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# Health & Wellness<sup>®</sup> MAGAZINE

August 2016

Lee Edition - Monthly

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# Therapy for Speech and Swallowing Complications

**P**eople who have trouble swallowing, a problem called dysphagia, also often experience speech problems. It happens when the disease damages the nerves in the brain and spinal cord that make these tasks happen.

For some people, these problems are mild. Others have a harder time dealing with severe symptoms. But treatments and techniques can help you improve your speech and make swallowing easier.

When faced with bothersome voice, speech or swallowing disorders, you simply want relief. Lehigh Regional Medical Center has highly trained speech therapists who can help restore your speech and swallowing capabilities.

## Speech Therapy

Speech therapists evaluate, diagnose and treat patients with a wide variety of conditions that affect oral motor skills, swallowing, and speech and language abilities. Lehigh Regional Medical Center's speech therapists work closely with neurologists, ENT (ear, nose and throat) doctors and other specialists to thoroughly evaluate patients and treat a variety of conditions, including:

- Cognitive communication disorders, including memory and problem-solving difficulties
- Language disorders, such as aphasia
- Liping or stuttering
- Motor speech disorders, including dysarthria and apraxia
- Speech conditions resulting from Parkinson's disease and multiple sclerosis
- Swallowing disorders, such as dysphagia
- Voice disorders, including dysphonia

## Speech and swallowing therapy treatments

Lehigh Regional Medical Center's speech therapists provide education, support and treatment strategies to improve communication and swallowing, utilizing a range of treatment options such as:

- Cognitive retraining, following stroke or other neurological impairment

- Customized exercises designed to strengthen muscles used in speaking or swallowing
- Electrical stimulation, such as VitalStim therapy, to improve swallowing ability by retraining motor nerves in the throat
- Lee Silverman Voice Treatment (LSVT), to improve communication and quality of life for individuals with Parkinson's disease
- Nutrition or diet modifications
- Recommendations and training for communication devices

Lehigh Regional Medical Center offers a comprehensive range of speech and swallowing services for individuals from pediatrics through geriatrics. Our speech therapists provide customized treatment plans to address each patient's unique challenges, and offer valuable information and encouragement to support each individual's goals.

## What does speech & swallowing rehabilitation involve?

Our speech-language pathologists will evaluate the specific needs of the patient and select a technique or a combination of techniques to serve the individual's needs.

Techniques can include, but are not limited to the following:

- Articulation improvement
- Aphasia/Language therapy
- Cognitive retraining for memory and attention as well as organizing and planning
- Computer aided speech or alternative non-vocal communication
- Swallowing therapy/modified barium swallowing exam
- Stuttering/fluency
- Voice improvement
- Patient and family education



## Speech and Swallowing Rehabilitation Therapy

The speech-language or swallowing evaluation is completed on a one-on-one basis and can typically last for one hour. If treatment is recommended, follow up visits range from 45 -60 minutes in length. The duration and frequency of treatment ranges for each individual person and will be determined by the evaluating speech therapist.

You'll receive a thorough evaluation and a personal treatment plan, including therapy for speech, language, cognitive, voice, stuttering and swallowing issues.

These issues are often associated with voice mechanisms, swallowing mechanisms, or neurological, physical or functional changes in the brain. Your therapist can help you take steps toward improvement.

There are many options for the treatment of speech and swallowing problems. The selected treatment will be based on the results of your evaluation.

For more information about the options available for treating speech and swallowing problems call **239-303-0495** today to schedule a consultation.

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# Debunking the MYTH of Cankles

By Joseph Magnant, MD, FACS, RPVI

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

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

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

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

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

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# Health and Wellness of the Caregiver

**A** caregiver is someone who gives basic care to a person who has a chronic medical condition. A chronic condition is an illness that lasts for a long time or doesn't go away. Some examples of chronic conditions are cancer, effects of stroke, multiple sclerosis, arthritis, diabetes, and Alzheimer's disease and other forms of dementia. The caregiver helps the person with tasks such as preparing and eating food, taking medicine, bathing, and dressing. Acting as someone's primary caregiver can be stressful and can be taxing on one's health as well.

As a caregiver, am I at risk for health problems?

Yes. Because being a caregiver is so hard, your health may suffer. You may feel stressed or overwhelmed by being a caregiver. You may find that you spend much of your time caring for others, but neglect your own health. Some of the tasks of being a caregiver, such as lifting or bathing your loved one, may put extra strain on your body. Being a caregiver also can cause financial stress, and you may avoid going to the doctor so you don't have to pay for visits or treatments. All of these things can affect your emotional, mental, and physical health.

## What health problems am I at risk for?

Studies show that caregivers have an increased risk for the following health problems:

- Alcohol, tobacco, and drug abuse
- Anxiety disorders
- Cancer
- Diabetes
- Heart disease, such as high blood pressure, high cholesterol, and heart attack
- Heartburn
- Infection
- Obesity
- Pain, such as muscle or joint pain and headaches
- Stress and depression

## Strategies for maintaining caregiver wellness:

- **Eat a balanced diet.** This may be easier than you think because you may be sharing meals with your loved one, who will also need to eat balanced, healthy meals.

- **Get plenty of rest.** If you're short on sleep, take naps when your loved one does. If you can't sleep because your loved one wanders or is restless at night (this is common in people who have dementia), investigate additional educational material or books designed to assist the caregiver with this issue.

- **Exercise.** Thirty to 60 minutes of exercise 4 to 6 times a week can give you more energy, reduce stress, and improve your mood. If your loved one is up for it, you can walk or find another type of exercise to do together.

- **Set personal health goals.** For example, set a goal to establish a good sleep routine or to find time to be physically active on most days of the week. It's also crucial to fuel your body with healthy foods and plenty of water.

The emotional and physical demands involved with caregiving can strain even the most resilient person. That's why it's so important to take advantage of the many resources and tools available to help you provide care for your loved one. Remember, if you don't take care of yourself, you won't be able to care for anyone else.

## To help manage caregiver stress:

- **Accept help.** Be prepared with a list of ways that others can help you, and let the helper choose what he or she would like to do. For instance, one person might be willing to take the person you care for on a walk a couple of times a week. Someone else might offer to pick up groceries or cook for you.

- **Focus on what you are able to provide.** It's normal to feel guilty sometimes, but understand that no one is a "perfect" caregiver. Believe that you are doing the best you can and making the best decisions you can at any given time.

- **Set realistic goals.** Break large tasks into smaller steps that you can do one at a time. Prioritize, make lists and establish a daily routine.



Begin to say no to requests that are draining, such as hosting holiday meals.

- **Get connected.** Find out about caregiving resources in your community. Many communities have classes specifically about the disease your loved one is facing. Caregiving services such as transportation and meal delivery may be available.

- **Join a support group.** A support group can provide validation and encouragement, as well as problem-solving strategies for difficult situations. People in support groups understand what you may be going through. A support group can also be a good place to create meaningful friendships.

- **Seek social support.** Make an effort to stay well-connected with family and friends who can offer nonjudgmental emotional support. Set aside time each week for connecting, even if it's just a walk with a friend.

- **See your doctor.** Get recommended immunizations and screenings. Make sure to tell your doctor that you're a caregiver. Don't hesitate to mention any concerns or symptoms you have.

We here at Life Care of Estero are here to improve the health of the community for which we serve. As part of this vision, we provide a team of highly skilled Physical, Occupational, and Speech Therapists and the latest in cutting edge rehabilitation technology such as the AlterG anti-gravity treadmill and the Biodex balance system to help you regain your independence and facilitate you reaching your personalized goals. Please call our outpatient rehabilitation department at (239) 495-4046 if you have any questions or think we can help you reach your rehabilitation goals.

Caregiver Health by Family Caregiver Alliance (April 10, 2012)  
Caregiver stress fact sheet by U.S. Department of Health and Human Services, Office on Women's Health (April 10, 2012)





# BOTOX® for Overactive Bladder

Frustrated with your Overactive Bladder (OAB) medication not working?

Do the side effects pose more health risks than benefits?

By Joseph Gauta, MD, FACOG

**W**hen you have Overactive Bladder, you learn to settle. To settle not only for the constant bathroom trips, but also for treatments that haven't worked as well as you'd like or left you with unpleasant side effects.

There's another approach. BOTOX® is approved to treat Overactive Bladder symptoms, such as a strong need to urinate with leakage, urgency and frequency in adults when another type of medication (anticholinergic) does not work well enough or cannot be taken. Even people with electrical stimulation treatments or devices can add Botox to their regimen if their current treatments are not working well enough.

## A different type of treatment for OAB

BOTOX® takes another approach to targeting the source of your OAB: the bladder muscle itself. And now just might be the right time to ask your doctor about how BOTOX® treatment may help you with your OAB symptoms.

## How does BOTOX® work?

BOTOX® works on the nerves and bladder muscle, blocking the signals that trigger OAB. In your body, certain chemicals travel from nerve cells to muscle cells to make your bladder contract so that you can urinate. With OAB, these muscles contract uncontrollably and you frequently feel like you have to empty your bladder.

BOTOX® treatment works by calming the nerves that trigger the Overactive Bladder muscle, helping to:

- Reduce daily leakage episodes
- Treat the strong need to urinate right away
- Reduce the number of times that you need to empty your bladder daily

## Proven results

In two 24-week clinical trials, patients who received BOTOX® (vs. those who did not) reported a significant reduction in the number of their daily leakage episodes at week 12.



If you're still not sure if you should talk to your urogynecologist about BOTOX®, ask yourself this question:

**Have you tried taking medications to manage your OAB and stopped because:**

- The side effects were intolerable?
- Or you still experienced urgency, frequency, or leakage?

If this sounds familiar, you are not alone. You're in the majority of people with your condition who are frustrated with their current treatment. In one study of 1117 patients, 73.5% reported that they stopped taking their OAB therapy within 1 year. According to two separate surveys, the top reasons that OAB patients discontinued anticholinergics were due to side effects and/or lack of results.

Ask a urogynecology specialist if BOTOX® could be right for you.

  
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Do you suffer from OAB, or other bladder, bowel, or pelvic disorders? Incontinence often negatively impacts daily living. The good news is that virtually all types of incontinence are treatable. The Florida Bladder Institute's expert team is dedicated to helping you achieve the highest level of health and quality of life.

The clinical staff of the Florida Bladder Institute is well-versed and experienced in using a variety of techniques including medication, rehabilitation, minimally invasive surgical intervention and lifestyle education to improve your overall health and help you regain control and reclaim your freedom. For more information on BOTOX® and other treatment options, call 239-449-7979 today!

## Joseph Gauta M.D.

Board Certified Urogynecologist

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



Meir Daller, M.D.

# VASECTOMY & REVERSAL

**V**asectomy has grown in popularity throughout the world since its inception in the 19th century. Approximately 600,000 men each year choose to undergo a vasectomy in the United States alone. Of those procedures, urologists perform 85% of vasectomies.

A vasectomy is a choice only a man can make, preferably with the support of his partner. While it is safe and simple, the permanent nature of the procedure requires careful consideration. By choosing this nearly 100%-effective procedure, a man can control the size of the family without placing his partner at increased risk.

Vasectomy is a procedure in which the vas deferens, the tubes that carry sperm from the two testicles to the urinary tract, are surgically altered, so sperm cannot pass through and be released to fertilize a woman's egg during sexual intercourse.

The surgeon reaches the vas deferens through a very small opening made in the front surface of the scrotum, after a local anesthetic makes the area numb. The most uncomfortable part of the entire procedure is the numbing itself. Once the local anesthetic kicks in, the man should not feel anything more than some pressure in the area. The entire procedure only takes about 20-30 minutes.

Contraception (such as a condom) must be used until two follow up examinations of the semen reveals that no sperm is present. Semen samples are taken at six week and 12 week post procedure intervals to determine if the sperm has been eliminated. Once there have been two collections of semen with no sperm, the procedure is considered a success.

Complications with vasectomy are rare, but when they do occur they are usually related to bleeding or infection. Typically, there is some swelling and minor pain for a couple of days post procedure. The application of cold packs and rest are recommended. Supportive under garments will also help minimize discomfort.



## Misunderstood Fears of the Procedure

Fear can prevent a man from choosing a vasectomy. The following issues are addressed to help a man understand that a vasectomy procedure is simple and safe:

- **Fear of pain** – Men do not like to think of any procedure near their genitals. Fact: What men need to understand is that an anesthetic is used to numb the area. There is usually no pain; just some pulling after the anesthetic is given. The procedure is usually so well tolerated that upon completion of the procedure, men are frequently surprised that it is over.
- **Fear of loss of masculinity** – Fact: A vasectomy does not affect virility. A vasectomy does not affect the blood and hormone supply to the penis. The amount and appearance of semen ejaculated will not change noticeably. Of course, during the recovery process, men may be sore, thus making sex less desirable. Later, some men report that sex is actually more enjoyable without the threat of pregnancy. Women may appreciate that their partners have chosen to take the responsibility for sterility (permanent birth control).
- **Fear of failure of the procedure** – Fact: Except for complete abstinence, no method is more effective than vasectomy in preventing pregnancy.

## Reversing a Vasectomy

While the best thing about a vasectomy is the intention of permanent sterilization, it can be reversed in men seeking to restore their fertility due to a change in marital status or reproductive goals.

Factors that explain the failure to achieve pregnancy include partner infertility, epididymal dysfunction, and antisperm antibodies. In addition, although comparative trials are lacking, most surgeons agree that the success of a reversal depends on the microsurgical technique used. Other factors that may influence success rates include the skill of the surgeon, the occlusion technique originally used, the presence of sperm granulomas, and the time interval between vasectomy and reversal. Success is determined by both patency of the reconnection which is typically 90% to 95% and subsequent pregnancy which is dependent on time from vasectomy.

## Time Since Vasectomy Pregnancy Rate

- 0 – 5 years 80%
- 6 – 10 years 60%
- 11 – 15 years 30%



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# Save Your Knees!

By Dr. John C. Kagan, M.D.

**A**s the largest joint in the body, the knee is prone to injury. According to the American Academy of Orthopedic Surgeons, knee injuries lead to more visits to orthopedic surgeons than any other problems. As we age, the cartilage that protects the bones begins to deteriorate in the knees. As this change occurs, the risk of developing osteoarthritis, also known as "wear-and-tear" arthritis, becomes greater.

Major reasons for knee pain include overuse injuries to the meniscus and knee ligament injuries to the ACL (anterior cruciate ligament), MCL (medial collateral ligament), and PCL (posterior cruciate ligament). Vigorous activities, such as running, basketball or soccer, can contribute to placing greater stress on the knee joint. Other factors, such as obesity and muscle loss in the body, can also leave people highly vulnerable to knee pain as they age. Consider implementing a variety of low-impact, knee-friendly activities, such as swimming, walking or cycling, into your exercise routine to help protect your joints from overuse. Regardless of the activity, it is essential to exercise wisely and follow proper techniques in order to avoid injuring the knee.

Stretching is a critical component to protecting the knees, and many knee conditioning treatment programs will incorporate a combination of stretching and flexibility to target muscle groups such as the quadriceps and hamstrings, abductors and adductors, and buttocks muscles. The American Academy of Orthopedic Surgeons' knee conditioning program suggests the following stretching exercises:

## 1. Heel Cord Stretch (this stretch should be felt in the calf and heel muscles)

- Stand facing a wall with the unaffected leg forward and slightly bent at the knee.
- Place hands on the wall for support as you step the affected leg back and behind you, with the heel flat.



- Keep the affected leg straight and both heels planted on the floor and press your hips forward.
- Hold the stretch for 30 seconds and then relax for 30 seconds. Complete two sets of four repetitions.

## 2. Standing Quadriceps Stretch (this stretch should be felt in the quadriceps muscle)

- Stand near a chair or wall and place one hand on the chair or wall for support.
- Bend your knee and bring the heel up toward your buttock.
- Grasp your ankle with your hand and gently pull your heel closer to your body with the bent knee pointing down towards the ground.
- Hold for 30 to 60 seconds. Repeat with the opposite leg for two or three repetitions.

## 3. Supine Hamstring Stretch (this stretch should be felt in the hamstrings)

- Lie on the floor with both legs bent.
- Lift one leg off the floor and bring the knee toward your chest with your heel pointing up to the ceiling and leg as straight as possible.

- Clasp your hands behind your thigh below the knee.
- Pull the leg gently in towards your head, until you feel the stretch.
- Hold for 30 to 60 seconds. Repeat with the opposite side for two or three repetitions.



Listen to your body and be sure to consult a doctor when knee pain occurs. If diagnosed early, limiting physical activities or participating in physical therapy may be prescribed. For other patients with more advanced cases, knee replacement surgery may be the best option. Speak to an orthopedic surgeon about treatment options, as well as which exercises are best for your body to ensure that your fitness routine is designed to promote wellness while lowering the risk for injury.

If you are experiencing joint pain, it is important to speak with an orthopedic specialist to discuss your options for pain relief. Dr. John C. Kagan and his staff are ready to answer all of your questions. Dr. Kagan has more than 30 years of experience as an orthopedic surgeon and sports medicine specialist treating patients in Southwest Florida. He specializes in treating patients with knee, shoulder and hip pain, as well as general orthopedics and hand surgery. For more information, visit [www.kaganortho.com](http://www.kaganortho.com) or call 239-936-6778.



**JOHN C. KAGAN M.D.**  
BOARD CERTIFIED ORTHOPAEDIC SURGEON

# LIFE-THREATENING SLEEP APNEA AND THE CPAP ALTERNATIVE

By Dr. Rich Gilbert

**T**he word apnea literally means without breath. During sleep, the muscles and tissues of the upper airway can collapse and narrow or totally block the opening in the throat for air. The narrowing of the upper airway can produce sound - snoring. However, when the upper airway becomes completely obstructed breathing stops. This condition is called Obstructive Sleep Apnea (OSA) and the resulting oxygen deprivation is life threatening!

## SNORING VS. SLEEP APNEA

Snoring is generally considered a mild condition resulting in limited daytime symptoms. Disruption to the sleep of the snorer's bed partner is the most common and irritating side effect.

OSA is a much more severe, life-threatening, condition in which the sufferer stops breathing repeatedly throughout the night. As a result, oxygen saturation levels in the bloodstream often drop to dangerous levels. Sleep patterns are disrupted because the body must fight to breathe and frequently arouse the sufferer from sleep. Besides fatigue there are much more grave health consequences associated with OSA that you should be aware of so that you understand the necessity of proper OSA treatment.

## SERIOUSNESS OF OSA

Having Obstructive Sleep Apnea means that you actually stop breathing multiple times during the night. The lack of oxygen to your brain jolts your body awake briefly so you can take the necessary breath and then fall back to sleep. This apneic episode has very serious health ramifications. Your brain, heart and other organs are being oxygen starved repeatedly throughout the night, usually between 5-15 times per hour! Sleep patterns like this mean you're limiting rapid eye movement (REM) sleep, the essential sleep stage that helps recharge your



body's internal battery. The next day, your body compensates for its lack of rest, resulting in fatigue and poor productivity. During the day your concentration is easily broken and you suffer from daytime sleepiness and irritability.

You may realize that your productivity suffers at work, but what you may not realize is what's going on inside your body. Specifically, when you stop breathing your body experiences a drastic drop in oxygen saturation, from 97% to as low as 60%. This can lead to significant health problems and even death.

### *Here's a list of the most common concerns that untreated sleep apnea can cause:*

**Car Accidents** - a deadly side effect of daytime sleepiness, people with untreated OSA are 5 times more likely to fall asleep behind the wheel.

**Heart Disease/Stroke** - the low oxygen levels caused by obstructed sleep apnea stress the body, making suffers of OSA more likely to have a heart attack or die in the middle of the night. The oxygen disruption makes it hard for your brain to regulate the flow of blood to arteries and to the brain itself.

**High Blood Pressure** - frequent awakenings during the night cause hormonal systems to become hyperactive, which can result in a dangerous elevation in blood pressure.

**Weight Gain** - obstructive sleep apnea goes hand-in-hand with obesity because fatty deposits in the neck block adequate breathing during sleep increasing your risk of OSA. In addition, the lack of oxygen and sleep deprivation causes the endocrine system to increase production of several hormones. Specifically, the hormone Cortisol which increases your appetite and the hormone Ghrelin which increases cravings for carbohydrates and sweets. Both of which contribute to weight gain. Thus resulting in a vicious cycle of sleep deprivation and weight increase.

**Type 2 Diabetes** - since Type 2 Diabetes is often brought on by obesity, up to 80% of diabetics also suffer from some form of obstructed sleep apnea. Research shows that sleep deprivation can be a contributing factor to insulin resistance, which is the body's early warning system indicating susceptibility to Type 2 Diabetes.

**Other serious health concerns that can be linked to OSA:** depression, gastric reflux, insomnia, muscle pain, loss of short term memory, fibromyalgia, cardiac arrhythmia, intellectual deterioration, inefficient metabolism, severe anxiety, memory and concentration impairment, mood swings, and impotence.

## TREATMENT OPTIONS

Although OSA can create severe health impairments - treatment can prevent most of these risks. It is even possible to cut down on blood pressure medication because getting adequate rest can lower blood pressure. Treatment is crucial. Often times that means CPAP therapy, a machine that sits beside your night table and applies positive airway pressure to the respiratory system to prevent apnea episodes. CPAP therapy has proven to be very effective in the treatment of OSA when used as prescribed. However, due to the invasive and obtrusive nature of CPAP therapy patient compliance is extremely poor. As a result, industry leaders now accept dental appliance therapy as standard practice.

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In 2006, the American Academy of Sleep Medicine recommended that oral appliances be used as a first line of treatment for mild to moderate OSA. FDA approved oral appliances used to treat OSA work by advancing the mandible, thus holding the jaw in a forward position. This increases the free space in the back of the throat and prevents upper airway tissues from obstructing and causing an apnea event.

### SCREENING FOR OSA AT THE DENTIST OFFICE

Attentive dentists are in a perfect position to screen for OSA because they routinely visualize their patients' upper airway, which may show an anatomical predisposition for obstruction. Additionally, dentists are privy to subjective signs and symptoms of OSA and can screen as part of medical history updates.

Often times, patients who believe they "snore" may in fact actually suffer from the more serious condition of OSA. If you or your bed partner suffers from symptoms of OSA, please call us to learn more about how oral appliances can prevent potentially serious health conditions that occur as a result of sleep apnea.

Dr. Rich Gilbert is well versed in all the different sleep apnea oral appliances available. After a brief consultation, Dr. Gilbert will explain which type of oral appliance will best suit you and why. All of Pelican Landing Dental's oral appliances are completely custom fabricated from molds of your mouth and are thereby effective and easy to wear. Most find that it typically only takes a few nights to get used to wearing. Soon, you won't ever want to sleep without it.



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# Do Your Loved Ones Need Assisted Living?

If you are like many, the recent holiday season provided cheerful memories with family. Gathering with loved ones is generally a joyous time, however if while visiting with family you noticed changes in a family member it can leave you concerned for their safety and health. For most aging people, it is difficult to accept help when completing routine tasks such as preparing food, taking medications, or even walking round without falling. As their family, you must acknowledge the changes you notice and help them realize that they may enjoy a better quality of life with assisted living.

Nobody likes the idea of having to move into an assisted living situation, but as people get older it often becomes a necessity. Most people look up to their parents as they grow up, and the idea that they may one day not be able to live independently is difficult. Parents and their children may deny that any kind of assisted living is necessary, but this denial will only end up doing more harm than good in the long run.

If you have elderly parents, or other loved ones, chances are that they will be able to live independently for the rest of their lives. Unfortunately, chances are just as good that they will need some kind of assistance as they reach the ends of their lives.

Here are some signs that your parents might need some level of assisted living.

## Changes in Weight

Weight changes can happen for a number of reasons. A person's metabolism often changes as he or she gets older, so some weight loss or gain might occur even in the healthiest of people. However, extreme weight loss can also be an indicator that people are unable to leave the home to buy groceries or feed themselves. Weight gain and weight loss may also be an indicator of memory loss. Many elderly people simply forget to eat, or they might forget that they've already eaten recently and prepare another meal for themselves. Keep an eye on your parents' weight; extreme changes could be an indicator that they need assisted living.



## Poor Hygiene

Assisted living and independent living facilities allow aging parents to live a more active, safe life.

Poor hygiene may also be an indicator that an elderly person can no longer live independently. If you notice that your parents have developed really bad body odor, bad breath or that they are often wearing dirty clothes, it may be because they are unable to take care of themselves.

## Falls and Mobility-Related Injuries

One of the biggest reasons why people need assisted living is because they are no longer as mobile as they once were. Many mobility issues can be solved by adding handrails, non-skid floors and other accommodations to the home, but if your parents are still suffering fall-related injuries it may be time to consider an assisted living facility.

## Behavioral Changes

Assisted living facilities are great at helping those living with dementia maintain as independent a life as possible. Obviously, not everybody will be aware of their own dementia or behavioral changes, so it's up to you to pay close attention to your parents as they get older. If you notice some serious changes in mood or behavior, it might be time for some kind of intervention. If you can't

keep a close eye on your parents or their behavior, you might want to talk to those close to them. Ask their friends and neighbors if they've noticed any changes in their behavior that would be alarming. If things change too much, you should consider assisted living, especially if those behaviors cause them to become more confrontational or violent than they've been in the past.

## Serious Financial Issues

Sudden and serious financial issues such as neglecting to pay bills or paying the same bill twice, participating in obvious scams and excessive gambling can also be signs that a parent needs assisted living. Forgetting to pay bills or paying bills twice could be a sign of memory loss, and excessive gambling and falling for scams is definitely a sign of poor judgment and a possible sign of dementia. While you don't need to pry into your parents' finances if there is no cause for alarm, you should keep close tabs on their money if you suspect they are suddenly being irresponsible with it.

If you noticed any of these, or other alarming things, while visiting with loved ones during the holidays, it is time to learn about the benefits of assisted living facilities.

For information about the options and services available at Pacifica, or to schedule an appointment for a tour, call 239-437-5511 today.



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# CUTTING EDGE TECHNOLOGY AND SCIENCE MEET TO MAKE YOU LOOK YEARS YOUNGER!

**S**wan Age Reversal Centers has Six South Florida locations in Naples, Bonita Springs, Fort Myers, Venice, Sarasota and Bradenton. Procedures in the Southwest Florida offices are administered by highly qualified Nurse Practitioners and Licensed Aestheticians that they are overseen by Dr. Andrea Basile, who is one of Americas finest Plastic Surgeons. Swan Age Reversal Centers specializes both in Non-Surgical Aesthetic procedures that have no down-time and also the Best Plastic Surgery procedures available.

Whether you are interested in Non-Surgical procedures like dermal fillers, anti-aging skin treatments, skin tightening, wrinkle reduction, targeted fat reduction, cellulite smoothing, female rejuvenation or are looking for Surgical Procedures like breast enhancement, tummy tuck, liposuction, and facelift, Swan Age Reversal Centers offers a top of the line experience that delivers results.

All of their offices are conveniently located, are clean and professional. They do not waste money on any "Fluff" to try to impress you. However, they will impress you with their great staff, superior treatments and reasonable pricing. This simple approach has allowed Swan Age Reversal Centers to successfully operate multiple locations that has led to them being South Florida's leading Aesthetic provider. They are driven by innovation in aesthetic beauty and are able to deliver an intimate and relaxing experience, complete with all the perks that a premium establishment can offer.

**A complimentary assessment is offered to all first time customers.**

## Non-Surgical Treatments offered:

- Skin tightening
- Wrinkle Reduction
- Cellulite Smoothing
- Non-surgical Neck Lift
- Botox & Fillers
- Stretchmark & Scar Reduction
- Targeted Fat Reduction
- Vaginal Rejuvenation

## Plastic Surgery options

- Facelift
- Neck Lift
- Tummy Tuck
- Liposuction
- Breast Enhancement
- Male Breast Reduction
- Butt Lift
- Arm Lift



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Naples Day Surgery Center, 11161 Health Park Blvd, Naples, FL 34110

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## Swan Non-Surgical Treatment Options



### SKIN TIGHTENING & WRINKLE REDUCTION

Swan Lift™ is an Age Reversal treatment that can be done for the Face, Neck, Décolleté, Arms, Hands, Belly, Buttocks and Thighs. Swan Age Reversal Centers uses a unique combination of Radio Frequency, Ultrasonic, Micro-Needling in unison to help lift, tighten and restore the skin to a more youthful state. This non-invasive, pain free treatment offers impressive results and is only found at Swan Age Reversal Centers.



### TARGETED FAT REDUCTION

Let's face it. Most of us wouldn't mind losing a few inches around the belly, back, love handles, thighs, buttocks or arms. Swan Age Reversal Centers believe that they have the answer! They offer a new approach to targeted fat reduction, combining multiple devices to help maximum results. Swan

Age Reversal Centers can focus on specific targeted body parts and transform bodies with remarkable results. These treatments are a safe and effective way to lose inches of fat without surgery and with no downtime! Treatments are quick and easy, and generally take 60 minutes or less.

### DERMAL FILLERS

Swan Age Reversal Centers offers a wide selection of fillers like Botox, Juvaderm, Sculptra, Kybella and Restylane.

## NON-SURGICAL EYELIFT

Do you have droopy eyelids and don't want to go under the knife? Many of our clients have opted for the Swan Eyelift™ instead. The Swan Eyelift™ is an affordable alternative to surgery for most people with mild to moderate sagging of the eyelids. There is no downtime and most clients only need a handful of treatments.

## LIPS AND LINES AROUND THE MOUTH

At Swan Age Reversal Centers, they can help enhance your lips and we can substantially reduce unsightly lines around the mouth. The treatment methods that they use are super effective, easy and has minimal to no downtime! We have multiple stand-alone or combined treatments options to achieve the best results.



## DOUBLE CHIN TREATMENT

At Swan Age Reversal Centers They offer multiple non-surgical options to treat a fat neck, also known as a double chin. They customize a treatment plan specifically to suit each client.

## VAGINAL REJUVENATION

At Swan Age Reversal Centers they offer Vaginal Rejuvenation. The procedure is a noninvasive, nonsurgical, in-office feminine rejuvenation treatment that is painless with no downtime. They safely and effectively tighten the labia and vaginal canal. Treatments are very easy, fast (only 30 minutes) with no pain or downtime. They are performed by highly qualified Female staff. The entire experience is discreet and private.



### Andrea Basile, MD

Swan Age Reversal Centers Medical Director and Resident Plastic Surgeon is Dr. Andrea Basile. He is one of the Americas finest plastic surgeons. He received his M.D. Degree and completed his Plastic Surgery Residency at Georgetown University, in Washington, D.C.. He pursued his residency in General Surgery at Harvard University's New England Deaconess Hospital and then plastic surgery research at Harvard's Massachusetts General Hospital.

# Get the Most from Your Fitness Routine

**A**re you getting the most from your fitness routine? Did you know that it is possible for you to burn calories long after your workout session is over? The science behind Orangetheory Fitness programs is all about keeping your heart rate in a targeted range, the orange zone, for optimal benefits. Staying in the orange zone has fitness fans all over the world sweating.

In just five years, the franchise has grown from one gym, here in Florida, to more than 600 worldwide. It's been dubbed the new CrossFit, the new Soul Cycle, the new, well, everything.

## So what's it all about?

The brainchild of ex-pilates teacher Ellen Latham, Orangetheory is all about working out just hard enough — and, importantly, measuring that output, so you know exactly what you've done.

What makes this workout different is that each gym-goer has a heart monitor strapped to them as they work out. The monitor sends stats to a scoreboard that's visible to everyone in the class.

The aim? To get into the orange zone — above 84 per cent of your maximum heart rate — for at least 12 to 20 minutes of the 60-minute workout. Since everyone can see how everyone else in the class is doing, it's a boon for super-competitive types.

## There's no hiding in this exercise class.

In the gyms, you'll find a row of treadmills, rowing machines, free weights stations and TRX suspension equipment.

Users are guided through each station by a group personal trainer and told to go at their "base level" (an effort you could sustain for 10 to 15 minutes), "push" level (where you're getting uncomfortable) or "all out" (really, really hard).

By combining cardio (treadmill and rowing) and strength training (weights and TRX), you're getting a high-intensity interval workout.

The orange zone is important because after working out for that long with that much intensity, your body is pushed into excess post-exercise oxygen consumption (EPOC).

And that's good because it means you'll burn a lot more calories than normal after the workout, even if you're doing nothing more than watching a movie while relaxing at home.

Most fitness experts recommend you train at a variety of intensities, mixing HIIT with activities like swimming, yoga and walking.



The benefit of group personal training is that once you show up, someone else is doing the hardest bit — motivating you.

If you go to a regular gym, most people there do not work at a level of intensity that's creating much EPOC. Having those stats there for you to see while you are working out is extremely effective.

## Is it safe?

As long as there is proper pre-screening for injuries, potential heart disease and diabetes — all risk factors when you're working out so intensely — then it's a great option for a workout.

It's a version of high-intensity interval training (HIIT), which is all about bang for buck. You could work out moderately for 150 minutes a week, or you could work out vigorously for 75 minutes — you get the same benefits but in less time. And that's why people find this kind of workout so beneficial, and keep coming back to it.

The key is to have rest periods after working hard and raising your heart rate during the workout.

The best thing about Orangetheory is that it takes the guesswork out of your workout. If you want results (and who doesn't?) and you're prepared to work hard, this is the routine for you.

There's no cheating because you can see exactly what you're doing — and so can everyone else in the class.

If you're looking for a more intense workout, and are looking for a gym membership designed to get results that high intensity interval training provides, work with our coaches to design a better HIIT workout for your fitness plan. See improved results, higher endurance, and quicker fat loss as you exercise more.

Not sure if an Orangetheory gym membership is for you? We invite you to book a free tryout session. As well, our membership plans have no contracts, and are strictly month to month. This allows you the flexibility to customize your gym membership to suit your lifestyle.

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# ULTRAFAST CT LUNG SCREENING

## Frequently Asked Questions



### What is an Ultrafast CT Lung Screening?

The Ultrafast Screening of the Lungs is a non-invasive CT scan that can detect abnormalities and lung cancer in its earlier, more curable stages using a new technique called helical low-dose CT scanning. The screening is far more accurate in finding lung tumors than a chest x-ray, the traditional diagnostic tool. It can find lung cancers when they are as small as the diameter of a soda straw, as compared with a chest x-ray that finds them when they are about the size of a quarter

### Why is there a need? What are the benefits?

Lung cancer is widely known to be the third most common form of cancer in the United States, but is also the leading cause of cancer-related deaths.

In 2013 alone, the National Cancer Institute estimated that approximately **220,000 new cases of lung cancer** were discovered, and that lung and bronchus cancer accounted for more than **150,000 deaths**. That's more than the number affected by colon, breast and prostate cancers **COMBINED!** The majority of cases are diagnosed at a very late stage, which offers a low survival rate of only 5 years after diagnosis.

Like mammograms have done for breast cancer, an Ultrafast CT Lung Screening offers you and your provider the opportunity to catch any concerns at

a much earlier stage. This gives your provider time to make informed decisions, and offer you a wider variety of treatment options than what may otherwise have been available to you. The Ultrafast CT Lung Screening is being hailed as the next advancement in preventative care, and is receiving support from organizations and medical societies nationwide.

### Is this exam covered by insurance?

Recently, Medicare and most commercial insurance companies have adopted a plan that will cover eligible, "high-risk" patients for a free exam once per year as part of their preventative services offering. Check with your insurance provider for specific coverage information.

### What should I expect from the exam?

There are no dyes, no needles, no fasting and no pain. There is absolutely no advanced prep needed for this exam. After a brief medical history questionnaire is completed upon your arrival, a technician will assist you into the machine – which is generally thought to be open and not claustrophobia-inducing. The scan will take less than 15 minutes, and consist of a series of pictures taken while you hold your breath at very short intervals.



### How much radiation is used?

Ultrafast CT Lung Screenings are considered a low-dose procedure, using less than 1.5 ms. This is the equivalent to what you receive naturally from the earth in less than 6 months. In fact, the National Cancer Institute assesses the risk of **not** having the exam is **400% greater** than the radiation risk.

### Where can I get screened?

Radiology Regional Center is an experienced and trusted leader in Southwest Florida's diagnostic healthcare. Their physicians and technologists are skilled in the use of CT technology for both screening and diagnostic purposes. They have also been designated as a Lung Cancer Screening Center by the American College of Radiology.



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**Radiology Regional Center**  
is pleased to offer you  
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### If you...

You are eligible if you meet the following criteria:

- Are between the ages of 55-80 (or ages 55-77 for Medicare)
- Are a current smoker or have quit within the past 15 years
- Are asymptomatic (no signs or symptoms of lung cancer)
- Have an order from your healthcare provider
- Carry Medicare or one of the many insurance companies that cover this health screening

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# CO2 Fractional Laser Vs. IPL Photorejuvenation – Which Treatment is for You?

By William Ehrlich, MD, FAACS Oculofacial & Cosmetic Surgeon

**T**he Frantz Cosmetic Center at Frantz EyeCare offers two of the most advanced treatments for skin rejuvenation: the MiXto SX Micro-Fractional CO2 Laser, and the Lumenis® IPL Photorejuvenation treatment.

CO2 laser resurfacing makes it possible for patients to have healthy, younger looking skin with minimal post-treatment down time. The laser delivers a therapeutic matrix of tiny beams of light energy to the top and mid layers of the skin with minimal discomfort resulting in:

- immediate shrinkage of damaged skin,
- softening of fine lines and wrinkles,
- removal of age and sun spots, and
- amazing results on acne scars.

Fractional means that only a fraction of the skin surface is exposed to the laser beam, leaving untreated skin around each treated micro spot. The beneficial effects of the laser beam expands under the skin surface to stimulate new collagen production across the entire area. This procedure is performed with a topical anesthetic crème and patients will have only 4 to 5 days of downtime. Patients will see continued reduction of fine lines and wrinkles over the next six months as new collagen is formed.

The Lumenis® IPL Photorejuvenation treatment enables us to offer you remarkable results on a range of skin concerns such as age and sun spots, freckles, birthmarks, rosacea and broken capillaries. IPL is not the same as laser treatments because unlike laser, IPL uses a very bright burst of broad-spectrum light through a wide treatment head, placed on the surface of the skin. The wavelength of the IPL is selected according to your skin type and your skin concerns. Our unique IPL (Intense Pulsed Light) technology gently and effectively eliminates spots, discolorations, and unwanted blood vessels.



The IPL Photorejuvenation treatment works with your skin to remove your imperfections and stimulate collagen and elastic fiber production over a sequence of treatments. Some skin concerns such as shallow pigmentation and age/sun spots can be cleared with as few as 1-2 treatments. Typically 2-6 sessions with 2-4 weeks in between are needed to achieve optimal results for most skin concerns. Immediately following treatment, you may experience some redness, depending on your customized treatment settings.

The redness will usually disappear within a few hours. In most cases, makeup may be immediately applied, and daily activities can be resumed the very same day. Typically you should stay out of direct sun for a few days following the treatment and apply sun screen.

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*William W. Ehrlich, MD, FAACS, practices Oculoplastic & Cosmetic Surgery at Frantz Cosmetic Center, a subsidiary of Frantz EyeCare, under the medical direction of Jonathan M. Frantz, MD, FACS. In addition to facial and body rejuvenation, the team of doctors at Frantz EyeCare offers a broad spectrum of patient-focused comprehensive care from eye exams and eyewear to bladeless laser cataract removal, treatment of eye diseases, bladeless Wave-Light LASIK, and treatment of dry eye with office locations in Fort Myers, Cape Coral, Punta Gorda, Lehigh Acres, and Naples.*

# Effective Regenerative Medicine Options for Chronic Back Pain

By Debra K. Brinker, RN

**M**any people who suffer with chronic back pain go through the traditional protocols to no avail, because all too often the true underlying cause is not identified. The common denominator for many painful musculoskeletal conditions causing back pain is spinal instability due to injury to the ligaments. Regenerative options can provide solutions that correct the underlying instability, providing a novel approach to alleviating chronic back pain.

## Disc degeneration and herniation

Ligaments are structures joining bone to bone, and in the back or spine, connect adjacent vertebrae. Ligaments serve as one of the primary stabilizing structures of the spinal column, providing adequate motion and restricting hypermobility, and, in doing so, protect the spinal column and nerve roots as they exit the spine. Disc degeneration begins when ligaments around the spine are injured. (See Figure 1.)

**Lateral view of two adjacent vertebral segments.** Facet joint hypermobility causes excessive motion between the vertebral segments, leading to disc injury including disc herniations and disc degeneration. Prolotherapy, by normalizing facet/vertebral motion, causes a decrease in pressure on the vertebral disc, thus eliminating the pain of such conditions as lumbar or cervical disc disease.

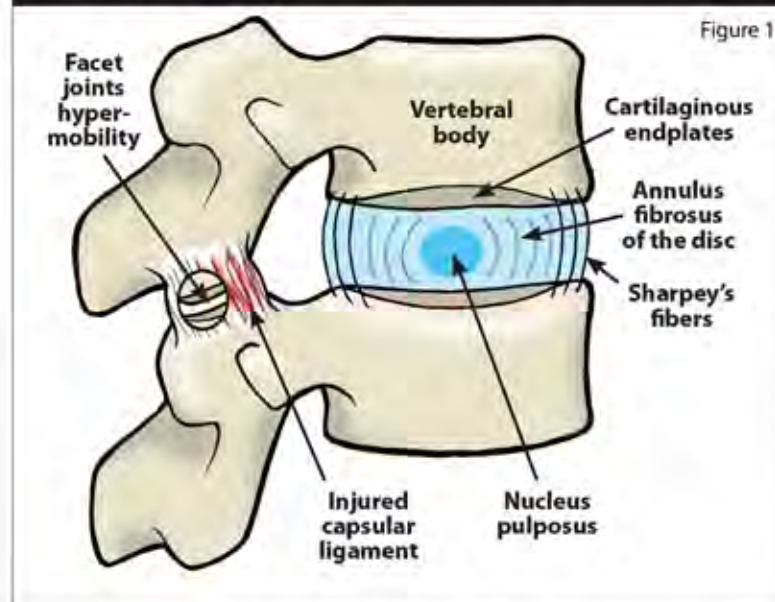


Figure 1

Instability due to ligament laxity is part of the pathophysiology of common diagnoses, such as degenerated, bulging, and herniated discs. The excessive motion causes abnormal forces and pressure on the discs between the vertebrae, which produces the degeneration of the discs. Disc degeneration eventually leads to osteoarthritis. (See Figure 2.)

## Prolotherapy – a game changer for back pain treatment

Our bodies have amazing regenerative capabilities. Physicians who treat joint pain with regenerative medicine techniques utilize regenerative injection therapies to stimulate the body to repair the

Figure 2

**The progression of degeneration of the lower back.** An initial injury to the spinal ligaments causes the start of spinal instability. The process progresses to involve more spinal segments. The completely degenerated lumbar spine is the final consequence of not resolving spinal instability.



ligaments. Prolotherapy, which is short for proliferative therapy, is an injection technique using naturally based solutions that cause such a healing effect. Some Prolotherapy solutions may include a person's own cells, generally known as Platelet Rich Plasma and Stem Cell Therapy. In the case of chronic back pain, regenerative techniques specifically stimulate the repair of the ligaments through which the disc herniates and the ligaments connecting the vertebrae.

## Traditional back treatment formulas

If you feel like you've been getting cookbook medical recommendations and getting nowhere, you probably are. Many of the modalities used to treat low back pain only provide short term relief, because they do not repair the ligamentous source of the musculoskeletal pain. Common treatments for back pain include cortisone injections, NSAIDs and eventually prescription narcotics, steroids and even anti-depressants, which of course come with their own set of problems.

Additional modalities for back pain relief can include massage and other body work that focuses on the muscles, but with chronic back pain, the pain tends to return. Physical therapy and exercise may provide some help for those whose problem originates with being sedentary or with the muscles. But as discussed, the underlying cause of chronic pain is often the overlooked ligaments, not the muscles. Chiropractic care can provide relief and often shines in acute cases, but when back pain is chronic and frequent adjustments are required due to resumption of pain, ligament injury is often at the root.

## Why is back surgery recommended so often?

Having an MRI done may be a fast-track to a surgical recommendation. Many people have abnormal findings on an MRI but have no pain. Therefore, pain must correlate with history and physical examination. Often patients are signed up for surgery because they have an abnormal finding on MRI, resulting in the surgical removal of tissue, such as what occurs during a laminectomy. Removal of tissue without addressing the underlying instability can lead to Failed Back Surgery Syndrome and worsened arthritis. (See Figure 3.)



## CASE STUDY:

### Multilevel Spondylosis after Multilevel laminectomy

Figure 3

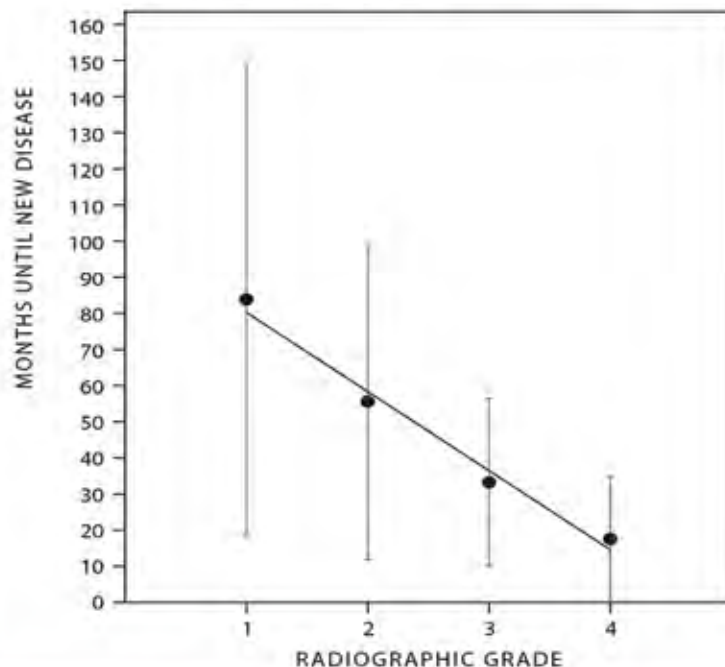
Despite chiropractic care and numerous allopathic modalities, JR received a multi-level laminectomy for back pain and sciatic symptoms. However, symptoms continued to progress to the point of "crawling on all fours." MRI revealed multi-level spondylosis, osteoarthritis and degenerative disc disease, and an EMG showed right-sided radiculopathy confirming why pain radiated down the leg. JR received 3 Prolotherapy treatments, significantly improving all symptoms, including the ability to walk normally.

### LEARNING POINT:

Laminectomy is an attempt to stabilize an unstable spine, but it is unsuccessful in treating instability long-term. Prolotherapy is effective post-surgery, but it is an even better treatment choice to stabilize the spine before surgery.

After spinal fusion, it is only a matter of time until the adjacent segments degenerate.

Figure 4



**Graph showing when the neck or back will hurt after a fusion operation.** This graph shows the durations until symptomatic adjacent-segment disease developed according to the radiographic grade for the forty-nine patients (fifty procedures) for whom radiographs were available.

Adapted from Figure 3, Hillbrand AS, et al. Radiculopathy and myelopathy at segments adjacent to the site of a previous anterior cervical arthrodesis. *The Journal of Bone and Joint Surgery*. 1999;81-A(4):519-528.

If fusion has been recommended, it is an acknowledgement of the vertebral instability, because fusion surgery is specifically utilized to prevent motion of the segments that are moving excessively. However, fusion surgery has many unnecessary long term risks and does not resolve the underlying ligament injury. Since spinal motion must come from somewhere, and fusion of two vertebrae causes them to remain immobile, increased activity is required of the segments above or below the fusion, leading to further instability and pain at those levels, and eventually to multi-level fusions. To fuse two vertebrae makes them immobile forever. Therefore, the motion required to do activities is increased on the adjacent vertebral segments and leads to more instability and pain, often leading patients undergo multi-level fusions. (See Figure 4.)

By comparison, regenerative treatments aim to relieve pain by stimulating the body to tighten and strengthen the ligaments naturally, without the installation of hardware or removal of bone, to correct the chronic subluxations and to stop perpetuating the degenerative cycle.

### What types of back pain conditions are appropriate for regenerative injection therapies?

Prolotherapy and its cellular cousins, Platelet Rich Plasma and Stem Cell Therapy are helpful for back pain that involves spinal instability: herniated discs, bulging discs, degenerative disc disease, chronic subluxation of the sacroiliac joints, and more. (See Figure 5.)

One of the wonderful things about regenerative therapy for back pain is that the individual can maintain activity and get back to sports or other activities they enjoy, without the need for extensive downtime. Treatments and exercise programs are individually tailored to promote healing and to return people to their active lives. It's really an amazing transformation to see people regain their mobility and independence!

### Spinal Instability

Figure 5

- Degenerative disc disease
- Spinal spondylosis (osteoarthritis)
- Spondylolisthesis
- Herniated discs
- Radiculopathy
- Myofascial pain syndrome
- Spinal stenosis

Common conditions caused by spinal instability.

- Stem Cell Therapy
- Prolotherapy
- Platelet Rich Plasma



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# Saving for College



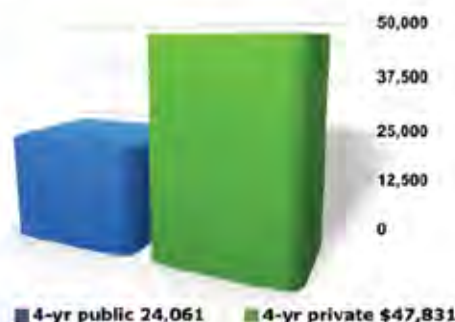
*Even though college costs are high, don't worry about saving 100% of the total. Many families save only a portion of the projected costs—a good rule of thumb is 50%—and then use this as a "down payment" on the college tab, similar to the down payment on a home.*

There's no denying the benefits of a college education: the ability to compete in today's job market, increased earning power, and expanded horizons. But these advantages come at a price. And yet, year after year, thousands of students graduate from college. So, how do they do it?

Many families finance a college education with help from student loans and other types of financial aid such as grants and work-study, private loans, current income, gifts from grandparents, and other creative cost-cutting measures. But savings are the cornerstone of any successful college financing plan.

## College costs keep climbing

It's important to start a college fund as soon as possible, because next to buying a home, a college education might be the biggest purchase you ever make. According to the College Board, for the 2015/2016 school year, the average cost of one year at a four-year public college for in-state students is \$24,061, while the average cost for one year at a four-year private college is \$47,831. Many private colleges cost substantially more.



Though no one can predict exactly what college might cost in 5, 10, or 15 years, annual price increases in the range of 3% to 6% would certainly be in keeping with historical trends. The following chart can give you an idea of what future costs might be, based on the most recent cost data and an assumed annual college inflation rate of 5%. (Source: The College Board, Trends in College Pricing, 2015)



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Year	4-yr public	4-yr private
2015/16	\$24,061	\$47,831
2016/17	\$25,264	\$50,222
2017/18	\$26,527	\$52,733
2018/19	\$27,853	\$55,370
2019/20	\$29,246	\$58,138
2020/21	\$30,708	\$61,045
2021/22	\$32,244	\$64,098
2022/23	\$33,856	\$67,303
2023/24	\$35,549	\$70,668
2024/25	\$37,326	\$74,201
2025/26	\$39,192	\$77,911

*Tip: Even though college costs are high, don't worry about saving 100% of the total. Many families save only a portion of the projected costs—a good rule of thumb is 50%—and then use this as a "down payment" on the college tab, similar to the down payment on a home.*

## Focus on your savings

The more you save now, the better off you'll likely be later. A good plan is to start with whatever amount you can afford, and add to it over the years with raises, bonuses, tax refunds, unexpected windfalls, and the like. If you invest regularly over time, you may be surprised at how much you can accumulate in your child's college fund.

Monthly Investment	5 years	10 years	15 years
\$100	\$6,977	\$16,388	\$29,082
\$300	\$20,931	\$49,164	\$87,246
\$500	\$34,885	\$81,940	\$145,409

*Note: Table assumes an average after-tax return of 6%. This is a hypothetical example and does not reflect the actual performance of any investment. All*





*Note: Investors should consider the investment objectives, risks, charges, and expenses associated with 529 plans before investing; specific plan information is available in each issuer's official statement. Also, before investing, consider whether your eligibility for any state tax benefits is contingent on your participation in your own state's 529 plan. There is the risk that the investments may not perform well enough to cover college costs as anticipated.*

*investing involves risk, including the possible loss of principal, and there can be no guarantee that any investing strategy will be successful.*

## College savings options

You're ready to start saving, but where should you put your money? There are several college savings options, and it's smart to consider tax-advantaged strategies whenever possible. Here are some options.

### 529 plans

529 plans are one of the most popular tax-advantaged college savings options. They include both college savings plans and prepaid tuition plans, though college savings plans are far more popular. With either type of plan, your contributions grow tax deferred and withdrawals are tax free at the federal level if the money is used for qualified education expenses. States may also offer their own tax advantages. (For withdrawals not used for qualified education expenses, earnings are subject to taxation as ordinary income and possibly a 10% federal income tax penalty.)

A college savings plan is an individual investment account that lets you direct your contributions to one or more of the plan's investment portfolios. With a prepaid tuition plan, you purchase tuition credits at today's prices for use at specific colleges in the future. With either type of plan, participation isn't restricted by income level and lifetime contribution limits are high, typically \$300,000 and up (limits vary by state).

### Coverdell ESA

A Coverdell education savings account (ESA) is a tax-advantaged education savings vehicle that lets you contribute up to \$2,000 per year for a beneficiary's K-12 or college expenses. Your contributions grow tax deferred and earnings are tax free at the federal level if the money is used for qualified education expenses. You have complete control over the investments you hold in the account, but there are income restrictions on who can participate, and the \$2,000 annual contribution limit isn't likely to put much of a dent in college expenses.

### U.S. savings bonds

The interest earned on Series EE and Series I saving bonds is exempt from federal income tax if the bond proceeds are used for qualified college expenses. These bonds earn a guaranteed (as to the timely payment of principal and interest by the federal government), modest rate of return, and they are

easily purchased at most financial institutions or online. However, to qualify for tax-free interest, you must meet income limits.

### Custodial account (UTMA/UGMA)

A custodial account allows a minor to hold investment assets in his or her own name with an adult as custodian. All contributions to the account are irrevocable gifts to your child, and assets in the account can be used to pay for college. When your child turns 18 or 21 (depending on state law), he or she will gain control of the account. Earnings and capital gains generated by the account are taxed to your child each year. Under the kiddie tax rules, for children under age 19 and for full-time students under age 24 who don't earn more than one-half of their support, the first \$1,050 of earned income is tax free, the next \$1,050 is taxed at the child's rate, and any amount over \$2,100 is taxed at your rate.

### Roth IRA

Though technically not a college savings option, some parents use Roth IRAs to save and pay for college. Contributions to a Roth IRA can be withdrawn at any time and are always tax free. For parents age 59½ and older, a withdrawal of earnings is also tax free if the account has been open for at least five years. For parents younger than 59½, a withdrawal of earnings—typically subject to income tax and a 10% premature distribution penalty—is spared the 10% penalty if the withdrawal is used to pay for a child's college expenses.

## A word on financial aid

Many families rely on some form of financial aid to pay for college, which includes loans, grants, scholarships, and work-study. Financial aid can be based on financial need or on merit. To determine financial need, the federal government and colleges look primarily at your family's income, but other factors come into play, including how many children you'll have in college at the same time and your assets. To get an idea of how much aid your child might be eligible for at a particular college, you can fill out the net price calculator on that college's website.

The bottom line, though, is don't rely too heavily on financial aid. Although it can certainly help cover college costs, student loans often make up the largest percentage of the typical aid package, and excessive student loan debt can negatively affect borrowers for years. The lesson? The more you save now, the less you and your child will need to fund later.

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# MATTERS OF THE HEART ATTACK VS. FAILURE

**W**e've all heard the dreaded names heart attack and heart failure. So what sets these two frightening conditions apart?

## Heart Attack

A heart attack, also known as a myocardial infarction, occurs when a blood clot develops at the site of plaque in a coronary artery, suddenly cutting off most or all blood supply to that part of the heart muscle. If the blood supply is not restored quickly, the heart muscle will begin to die due to lack of oxygen. This can cause permanent damage to the heart, and, in worst cases, death.

Heart attacks should not be confused with heart failure. Heart failure is typically a chronic, long-standing condition, while heart attacks generally come on suddenly.

## Know the Symptoms

Symptoms of a heart attack can vary from person to person. If you think you may be having a heart attack, seek medical help and call 911 immediately.

The National Heart Attack Alert Program notes these major symptoms of a heart attack:

- Tightness and discomfort in the chest area. Most heart attacks cause pain in the center of the chest, lasting for more than a few minutes. Discomfort may subside for a minutes and then return. The sensation is an uncomfortable pressure, a feeling of swelling, fullness, or a painful squeezing.
- Pain or discomfort in other areas of the body, including one or both arms, the back, neck, jaw or stomach.
- Shortness of breath. This symptom may occur before any feeling of discomfort arises in the chest, but most often accompanies it.
- Sweating and nausea. Breaking out in a cold sweat and feeling nauseated or lightheaded are also common symptoms of a heart attack.

To improve your heart health and prevent a heart attack, maintain a healthy weight, exercise, quit smoking, eat a healthy diet, manage blood pressure and cholesterol, and visit your doctor or cardiac specialist for regular medical checkups.



## Heart Failure

Heart failure (congestive heart failure) occurs when the heart fails to pump enough blood to maintain the needs of the body. A highly common condition, it affects an estimated 5 million people in the United States each year.

The best way to prevent heart failure is to manage risk factors that lead to it, such as high blood pressure, high cholesterol, coronary artery disease, obesity, and diabetes. Lifestyle changes, medication, and surgery can all relieve and improve symptoms.

Heart failure is a serious condition, but when the symptoms are managed with proper treatment, patients with heart failure can lead a normal, active life.

## Getting Help

While heart failure can be less dramatic than heart attack, it can also be just as lethal. If you suspect you or a loved one may be suffering from either heart failure or a heart attack, seek medical care immediately.

*This information is for educational purposes only and is not intended to replace the advice of your doctor or health care provider. We encourage you to discuss with your doctor any questions or concerns you may have.*

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# Back to School, Back to the Doctor

**T**he countdown is on, and parents and kids alike are feeling the pressure to get ready for school – there are school supplies to be bought, first-day outfits to be chosen, and anxieties to be calmed. But that's not the end of the list. A great start to the school year also means the healthiest start possible.

Whether your child is starting preschool or high school, it's important (and in some states, mandatory) to ensure that his or her medical records are current and, of course, that he or she is healthy. Most schools require a medical clearance form before kids can attend school or join extracurricular sports.

Here are a few of the many things that should be covered in your child's annual check up.

## Immunizations

First and foremost, the American Academy of Pediatrics (AAP) recommends that your child's immunizations be up to date. In Florida, except for religious or philosophical reasons, your child's immunizations must be kept current. Most vaccine series have been started by age 2, so the concern for school-age children is that they continue the series and get appropriate booster shots on time. A list of Florida immunization requirements can be found on the AAP website, [www.aap.org](http://www.aap.org).

## Hearing & Vision Health

Whether required or not, an annual evaluation of children's hearing and vision should be part of the back-to-school routine. Impaired vision or hearing can adversely affect learning, and young children often don't know or can't articulate that they can't see or hear properly.

According to the American Academy of Ophthalmology, more than 12 million children suffer from visual impairment. One in 20 preschoolers is affected, and one in four school-age children have a vision impairment. If you notice your child squinting to read or exhibiting any other eye problems, notify the doctor during the physical exam. And make sure your child uses protective eyewear while playing sports.



## Behavioral and Special Health Concerns

During an annual check up, aspects of behavioral development, such as speech and socialization, learning issues, and others may also be checked. If you have any concerns about your child's development this is a great time to bring it to the attention of the doctor for further testing if needed. If your child has any special medical needs, these also need to be addressed with the school. For instance, if your child needs medication throughout the day, parents need to ensure the appropriate people are informed about proper dosage.

## Managing Asthma and Allergies

Asthma symptoms sometimes dissipate during the summer, so kids may be taken off their medication or have their dosage altered. If your child has developed seasonal allergies, it is recommended that you set up separate visits in the spring and fall so your pediatrician can recommend proper preventive care for each season.

For children with severe food allergies, or other allergies that can cause anaphylactic shock (like allergy to bee stings), parents are required to give written consent for the school to administer epinephrine, otherwise the school is prohibited from doing so.

## Weight Management

Today, one in every three school-age children is considered overweight or obese. Childhood obesity can lead to health problems (such as diabetes, high blood pressure, high cholesterol, and many others), and can subject your child to social stigma.

Genetics plays a role, so be especially mindful if obesity runs in your family. During your child's annual physical exam, your pediatrician will check his or her body mass index (BMI) and ask about his or her diet and activity level. If your child is overweight, both may need to be adjusted. And remember, children need at least one hour of physical activity every day.

## The Importance of Back to School Physicals

While a physical exam may not seem urgent if your child appears healthy and strong, a yearly exam is a critical part of your child's health care. A physician can detect signs of poor health and identify early symptoms of a more serious illness that may not be obvious in its early stages. It also presents the perfect time for you or your child to ask questions about health, fitness, and other medical-related issues that may be of concern for your growing child. Many times the annual exam is the child's only doctor appointment all year.

The summer months leading up to the beginning of a school year are among the busiest times of the year at a doctor's office, and this can make getting an appointment a difficult task.

Having trouble getting into your regular family doctor? The Urgent Care Center can provide quality care for you and your family. Urgent Care Center physicians are equipped and qualified to handle all of your family's general medical needs—from a common cold to school physicals and beyond. Not to mention that an Urgent Care Center's extended hours make getting your child in for a physical easier and more convenient than your regular doctor's office.



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# LIVING WITH IRRITABLE BOWEL SYNDROME

By James J. O'Mailia, M.D., Gastroenterologist

I am often asked by my patients about their symptoms of **Irritable bowel Syndrome**, or IBS. I have known of this affliction for nearly 40 years, since I first entered Medical School, and have seen it used to explain multiple gastrointestinal symptoms – sometimes accurately, many times inaccurately. IBS has had various other names: spastic colon, nervous colon and mucous colitis – in order to describe symptoms of diarrhea, constipation, alternating diarrhea and constipation, abdominal cramps, etc. Once diagnosed accurately, IBS is treatable, but not curable, not at this time. IBS can occur at any age and present itself seemingly without rhyme or reason. It is an all-too-common malady that ranks just below the common cold as a reason for absenteeism at work and school. It is a misery that can lead to a distressed lifestyle.

IBS is not a disease, like Ulcerative Colitis or Crohn's Disease, nor is it Colon Cancer, and it is not life-threatening. As its name states, IBS is a "syndrome" involving symptoms, not necessarily the structural health of the colon. In fact, many patients with IBS have perfectly normal structural anatomy of their entire gastrointestinal tract. As an analogy, it's like buying a new Ferrari (structural anatomy), but has no gasoline (functional symptoms). Thus, as disruptive as IBS symptoms may be, they do not evolve into a significant threat or complication.

Although everyone has had a bout with IBS – before a first date, at a job interview, meeting a deadline or onstage at a public performance event – *true IBS sufferers* endure symptoms on a chronic, almost daily basis, regardless of circumstances. Besides diarrhea and constipation, other symptoms include bloating, excessive gas, increased mucus in stools, abdominal cramps and pain, and the urgent need to have a bowel movement. Although these same symptoms can be brought on by poor diet and bad habits like smoking and excess alcohol, *true IBS symptoms* usually worsen after eating and are relieved by a bowel movement or passing gas. They generally don't occur while asleep, but can awaken sufferers in early morning with an urgency to have a bowel movement. At other times, they will have several bowel movements with a sense

of incomplete evacuation, sometimes followed by hard, dry stools, like "hard pebbles" or like "pencil-thin". The symptoms of IBS wax and wane, when under stress, when least expected, and then retreat until the next inevitable bout

To live with IBS, patients will alter their lifestyles routinely. They will prepare for an important event by not eating for a length of time prior to the event, or they will take anti-diarrhea therapy prophylactically, to ensure confident control. They will study the layout of a restaurant or store to learn the location of the bathroom. They will calculate the distance from a destination back to their home should they need to leave in a hurry if a bout comes on, with the nearly incapacitating cramping, abdominal pain, nausea and sometimes vomiting due to IBS.

Despite extensive research and clinical studies, the full medical understanding of the causes of IBS remains elusive. What we do know is that the core cause of IBS symptoms is what is termed "dysfunctional gut motility", which is a disorganized squeezing of the gut, and not a more ordered, rhythmic movement – like a farmer milking a cow.

Extensive IBS studies point to hormonal and chemical neurotransmitters as the source of the dysfunction, but much more research is needed. Stress clearly plays a role in IBS, as it can trigger the symptoms. One important distinction: IBS is *not* "in your head", but rather "in your gut". It is real. Although stress relievers (anti-stress medications and quieting techniques) can help alleviate the symptoms of IBS, symptoms many times present themselves absent of stress.

To treat IBS, your doctor must first obtain an accurate diagnosis. Since there is no specific test for this, all other afflictions with similar symptoms must be ruled out. Diagnosing IBS may require a combination of history and physical examination, laboratory tests, x-rays and possibly a flexible sigmoidoscopy/colonoscopy to "see" the lining of the colon. If the diagnosis is IBS, treatment can begin.



There is no specific treatment for all presentations of IBS. However, your doctor can significantly help control your symptoms and therein improve your quality of life. Other than the aforementioned stress relievers, IBS is treated with diet changes and symptom relievers.

A recently developed dietary plan, known as the Low FODMAP diet, restricts certain carbohydrates and can drastically improve symptoms. Yet, in my years of treating IBS, I have found that diet changes are always individualized with basic, common-sense eating rather than purely micromanaging a diet verbatim, as some patients on so-called "healthy diets" can have the worst IBS symptoms. Medications help relieve symptoms, but are constantly changing – and what works for some patients may not work for others.

It generally takes time and effort between the doctor and the patient to reach a good outcome. This includes education, understanding and determination in working together, and staying compliant. As IBS research continues to find an absolute cure, there is the other great hope that better therapies, including diet, natural products and standard medications, will one day lead to maximized control of symptoms and *living without IBS*.

*Be well and stay well.*



**JAMES J. O'MAILIA, M.D., P.A.**  
*Specializing in Gastroenterology*

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# Back to School Blues

It's that time again! School is back in session which means Summers over, great time with friends, sleeping in late, no agenda, the scheduled is filled with only fun comes to a screeching halt.

**Getting back on track after summer break is a challenge for both Parents and Children.**

**#1 Emotional challenge:** Having been with family or friends for a period of time in a non-stressed environment makes it all the more emotional when you have to separate the time for responsibilities.

**#2 Physical challenge:** Waking up early and Re-training your body from being on a casual break to sitting in class all day can make you more tired, fidgety, and less focused.

**#3 Mental Challenge:** Having to focus for hours on school subjects can be very trying on one's brain. Mental fatigue sets in along with mood changes.

**Prepare for a mock trial before school starts this will help get a head start on the above School Blue Triggers.**

**#1 Start family conversations** to help shift the focus on school this will help create a plan to fit in everyone's schedule. Ie: Preparing lunches, transportation, after school activities, sport practices and so on.



**#2 Start going to bed 15 min earlier each night and wake up 15 min earlier each morning** this will help your body adjust before school starts.

**#3 Brain exercises ...** training your brain to focus on school and not summer fun will be a challenge especially living in Sunny Florida, but getting your brain in gear ahead of time will help ease you into your studies without difficulty.

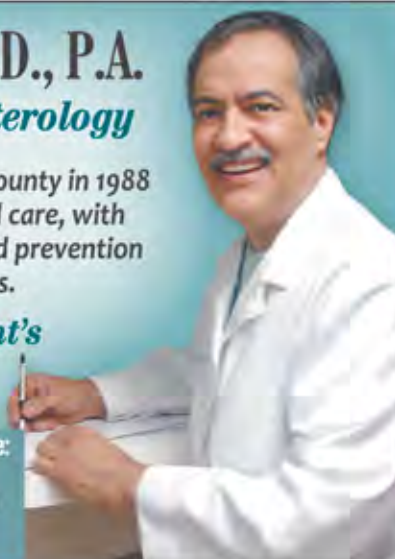
Going back to school can be as fun as Summer Break.

It's all about preparing, enjoying the gift of learning, and making memories!

Wilson's Wellness Center wishes you the best 2016-2017 School Year!

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# SENIOR SAFETY: KEEPING THE ELDERLY SAFE IN THEIR HOME

By Jeff Spector, Lead Designer - Curtis Allen Designs

If someone were to ask what your dream home would be like -- where you could live comfortably and enjoy this home until the end of your days -- what would your answer be? Would you have large, ornate rooms with a beautiful view, a modern kitchen with a large island? Would you have all the latest in technology to keep up with this ever-changing world, and all of the amenities to entertain your loved ones?

There are many combinations of luxury and necessity that each of us finds ourselves fantasizing about when we envision the home we want to live in as we age. When we think of a home that is comfortable, there is a certain expectation that we will be able to navigate it with ease, that we will be able to enjoy living in it for the rest of our lives. One way to make this dream a reality is by ensuring that our home is accommodating to any situation.

There are many ways to make our home a safer place to live and visit; some of which we can do ourselves, while others are best left to the professionals. Some of the things we can do include keeping the home clean and clutter-free with ample lighting, making sure fire extinguishers and smoke detectors are present and working. We can also secure rugs or replace them with nonslip rugs, keep chemicals away from food, dispose outdated products, and check all extension cords for damages or replace them with power strips.

The modifications that Certified Aging in Place Specialists (CAPS) can help you with include adding grab bars and hand rails, building wheelchair accessible ramps, switching tubs out for showers with transfer benches or installing Bliss Tubs. In addition, changing hardware on cabinets from knobs to pulls or levers, installing motorized window treatments and remote controlled fixtures will make life easier as well.





It is no secret that we will all age, and some of us or our loved ones, will be in a situation (whether it be illness or disability) where safety and stability will become ideal much earlier than others. The good news is that we can take steps necessary to prepare for these needs and ideals to change. Options today allow us to modify or design our homes with the needs of someone with or without disabilities in mind, a term called Universal Design.

CAPS will be able to assess and address with you the Five A's of Universal Design- availability, accessibility, acceptability, affordability and adaptability. Your specialist will be able to determine your immediate needs, but it is a good idea

to have a physical therapist or physician inform you of the assistance you may need within the upcoming years, since every person ages differently.

Keeping in mind that Universal Design is not only for the elderly, most of the options available are also helpful to someone who is planning to have surgery or is recently recovering from an accident. Safety features that are designed to assist people with mobility and stability are good to have installed, whether you are old or young, in perfect health or ill. Some options to consider are wheelchair ramps, stair glides, walk-in tubs, hand rails, grab bars, zero threshold showers, 34-inch wide door jambs and widened areas between furniture.

With the safety of our loved ones in mind, envisioning a home that will accommodate our needs is now easier than ever. At Curtis Allen Designs, our staff are CAP specialists who can help you make the best educated decision as to which types of safety features to include in your universal design. Give us a call today to discuss your options or visit our showroom to see how these safety features, along with Curtis Allen Designs, can make your life easier. Let us walk you into the future of Living and Aging in Place. Our showroom is open Monday to Friday between 8am and 5 pm. We look forward to meeting you there!

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# QUESTIONS ABOUT YOUR HEARING?

## Get Your Answers from **EXPERIENCED** Clinicians!

By Hoglund Family Hearing and Audiology Services

"When it comes to taking care of hearing loss, **experience really matters!**" states John Hoglund of **Hoglund Family Hearing and Audiology Center**. "Most people do not fully understand how complicated hearing loss can be. There are so many factors involved including the type of loss, how long the loss has been present, sensitivity to loud noises, balance and vertigo issues, as well as "ringing ears" and other head noises. Hearing loss has many causes, and impacts Patient's lives in many ways. Clear data to the brain is critical for keeping strong cognitive ability ... and untreated hearing loss dramatically influences Patient's memory. You need somebody with experience and knowledge that keeps you, the Patient, completely informed of the entire process and will work with you to find the best solution for your lifestyle and budget."

"We are very proud of the staff we have assembled and the level of experience between our Audiologists and Hearing Instruments Specialist makes a huge difference in your clinical outcome", Mr. Hoglund continued, "My wife Patricia and I and our top two Audiologist have well over 100 years' experience between us in helping the hearing impaired. ANY of us... **or in some cases ALL of us...** are accessible to every Patient who visits our Practice. We believe in a "team approach" to working with our Patients. We have Audiologists that have seen every pathology you can imagine, including surgical ears, vertigo Patients, Meniere's disease Patients, single-sided deafness cases, and a lot of Patients with tinnitus or ringing "ears"! We opened the area's first Tinnitus Clinic four years ago and have changed the lives of many people who were told by previous practitioners that **nothing could be done to help them and they had to just learn to live with it!** **Dr. Dornton is now accepting new Tinnitus Patients!**



Dr. Lynette Dornton AuD.

We also have an AMAZING team of younger Hearing Instruments Specialist with very sharp technical computer programming skills, who do an

outstanding job of always staying current with the rapidly exploding technology from each of the major manufacturers! They have a great depth of knowledge in all of these fitting algorithms and software programs. Technology in our field is like other area of electronics and new innovations are coming at us at a faster pace than we ever imagined, but our staff prides themselves on being our industry's version of a "geek squad" in keeping up with these technological advancements. If you have instruments purchased elsewhere that are NOT meeting your needs and want a FREE "Second Opinion" about the way they are programmed, please give us a call! The more sophisticated the devices have become; ... the more important your Clinician's technical skills are to a successful fitting. I would put our staff's technical expertise up against any Practice in the nation!

### KNOWLEDGE IS POWER WHERE YOUR HEALTH IS CONCERNED!

We built our Practice on a foundation of providing education to the hearing impaired. We have given educational lectures since 1985 throughout the community for groups and organizations seeking speakers, and during the winter months we have monthly "Lunch and Learn" seminars inviting people to local area restaurants to hear from educational speakers who are experts in hearing issues from across America. We invite manufacturers' representatives from the major manufacturers to hold product workshops showcasing the newest breakthroughs in today's invisible, digital, wireless, and Bluetooth technology. We provide all of these services and education completely free of charge to our Patients! "I never wanted expense to be a barrier to education", states Mr. Hoglund, "so we always do our evaluations **completely free of charge or obligation**. The only **obligation** a Patient has is to themselves and to their families, but I want them to know everything they need to know about their hearing issues! Our little slogan we've used for 20 years is... **"All it will COST is a little of your TIME... but the KNOWLEDGE you receive may be PRICELESS!"** "Please call us today to schedule an evaluation if you have any questions about any topic concerning your hearing!"

### WE ARE PROUD OF OUR AWARD WINNING STAFF OF CLINICIANS!



This year we would like to THANK our Patients and friends of the Practice in acknowledging our amazing team of Clinicians and support staff by voting us THE BEST in the following "Reader's Choice" Awards:

#### **BONITA'S BEST AWARD**

**BEST Audiology Practice**  
(Our 13th Year of Winning Bonita's Best)

#### **BEST OF SOUTHWEST FLORIDA**

**BEST Hearing and Testing Center**  
**BEST Tinnitus Treatment Center**  
**BEST Audiologists**

#### **BEST OF NORTH FORT MYERS**

**BEST Hearing Center**  
(In our FIRST full year in Tucker Vision Center)

**We feel truly BLESSED to have such WONDERFUL TEAM of Hearing Professionals!**

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**Bonita Springs, FL 31434**  
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**Estero, FL 34135**  
**(239) 992-HEAR (4327)**

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**North Fort Myers, FL 33903**  
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13710 Metropolis Ave.Suite 101  
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**(239) 498-4240**

# PREVENT KNEE REPLACEMENT SURGERY

By Physicians Rehabilitation

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

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

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

Currently there are multiple FDA approved hyaluronic acid preparations, which are extracted from rooster combs, and there are some synthetically grown products for those with avian allergies. They have trade names such as Supartz and Orthovisc.

These injections are also called viscosupplementation as they restore the normal viscoelastic properties to synovial fluid. This can help protect cartilage,



lubricate the joint and improve the shock absorbing effect of the knee. It is also suspected that hyaluronic acid injections may protect cartilage cells and actually promote the formation of more cartilage. This is the subject of a lot of speculation and has not been definitively proven.

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

Knee injections are typically extremely effective. A recent study on our website, shows the injections, which are as painless as a flu shot, when done under fluoroscopic guidance to ensure the hyaluronic acid passes through the synovial membrane, combined with physical therapy focused on painless strengthening of your knee area, and proper bracing to allow the fluid to move freely throughout the joint space, creates the highest level of pain reduction, with over 99% of patients we treat achieving an average pain reduction of 77%. These results are often good enough to delay the need for a knee replacement surgery and avoid it altogether.



If you suffer from pain due to osteoarthritis, rheumatoid arthritis or post traumatic arthritis, Physicians Rehabilitation can help.



**239-768-6396 | [www.PhysiciansRehabilitation.com](http://www.PhysiciansRehabilitation.com)**  
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## Do you suffer from Ringing in the Ear?

*There is help and hope for Tinnitus!*

### What is tinnitus?

The perception of sound in the ears or head where no external source is present. Some call it "ringing", or a "buzz" or "head noise". For many people it is disruptive and annoying.

### Treatment is available!

Research at Duke University has shown that over 80% of all tinnitus sufferers experienced significant improvement after using a new F.D.A. approved treatment process.



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  - 3801 Bee Ridge Rd. Unit #9/10, Sarasota, FL 34243 - (941) 702-9575
  - The Villages at Spruce Creek Professional Center, 10935 SE 177th Pl. #405/406/407, Summerfield, FL 34491 - (352) 775-3339
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# EMPTY NESTERS...GOT NEW GRANDKIDS? ESTATE PLANNING TIPS FOR NEW FAMILY MEMBERS.

By Steven J. Gibbs, Esq.

**T**his month's article springs from my personal experience because we have a newborn and this changes everything for estate planning. Changes resulting from new family members apply to parents and grandparents alike and this article focuses on the kinds of updates that are necessary when new family members arrive on the scene.

## Key Estate Planning Documents Will Need To Be Updated To Protect A New Addition To the Family As Follows:

1. Guardianship Provisions concerning the care of children will need to be updated.
2. Wills and Trust Provisions concerning the distribution of assets will need to be updated.
3. Medical Planning updates concerning issues like "cord blood" are important and may be missed.

In a previous article, I wrote about how 3 major life events necessitate three basic estate-planning documents. That article did not address the major and most joyful life event of additional family members or more specifically...new children and grandchildren.

**1. Guardianship Provisions Protect Children and Grandchildren.** So provisions for Guardianship are all about who will care for children/grandchildren in the event the current primary caretakers cannot continue to do so. In the most common case of parents, if one parent becomes unable, the other is the natural guardian. The importance of planning occurs when both parents cannot continue to care for children and a third party must be designated as guardian. The person or persons who are designated in most estate planning cases are often siblings of either parent or perhaps the grandparents depending upon age and ability to care for children. The most important estate planning guideline to consider is that the most stable and trustworthy candidates are chosen for the best interest of the children, and that the documents are abundantly clear concerning who the guardians are and perhaps who the successor guardians are. A properly drafted estate planning should also address what happens if the designated guardian becomes divorced or widowed due to unexpected life changes. For example, does the remaining individual continue to serve or does a successor sibling and spouse take over? Life changes concerning your appointees are another good reason to have regular estate planning update meetings as we've discussed in the past.



**2. New Family Members Necessitate Changes to Distribution of Assets in Wills.** A well prepared Revocable Living Trust or Last Will & Testament should include some language to accommodate children or grandchildren who are born following the creation of the document. Usually your Revocable Living Trust or Last Will will say something like "children as defined by this document will include any children born hereafter..." Although estate planning documents may say something about after-born children, they may also say the opposite; so a "best practice tip" is to specifically update your Revocable Living Trust or Last Will so that it specifically mentions your new family member. Changes to your Revocable Living Trust or Last Will apply to the distribution of assets between children or grandchildren and also apply to any Guardianship designations in the documents as discussed above.



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### 3. New Family Members May Necessitate Specific Medical Planning Concerns That Are Often Missed.

Science often moves more quickly than the law and the law is often slow to adapt. A big concern that can arise nowadays, based upon my own experience with clients, is estate planning for cord blood banking and related concerns. This is just one example and it is very important to address questions such as the rights to "cord blood" and "cord tissue" pass if the primary account holders (often the parents) are disabled or become incapacitated. For example, it is often advisable to transfer the cord blood rights to a revocable living trust so that upon disability or death, the successor trustee will have the authority to utilize this resource for benefit of whomever needs it.

The "take away" in all of this is to consider what updates are necessary when new little ones arrive on the scene in your family because they are too important to miss.

As always, I hope this was helpful, and  
Until next time...

Steven J. Gibbs, Esq.



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

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

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

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

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

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DENAS PCM 6 is a superior advanced SCENAR device that is a compact portable solution that fits in your hand at home or on the go. When you use the device, it transmits bipolar electrical pulses, similar to a tingling sensation that is easily directed to different parts of your body. No special medical education is required for effective use of the device. Denas technology helps you overcome acute or chronic health issues and restore body's lost functions from conditions that started years ago. Dedication and determination will persevere through continued use of the device as it helps the body naturally repair itself and facilitates the restoration of homeostatic function. Using this SCENAR technology, it can target different pain conditions and health issues with different adjustable frequencies. The DENAS PCM 6 has many natural healing capabilities without the use of drugs.

### Denas delivers when others fail.

Denas is very different from other electro therapy units such as TENS. The feature of TENS impulse is asymmetrical bi-phase square wave that stimulates A and B fibers and lacks a biofeedback capability. However, Denas devices have a fixed and constant distance between cathode and anode, the neuro-electrical impulse is high amplitude and mirrors the body's natural nerve signal so it stimulates C-fibers, which make up about 75% of all nerves in the body, which explains the rapid and effective results. The C- fibers react to the electro-neuro stimulation which produce neuropeptides, endorphins and regulatory peptides. These neuropeptides are the human body's natural pharmaceuticals that carry out all auto-regulatory and auto-therapeutic processes focused on the maintenance and restoration of homeostasis healthy balance of the body's cellular and organism health.

### Solid Foundation with history

SCENAR technology was developed in the 1970s for the Russian cosmonauts use in space and Olympic team members instead of conventional medical or pharmaceutical methods. It provided Russia a secret weapon for fast muscle recovery from back injuries, muscle injuries, shoulder, knee and joint injuries sustained in intense competition of individual sports and team sports during the Olympics. When other athletes

would be sidelined, Russia's athletes would quickly overcome injuries through its use. Kept Top Secret for almost 2 decades the technology was finally shared with the world after the collapse of the USSR in 1991 and is now enjoyed by millions worldwide.

### 40 years of clinically proven results

While the FDA has approved SCENAR for muscle reduction, biofeedback, and the treatment of pain. Russian physicians have long used SCENAR to treat virtually all organ systems: musculo-skeletal, nervous, digestive, pulmonary and cardiovascular. With over forty years of published research and proven results in hospitals and clinics throughout Russia, Europe, and the United Kingdom. Russian experience demonstrates SCENAR effectiveness in close to 90% of all patients treated, with full healing noted in two out of every three patients, and significant improvement and recovery in the rest. DENAS SCENAR is now available so you can enjoy the benefits of this affordable pain-free device that is Drug free, safe & effective.

### Easy to use

You can easily manage this portable device since it is a light-weight and compact. The DENAS PCM 6 solution operates on two AA batteries, providing therapy when you need it. It also comes with a sturdy and compact carrying case that you can take with you when you travel.

There are twenty-four preset automated programs with the new DENAS PCM 6. This device offers picture illustrations for each application. Your new best friend also includes over one hundred manual frequencies for other health solutions. The MED (Minimum Effective Dose) mode, and a screening mode to locate internal issues.

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- Throat
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- Cold
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- Trauma
- Asthma



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Until now, you could only purchase the DENAS PCM 6 from Russia but as of May 2016, you can buy this new device at [www.denaspainreliefstore.com](http://www.denaspainreliefstore.com) We are excited to be the only USA based DENAS Dealer offering a solution for your health and wellness needs.

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*You can find more information about the DENAS PCM 6 call Coach Jimmy K direct at 503-395-4142 and ask about the Special Lee County, FL Bonus with your order (\$100.00 Value).*

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Ricardo S. Bocanegra, D.D.S.

# Back to School & Oral Health: A Window to Your Overall Health

**Y**our oral health is more important than you may realize. Get the facts about how the health of your mouth, teeth and gums may affect your general health.

Did you know that your oral health can offer clues about your overall health? Or that problems in your mouth can affect the rest of your body? Understand the intimate connection between oral health and overall health and what you can do to protect yourself.

## What's the connection between oral health and overall health?

Your mouth is teeming with bacteria — most of them harmless. Normally the body's natural defenses and good oral health care, such as daily brushing and flossing, can keep these bacteria under control. However, harmful bacteria can sometimes grow out of control and cause oral infections, such as tooth decay and gum disease. In addition, dental procedures, medications, or treatments that reduce saliva flow, disrupt the normal balance of bacteria in your mouth or breach the mouth's normal protective barriers may make it easier for bacteria to enter your bloodstream.

## What conditions may be linked to oral health?

Your oral health may affect, be affected by or contribute to various diseases and conditions, including:

- **Endocarditis.** Gum disease and dental procedures that cut your gums may allow bacteria to enter your bloodstream. If you have a weak immune system or a damaged heart valve, this can cause infection in other parts of the body — such as an infection of the inner lining of the heart (endocarditis).

- **Cardiovascular disease.** Some research suggests that heart disease, clogged arteries and stroke may be linked to oral bacteria, possibly due to chronic inflammation from periodontitis — a severe form of gum disease.

- **Pregnancy and birth.** Gum disease has been linked to premature birth and low birth weight.

- **Diabetes.** Diabetes reduces the body's resistance to infection — putting the gums at risk. In addition, people who have inadequate blood sugar control may develop more-frequent and severe infections of the gums and the bone that holds teeth in place, and they may lose more teeth than do people who have good blood sugar control.

- **HIV/AIDS.** Oral problems, such as painful mucosal lesions, are common in people who have HIV/AIDS.

- **Osteoporosis.** Osteoporosis — which causes bones to become weak and brittle — may be associated with periodontal bone loss and tooth loss.

- **Alzheimer's disease.** Tooth loss before age 35 may be a risk factor for Alzheimer's disease.

- **Other conditions.** Other conditions that may be linked to oral health include Sjogren's syndrome — an immune system disorder — and eating disorders.

Be sure to tell your dentist if you're taking any medications or have had any changes in your overall health — especially if you've had any recent illnesses or you have a chronic condition.



## How can I protect my oral health?

To protect your oral health, resolve to practice good oral hygiene every day. For example:

- Brush your teeth at least twice a day.
- Replace your toothbrush every three to four months.
- Floss daily.
- Eat a healthy diet and limit between-meal snacks.
- Schedule regular dental checkups.

Also, watch for signs and symptoms of oral disease and contact your dentist as soon as a problem arises. Remember, taking care of your oral health is an investment in your overall health.

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# Laser Acupuncture - Ancient Wisdom Meets High Tech

Dr. Brian Healy, AP, DOM, LMT

**L**ight is essential to all living creatures on Earth. The energy from the sun is what powers our planet, creating our weather and directly providing vital sustenance to the simple organisms at the foundation of our biosphere (plankton, algae, and plants) and indirectly feeding all the animals higher on the food chain that depend on the simpler life forms for food. Even the power that we derive from fossil fuels originated as solar energy.

Cells have organelles called chromophores which absorb light and then stimulate the mitochondria (the powerhouse of the cell) to improve cellular metabolism. In addition, it has been shown that cells themselves emit light particles called biophotons which have similar properties to laser light. It is theorized that cells may actually communicate with each other using biophotons. This idea is very similar to the Eastern concept that it is Qi that directs the communication and mutual functioning of tissues and organs in the body.

## Tried and True Treatments Using Light Therapy.

Various forms of light have been used therapeutically for many centuries. Heliotherapy, or treatment with sunlight, was used by the ancient Egyptian, Greek and Roman physicians to address many conditions and has almost certainly been practiced since the dawn of time.

For decades visible red and infrared laser light has been used to accelerate wound healing and hair growth, enhance the formation of new blood vessels, and promote enzyme synthesis.

## Laser Light Therapy

Laser therapy is also known as laser phototherapy or laser bioregulation.

Most therapeutic lasers are classified by the FDA as Class 3B or low level lasers that emit energy of less than .5W. Class 4 lasers deliver power upwards of .5W and can also be used therapeutically. Surgical and cutting lasers are Class 4 lasers. More power does not mean more therapeutic benefit however. In low level laser therapy the cells are stimulated by photons. Higher power lasers work primarily by heating the tissues.

Laser light is delivered to the patients in doses of energy called Joules. This dosage varies depending on the depth and type of tissues being treated. Surface tissues (like acupuncture points) are commonly treated with 4-8 Joules. Deeper tissues may be treated with



dosages of 20- 40 Joules. Laser systems of different wavelengths act upon different tissues - water, blood, bone and fat cells all absorb laser light at different rates at different wavelengths. Lasers may also be pulsed at specific frequencies to resonate with particular biological tissues or organs. By carefully selecting the proper wavelength, dosage, and pulse frequency we achieve the optimum response from the target tissues.

The general benefits of laser therapy are decreased pain, decreased inflammation, and increased tissue regeneration.

## Laser Acupuncture

Acupuncture points are like a network control centers that regulate physiological functioning. Stimulating an acupuncture point, whether with a needle or with photons, activates the body's ability to self balance and to heal. Laser acupuncture is a form of acupuncture stimulation which has proven to be a safe effective alternative to standard acupuncture treatment.

By using a beam of laser light focused into a very small spot we can activate acupuncture points. Pictured in these photos is a twelve channel laser needle system, which connects to points on the body using fiberoptic cables. Using this method of laser acupuncture, treatment time may be as little as twenty minutes and is completely painless. It is a more subtle form of treatment and may require multiple sessions for full effectiveness.

## There are several advantages to using the lasers over needles:

Biologically, the laser bio-stimulation will increase the cell production in connective, tendinous, and cartilaginous tissue. This results in increased collagen production. Research demonstrates that the laser affects the mitochondria thereby enhancing the production and synthesis of ATP (Adenosine Triphosphate) and optimizes oxygenation and phagocytosis.



Photo by Julene Dolewa

The healing process increases the tensile strength of healed tissue, reduces swelling, increases blood flow, increases lymphatic activity, reduces inflammation and increases cellular metabolism and speeds the repair process. The results are accumulative.

## 4 Distinct Effects

- Growth factor response within cells and tissues.
  - Pain relief as a result of increased endorphin and serotonin release.
  - Increased lymphatic activity and strengthening of the immune system response.
  - Stimulation of acupuncture points, increased collagen and ATP production, increased circulation.
- Treatment is non-destructive, safe, and painless. The more you use it, the more effective the results.

Dr. Brian Healy has found that laser acupuncture is particularly beneficial in treating painful, swollen joints and has had great success using this technology in treating osteoarthritis of the knee. "In addition to joint pain, I use it to treat patients who have edema and are not able to undergo traditional acupuncture needling. Children are also excellent candidates for laser acupuncture as well as anyone who is needle sensitive."

For more information about laser acupuncture or to schedule a consultation, call Dr. Healy's office today at 239-437-WELL (9355).

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# Medicare Enrollment NOT the Same as Social Security!

There seems to be a lot of confusion between the two.

By Ulla-Undine Merritt (Dee) National Producer Number (NPN) 8853366

**Social Security** you can apply online at [www.ssa.gov](http://www.ssa.gov) for retirement benefits or benefits as a spouse if you:

- are at least 61 years and 9 months old;
- are not currently receiving benefits on your own Social Security record;
- have not already applied for retirement benefits; and
- want your benefits to start no more than 4 months in the future. (We cannot process your application if you apply for benefits more than 4 months in advance.) \*Social Security

**Medicare** you can apply online at [www.medicare.gov](http://www.medicare.gov) for Medicare benefits for yourself 3 months before your 65th birth month. Example June 20th birthday you can apply as early as March 1st. If your birthday is any day of the month except the 1st, your Medicare will be effective the 1st day of your birth month. The same example as above your benefits would begin June 1st. If your birthday is effective the 1st of the month then your benefits begin the month before, so a June 1st birthday your benefits would begin May 1st. VERY important if you DO NOT take Medicare Part B & D when you are eligible when you do take it there is a penalty for each month you did not have them and that penalty will last for the rest of your life or for as long as you take these services. If you have employer coverage (not cobra) this is a valid waiver. If you take these after you leave employment there is a special form your employer must fill out so that you are not charged a penalty.

**Both Medicare and Social Security** require you to be eligible by qualifying either through yourself or your spouse.

Most people that have worked in United States of America receive Medicare Part A at no month cost to them. This is because they have worked at least 40 quarters (approx. 10 years); this is based on a minimal earnings calculator (see [www.medicare.gov](http://www.medicare.gov) for more information).

**In general Medicare Part A covers:**

- Hospital care
- Skilled nursing facility care
- Nursing home care (as long as custodial care isn't the only care you need)
- Hospice
- Home health services

There is a Medicare Part A deductible of \$1,288 for each benefit period for "inpatient" hospital stays. In order for Medicare to cover skilled nursing facility care you need to have a 3 day hospital stay. You must make sure you are admitted not kept for observation, always ask.

**In general Medicare Part B covers:**

- **Medically necessary services:** Services or supplies that are needed to diagnose or treat your medical condition and that meet accepted standards of medical practice.
- **Preventive services:** Health care to prevent illness (like the flu) or detect it at an early stage, when treatment is most likely to work best.

**Part B covers things like:**

- Clinical research
- Ambulance services
- Durable medical equipment (DME)
- Mental health
- Inpatient
- Outpatient
- Partial hospitalization
- Getting a second opinion before surgery
- Limited outpatient prescription drugs

**Medicare Part B premium varies based on income.** If you file an individual tax return if your income is less than \$85,000 and filing joint less than \$170,000 your monthly premium is \$121.80. For other incomes please visit [www.Medicare.gov](http://www.Medicare.gov).

**Medicare Part D Drug Coverage** these are administered through Insurance companies.

**Your actual drug plan costs will vary depending on:**

- The drugs you use
- The plan you choose
- Whether you go to a pharmacy in your plan's network
- Whether the drugs you use are on your plan's formulary
- Whether you get Extra Help paying your Medicare Part D costs

Once you have coverage Medicare Annual Election Period is October 15th to December 7th, during this time you can change your plan Medicare Part C or Part B. The effective date will be January 1st of the following year. \*resource [www.medicare.gov](http://www.medicare.gov)

Also remember when moving, getting married or divorced, adding to your family you have a special enrollment period to apply or change your health insurance coverage. Also check your wills, trusts, and make sure they follow Florida's laws and guidelines. Establish yourself with a local attorney, CPA, Financial Planner / Insurance Agent. An annual review is very important. Too many times people assume. Don't assume. Ask a professional, most of the time your first consultation is at no charge.

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# WAITING FOR A HEART

## BABY ADDILYN'S JOURNEY

**T**wo days shy of 26 weeks gestation, Amy & Daniel Jodoin received devastating news during a routine visit to monitor their twin girls. During the echocardiogram, the tech noticed something wrong and asked the doctor to take a look. At that time, Amy was immediately sent to Shands at the University of Florida Labor and Delivery unit to be assessed by a cardiologist. Upon further testing they found that one of their babies, known to the doctors as baby A, had a significantly enlarged left ventricle. There was no explanation as to the cause making it more difficult to accept the news to follow.

The team at Shands prepared Amy for a possible emergency delivery. The prognosis for "Baby A" was very grim, the baby would most likely not survive in utero longer than a few days. The team of doctors informed the Jodoins' that there was nothing they could do at that point. However, "Baby B" appeared to be in perfect health. While grateful for the news of one healthy baby, this posed a new challenge. Exhausted and heartbroken the couple was sent home to wait for their unborn daughter to pass ...or to wait for a miracle. Over the course of the weeks and months that followed "Baby A", named Addilyn Grace, would defy the odds by continuing to grow and develop normally, with the exception of her heart. Amy and Daniel, not embracing the doctors' words, were going to fight as long as Addilyn was.

By 28 weeks the cardiologist was finally able to get the images needed to diagnose Addilyn with critical aortic stenosis, tri-cuspid regurgitation, mitral valve regurgitation, and pulmonary valve stenosis. The stensed aortic valve had caused the left ventricle to be severely enlarged. With Addilyn defying the odds, her cardiologist enlisted an interdisciplinary team consisting of transplant doctors, cardiac surgeons, and the director of the neonatal intensive care unit to search for options. The team discussed several options including a number of surgeries or heart transplant, which all came with an "if" factor as well a number of risks. At the end of the discussion Amy and Daniel were told there was little chance any of the procedures would be successful.



With transplant a viable option, the team decided, at 34 weeks gestation, Addilyn would be placed on the fetal transplant list. This meant, should a heart become available after 34 weeks, a c-section would be done and Addilyn would go immediately to the OR for the transplant. Although a new heart didn't become available and this wasn't an option for Addilyn, hopefully more facilities will utilize the fetal listing and a child can be saved.

At 37 weeks Amy was admitted to Shands for continuous monitoring with a planned delivery date at 39 weeks in order to extend the time on the fetal transplant list. Because of complications prior to 39 weeks gestation, Addilyn Grace and Ainsley Rae made their appearance at 10:00 and 10:01 AM on May 10th. On day one of life, Addilyn was added to the national transplant list as 1a,urgent status.

At birth, an entire team of doctors, nurses, and other clinical staff were prepared for a critical baby that had been given a "slim chance" of survival. However, they were given a baby that did not require any support. Once again Addilyn, the baby that there was nothing that could be done, given a slim chance to live, and going to need unmeasurable amounts of support, defied the odds against her. Addilyn would have her aortic valve ballooned at just 2 days old and transferred to the pediatric cardiac intensive care unit. Her left ventricle showed immediate improvement after the balloon which would end up diminishing in the days to follow. Addilyn Grace is still in the congenital heart unit at Shands, 82 days old and waiting on the perfect heart. She is on a ventilator and medication to help the heart perfuse the body.

As the days turn into weeks, Amy and Daniel remain hopeful that they will receive the news that a heart has become available for Addilyn. One thing both Amy and Daniel have struggled with is knowing that for Addilyn to live, other parents will lose a child. They pray continuously for a new heart for their baby and for the donor's family. "We know God has big plans for Addilyn," Amy and Daniel proclaim. "Going through this has given us a new perspective on life. The small things that seemed so significant now seem so trivial."

Addilyn's journey has inspired Amy and Daniel to help educate others about organ donation and they encourage you to consider registering as a donor.

### More Organ Donors are Needed

In the United States, there is a large shortage of organ donors. Those on the organ donor transplant list can be waiting anywhere from several months to years. A shocking number of patients on the waiting list die every year. You can help save lives by registering as an organ donor and spreading the word to your family and friends.

One donor can make a significant difference in multiples people's lives. It's important to know the impact you can make by registering as an organ donor. One day it could be you who needs an organ transplant.

Every 10 minutes, a person is added to the national organ donation waiting list, which currently adds up to a total of more than 123,000 people.

The following numbers indicate the number of patients on the organ donation waiting list as of the date this article was written:

Kidney: 101,653 people  
Liver: 15,241 people  
Heart: 4,194 people  
Lung: 1,584 people  
Pancreas: 1,063 people

Approximately 21 people die every day waiting for an organ.

### Help Improve These Numbers

Registering as an organ donor will improve these statistics by lowering the number of people waiting for an organ.

As a registered organ donor, your donation has the potential to save or improve more than 50 lives. One donor can provide: Kidneys, Pancreas, Liver, Lungs, Heart, and Intestinal organs.

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## **... But as for me and my household, we will serve the LORD** From Joshua 24:15

### **When you think about it, it's a pretty bold statement.**

It is one thing for an individual to stand and say "As for me, I will serve the Lord!" To make that statement alone requires a great deal of faith on my part, and a great deal of faithfulness on the Lord's part.

It is an even bigger thing to make a claim of future faithfulness for myself and my family. That's boldness! You probably know already that the words above are from the lips of Joshua, the Old Testament character that led the people of God into the Promised Land. By the time he spoke these words, he was a faith-tested, battle-experienced, miracle-believing servant of the Lord.

He also was a father and a grandfather. And the statement above indicates that he had great faith for a great family. And not only did he declare faithfully service to the Lord as his family's agenda, he saw it through. Here's what he had.

**First**, he had a personal commitment to follow God's will. As you prioritize the place that the Lord Jesus Christ is going to have in your family, you will quickly learn that you cannot lead others to a place you have not been. Recall that Joshua was one of the first faithful spies to discover the wonders of the Promised Land. Joshua was one of two (out of twelve) that stood against that majority view, and stood true to believing God.

**Second**, he had the faith to believe God for big things. When we were children, we sang about the collapse of the wall around the city of Jericho. Recall that the battle for Jericho took place under the (human) leadership of Joshua. When God described a battle plan that only made sense in light of great faith in a great God, Joshua did not balk. He believed God for what seemed impossible. Marching in circles, yelling, and blowing trumpets is not what led to the destruction of the powerful enemy. It was faith in action that saw those walls fall.

**Third**, he had the character to stand against sin. It's not as well known as the battle of Jericho, and we sure don't sing songs about it, but the very next battle that Joshua led the people into was the battle of Ai. It was a little village that should have been an easy win. But do you remember what happened? God's people got clobbered in the battle! Do you remember why? It was the sin of a one man, Achan, who hid some of the plunder of Jericho in his tent, leading to a loss of power for the whole nation of Israel. But God was faithful as He led Joshua to detect and correct the sin that was within the Israelite camp. What does this show us? If we are going to set the right priorities for our homes, we are going to have to be willing to be constantly alert to the sneak attacks of the enemy as he tries to knock our families off track. Too many parents are unwilling to lovingly but firmly confront, correct, and then comfort their children, from toddlers to teenagers, about issues of sin and righteousness. But Joshua was not afraid to take a stand.



Do you want your family's journey to be one that has you serving God together, with priorities lined up right? It takes commitment, faith, and character!

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