raised in the Bronx, New York. He received his undergraduate degree from Emory University in Atlanta, Georgia and a Masters degree in Molecular Biology from George Washington University in Washington D.C. After college, Dr. Yadven worked as a marine biologist for the Smithsonian Institute in both Washington, D.C. and the Caribbean. He then received his Medical Degree and General Surgery training at George Washington University. Wanting to return to the South, Dr. Yadven completed his Urology Residency at Tulane University in New Orleans, Louisiana. He is

Board Certified by the American Board of Urology. Dr. Yadven has been in private practice in Bradenton, Florida since 1997 and is happy to call Florida his home.

Dr. Yadven practices all aspects of general Urology, with particular interest in prostate disease, urinary stone management and minimally invasive therapies. He has developed products for the management of urinary retention resulting in a U.S. patent.

In his free time, Dr. Yadven enjoys photography and digital art, NFL football (he is a huge New York Giants and New Orleans Saints fan), computers, water sports and fun at home with his wife Sharon, his two children Sarah and Maxwell and his family’s animal menagerie.



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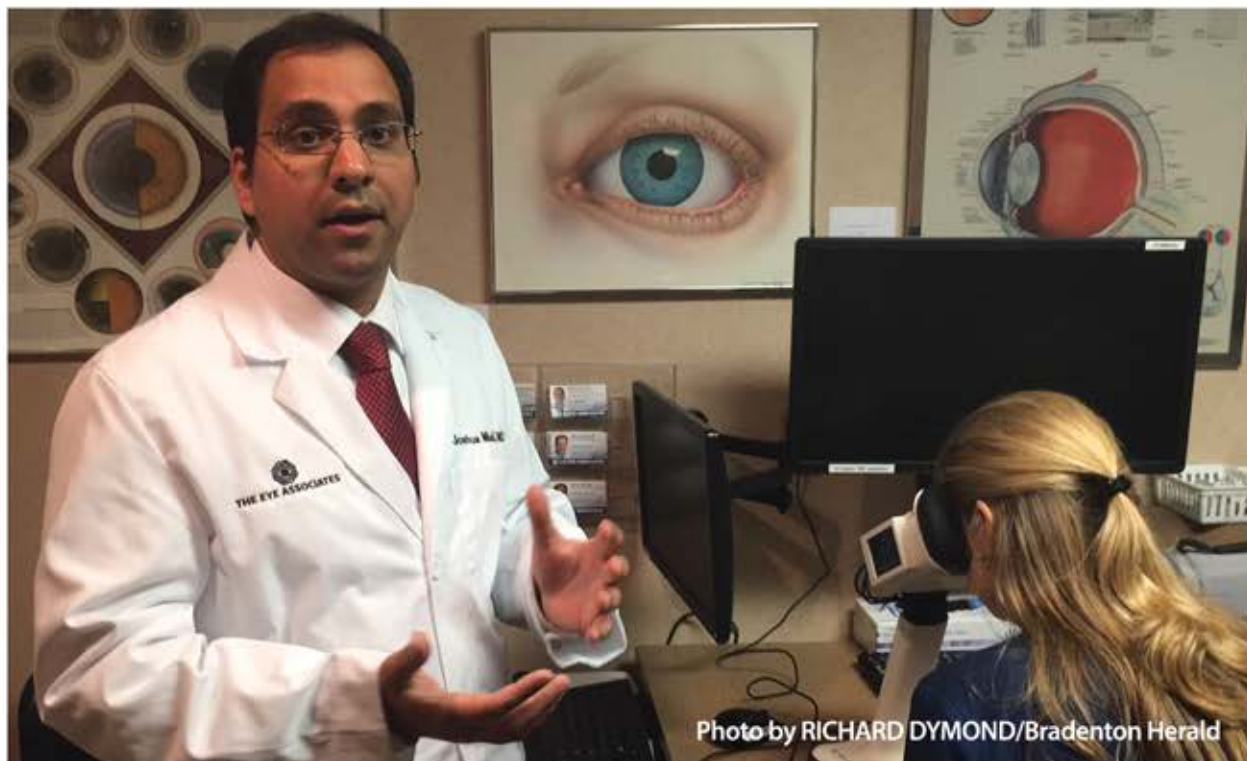


# Technological Breakthrough Brings Hope to Macular Degeneration Patients

*Medicare approves ForeseeHome, a Home-based Monitoring Program*

**A**ge-related Macular Degeneration (AMD) affects more than 1.75 million individuals in the US, and owing to the rapidly aging of the US population, it is expected that it will reach 3 million by 2020. A diagnosis of AMD causes anxiety because it's well known that significant vision loss can be a possibility, particularly if there is progression from the "dry" to the "wet" form of the disease. Fortunately, the earlier AMD is treated, the better the patient's final visual outcome will probably be. However, to have early treatment, true early detection is critical. Successfully recognizing the first signs that could indicate disease progression have been notoriously difficult to achieve...until now.

Starting some months ago, Dr. Joshua Mali, a Fellowship Trained Retina Specialist at The Eye Associates, began to study a piece of technology called The ForeseeHome AMD Monitoring Program, which was recently approved by Medicare. It is the first FDA-approved home-based monitoring system designed to monitor dry macular degeneration. Dr. Mali is one of the first doctors in this area to offer the benefits of this system to his patients. Patients use the ForeseeHome device by looking through a foam eye-piece for three minutes each day. From the comfort of their own homes, their results are automatically transferred to a monitoring center which then alerts the doctor to any change from a pre-established baseline. It's easy to use, since the device simply plugs into a power outlet, making an internet connection or computer unnecessary. Another advantage is that the manufacturer helps patients learn how to use the machine, and assists in their establishing an initial baseline by which subsequent results are measured.



Dr. Joshua Mali talks about the advantages of Foresee Home.

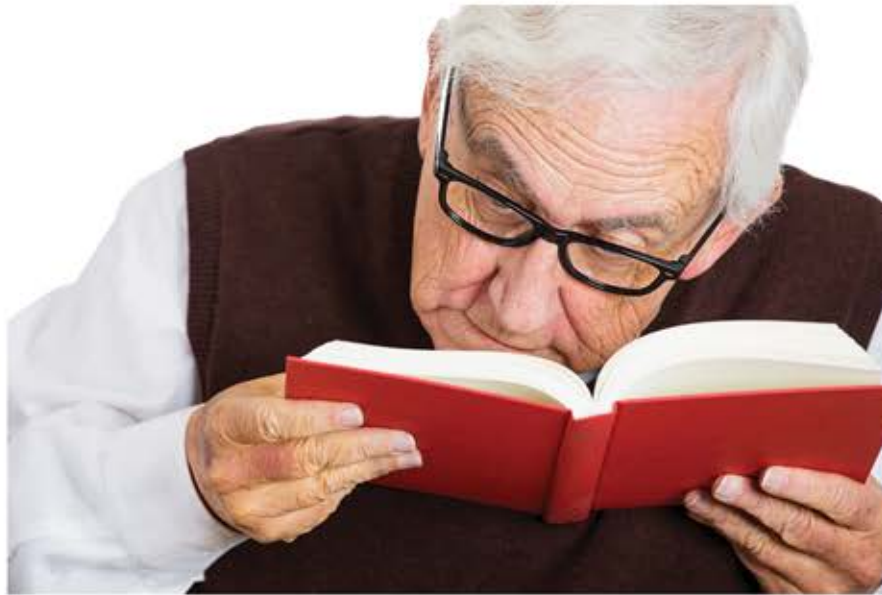
## AMD and The Difference between Wet and Dry AMD

Dr. Mali explains, "As we age, if we smoke or if genetics are not on our side, we may come down with age-related macular degeneration, which is the leading cause of severe vision loss and blindness in adults over age 50." The early stage is usually called *Dry* AMD, and is associated with the gradual deterioration of the macula. This part of the retina is responsible for detailed central vision tasks like reading, driving and facial recognition. "Patients with the dry form may progress to the wet type of AMD, in which blood vessels form and may leak fluid and blood onto the retina. Several studies indicate that early detection of warning signs of disease progression gives patients the best chance to start therapy and maintain good vision and a better quality of life," Mali added.

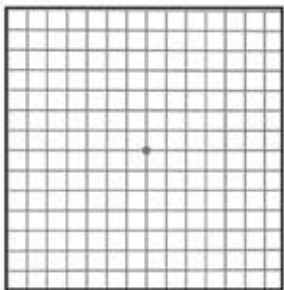
Prior to the invention of ForeseeHome, retina patients were given an Amsler Grid in order to check their eyes daily and record changes or distortions. They were instructed to cover one eye at a time and stare directly at the dot in the center of the gridlines. The patients themselves would determine whether or not changes were occurring in their vision by noticing if the lines were wavy or distorted. Sometimes uncertainty and difficulty in isolating the center dot from the rest of the page prevented the patient from reporting changes. Sometimes by the time changes were noticed, it was too late to protect good functional vision. "A key advantage to the machine is that it prevents the brain from masking or compensating for actual defects in the vision," said Dr. Mali. "It auto-reports the results, and is more sensitive than the Amsler Grid used in the past," he added.



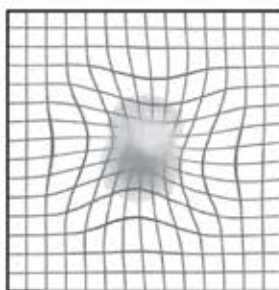
With regard to Forsee-Home, Dr. Mali commented, "The best part is that if the system notices a change in either eye from the baseline, it alerts me and I contact them to be examined. We will catch things sooner and have better outcomes." Making sure he knows exactly when his patients slip from dry to wet is important because the doctor can administer drugs to treat the wet form before sight is lost.



### THE AMSLER GRID



**Normal:**  
Lines appear  
straight



**Abnormal:**  
Lines appear  
shaded or distorted

The Amsler Grid is the traditional vision monitoring tool. The ForseeHome is an updated, more technologically advanced and more accurate way to monitor your vision for changes.

"There are exciting new medicines available now to fight wet AMD and they are effective if it is caught fast," Dr. Mali noted. "If time is lost, even days, a patient can lose their sight. The machine is sensitive to changes in vision caused by the leaking of fluid and blood onto the retina," he added.

Now that it is a Medicare-covered service, Forsee-Home is available to Dry AMD patients with a prescription. Always at the leading edge of technology, The Eye Associates is pleased to have this additional tool in its arsenal to fight vision loss. Patients can see Dr. Mali at their offices in West Bradenton and Sarasota.



**Our Physicians - L to R:** Charles Anthony II, MD; David M. Rubin, OD; Michael Camp, OD; Edwin Detweiler, OD; Joshua Mali, MD; Jeffrey Kasper, MD; Robert Friedman, MD; Richard Hector, MD; Cathleen McCabe, MD; Lori Ann Long, OD; Brian Foster, MD; Todd Berger, MD; Scott Han, OD; Robert Rego, OD



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# BREEZE THROUGH ALLERGY SEASON WITH PROPER CARE

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

**A**pril showers bring May flowers and pollen! For those who suffer with seasonal allergies, there is no need to announce that spring allergy season is upon us because you are likely already experiencing some of the unwanted symptoms. But don't worry, there are ways to fight the annoyance so you can be as allergy-free as possible this year.

Sometimes it is hard to distinguish whether the symptoms you are experiencing are due to a cold or allergies. The clear difference between the two is colds usually tend to be short-lived whereas allergies can run for weeks or even months. Also, allergies don't cause fevers and aren't bacterial infections. The most common allergy is pollen, which causes symptoms to flare-up due to the pollen grains floating through the air. Allergies tend to occur when the seasons change and you may notice your allergies approaching at almost the exact same time every year.

Those who can tell the seasons changed without even looking at the calendar experience some of the following symptoms:

- Runny and stuffy nose
- Watery eyes
- Sneezing
- Sore throat
- Coughing
- Itchy eyes and nose
- Dark circles under the eyes
- Fatigue

Allergies occur when our immune system responds abnormally to these allergens, releasing substances such as histamine. It is not exactly clear why some people's immune systems react this way.







### Treating Seasonal Allergies

There are many measures that can be taken to treat seasonal allergies. Avoidance is key. If your allergy symptoms are severe, stay indoors as much as possible when the pollen count is high. During the spring, it may be a good idea for those with allergies to change their clothing after being outside for extended periods of time because pollen lingers on fabrics long after going inside. It is also recommended that you keep your windows closed when the pollen count is high. The pollen count is measured by several organizations and can be easily found online for free. It is also sometimes reported on the local news.

There are several over-the-counter options available that are effective for controlling mild to moderate allergy symptoms. When choosing which over-the-counter product to use, keep the following information in mind. Antihistamines reduce sneezing, sniffing, and itching by blocking the action of histamine (the substance produced during an allergic reaction) in the body. Decongestants clear mucus out of the nasal passageways to relieve congestion and swelling. Decongestants may elevate blood pressure and heart rate, so check in with your doctor to make sure that it is safe for you to take these.

Eye drops will relieve itchy eyes and prescription nasal sprays can be used to stop inflammation that causes the allergic reactions of sneezing and runny noses.

Even though you can buy some allergy medications without a prescription, it's a good idea to talk to an physician first to ensure sure you choose the right medication for your specific symptoms. Always remember to read the packaging label as some of these products are only meant to be used for a few days.

While eye drops, nasal sprays and over-the-counter products may be effective for some, others may desire relief without any type of medication. If you find prefer to treat symptoms more naturally, using saline sprays and cleaning the nasal passage with a Neti pot may help alleviate allergy symptoms.

If seasonal allergies are affecting your ability to enjoy the outdoors, seek professional treatment for your allergy symptoms from the nearest Urgent Care Center.

Our practitioners can offer tips on how to breeze through allergy season and prescribe medication if needed. Taking medicine may not be enough in some cases, which is why we also educate our patients on proactive ways to avoid allergy flare-ups.

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# Effective & Proven Chronic Pain Relief with VAX-D

By Craig S. Aderholdt, BSc, DC

**V**AX-D, short for Vertebral Axial Decompression, is a patented non-surgical therapy proven to successfully treat chronic low back pain, caused by prolapsed, bulging, herniated or degenerative discs, facet syndrome, stenosis and sciatica. Even post-surgical patients and those suffering from central canal or foraminal stenosis have reported significant pain relief with VAX-D therapy. Over a series of relaxing treatment sessions, patients experience powerful pain reduction and healing. Some patients even notice relief after just one visit.

VAX-D's proven and patented technology is currently being utilized by leading physicians in orthopedic medicine, pain medicine, neurology and other specialties in hundreds of clinics around the world. Many doctors choose VAX-D over other devices because it employs the original, patented technology from which decompression therapy was born. VAX-D effectiveness is backed by clinical research. Back pain has grown to be a \$54 billion industry and has literally become a national epidemic. Due to the astounding array of varied treatment options, finding a back pain solution can be a daunting task. Knowing that a product backs its claims with clinical research makes all the difference, and that is what VAX-D offers. A recently completed 2 1/2 year study has demonstrated that VAX-D achieved a remarkable 88% success rate in the 283 chronic back pain patients studied! The patients selected for the study had been unsuccessful at finding relief with at least two previous non-surgical treatments.



VAX-D is not to be confused with traction. VAX-D lengthens and decompresses the spine, reversing high intradiscal pressure through the application of negative pressure via a patented "slow ramp-up" process. This reversal of pressure creates a vacuum inside the discs that not only takes pressure off of pinched nerves, but helps to reposition bulging discs and pull extruded disc material back into place. Simultaneously, nutrients, oxygen and fluids are drawn into the disc to create a revitalized environment conducive to healing. VAX-D stimulates the body's repair mechanism, providing the building blocks needed to actually mend injured and degenerated discs. VAX-D's process is the only patented treatment clinically proven to decrease disc pressures to the negative levels needed to facilitate healing!

### How does VAX-D work?

High intradiscal pressures cause discs to bulge out and press painfully on nerve roots. They also make for a compressed, anaerobic environment unsuitable for healing. Decompression produces and sustains negative pressures within the disc, creating a vacuum effect which draws in nutrients and fluids to promote the repair of injured discs and surrounding tissues. This vacuum has also been shown to aid in the retraction of escaped cushioning gel from herniated discs. Much like gauging the air pressure in a car tire, scientists have been able to use pressure sensors to measure the various pressures put on spinal discs while lifting, standing, sitting, lying down, undergoing traction, and during VAX-D Therapy. Like other pressures found in the body such as blood pressure, intradiscal pressure is measured in millimeters of mercury (mmHg). While traction, physical therapy and manipulation may reduce disc pressures to as low as 40 traction, physical therapy mmHg, only VAX-D has been shown to achieve negative pressures within the spine. Clinical studies have shown that, with VAX-D Therapy, negative pressures as low as -160 mmHg\* are created within the injured disc during the treatment session!

The key to the "distraction" of VAX-D is achieved through an intricately timed series of pulls, holds, and releases over the course of a treatment session. VAX-D's biofeedback system adjusts this curve of tension specifically to each patient's needs, making every session a truly individualized treatment.

VAX-D Therapy involves three phases that repeat fifteen times throughout a treatment session: the Decompression Phase, the Retraction Phase, and finally, the Rest Phase. During the Decompression



Phase, tension slowly mounts, lengthening the spine; up to 99 pounds of tension may be exerted directly on the injured discs. This is where spinal pressures drop and decompression actually occurs. During the Retraction Phase, tension is slowly decreased and the spine is retracted slowly. This is followed by a short Rest Phase.

### Is VAX-D Right for Me?

*You may be a candidate for VAX-D if:*

- You have chronic and/or severe back and/or neck pain caused by bulging or herniated discs, degenerative disc disease, sciatica, and/or facet syndrome.
- You have been diagnosed with a clinically unstable low back.
- You have failed back surgery syndrome.
- You have been told to consider surgery.

Many patients have experienced more than a 50% reduction in pain after their first treatment! For those suffering from herniated and degenerated discs, the escaped nucleus pulposus may be partially or completely retracted back into the disc after just the first session (though usually it takes longer), relieving a great deal of pain. However, pain reduction does not indicate full recovery, and a full recovery is essential to preventing re-injury. Each treatment session lasts approximately 45 minutes. A typical VAX-D treatment regimen consists of about 20 sessions. Some conditions require fewer visits; some require more. Many patients report relief from their pain and other symptoms during the first

few treatment sessions, and most experience dramatic pain relief after completion of their prescribed VAX-D Therapy program.

VAX-D therapy is a non-surgical procedure to reduce pain by decompressing your spine and reducing the stress and pressure on your discs and spinal nerves. Contact Dr. Craig Aderholdt, at **941-756-5528** for a **free consultation** to see if you are a candidate for this revolutionary procedure. We hope you enjoy the information within and share it with others. Contact Dr. Aderholdt today to find out if you can finally relieve your pain and suffering with this proven safe and effective nonsurgical breakthrough for neck and back pain..



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**Dr. Craig S. Aderholdt, BSc, DC**



*At Back Pain Institute of West Florida, located in Bradenton, FL, our number one concern is to help our patients with a natural approach to pain treatment. Dr. Craig Aderholdt, BSc, DC, received his undergraduate degree from Pennsylvania State University State College, and his Doctor of Chiropractic from life University School of Chiropractic in Marietta, GA. He then later graduated Cum Laude.*

*Dr. Aderholdt also holds certification in chiropractic adjunctive physiotherapy from New York Chiropractic College and completed extensive postgraduate training in therapeutic modalities at National-Lincoln School. He is a member of the Florida Chiropractic Association and American Chiropractic Association and is a certified VAX-D consultant. He was also voted a Bradenton Herald People's Choice Awards Winner for 2008 and is the Manatee Herald-Tribune Awards winner for 2015.*



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# How to Handle TMS...

# Tired Mom Syndrome

By Nancy Jergins  
iMOM.com

If you've never heard of TMS, you've probably had it—Tired Mom Syndrome. I coined the phrase after laughing with my children about my late evening fatigue that sets in after long days of running around and doing the things mothers do. The symptoms? A higher level of irritability. The desire to sequester one's self from the noise of loud children. And the slower movement associated with a tired body and mind!

I started joking about TMS because I wanted to help my children understand that even moms have limits. I explained to them that I love them very much, but that by the end of the day I don't have quite as much patience. I let them know that I can't handle a lot of craziness at this point in my day, and I ask them to please tone it down just a bit. I tried to help them relate by pointing out that neither one of them likes to be awakened in a loud, forceful way. I told them that's how I feel in the evening; I need a gentle approach, too.

## Here's how to handle tired mom syndrome.

### 1. Pause before you lose it.

My children were in rare form on the way home from school the other day. They were loud, antsy, and were pretty much just letting off steam from a long day of studies. We were about a block from home when I felt myself near the point of losing it. I did not want to say something I would regret later. So I asked them to get out of the car and walk home. Well actually, I firmly told them to please get out of the car... now.

That little bit of alone time helped me pull it back together, and we laughed about the situation. A better outcome than if I had lost it in the car. (And don't worry, they were on the sidewalk and I was keeping an eye on them in the rearview mirror.)



### 2. Act like a baby.

While I was on a walk with a good friend the other morning, we started talking about naps. We both observed that TMS is much more likely to strike when we're tired. Enter the nap. It can be as short as 10 minutes, but if you can get in a good half hour every now and then, do it. You'll think better. You'll have more patience. You'll be nicer to your children. My friend told me that she's stolen a quick nap in the school pickup line!

If you can't slip a nap into your day, try to get enough sleep at night. I know, it's tough. There is always one more thing to do at night that keeps us from hitting the hay. But try not to go too many nights without getting good rest.

### 3. Cut back.

I woke up this morning at 3:30 and could not go back to sleep. My mind was spinning with the appointments I needed to schedule, the bills I

needed to pay, and the clothes—lots of clothes—I needed to fold. To beat TMS, you have to cutback on worry. Worry compounds TMS. But cutting back on worrying is easier said than done. Still, here's what helps: Pray. Ask God to help you realize that there is only so much you can do. A lot of things are out of your control. Those are the things that worry is wasted on. Cut out some of your responsibilities, if you can. I went through my duties and jettisoned the ones that were taking up too much of my energy and gave little reward.

So the next time you get TMS, try the steps above for relief, and let me know if they help!



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# Smoking and Reproduction

For many reasons, men and women who want to have children should not smoke. Studies suggest that smoking affects hormone production. This could make it more difficult for women smokers to become pregnant. Pregnant women who smoke or who are exposed to secondhand smoke endanger their unborn babies, as well as their own health. Babies whose mothers smoked during pregnancy or who are exposed to secondhand smoke after birth are more likely to die of sudden infant death syndrome (SIDS) than are babies who are not exposed. More than 100,000 of the smoking-caused deaths over the last 50 years were of babies who died from SIDS or other health conditions. Deadly chemicals in cigarette smoke reached these infants before they were born, or when they were exposed to cigarette smoke during infancy.

## Pregnancy Complications

More than 400,000 babies born in the United States every year are exposed to chemicals in cigarette smoke before birth because their mothers smoke. Smoking is known to cause ectopic pregnancy, a condition in



which the fertilized egg fails to move to the uterus and instead attaches in the fallopian tube or to other organs outside the womb. Ectopic pregnancy almost always causes the fetus to die and poses a serious risk to the health of the mother. Another possible complication from smoking during pregnancy is miscarriage.

Mothers who smoke during pregnancy are more likely to deliver their babies early. Preterm delivery is a leading cause of death, disability, and disease among newborns. Mothers who smoke during pregnancy are also more likely to deliver babies with low birth weight, even if they are full term.

Carbon monoxide in tobacco smoke keeps the fetus from getting enough oxygen. Smoking during pregnancy can also cause tissue damage in the fetus, especially in the lungs and brain. This damage can last throughout childhood and into the teenage years.

## Birth Defects

Smoking during pregnancy can cause birth defects. Women who smoke during early pregnancy are more likely to deliver babies with cleft lips and/or cleft palates—conditions in which the lip or palate fails to form completely. Both conditions interfere with an infant's ability to eat properly, and both must be corrected with surgery.

## Male Reproduction and Sexual Function

In the United States, 18 million men over age 20 suffer from erectile dysfunction (ED). A man with ED can't have and maintain an erection that is adequate for satisfactory sexual performance, which can affect reproduction. Recent evidence concludes that smoking is a cause of ED. Cigarette smoke alters blood flow necessary for an erection, and smoking interferes with the healthy function of blood vessels in erectile tissue.

Men need healthy sperm for fertility. Smoking damages DNA in sperm, which can lead to infertility or early fetal death.

Source: Surgeon General's Report  
cdc.gov/tobacco



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MILLION  
MALES**

—OVER AGE 20—

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DYSFUNCTION (ED)**



**SMOKING IS A CAUSE OF ED**

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# May is Food Allergy Action Month!

## How Many People Have Food Allergies?

- Researchers estimate that up to 15 million Americans have food allergies.
- This potentially deadly disease affects 1 in every 13 children (under 18 years of age) in the U.S. That's roughly two in every classroom.
- The economic cost of children's food allergies is nearly \$25 billion per year.

## Food Allergies on the Rise

- According to a study released in 2013 by the Centers for Disease Control and Prevention, food allergies among children increased approximately 50% between 1997 and 2011.
- The number of people who have a food allergy is growing, but there is no clear answer as to why.
- Researchers are trying to discover why food allergies are on the rise in developed countries worldwide, and to learn more about the impact of the disease in developing nations. More than 17 million Europeans have a food allergy, and hospital admissions for severe reactions in children have risen seven-fold over the past decade, according to the European Academy of Allergy and Clinical Immunology (EAACI).

## FOOD ALLERGIES IN THE U.S.

**15 MILLION**

Americans have food allergy, a serious medical condition.



People can be allergic to any food, but there are

**8 FOODS THAT CAUSE THE MOST REACTIONS.**



Milk



Eggs



Peanut



Tree Nuts



Soy



Wheat



Fish



Shellfish

## Food Allergy Reactions & Anaphylaxis

• Every 3 minutes, a food allergy reaction sends someone to the emergency department – that is more than 200,000 emergency department visits per year.

• A reaction to food can range from a mild response (such as an itchy mouth) to anaphylaxis, a severe and potentially deadly reaction.

• The U.S. Centers for Disease Control reported that food allergies result in more than 300,000 ambulatory-care visits a year among children under the age of 18. Food allergy is the leading cause of anaphylaxis outside the hospital setting.

• Once an anaphylactic reaction starts, a medication called epinephrine is the first line of defense to treat the reaction, and you should immediately seek emergency medical attention by calling 911. You can protect yourself by learning the symptoms of allergic reactions and knowing what steps to take if you have a severe reaction.

• Teenagers and young adults with food allergies are at the highest risk of fatal food-induced anaphylaxis.

• Individuals with food allergies who also have asthma may be at increased risk for severe/fatal food allergy reactions.

• Symptoms of anaphylaxis may recur after initially subsiding and experts recommend an observation period of about four hours to monitor that the reaction has been resolved.

• It is possible to have anaphylaxis without any skin symptoms (no rash, hives).

• Failure to promptly (i.e., within minutes) treat food anaphylaxis with epinephrine is a risk factor for fatalities.



# You could save a life...

Learn the symptoms of an allergic reaction.

*Anaphylaxis is a serious, potentially fatal allergic reaction. Symptoms of an allergic reaction can range from mild to severe, and can include one or more of the following:*

**Mouth:** swelling (tongue and/or lips), itchy mouth, blue-tinged lips

**Throat:** trouble breathing/swallowing/speaking, tightness, hoarseness

**Lungs:** repetitive cough, shortness of breath, wheezing

**Heart:** faintness, weak pulse, dizziness, confusion, paleness

**Skin:** hives, itchy rash, swelling, flushing

**Gut:** vomiting, diarrhea, crampy pain

**Other:** sense of impending doom, loss of consciousness

If you observe signs of an allergic reaction, get help immediately. **If you suspect anaphylaxis, administer prescribed epinephrine and call 911.**

## Foods Commonly Associated with Food Allergies

- Eight foods account for 90 percent of all reactions: milk, eggs, peanuts, tree nuts, soy, wheat, fish and shellfish. Even trace amounts of a food allergen can cause a reaction.

## Food Allergy Risk Factors and Related Diseases

- Food allergies affect children and adults of all races and ethnicity.
- A food allergy can begin at any age.
- Your risk of having food allergies is higher if you have a parent who suffers from any type of allergic disease (asthma, eczema, food allergies, or environmental allergies such as hay fever).
- Children with food allergies are 2-4 times more likely to have other related conditions such as asthma and other allergies, compared with children who do not have food allergies.
- Food allergies may be a trigger for or associated with other allergic conditions, such as atopic dermatitis and eosinophilic gastrointestinal diseases.

## Can You Outgrow a Food Allergy?

- Peanut and tree nut allergies, which also tend to develop in childhood, usually are lifelong. In the U.S., approximately three million people report allergies to peanuts and tree nuts. Studies show the number of children living with peanut allergy appears to have tripled between 1997 and 2008.
- Cow's milk, egg and soy allergies typically begin in childhood and eventually may be outgrown. In the past, most children outgrew these allergies by school age. A recent study, conducted by researchers at Johns Hopkins University School of Medicine, indicated that children are taking longer to outgrow milk and egg allergies. Fortunately, the majority are allergy-free by age 16.
- Fish and shellfish allergies also tend to be lifelong. More than 6.5 million adults are allergic to finned fish and shellfish.

## Is There a Cure?

- There is no cure for food allergies. Strict avoidance of food allergens and early recognition and management of allergic reactions to food are important measures to prevent serious health consequences.

Source: Foodallergy.org



# Understanding & Effectively Managing Your Chronic Limb Swelling

By Alyssa Parker

**A** compression pump is widely recognized as effective treatment option for limb swelling. Compression pumps are a safe way to assist your body's circulatory system in moving the excess fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility. The compression pump is a gentle massaging technique that compresses in a rhythmic cycle, similar to that of a normally functioning lymphatic system that has not been damaged. This is a great treatment option for patients who have tried compression stocking, elevation, diuretics, or massage with little or no relief. This is a non-invasive, safe and effective way to assist your body's circulatory system in moving the excess fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility.

The 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. If the lymphatic system is obstructed causing damage, blocked, or developed abnormally, protein-rich fluid accumulates in the tissues, the potential result may be chronic swelling known as Lymphedema.



The venous system is comprised of two parts deep circulation and superficial circulation, which are interconnected by perforating veins. The venous system is an important component to your body's circulatory system delivering blood to the heart then passing back through the lungs to obtain oxygen to deliver back to the lower limbs of the body. Chronic venous insufficiency (CVI) involving both parts of the venous system is caused by incompetent valves and venous hypertension. Patients may experience swelling, discoloration and skin ulceration. Chronic skin ulcerations are common due to the low oxygen making it difficult to heal.

Lymphedema and CVI may cause irreversible damage to the body if not treated appropriately in an efficient manner.

## Compression Pump: Preferred Treatment Option

Many individuals attempt to manage their limb swelling through various treatments such as compression stockings, exercise, diuretics, and elevation with little or no results. Pneumatic compression devices are one of the most highly recommended treatments for these conditions and are recognized by Medicare.

The compression pump is also beneficial to patients with reduced strength and dexterity who have a difficult time getting extremely tight compression stockings on each leg. The garment sleeves that attach to the pump are quick and easy to put on.

## When should I see a doctor?

If you're experiencing swelling and discomfort in a limb don't let it go untreated seek help today.

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

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

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

The compression pump is recognized by Medicare and covered by many commercial insurers; Actual coverage varies with individual plans. Acute Wound Care, LLC is a highly focused local provider of wound products and compression pumps working with select area physicians highly versed in this condition. Our highly trained staff will assist you in finding the appropriate treatment that will offer you a better quality of life.

For more information and articles on this topic, Google "Acute Wound Care" or visit [www.AcuteWoundCare.com](http://www.AcuteWoundCare.com) or call 239-949-4412 and speak with a specialist.



## ACUTE WOUND CARE

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# OSTEOARTHRITIS OF THE KNEE - WHY SUFFER NEEDLESSLY?

By Physicians Rehabilitation

**O**steoarthritis (OA) is a common illness that causes joints to become stiff and extremely painful. If you have been diagnosed with OA you are not alone. Over 27 million people in the United States alone are reported to have this condition!

Though OA can affect multiple joints in your body, it is most common in the knees, hips, hands, feet and spine. OA causes the smooth cartilage that covers and protects the ends of your bones to break down which can cause your bones to begin to rub together. With knee OA your knee joint is no longer able to naturally lubricate itself and the cartilage no longer cushions the joint like it once did. This results in stiffness, swelling, and pain that can make walking very difficult.

## Common Symptoms of OA

- Knee pain when moving, standing, or sitting
- Loss of flexibility in the knee
- Redness and swelling in the knee area

## What Causes OA of the Knees?

The actual cause of OA is unknown. However, there are many things that will contribute to getting the disease. Anyone can get OA of the knees, but it is most common in people over the age of 65. The associated conditions of OA include getting older, obesity, previous injury to the knee, or a sports-related injury. OA affects women more than men.

## Treatment of Osteoarthritis

The physicians and knee pain specialists at Physicians Rehabilitation use a highly effective, natural osteoarthritis treatment called Supartz, which provides welcomed pain relief for OA sufferers.

**Over 99% of patients who utilize our osteoarthritis knee pain protocol receive significant pain reduction, with an average of 77% in reduced pain!\***

Supartz is hyaluronate that is injected directly into your knees by a physician. Supartz is an FDA approved hyaluronic acid that is used to treat osteoarthritis (OA) and the associated knee pain. Hyaluronic Acid is a natural substance that is found in large amounts in your joint tissues and joint fluids. It acts as a lubricant and shock absorber inside your knee joint and enables your knees to properly operate. Its formulation is from nature, derived from the rooster comb, purified, sterilized and cross linked to match the viscosity of your naturally occurring synovial fluid.

## Benefits of Supartz Injection Therapy Include:

- Months to years effective pain relief
- Prevents further damage by replacing joint fluid
- Approved by the FDA for OA treatment
- Naturally-derived formulation

## How Supartz Works

Supartz is injected by a physician directly into the knee joint using video fluoroscopy (live x-ray) imaging for superb accuracy. When injected, it immediately lubricates the joint and acts as a barrier against bone-on-bone grinding. In doing so, Supartz reduces the source of inflammation and damage caused by grinding and provides long-term pain relief for OA patients.

## What to Expect from the Procedure

The knee injections are administered by a physician during a brief office visit. A typical treatment involves the OA patient receiving one injection per week for 5 weeks to achieve the maximum benefit from the treatment, coupled with individually designed physical therapy for creating superior joint healing.

## Typical Supartz Injection Session Process

- Sterilization of the knee area
- Small amount of numbing medicine applied
- Lidocaine internal numbing
- Iodine (or other contrast dye) is injected to verify perfect Supartz placement within the synovial capsule
- Video fluoroscopy used to insure a precise injection administered (without use of this method there is a significant chance of missing the synovial capsule and losing benefit of the injection)
- Once completed, the patient is free to resume their normal daily activities

## Little or No Side Effects

Though it can only be administered by a physician, Supartz is a naturally derived substance that is not considered a drug. The most common adverse effects reported are injection-site swelling and irritation, like any injection point you may have encountered.

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# EXPLOITATION OF THE ELDERLY

By James W. Mallonee

I am frequently asked what someone should do if they are fairly sure that their loved one is being taken advantage of at the hands of a neighbor, son, daughter, sibling or care giver. The simple answer is to call Florida's Department of Children and Families (DCF) hotline and report your suspicion of elder abuse. Alternatively, you could institute a guardianship to protect the person who is being abused, but this can get expensive and may not result in the protection desired. Another alternative is to seek out a lawyer who can investigate and may file a lawsuit under Florida's Adult Protective Services, Chapter 415, Florida Statutes.

Florida's Adult Protective Services statute is designed to protect the elderly and disabled from exploitation by others. The statute even provides what the legislature was thinking when the law was written. Here is a sample of that language:

"It is the intent of the Legislature to provide for the detection and correction of abuse, neglect, and exploitation through social services and criminal investigations and to establish a program of protective services for all disabled adults or elderly persons in need of them."

The statute protects an elderly and infirm person who is now in the last remaining years of life and has accumulated enough wealth to live those years out comfortably; but, is the target of a third party who has managed to convince the elderly person to hand over those last few thousand dollars by intimidation, threat, or undue influence.

Chapter 415 of the Florida Statutes defines "exploitation" as a person who:

1. Stands in a position of trust and confidence with a vulnerable adult and knowingly, by deception or intimidation, obtains or uses, or endeavors to obtain or use, a vulnerable adult's funds, assets, or property with the intent to temporarily or permanently deprive a vulnerable adult of the use, benefit, or possession of the funds, assets, or property for the benefit of someone other than the vulnerable adult; or



2. Knows or should know that the vulnerable adult lacks the capacity to consent, and obtains or uses, or endeavors to obtain or use, the vulnerable adult's funds, assets, or property with the intent to temporarily or permanently deprive the vulnerable adult of the use, benefit, or possession of the funds, assets, or property for the benefit of someone other than the vulnerable adult.

(b) "Exploitation" may include, but is not limited to:

1. Breaches of fiduciary relationships, such as the misuse of a power of attorney or the abuse of guardianship duties, resulting in the unauthorized appropriation, sale, or transfer of property;
2. Unauthorized taking of personal assets;
3. Misappropriation, misuse, or transfer of moneys belonging to a vulnerable adult from a personal or joint account; or

4. Intentional or negligent failure to effectively use a vulnerable adult's income and assets for the necessities required for that person's support and maintenance."

As you can see the definition of exploitation is very broad with its focus on protecting an elderly or disabled person from being manipulated by a third person for their personal benefit and not the infirm person's benefit. So how does exploitation occur?

The general consensus seems to be that exploitation of an elderly person is not a family member, but a friend or neighbor who hides behind the classic shield of being showered with gifts from the elderly person because the infirm individual is convinced that their children want nothing to do with them or that their children are conspiring to place them into a nursing home. In many cases this is simply a fabricated story to isolate the infirm and elderly person from the truth.



The exploiter (e.g. a caretaker) isolates the elderly person by not allowing him or her to communicate or socialize with their friends. When family or friends call or visit, the exploiter intercedes and tells them that all is well and typically will interject themselves into any conversation such friends and family members attempt to have with the elderly person. The classic case is an exploiter who prevents the elderly person from answering any questions placed before him or her by speaking for them. In short, the infirm person never speaks because the exploiter has seized control of the conversation. In addition, when family or friends pre-schedule a visit, the exploiter makes certain that the elderly person is out of the house or answers the door stating that the elderly person is resting and that he or she will call them (which never occurs) upon waking.

This is a slow process that takes place over an extended period of time. The isolation eventually causes the elderly person to submit to the exploiter's propaganda that they are all that the elderly person has in the form of friends. Furthermore, the exploiter continually suggests that the elderly person's family and close friends have abandoned them and without the exploiter's help the elderly person will be placed in a nursing home to wither away. Lacking any outside influences to expose the exploiters charade, the elderly person is eventually convinced of the family and friend's fabricated conspiracy.

The legislature has provided two means of protecting the elderly from such abuse and exploitation. One is through a civil complaint and the

other is criminal. Chapter 415 is a civil remedy and not criminal. There is a separate statute for criminal abuse and exploitation of the elderly which is not within the scope of this article. Suffice it say, the legislature provided a very broad means of bringing an exploiter to civil court and letting the judicial system decide if the elderly person has been the subject of neglect, abuse or exploitation. The legislature provided that the elderly person may recover actual and punitive damages for such abuse, neglect, or exploitation. More importantly, persons who can bring a civil complaint for exploitation of an elderly person include the exploited person as well as that person's guardian, or organization acting on behalf of the exploited person, or by the personal representative of the estate of a deceased victim without regard to whether the cause of death resulted from the abuse, neglect, or exploitation of the infirm person.

As you can see, Chapter 415 of the Florida Statutes provides a means for the elderly and disabled person to fight back and recover their lost funds and dignity. If you believe that you or a loved one has been the victim of misappropriation, abuse or neglect to one's person or property; or, that your parent has been victimized by a third party, please contact the Department of Children and Family Services or your attorney who can investigate your claims and recover misappropriated funds as well as the last remaining dignity that an infirm person possesses.

.....  
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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## May is High Blood Pressure Education Month &amp; Stroke Awareness Month

# High Blood Pressure and Stroke

**B**lood pressure measures the force your blood exerts on blood vessel walls as it travels through your body. Your blood pressure reading has two numbers (for instance, 120/80). The first number is the systolic blood pressure, and measures the force your blood exerts on blood vessel walls as your heart pumps. The second number is the diastolic blood pressure, and measures the force your blood exerts on blood vessel walls when your heart is at rest between beats.

## What is high blood pressure?

For people over age 18, ideal blood pressure is considered 120/80 or lower. Blood pressure varies with exercise or stress. A blood pressure reading that is often higher than 120/80 is considered pre-hypertension. High blood pressure or Stage One hypertension is measured at 140/90 or higher. If you have had a previous heart attack, stroke, are diabetic, have kidney disease, high cholesterol, or are overweight, speak with your physician about controlling and lowering your blood pressure. Keeping your blood pressure below 140/90 may reduce your risk of any complications.

As many as 50 million Americans age six and older have high blood pressure. Of the one in every four adults with high blood pressure, 31.6 percent do not know that they have it.

## How is high blood pressure related to stroke?

High blood pressure is the most common risk factor for stroke. Doctors call high blood pressure “the silent killer” because you can have high blood pressure and never have any symptoms. If it is not treated, high blood pressure can lead to stroke, heart attack or kidney failure.

High blood pressure puts stress on blood vessel walls, causing them to thicken and deteriorate, which can lead to a stroke. It can also speed up several common forms of heart disease.

When blood vessel walls thicken, cholesterol or other fat-like substances may break off of artery

walls and block a brain artery. In other cases, the increased stress can weaken blood vessel walls, leading to a vessel breakage and a brain hemorrhage.

## What causes high blood pressure?

In most cases, it's impossible to pinpoint an exact cause of high blood pressure. There are, however, some factors that have been linked to high blood pressure, such as: Family history of high blood pressure:

- **Age** – the rate of high blood pressure rises in men after age 35 and in women after age 45
- **Gender** – Men are more likely to have high blood pressure than women
- **Race** – Approximately 33 percent of African-Americans have high blood pressure, compared to 25 percent of Caucasians
- **Other factors** linked with high blood pressure include excess weight, high alcohol consumption, diabetes, lack of exercise, and a high-salt diet.

## How can high blood pressure be treated?

In most people, high blood pressure can be controlled through diet, exercise, medication, or a combination of all three.

A diet that is low in salt and rich in vegetables, fruits, and low-fat dairy products may help lower your blood pressure. Recent studies have also shown that increasing potassium intake may help lower blood pressure.

A program of regular **exercise** – appropriate to your age and fitness level, and approved by your health care provider – can lower blood pressure, and may aid in weight loss.



Stroke is an emergency and a brain attack. Act **FAST** and call **9-1-1** at the first sign of stroke.

<b>F</b>	<b>FACE</b> Ask the person to smile. Does one side of the face droop?	
<b>A</b>	<b>ARMS</b> Ask the person to raise both arms. Does one arm drift downward?	
<b>S</b>	<b>SPEECH</b> Ask the person to repeat a simple phrase. Is their speech slurred or strange?	
<b>T</b>	<b>TIME</b> If you observe any of these signs, call 9-1-1 immediately.	

Finally, many **medications** are offered to treat high blood pressure. You and your health care provider may have to try several different drugs before you find the one that works best for you. This is common, so try not to be discouraged if it happens. Once you find a drug that works, be sure to take it as directed, even when you feel fine. If you have already had a stroke, lowering your blood pressure (even if you do not have high blood pressure), lowers the risk of recurrent stroke.

Speak with your health care provider about “customized” strategies and information about how to control your hypertension. The key to keeping your blood pressure within the normal range is your commitment to be an active participant with your health care provider in your own care.

For more information: The National Heart, Lung, and Blood Institute (NHLBI) of the National Institutes of Health <http://www.nhlbi.nih.gov>.

For more information about ways to reduce your risk of stroke, visit National Stroke Association at [www.stroke.org](http://www.stroke.org).

Source: [stroke.org](http://stroke.org)



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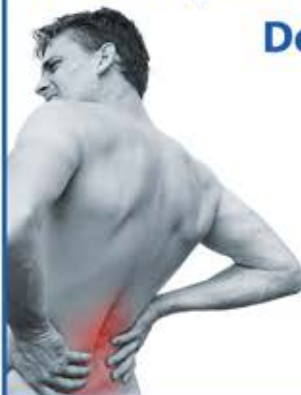
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**YOUR PATIENTS NEED YOU**



# Mental Health in the Workplace

By Kailee Witt, MA - Associate Director, Enrollment Management Systems & Communications at FSW  
Jessica Clark, APR - Public Relations and Marketing Associate at FSW

**W**hether brought on by workplace stressors, a busy or changing home life, or genetics, mental health issues can impact anyone at any stage of life. According to the National Alliance on Mental Health (NAMI), "1 in 5 adults in the U.S. experiences mental illness in a given year." Given this statistic, it is almost guaranteed that mental illness is impacting you or someone you know in your workplace.

## The Stigma of Mental Health

Organizations such as NAMI are not just a resource for those suffering from or with loved ones suffering from mental health issues. Another main goal of these organizations is to educate the general public in order to combat the stigma and stereotypes surrounding people with mental health issues. In fact, NAMI's website includes a three step pledge to be "stigma free:"

1. **Educate Yourself and Others** – "Mental health issues are not the result of personal weakness, lack of character or poor upbringing."
2. **See the Person and Not the Illness** – "Getting to know a person and treating them with kindness and empathy means far more than just knowing what they are going through."
3. **Take Action on Mental Health Issues** – Interested in learning more about the pledge or discovering more mental health statistics? Check out NAMI's website at [www.nami.org](http://www.nami.org).

## Managing Stress in the Workplace

Even when you love your job, you will occasionally experience work-related stress. It can be due to deadlines, new roles, or challenging opportunities. This is normal, but if the stress is constant and chronic, then steps should be taken to manage the stress to enjoy a healthy and fulfilling life.

According to the American Psychological Association, there are steps you can take to help manage your work-related stress:

- **Track Your Stressors** – Keep a journal for a week or two to help identify the exact stressors.
- **Develop Healthy Responses** – Try to create healthy ways to handle stress, such as exercise or hobbies.
- **Establish Boundaries** – Create work-life boundaries so that you are not thinking of work 24/7, and not connecting to the office when you are off.
- **Take Time to Recharge** – Take those vacation days to recharge and replenish your energy and motivation.



- **Learn How to Relax** – Look for techniques that help you relax and unwind – meditation, deep breathing, walking, time for yourself.
- **Talk to Your Supervisor** – Healthy employees are typically more productive, so your supervisor wants you to have a healthy well-being. Your boss can help you create an effective plan to manage stressors at work while being more productive.
- **Get Some Support** – Reach out to friends and family for support. Some employers even offer an employee assistance program (EAP) that could offer some guidance.

## Balancing Work and Personal Life

Work/life balance is a struggle for so many people. With the current technology it is easy to be accessible 24 hours a day, seven days a week. Employees need to make an extra effort to 'turn off' work mode and focus on family and personal life.

According to Mental Health America (MHA), many employees are in a "...rush to 'get it all done' at the office and at home..." which means "...as our stress levels spike, our productivity plummets." Being stressed creates so many problems outside of losing productivity, such as being depressed, irritable or harming our personal relationships. The tips earlier in this article focus on managing stress at work, but what about stress at home? MHA proposes that these tips will help manage the stress at home while also encouraging a healthy work/life balance:

- **Unplug** – Technology makes it easy to work from anywhere, but make sure to turn off the work mode and enjoy your personal time.
- **Divide and Conquer** – Make sure responsibilities are shared equally at home.

- **Don't Over Commit** – Learn to say 'no' sometimes, maybe schedule time just for yourself to do whatever you choose.

- **Get Support** – Communicate with family and friends to have a strong support network at home.

- **Treat Your Body Right** – Eat healthy and exercise to keep your body in good physical shape.

- **Get Help if You Need it** – If you are overwhelmed with work and personal life and need extra help, seek that support. "It is not a sign of weakness – taking care of yourself is a sign of strength."

## Where to Go for Help

There are many resources for individuals who feel they or someone they know may be experiencing mental health issues. The important thing is to seek help and support to ensure you are taking care of your mental health. Some resources may include:

- **EAP Programs** – many employers offer Employee Assistance Programs that may cover short term counseling or other services.
- **Primary Care Doctor or Health Insurance** – meet with your primary care doctor to determine the need for referrals to mental health specialists.
- **National Suicide Prevention Lifeline at 1-800-273-8255 or 911** – if you or someone you know is thinking of suicide, it is important to get help right away. Designated professionals at these hotlines can help.

## Resources:

<http://www.apa.org/helpcenter/work-stress.aspx>  
<http://www.mentalhealthamerica.net/work-life-balance>  
<http://www.nami.org>



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# Walking Over Niagara Falls

By Alex Anderson, Senior Associate Pastor at Bayside Community Church

**D**uring one of our Easter Services at Bayside Community Church, Nic Wallenda (one of our members) walked a high-tension cable over the audience in our auditorium as an illustration for our Lead Pastor, Randy Bezet's, message.

As Nic climbed onto the high wire and began his walk over our heads, he shared that his family had been high-wire walkers for seven generations. Recently his aunt had been featured in an article on a high-wire walk she had done at 80-years old.

To watch him on the wire over us was truly an extraordinary thing to see. He was calm, focused, articulate, funny and even picked on Pastor Randy's favorite football team, LSU.

But what I really liked was two very critical keys he shared from the wire that helped him be safe and successful. His success includes holding **nine Guinness World records** for various acrobatic feats, but he is best known as the first person to walk a tightrope stretched directly **over Niagara Falls**.

Nic said that while he is walking the high wire, doing these death-defying acts, **he talks to his dad** through a two-way communications piece attached to him. He said that once while he was riding a bicycle on a wire he got to a place on the wire and the bicycle tires started to slip and lose traction. He told his dad that he was going to back up and not cross the wire with the bicycle. His dad calmly and patiently talked him through it, and he went on and crossed safely and successfully.

The second thing he said is that even after months of preparation, while he was walking over Niagara Falls the winds were so gusty and strong that he had to stop the walk and **get down on one knee** and wait for the gust to pass while he talked with his dad.

## What great examples for Christ-followers.

We constantly have a line of communication open to our Dad in Heaven and can talk to him at any time, especially when the scary winds of life are gusting all around and are threatening to harm us. Like Nic Wallenda, we can get down on our knees and let our Dad in Heaven talk us through it.



As a Christ-follower I have found that you can hear God speak to you in that inner place called the heart.

And actually the Lord Jesus said this,

*"My sheep recognize my voice. I know them, and they follow me. I give them real and eternal life. They are protected from the Destroyer for good. No one can steal them from out of my hand. The Father who put them under my care is so much greater than the Destroyer and Thief. No one could ever get them away from him. I and the Father are one heart and mind."*

(John 10:27-30 Message Bible)

**What a great comfort to know** that you have an open line of clear communication to your Dad in Heaven who is so much greater than anything that you could ever face.

Like Nic and his relationship with his dad, the key is to have a relationship with your Dad in Heaven through His son Jesus Christ. It's in a relationship with Him that you learn to trust Him and become familiar with His voice.

Nic Wallenda took his dad's advice for one reason: he knew his dad's voice. Nic's dad had Nic training on the wire since he was two years old. So he had

been hearing his dad's familiar voice all his life. And when those scary gusts of wind hit him on the wire, it was **his dad's familiar and trusted voice that helped him** not only get across the wire but also get nine Guinness World records.

Let's think about that for a minute. What amazing things could you accomplish if you were to come to know and trust your Dad in Heaven's voice? Not only could you endure through turbulent times but you could even obtain some amazing new records or goals in your life. You could go to a whole other level.

**So start today...**get down on one knee and unabashedly talk to your Dad in Heaven. Dare to ask Him for something outlandish. Reach beyond your normal everyday life. Live an extraordinary life of faith in what can be and should be. Live your life with intention and purpose. Do life on your own high wire with your Dad in Heaven's comforting voice constantly in your ears!

Go ahead...I dare you!

*To your spiritual health,*  
**Pastor Alex Anderson**  
Author, *Dangerous Prayers*  
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