

S O U T H W E S T F L O R I D A ' S

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

July 2021

Charlotte/South Sarasota Edition - Monthly

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WANTS YOU  
TO KNOW**

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How to be Number One  
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What You Need to Know

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## If a significant missing fact was costing you money, when would you want to find out?

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- **Two must ask questions you should ask** right now **if you own bonds or bond funds.**
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1. A 2018 study that compared the Catalys with another leading laser concluded that the Catalys demonstrated superior outcomes in terms of the patient experience, completeness of capsulotomy and ease of cortex removal. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6087026/>  
2. In addition to the 2018 study noted above, a 2016 study showed that when compared to another leading laser, the other laser showed significantly higher cumulative dissipated energy and phacoemulsification power needed in comparison to the Catalys group. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5077266/>



# Hypertension: What You Need to Know

**H**igh blood pressure (hypertension) has little to no symptoms and is often referred to as a silent killer. It can lead to stroke, heart disease, and sudden cardiac arrest. It's imperative to check your blood pressure regularly. Typically, the systolic blood pressure (top number) rises with age, while the diastolic blood pressure (bottom number) tends to fall. However, any changes in blood pressure that are left untreated can cause severe health conditions to arise. We caught up with Dr. Grinshteyn of Bayfront Health Medical Group to find out more information on the risks associated with hypertension and what individuals can do to help maintain normal blood pressure levels.



## Question #1—What are the associated risks of uncontrolled hypertension?

**Dr. Grinshteyn:** Since there are very few, if any, symptoms of hypertension, many patients don't know they have high blood pressure. The hard fact is that people with hypertension have a high-risk factor for myocardial infarction (MI), strokes, kidney failure, cognitive disorders, and lesser-known issues like vision problems. Hypertension affects every blood vessel in the body from the tip of the toes to the top of the head. It's ideal to have a blood pressure range of around 120/80 to 130/80.

## Question #2—What steps do you recommend to lower it naturally or with medical intervention?

**Dr. Grinshteyn:** Years ago, we used to take a paternalistic approach and say, "You need to take medicine!" Today, we know it's best to offer lifestyle modifications for an overall underpinning approach. Medications are essential in many cases, but their effect will be much more beneficial and efficacious when paired with diet and exercise protocols. Lifestyle changes are critical.

I go beyond blood pressure numbers and check kidney function, order electrocardiograms (ECG/EKG), check thyroid hormones, and other in-depth testing as a first step. These can often contribute to hypertension. Once we establish underlying health conditions, we can discuss what can be done as far as lifestyle changes through diet and exercise. We have a registered dietitian that can offer personalized plans like the DASH or Mediterranean diet. These diets emphasize eating plenty of vegetables, fruit, healthy fats, whole grains, and lean protein (especially cold-water fish) while avoiding excess salt, sugar, simple carbs, and saturated fats. They can also be tailored to fit individual needs.

Exercise is very important to lower and/or stabilize blood pressure. I don't mean pumping weights like Arnold Schwarzenegger, or bench pressing a car! Exercising 150 minutes per week (30 minutes/5 days) is plenty of activity to improve overall health and hypertension. Here in Florida, many patients have the luxury of swimming. I highly recommend hydrotherapy and suggest being chest-deep in the pool while doing cardio-style movements to increase heart rate. It's a low impact workout and easier on the joints. Once we have diet and exercise down, medication support will bring down blood pressure that might still be on the high side.

Many people don't realize that alcohol is a huge contributor to hypertension. Unfortunately, it's easy to start socializing or drinking with other retirees or friends and quickly have moderate drinking get out of hand. Limiting alcohol or quitting drinking is very beneficial for health in general.

For some patients, we recommend tracking blood pressure at home with an arm cuff. Depending on the numbers, we might have you do that regularly or every few months.

There is a real scenario called "white coat syndrome," which elevates blood pressure in the doctor's office due to apprehension. In our office, I've just implemented a new device that can track blood pressure in the convenience of the patient's home-setting for a consecutive 24-hours. It's a small device that discreetly attaches to the arm to track the fluctuations when living your normal life. It helps us better understand how much pressure or lack thereof is pumping while eating, sleeping, exercising, etc.

We don't want anyone's blood pressure to come down too quickly as that can cause a water-shedding effect, which can cause dizziness, nausea, vascular issue, strokes, and cognitive issues, to name a few. We want to lower blood pressure safely and within guidelines that are optimal for patients' overall health. Leaving it untreated is not an option, and as I stated, many patients don't know they have high blood pressure, which is very dangerous and, in many cases, life-threatening.



## Simon Grinshteyn, M.D., FAPWHC

Dr. Simon Grinshteyn is board-certified in family medicine, with additional certification in wound management and hyperbaric medicine. He provides preventive and diagnostic care for acute and chronic illnesses, with special interests in advanced diabetes care and hypertension management. His goal is to help patients achieve and maintain good health.

Dr. Grinshteyn earned his medical degree from St. Matthew's University School of Medicine in Grand Cayman, Cayman Islands, and Ross University School of Medicine in Bridgetown, Barbados, where he graduated with highest honors. He completed a residency in family medicine at the Wright Center for Graduate Medical Education in Wilkes-Barre, Penn., where he served as Chief Resident. Dr. Grinshteyn is fluent in English and Russian.



For an appointment, just call or schedule online.

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# UV Safety Can Reduce Your Risk of Cancer

In July, UV Safety Month reminds us of the connection between ultraviolet (UV) light and cancers of the skin, lips and eyes and it educates us about ways we can protect ourselves from UV rays. The majority of all skin cancers are caused by overexposure to UV light rays - either from the sun (a natural source) or from an artificial source, such as tanning beds. Especially here in Florida, it is important to learn the risks of too much sun exposure and take precautions to protect yourself and your family, so that everyone can enjoy the outdoors safely.

About one in five Americans is likely to develop skin cancer, according to the American Cancer Society (ACS), making it the most common form of cancer in the U.S. Generally, it is highly treatable; however, it should still be taken seriously and you should seek a medical evaluation if you notice a suspicious lesion or mark anywhere on your skin. The good news is that, in addition to being the most common type of cancer, skin cancer is also the most preventable cancer. In fact, research indicates that protecting your skin before you turn 18 can cut your risk of some types of skin cancer by as much as 78%.

There are three main types of skin cancer - basal cell, squamous cell and melanoma, which is the most serious type. Basal cell skin cancer is the most prevalent and least dangerous type of skin cancer. It generally appears on the head, neck or upper torso and it grows slowly. Spots, blemishes, freckles and moles are signs of sun-damaged skin. They are usually harmless, but if you notice them changing, see a doctor.

While not as dangerous as melanoma, squamous cell skin cancer can spread to other parts of the body over some months. It usually appears as a thickened, red, scaly spot that may bleed easily, crust or ulcerate. It is generally found on those areas of the skin that are most often exposed to the sun.

## Risks and Warning Signs of Skin Cancer

Most moles, brown spots and other growths on the skin are usually harmless; however, it's a good idea to have an annual skin check by a professional



healthcare provider. Older adults, people who are fair-skinned, or those who have a lot of moles are generally at greater risk, so it's important to know your skin well and recognize any changes that you see on your body.

Here is an easy way to recognize if a mole or other skin lesion may be cancerous - just remember the **ABCs of skin cancer**:

**Asymmetry:** one half of the mole doesn't match the other

**Border:** is irregular

**Color:** is not uniform

**Diameter:** greater than 6 mm (about the size of a pencil eraser)

**Evolving:** size, shape or color changes

To reduce your risk of skin cancer:

- Whenever you are in the sun, wear a sunscreen with a sun protection factor (SPF) of 30+
- Do not use tanning beds
- Have an annual skin check by a medical professional
- Watch for any changes in moles or new suspicious skin growths

## WORLD-CLASS CANCER TREATMENT CLOSE TO HOME

Florida Cancer Specialists & Research Institute (FCS) has a statewide network of expert, board-certified physicians who bring world-class cancer treatments to local communities, both large and small, in locations throughout Florida. FCS is also a strategic partner with Sarah Cannon, one of the leading research and clinical trial organizations in the world. This alliance provides FCS patients access to the newest, most innovative and most promising new treatments.

Florida Cancer Specialists treats patients with all types of cancer and offers a number of services, including an in-house specialty pharmacy, an in-house pathology lab, financial counselors at every location and 24/7 access to Care Managers, who help deliver the most advanced and personalized care in your local community.



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# Treating Venous Ulcers at Joyce Vein & Aesthetic Institute

Venous dysfunction in the legs can lead to painful chronic skin ulcers that will not heal. To resolve this kind of problem correctly, there's only one solution: consult someone with extensive expertise in the field like Douglas H. Joyce, DO, founder of Joyce Vein & Aesthetic Institute in Punta Gorda.

"There are two systems of veins in the leg," explains Dr. Joyce. "The main system, in the middle of the muscles, is called the deep system. The other system is made up of all the veins you see under your skin, and are called the superficial veins. These two systems are connected by perforator veins. If you picture a ladder, with the superficial system being the left rail and the deep system being the right rail, the perforator veins are the rungs on the ladder going across between the two sides. The superficial side of the ladder is under low pressure, and the deep system side is under high pressure. Each perforator vein has a one-way valve. When you relax, the perforator valves open, and blood passively drains from the superficial into the deep system. When you walk, the deep system is compressed, generating the high pressure that returns blood back to the heart against gravity. All the valves in the perforators snap shut, so that the high pressure blood does not move out to the skin veins. "When perforator veins malfunction, each leg movement causes blood to flow backward at high pressure into the superficial system. This increases the pressure in the superficial system dramatically causing damage to the delicate superficial veins and skin. We call this problem chronic venous insufficiency and it is the cause of venous ulcers. Severe intractable ulcers can make life nearly unbearable. Patients suffer with painful, draining wounds which will not heal despite skin grafts and compression. The answer is to remove the reasons for the increased skin vein pressure by treating the dysfunctional perforator veins themselves."

Dr. Joyce has developed a non-invasive laser treatment called single needle ablation to accomplish this. Done in the office setting this procedure is performed through a small needle stick and takes



less than fifteen minutes. "Combined with our other venous laser treatments, we can reverse serious venous disease and heal "untreatable" ulcers that have been present on some cases for over a decade," states Dr. Joyce.

"It's tremendously rewarding to help these patients," adds Dr. Joyce. "Relatively few physicians treat this level of venous disease. We are pleased to be able to provide this care through The Ulcer Center at JVAI, not only to residents of Florida, but also to others who travel from around the country and even overseas to benefit from these procedures.

For more information and to schedule an appointment, call Dr. Joyce at 941-575-0123 or visit [www.jvai.com](http://www.jvai.com)

## PATIENT TESTIMONIAL

*I saw my leg had a little ulcer. It is not going away unless you fix it internally. Dr. Joyce understands this disease. He is always interested in you the patient. I was eager to come here because I wanted it done and I wanted it done right.*

Michael C.



**Dr. Douglas H. Joyce, DO, FACOS, FACPh**  
Cardiovascular & Thoracic Surgery

### SPECIALITY

Triple Board Certified Phlebology (Venous Disease) Cardio-Thoracic & Vascular Surgery, and General Surgery

### DEGREES

**Bachelor and Masters of Science** The University of Michigan, Ann Arbor

**Doctorate** Michigan State University, College of Osteopathic Medicine, East Lansing

**Diplomate** American College of Phlebology  
American College of Osteopathic Surgeons International College of Surgeons

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**Surgical Fellowship** Cardiovascular Thoracic Surgery, Cleveland Clinic Foundation, OH Special Fellow, Department of Cardiopulmonary Perfusion, Cleveland Clinic Foundation, OH Special Fellow, Congenital and Adult Cardiovascular-Thoracic Surgery, Deborah Heart and Lung Center, Browns Mills, NJ

**Former Assistant Clinical Professor** of Surgery Department of Osteopathic Medicine, Michigan State University College of Osteopathic Medicine UMDNJ-Robert Wood Johnson Medical School, New Brunswick, NJ



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# DIABETIC FOOT INFECTION AND PREVENTING AMPUTATION

**T**he prevalence of diabetes in the United States continues rising at an alarming rate. According to the CDC an estimated 30.3 million people have been diagnosed with diabetes and is expected to exceed half a billion by 2030. It's estimated that 7.2 million adults are undiagnosed in the United States. With this increasing trend of diabetes, comes a rise in lower extremity amputations. The majority of these lower extremity amputations are in fact preventable. Unfortunately, a large portion of the diabetic population are not receiving proper preventative foot care or performing daily steps to prevent infections and/or amputation.

The first step is determining if you have diabetes. Diabetes can easily be diagnosed by seeing your primary care physician and completing some blood work. Once diagnosed with diabetes, routine follow up with your PCP is imperative to have your blood sugars under control. Diabetes can be managed with diet modifications, weight loss and medication if needed. Next, find a podiatrist for routine care who can also educate you on preventative measures. Regular foot screenings can be lifesaving and limb saving for the diabetic population. Your podiatrist will also screen you for other risk factors that can contribute to the development of diabetic foot infections and/or amputations. The good news is that many of these risk factors are preventable or controllable. Some common risk



factors include high blood sugars, high blood pressure, smoking, calluses/corns, foot deformity, poor blood flow, history of ulcers or previous amputations, vision loss, kidney disease and neuropathy. Working together with you, your PCP and other medical professionals, we can significantly reduce your risk of amputation.

Ulcers are a primary cause leading to the development of complicated foot infections, hospitalization and amputation. Many of these ulcers start as a simple callous. As a diabetic with some degree of neuropathy, you may not feel a callous progressing into an open wound. You may also not

notice early signs of infection. Without prompt treatment, this unnoticed wound or infection can quickly deepen to the level of bone or progress to a limb threatening infection requiring hospitalization and likely amputation. Routine foot screenings are so important for the diabetic population.

In addition to routine foot screenings, self-inspection should be performed daily. Check your feet daily for blisters, cuts, sores, redness, swelling or any other abnormal changes. Make sure to also look between your toes. Use white socks, white socks make it easier to notice blood or drainage. This will help you notice that something is wrong. You also want to wear socks that hold moisture away from the skin like cotton or special acrylic fibers, not nylon. Avoid socks with seams that irritate your skin. You can also turn your socks inside out, so the seam is on directly on your skin. If you can't reach your feet, ask someone to help or try using a foot mirror. Don't try to remove calluses or other foot lesion yourself. Avoid going barefoot. Don't use worn down shoes, shoes that are too small or too narrow for your foot. Don't smoke or quit smoking if you do, smoking impair circulation.

If you notice anything abnormal, contact your podiatrist or primary physician right away. Diabetics should attend routine foot screenings with their podiatrist a minimum of every 6 months. Together, we can change lives by saving limbs!

**Isin Mustafa** DPM, MSHS, AACFAS

For more information, you may contact Dr. Isin Mustafa at Family Foot & Leg Center at (239) 430 - 3668 (FOOT). Family Foot & Leg Center has 8 locations throughout Collier, Lee, & Charlotte Counties to quickly resolve all your foot and ankle problems.



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# What Your Eye Doctor Wants You To Know About The 4th of July Injuries:

## *This is Important*

**T**he fourth of July brings emotions of joy and reasons to celebrate our freedoms and time with friends and family, which are admirable and well needed in this time of our lives, but it goes without saying that fireworks are dangerous. A critical fact that not many people know is that more bystanders are injured by fireworks than those operating the explosives.

More than 65 percent of injuries due to fireworks are assumed by the innocent bystander. Children and young adults are frequent victims. Children age 15 and under accounted for 36% of the total injuries, according to the commission's report. And half of the injuries requiring an emergency room visit were to people age 20 or younger.<sup>1</sup> Even sparklers can be dangerous, as they burn at more than 2,000 degrees Fahrenheit. Sparklers were responsible for 1,200 of the injuries in the latest report, and a sparkler mishap caused one of the fireworks deaths reported in 2017.<sup>1</sup>

The most recent Consumer Product Safety Commission report found that 15% of fireworks injuries were eye injuries. In the most severe cases, fireworks can rupture the globe of the eye, cause chemical and thermal burns, corneal abrasions and retinal detachment — all of which can cause permanent eye damage and vision loss.<sup>1</sup>

**According to the American Academy of Ophthalmology, follow these safety tips from the Consumer Product Safety Commission:**

- Do not allow young children to play with fireworks. Sparklers, a firework often considered by many to be the ideal "safe" device for the young, burn at very high temperatures and should be handled by young children. Children may not understand the danger involved with fireworks and may not act appropriately while using the devices or in case of emergency.
- Older children should be permitted to use fireworks only under close adult supervision.

**Reference:**

1. American Academy of Ophthalmology, Eye Smart, Fireworks and Eye Safety, <https://www.aao.org/eye-health/tips-prevention/injuries-fireworks-eye-safety>



- Do not allow any running or horseplay.
- Set off fireworks outdoors in a clear area, away from houses, dry leaves, or grass and other flammable materials.
- Keep a bucket of water nearby for emergencies and for pouring on fireworks that fail to ignite or explode.
- Do not try to relight or handle malfunctioning or "dud" fireworks. Soak them with water and throw them away.
- Be sure other people are out of range before lighting fireworks.
- Never light fireworks in a container, especially a glass or metal container.
- Keep unused fireworks away from firing areas.
- Store fireworks in a cool, dry place.
- Check instructions for special storage directions.
- Observe local laws.
- Never have any portion of your body directly over a firework while lighting.
- Do not experiment with homemade fireworks

### About Quigley Eye Specialists

*Technology leaders in eye care, Quigley Eye Specialists is one of the nation's leading multispecialty ophthalmology practices specializing in cataracts, laser cataract surgery, glaucoma, LASIK, dry eye, eyelid surgery, retinal issues, corneal conditions and routine eye care. As the number one choice for cataract treatment in Southwest Florida, Quigley Eye Specialists is committed to providing the highest level of quality eye care and service to the community. The practice has served the region for more than 30 years and offers patients convenient locations throughout Florida including: Sarasota, Venice, North Port, Port Charlotte, Punta Gorda, Cape Coral, Fort Myers, Fort Myers Beach, Lehigh Acres, Bonita Springs, Naples, and Coral Gables.*

Quigley Eye Specialists, founded in 1988, consists of more than 100 medical professionals, including surgeons, optometrists, retina specialists and technicians. Offices are conveniently located throughout Southwest Florida in Sarasota, Venice, North Port, Port Charlotte, Punta Gorda, Cape Coral, Fort Myers, Lehigh Acres, Bonita Springs, Naples and Coral Gables.

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# Technology, Precision Bring Hope to Cancer Patients

By Dr. Arie Dosoretz

Technology is in a continuous state of improvement.

As soon as a new cell phone hits the market, for example, consumers will line up to get their hands on the industry's newest, shiniest device. And who can blame them? Consumers want the best.

The same principle holds true in cancer care. Manufacturers are continuously researching and experimenting to develop new equipment that is more effective, more powerful and more precise than their predecessors. So who can blame patients for choosing doctors whose practices features the latest, most innovative technology?

Since its inception, Advocate Radiation Oncology has prioritized technology to ensure patients have access to the most sophisticated, advanced technology on the market. As a result, local physicians continue referring patients to Advocate, knowing they will receive personalized care and treatments using top-of-the-line equipment.

In radiation oncology, precision is critically important. Precision can destroy tumors without damaging surrounding tissue. The newest technology can focus beams in increments of less than a millimeter, a level of precision that helps reduce treatment times and lessens the side effects of radiation. That's why patients, and radiation oncologists, want the latest, greatest cancer-fighting equipment.

Advocate treats patients diagnosed with all types of cancers, including breast, prostate, lung, brain, neck and others. The practice has made substantial capital investments in equipment, including these three state-of-the-art Varian machines:

- **Halcyon:** Using image-guided radiotherapy, the Halcyon's intelligent automation provides for faster treatment times. Its quiet, smooth motions and soft, ambient lighting keep patients relaxed and comfortable during their treatments.

- **TrueBeam:** The Intensity-Modulated Radiation Therapy, or IMRT, linear accelerator targets and destroys tumor cells in the body using external-beam radiation.



- **Identify:** A comprehensive administrative technology system, Identify uses patient biometrics at every stage of the treatment process to ensure safe and accurate care. Identify is integrated across all machinery and devices within the practice, streamlining communication between the radiation therapists, machines and patients.

Offering the most innovative and powerful technology on the market is a difference-maker for patients, but only half of the equation. The other half is expertise from Advocate's experienced, compassionate physicians who partner with patients on every step of their cancer treatment journey. With a patient-first approach, physicians create an individualized treatment plan unique to each patient. The ultimate goal is to quickly and efficiently deliver radiation treatments that allow patients to continue living their lives with minimal disruption.

A cancer diagnosis will always initiate very serious discussions, but the prognosis isn't nearly as worrisome as it was even a decade ago. Technology has changed the conversation. In fact, doctors once discussed cancer's death rate; they now reference its survival rate. If diagnosed and treated early, a majority of cancers are survivable.

## About the Author

Dr. Arie Dosoretz is a board-certified radiation oncologist and founding partner at Advocate Radiation Oncology, a locally owned and operated practice with offices in Fort Myers, Cape Coral, Port Charlotte, Bonita Springs and Tamarac. For more information, please visit [AdvocateRO.com](http://AdvocateRO.com).

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# FDA Approves New Drug For The Treatment of Alzheimer's Disease

In the United States, Alzheimer's affects 6.2 million Americans, and that number is expected to rise exponentially over the next decade. To date, there has been no meaningful cure for the disease, but in June of this year, the FDA approved a new drug, Aduhelm (aducanumab), for the treatment of Alzheimer's. Because Aduhelm provides a meaningful therapeutic advantage over existing treatments, the government has put it on a fast track known as an accelerated approval pathway.

The director of the FDA's Center for Drug Evaluation and Research, Patrizia Cavazzoni, M.D., said the following, "Alzheimer's disease is a devastating illness that can have a profound impact on the lives of people diagnosed with the disease as well as their loved ones. Currently available therapies only treat symptoms of the disease; this treatment option is the first therapy to target and affect the underlying disease process of Alzheimer's. As we have learned from the fight against cancer, the accelerated approval pathway can bring therapies to patients faster while spurring more research and innovation."

Aduhelm has conducted studies on 3,482 patients, and it is known to target the pathophysiology of the disease state. The studies show that patients receiving Aduhelm had a significant dose- and time-dependent reduction of amyloid-beta plaque, while patients in the control arm of the studies had no reduction of amyloid-beta plaque.

## Critical Imaging Tracks Progress

These findings are measured with a baseline Imaging study, such as a Lumbar Puncture, MRI, or PET Scan, and then remeasured as needed after treatment. Radiology Regional is a participating Imaging center that specializes in these types of brain scans.

## Why Radiology Regional?

Radiology Regional is a physician-owned, well-established imaging practice with 50 board-certified radiologists that work closely with your doctor. You will get personalized service and expertise in a warm, comfortable environment, which is not always offered with a big group or hospital-owned



organization. Radiology Regional also provides the newest technological advances. Their superior imaging equipment includes 3T wide-bore MRI, 256 Slice CT, 3D Mammography, Nuclear Medicine, PET Scans, and Siemens ultrasound. Radiology Regional is a premier diagnostic facility that takes pride in offering the highest quality healthcare to the community.

At Radiology Regional, they take your health personally. They have a group of in-house, subspecialty, fellowship-trained radiologists that are experts in diagnosing and detecting conditions within the abdominal and pelvic areas, including the prostate. The machines they invest in are not standard; these are state-of-the-art, high-tech imaging equipment that can find even the most intricate details that would otherwise be missed.

Radiology Regional has a high-resolution prostate MRI protocol to find small prostate cancers, a dynamic MRI to diagnose pelvic organ prolapse, MRI protocol technique to accurately stage rectal cancer for surgical planning, specific protocols to best evaluate the ovaries and uterus and MRI technique to focus on the bones and muscles. All imaging exams are not equal, and Radiology Regional goes above and beyond to offer high-quality studies to help guide medical management.

For over 50 years, Radiology Regional has expanded its scope of services and number of outpatient facilities to meet the growing needs of their patients and referring physicians. Radiology Regional has thirteen, ACR/IAC accredited and convenient locations to serve you. Their dedicated team of board-certified radiologists, registered technologists, and other specialists are committed to providing their patients with exceptional care utilizing the most advanced technology and techniques available.

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# Fish Oil and Fiber:

## How to be Number One at 'Number Two'

By Anne-Marie Chalmers, MD

**C**ountless articles detail how exercising, eating well, and sleeping better are crucial for healthy aging. But there's one aspect to good health that people rarely mention: pooping.

Yes, pooping.

Maybe as a physician, I should be medically correct and write "defecating" instead. But whatever the term, one thing is certain: Regular bowel movements are essential for feeling good.

### Chronic Constipation Could Be a Symptom of Intestinal Dysbiosis

A proper poop depends on a healthy gut. So if you regularly struggle with constipation or diarrhea, it could be a sign that your gut is not functioning optimally.

In medicine, we use the term intestinal dysbiosis. This means that the populations of different gut bacteria that colonize the intestines have become imbalanced.

Today, we know that these gut bacteria dictate not just bowel-related disorders — like Irritable Bowel Syndrome (IBS) and chronic constipation — but also our weight and immune response to chronic diseases.

The composition of our gut bacteria depends on a variety of factors, including genetics, age, previous antibiotic use, and environment. Diet, however, plays an especially big role.

Let's focus on two stool-facilitating nutrients that promote good intestinal health: fiber and fish oil.

### The Digestive Benefits of Fibers

Almost every constipation-related article talks about the importance of eating enough fiber — and with good reason. Fiber has a profound impact on our digestive system.

First and foremost, fiber promotes good microbial health. Gut bacteria feed on fiber through fermentation, breaking them down in the digestive system. During this fermentation process, the bacteria create short-chained fatty acids (SCFAs) that support the integrity of the cells in the stomach. SCFAs also influence our metabolism, appetite, and immune response.



Different types of fiber also affect our digestive system in unique ways. For instance, beta-glucan soluble fibers (found in oats and barley) bind together with cholesterol to remove it from the intestines.

Insoluble fibers are generally not fermented by the gut bacteria. However, insoluble fibers are still important since they push food through the intestinal tract. Certain types of insoluble fiber also bind together with water to help soften the stool, providing a natural laxative effect.

### Why Fiber-Rich Foods Are Important

Because different fibers feed different bacteria species and impact our digestive system in unique ways, eating a variety is best for promoting good health.

Unfortunately, most of us here in the United States do not get enough. While studies show massive improvements in microbial diversity when people consume more than 30 grams of fiber daily, most Americans only get between 12-18 grams on average.

### The Benefits of Omega-3 Fish Oil for Constipation

Since oils act as natural lubricants, most varieties will help get the "ball rolling" in the restroom.

### For better bowel movements, however, omega-3 fish oils have clear advantages for 3 key reasons:

1) Fish oil increases the production of intestinal alkaline phosphatase (IAP). IAP plays a crucial role in maintaining gut homeostasis and reducing inflammation in the intestines. Researchers have also found a link between lower IAP concentrations and conditions like IBS.

2) Full-spectrum fish oils have antimicrobial properties that keep certain "bad" endotoxin-producing bacteria from wreaking havoc in the gut. Since endotoxins cause inflammation, blocking their build-up helps reduce inflammation in the intestines.

3) Fish oil also promotes a better composition of gut bacteria. In clinical studies of IBS patients, researchers found that omega-3 supplementation increased the population of certain healthy bacteria species. Omega-3s also decreased the levels of harmful bacterial groups, resulting in an overall healthier gut.

### How Often Should I Be Pooping?

If you take fish oil, enjoy a high fiber diet, and practice other healthy habits — like drinking lots of liquids and exercising regularly — chances are that you've mastered the art of pooping. Still, what does it mean to be 'regular'?

While most people defecate once a day, the so-called 'normal' interval between defecations varies greatly. Constipation is defined as having fewer than three bowel movements every seven days. On the flip side, some people produce two to three stools a day, which is still considered within the normal range.

Given such a wide definition for 'regularity,' the most important thing to remember is that consistency is key.

This article was abbreviated from a longer version published on [omega3innovations.com](https://omega3innovations.com/blog/fish-oil-and-fiber-how-to-be-number-one-at-number-two/). For the full text and references, visit:

<https://omega3innovations.com/blog/fish-oil-and-fiber-how-to-be-number-one-at-number-two/>

### About Anne-Marie Chalmers, MD

Born and raised in the United States, Dr. Chalmers graduated from Brown University and completed her medical training at the University of Oslo in Norway. Dr. Chalmers practiced medicine in Norway for many years. Today, she serves as president of Omega3 Innovations.



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# Emotion takes control and overrides logic and facts.

Continuing the discussion from last month's article of whether the market is primed for a pullback it leads to the problem of heavy social media involvement in markets that furthers the problem of making logic and fact-based decisions.

So, the missing critical facts are...

1. When did someone get information and buy in or get out?
2. Was the information obtained legally?
3. How accurate is the information?

Euphoria or Panic? Both are emotional with very little fact or process.

Although this has been going on for decades the rapid growth of social media and even alternative investment choices like crypto currency are accelerating the amount of misinformation which pushes emotions to the limit.

Another way to look at how you react to greed and emotion is if you have played a slot machine. Did you put in a reasonable amount based on your income and net worth? Did you cash out with a small profit or loss?

Did you put in more than you should have and let it ride up, down and maybe to zero?

In other words, how do you personally react to greed and desire? Does it have a similar influence on your investment decisions?

Do you have a process that helps you identify facts, clear up misconceptions, and control emotion when you make major investment decisions? Most people don't.

## EMOTIONAL INVESTING

Generally, research shows over 80% of our investment decisions are based on emotion and possibly 100% of other decisions in our life. This is hard to control and hard to determine and we usually end up taking too much risk, paying too much in taxes, and not preparing properly for our future.

Going through a proper discovery meeting or attending an educational event on how you arrive at decisions will help you determine if you have too much emotion, misconceptions, myths, or other missing facts built into your investment, tax, and estate planning.

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# ANSWERING YOUR QUESTIONS ABOUT THE TREATMENT OF ANXIETY/PTSD AND DEPRESSION

## 1. How does neurofeedback specifically help in the treatment of depression and other mental health conditions?

Depression and other common mental health conditions such as anxiety, PTSD, and ADHD are accompanied by abnormal brain electrical activity. Just as the electrical activity of the heart can be determined by an EKG, brain electrical activity can be observed by qEEG brain mapping and used by neurofeedback equipment to train the brain back to more harmonious and healthy brain activity. As brain activity becomes more regulated and healthy, the symptoms of out of sync brain electrical activity – depression, anxiety, PTSD, ADHD, etc. become reduced or eliminated.

## 2. Can you describe the Transmagnetic Cranial Stimulation modality, how it works and how it's can be used to treat depression as well?

Transcranial Magnetic Stimulation (TMS) is a drug-free, painless, non-invasive treatment therapy that uses magnetic pulses to stimulate activity in neurons. There are several TMS medical devices cleared by the FDA for use in treating Major Depressive Disorder, Obsessive-Compulsive Disorder, and Migraine.

Specifically, what we use at the Brain Wave Center is Personalized repetitive Transcranial Magnetic Stimulation (PrTMS.) This method of treatment was designed to offer a personalized, gentler, and more sophisticated approach. Unlike traditional TMS where all clients receive the same treatment therapy, PrTMS incorporates diagnostic assessments and a brain function analysis for a more personalized TMS treatment plan designed to provide optimal results.

Research suggests that PrTMS may be helpful for patients suffering from a variety of mental health conditions, and also for healthy individuals, such as athletes, who are interested in high-level human performance. It's an outpatient therapy, and clients are able to drive themselves to and from appointments.



## 3. Can you talk more in depth about the Diagnostic Testing and Therapy Clinic that The Brain Wave Center is launching, and how this will serve the community?

Launching our new Diagnostic Testing and Therapy Clinic is based on two separate needs expressed by both Charity Organizations we work with and our own client base.

The diagnostic part of the clinic evolved from requests from partners such as Easterseals and The Florida Center for Early Childhood regarding the backlog they have for children requiring assessments such as ADOS (spectrum disorder) and general attention deficient. They've cited a several month waiting period, which is too long for many families trying to get help for their children. Since we already had two Doctors of Psychology working with us, it just made sense to help reduce the backlog and help more children and families get

the care they need and deserve. Our team incorporates proven testing and assessment methods backed up by qEEG Brain Map analysis to accurately identify underlying issues and correctly identify appropriate therapies.

We are opening the therapy side of the clinic based on our own experience and peer-reviewed studies, that by merging advances in applied neuroscience, specifically, neurofeedback, with evidenced based models of psychotherapy, we often see superior results. At The Brain Wave Center, we will offer psychotherapy services alone or in combination with neurofeedback training sessions.

Our goal is to achieve break-through results, we use proven traditional treatment approaches, combined with leading-edge technology to build an individualized treatment solution.

## 4. Why is it important to make mental health treatment interventions widely accessible to the public—especially in the midst of this global pandemic?

The stigma of mental health treatment has begun to fade and more & more people are becoming aware that it's possible to live a more happier and healthy life. As The Brain Wave Center we are focused on assisting everyone in improving their emotional health and overcoming anxiety, depression, PTSD, and common mood disorders.

Find out today how neurofeedback can help you or a loved one. Call **941-552-4500** or schedule your **Free Initial Evaluation** online.

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# All in one

## Dental Visit with CEREC

By Dr. Joseph Farag

New technologies are making our lives simpler and easier everyday and dentistry has certainly not been left behind. Thanks to a great new system called CEREC, you can now have a high-tech smile in a single visit.

In days gone by, you may have needed to visit the dentist two or three times to have a quality, white ceramic restoration. The dentist would need to take a special impression to make a plaster model for the dental laboratory to generate an extra replica of your tooth in order to hand-make your porcelain restoration. The craftsmanship of the laboratory technician is highly regarded, but generally requires a minimum turn-around time of two weeks, leaving you to function with a temporary, generally plastic, restoration.

Instead of multiple dentist appointments and weeks for a complete restoration, CEREC allows the dentist to achieve the same, if not better, results in a single visit.

CEREC is an acronym for Chairside Economical Restoration of Esthetic Ceramics. Translated, it means that a dentist can economically restore damaged teeth in a single appointment using high-quality ceramic material that matches. CEREC uses the latest Computer-Aided Design and Manufacture (CAD-CAM) technology incorporating a camera, computer and milling machine in one instrument to give you perfect, white fillings, veneers or crowns, all in a fraction of the time it used to take.



### Here's how it works.

Once your dentist determines that CEREC is the correct course of treatment, your visit will begin by preparing the tooth. Any decay, if present, is removed, leaving as much possible of your healthy tooth to support the CEREC restoration. Next, your dentist will use a specially designed electronic camera that makes a digital 3D model of your tooth in seconds.

You can then watch your dentist design your new restoration on a computer screen, right beside the dental chair using the 3D image created by the camera. The virtual filling is then transferred into reality, again using CEREC. A solid block of porcelain ceramic is inserted into the CEREC milling unit. Special tools then sculpt your restoration to the finest detail based on the restoration designed on the CEREC computer.

The perfect-fit restoration is completed and placed in your mouth with the whole process only taking around an hour! CEREC fillings are natural looking, smooth, white and hard-wearing, just like the enamel surface of the rest of our teeth. The ceramic material is biocompatible and is not effected by hot or cold.

The office of Dr. Joseph Farag offers CEREC restoration. For more details and CEREC or to schedule an appointment for a check-up please call (941) 764-9555 today.



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# Leg Pain?

## It May Be Peripheral Artery Disease or PAD

### Do you happen to have these symptoms?

- Painful cramping in your hip, thigh or calf muscles after certain activities, such as walking or climbing stairs (claudication)
- Leg numbness or weakness
- Coldness in your lower leg or foot, especially when compared with the other side
- Sores on your toes, feet or legs that won't heal
- A change in the color of your legs
- Hair loss or slower hair growth on your feet and legs
- Slower growth of your toenails
- Shiny skin on your legs
- No pulse or a weak pulse in your legs or feet
- Erectile dysfunction in men

Then you may have Peripheral Artery Disease or PAD. If peripheral artery disease progresses, pain may even occur when you're at rest or when you're lying down (ischemic rest pain). It may be intense enough to disrupt sleep. Hanging your legs over the edge of your bed or walking around your room may temporarily relieve the pain.

### What are the causes and Risk factors?

Atherosclerosis is a process in which blood, fats such as cholesterol, and other substances build up on your artery walls. Eventually, deposits called plaques may form. The deposits may narrow — or block — your arteries. These plaques can also rupture, causing a blood clot.

Peripheral artery disease is often caused by atherosclerosis. In atherosclerosis, fatty deposits (plaques) build up in your artery walls and reduce blood flow.

Although the heart is usually the focus of discussion of atherosclerosis, this disease can and usually does affect arteries throughout your body. When it occurs in the arteries supplying blood to your limbs, it causes peripheral artery disease.



### Risk factors of PAD

- Smoking
- Diabetes
- Obesity (a body mass index over 30)
- High blood pressure
- High cholesterol
- Increasing age, especially after reaching 50 years of age
- A family history of peripheral artery disease, heart disease or stroke
- High levels of homocysteine, a protein component that helps build and maintain tissue

People who smoke or have diabetes have the greatest risk of developing peripheral artery disease due to reduced blood flow.

### When should I see my doctor?

If you have leg pain, numbness or other symptoms, don't dismiss them as a normal part of aging. Call your doctor and make an appointment.

Even if you don't have symptoms of peripheral artery disease, you may need to be screened if you are:

- Over age 70
- Over age 50 and have a history of diabetes or smoking
- Under age 50, but have diabetes and other peripheral artery disease risk factors, such as obesity or high blood pressure

While many people with peripheral artery disease have mild or no symptoms, some people have leg pain when walking (claudication). Claudication symptoms include muscle pain or cramping in your legs or arms that's triggered by activity, such as walking, but disappears after a few minutes of rest. The location of the pain depends on the location of the clogged or narrowed artery. Calf pain is the most common location.

### The Good News is RAVE can help

Our Physicians Dr. Craig Reiheld and Dr. Charles Gordon are able to provide an outpatient minimally invasive surgery that can have you in and out of our facility within a few hours. Our state of the art outpatient surgical suite allows us to give you the best treatment option if you suffer with Peripheral Artery Disease (PAD).

### If left untreated it could lead to:

- **Critical limb ischemia.** This condition begins as open sores that don't heal, an injury, or an infection of your feet or legs. Critical limb ischemia occurs when such injuries or infections progress and can cause tissue death (gangrene), sometimes requiring amputation of the affected limb.

- **Stroke and heart attack.** The atherosclerosis that causes the signs and symptoms of peripheral artery disease isn't limited to your legs. Fat deposits also build up in arteries supplying your heart and brain

If you feel that you have or have been diagnosed with PAD have your physicians set up a consultation with our Board Certified Interventional Radiologists to review your treatment options.



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# Cognition and Hearing Loss: An Audiologist Takes on the Next Level of Patient Care

By Dr. Noël Crosby, Au.D.

If you're over 50 years old, you may start experiencing some decline in your cognitive health. Cognitive impairment and dementia are a growing concern. It's a well-known fact that, as we get older, we tend to experience some level of decline in our cognitive ability. For some of us it may be mild, and for others more serious. Recent research has found that we can do something to slow the decline of cognitive performance.

Increasing evidence has linked age-related hearing loss with more rapid progression of cognitive decline and incidental dementia. Recent literature indicates that individuals with hearing loss had a 55% greater risk of developing dementia compared to those with normal hearing, and it increased linearly with the severity of hearing loss. Long-term hearing deprivation can impact cognitive performance by decreasing the quality of communication leading to social isolation and depression and could facilitate the onset of dementia. On the other hand, limited cognitive skills may reduce the cognitive resources available for auditory perception, increasing the effects of hearing loss.

Cognitive health includes such things as your ability to clearly think, learn and remember. Most people don't realize cognitive health can be managed like other important parts of your health, such as your heart and cholesterol. You may think cognitive health decline is only connected to dementia or Alzheimer's disease. But that's not true. Cognitive health decline can often be related to other factors such as hearing loss, Cardiovascular conditions, diabetes, poor vision and other medical or lifestyle choices.

Early detection and risk reduction of cognitive decline is quickly becoming top of mind within the healthcare community. Recent research efforts have helped us learn much more about the importance of cognitive health and its relationship to your overall general health. Monitoring your cognitive performance, making good wellness choices and partnering with your healthcare provider is a winning combination for managing your cognitive health.



Untreated hearing impairment is a proven contributor to cognitive decline. An audiologist is skilled in evaluating, diagnosing and correcting hearing loss with hearing aids and other amplification and hearing assistance technology. But the audiologist can also be your partner in cognitive screening. New technology has made screening for cognitive health by the Audiologist a new reality and I have recently added cognitive screening to my practice. I have invested resources and time to understand how to best serve my patients concerning their cognitive health and the actions to be considered when making corrective hearing recommendations.

The equipment being used is called Cognivue, an FDA-cleared computerized test of cognitive function, that provides a more sensitive and sophisticated evaluation of key cognitive domains. It is easy to use, patient friendly, and reliable. The screening process takes roughly ten minutes to complete and generates an easy to read report that is reviewed with the patient upon completion.

"Since I have been using this in my office I have been discovering so much more about my patient that goes beyond the audiogram which also assists me with my recommendations for long term hearing care in my office"

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### PROFESSIONAL BIO

Dr. Noël Crosby, Au.D., owner and audiologist at Advanced Hearing Solutions in Englewood, FL is a licensed professional whose over 30 year career has been devoted to helping people of all ages hear and understand more clearly. Dr. Crosby received her BS and MS degrees from FSU and her Doctorate in Audiology from UF. Her credibility as an authority grew during her tenure as the Director of Audiology at the Silverstein Institute in Sarasota, FL from 1991-1998. Today, in addition to managing a successful audiology practice, Dr. Crosby is involved in creating hearing loss awareness through her jewelry and accessory company AuDBling.com. She has served and is serving on various professional boards and committees and was president of the Florida Academy of Audiology in 2000 and 2010. She has been married to Michael for 29 years and has one daughter.



# ARTHRITIC KNEE PAIN: DO YOU REALLY NEED SURGERY?

By Physicians Rehabilitation

**W**alking, standing and exercising put a lot of strain on our knees. For example, a person that weighs 150 lbs. walking up a flight of stairs will put approximately 500 lbs. of pressure on their knees with each step. Not only is the knee one of the most intricate of all the joints in the body, but they are also the most susceptible to arthritis. Multiple types of arthritis affect the knees, but osteoarthritis is by far the number one type that surpasses all others.

## What is Osteoarthritis (OA) of the Knee?

Positioned between the three bones of the knee (the femur, tibia, and patella) the articular cartilage provides a smooth gliding surface and acts as a shock absorber. This cartilage is smooth and resilient but susceptible to wear and tear. Once the cartilage begins to break down it is difficult to stop and often the cartilage breaks down completely and wears away. This can cause soreness, swelling, and stiffness, and it is the beginning stages of osteoarthritis, or bone rubbing against bone, which in turn causes bone spurs and a great deal of discomfort.

Articular cartilage has no blood supply. The cells that make the cartilage are nourished by the synovial fluid, and hydrostatic pressure of the joint influences the health and pathological condition of arthritis. The wear and tear process can be slowed often by weight reduction, strengthening the muscles surrounding the joints, and by minimizing or reducing activities that put excessive weight on the knee joints. However, there are well-known non-invasive treatments that have helped numerous people regenerate knee joint function and tissue.

Osteoarthritis develops slowly, and the often the pain becomes worse with time. This type of arthritis is also known as degenerative joint disease, because it is often associated with the aging process. But occasionally, this process can also affect younger people too. The pain can be debilitating and interfere with daily activities, affect your ability to work and create limited range of motion in your life.

**MANY PHYSICIANS WILL RECOMMEND SURGERY, BUT DO YOU REALLY NEED IT?**



## Knee Replacement Surgery is Permanent

Starting with a more conservative approach is a better choice. Knee replacement is a very extreme measure to take without considering all of your options for a condition as common as knee arthritis. Physicians Rehabilitation has an effective knee program that entails several non-invasive treatments that can alleviate pain, increase weight bearing and strength, and regenerate tissue.

## Physicians Rehabilitation's Knee Therapy Program Includes:

- PRP (Platelet Rich Plasma)
- Physical therapy
- Bracing
- Rehabilitation
- Supplementation and more



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## Viscosupplementation

Viscosupplementation is an FDA approved, guided, hyaluronic acid injection. It is a gel like substance that is very similar to the synovial fluid in our joints, which reduces inflammation and increases cushioning and lubrication of your knees immediately. This treatment protocol is used to treat the symptoms associated with arthritis.

Viscosupplementation (also known as hyaluronic acid injection) involves injecting a lubricating fluid into the knee joint to promote more comfortable knee movement, reduce friction in the joint, and slow the progression of arthritis. This treatment is also commonly paired with physical therapy to help strengthen the joint and improve range of motion. At Physicians Rehabilitation, we perform viscosupplementation with the guidance of advanced fluoroscopic technology to achieve enhanced precision and provide our patients with optimal results. Viscosupplementation is considered to be a safe procedure, and is covered by Medicare and most insurances.

## PRP (Platelet-Rich Plasma)

Fortunately for our patients today, advances in science have allowed us to find new and targeted approaches to treating degeneration and injuries. Platelet-rich plasma or PRP is an "autologous blood therapy" that uses a patient's own blood components to stimulate a healing response in damaged tissues. PRP provides an alternative to surgery by promoting safe and natural healing.

Research studies and clinical practice have shown PRP therapy is very effective at relieving pain and returning patients to their normal lives. Both ultrasound and MRI images have shown definitive tissue repair after PRP therapy, confirming the healing process. The need for surgery can also be greatly reduced by treating injured tissues before the damage progresses and the condition is irreversible.

## Physicians Rehabilitation

We are a leading provider of nonsurgical orthopedic solutions in the Florida. We cater to patients of all ages and lifestyles who are at their wit's end with symptoms of osteoarthritis and other debilitating joint conditions. If you're ready to find meaningful relief from your knee pain, we encourage you to consult with our board-certified physicians about your non-surgical treatment options – even if other doctors have told you that surgery is the only answer.



# Numerous Buyers Are Interested in Purchasing a New or Second Home in 2021

**W**ith the effects of COVID-19 still pressing on our lifestyle choices and demands, many potential home buyers are no longer waiting for things to return to “normal” but rather have accepted that the new way we live is why they are looking to purchase homes now.

The interest rate has been extremely low, and although researchers predict an increase, that will still be nominal compared to years past. The inventory is still meager; throughout the entire country, with approximately only 500,000 homes available, but that number is expected to increase as well.

Many homeowners that have been on the fence about selling are ready to do so now. The reason or motive behind selling are unique to each individual, of course, but they are typically due to making a notable profit on home sales, moving into a larger, more spacious home, or for seniors, downsizing or moving into a senior community.

Supply and demand are thought to even out more in 2021 than we saw in 2020, for the sheer fact that people realize that working and spending time at home is not going to change much. Even though we are expected to see a significant amount of people getting the vaccine by the year's end, we still have a ways to go to see real change, which could take years. Despite this optimistic look, we as a country and the world are going to see the virtual opportunities arise and the true staying power of technological advances.



Bidding wars are still presumed to grow, so if you are interested in buying, you need to be prepared to purchase. You must know your price range, and it's optimal to have preapproval for your loan or funding. If you see a home you love, you don't want to miss out.

If you are interested in buying or selling, it's imperative that you seek out a realtor that knows the area, the comps in your area of interest, and one that can leverage potential buyers with specific needs and desires.

Realtor Denise Henry explains, “There is still an ongoing exodus from our country's large metropolitan cities. People that come to Charlotte county fall in love with our small-town feel, privacy, and the paradise of the beach, water, and year-round sunshine.”

When you're buying or selling, keeping the transition stress free is one of Denise's top priorities. She offers attentive knowledge, exemplary customer service, and well-rounded knowledgeable insight. With years of experience and a proven track record, Denise has repeat customers who regularly refer family and friends. When you're making life changes like buying or selling real estate, you should always consult and work with the best.

*Contact Denise Henry Today.*

**Denise Henry** GRI, RENE  
Broker Associate

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# WHY IS A CALLUS ON THE BOTTOM OF MY FOOT POTENTIALLY DANGEROUS?

By Desmond Bell, DPM, CWS - Chief Medical Officer at Omeza

**C**alluses are one of nature's ways of protecting our bodies, especially when occurring on the hands and feet. Simply stated, calluses are a build-up of skin, typically over a bony prominence where repetitive, minor trauma has occurred over time. Athletes, manual laborers, guitar players, dancers, or anyone who uses their hands or feet regularly has likely experienced callus formation as it pertains to their relevant activity. Calluses are also known as "hyperkeratotic lesions" and in some instances, "pre-ulcerative lesions". They are thick skin pads that reduce shearing, torque, and the likelihood of a break in the skin that can lead to infection or more extensive damage.

## Why then, would calluses become the cause of the very things they are intended to protect the body from?

A simple way to illustrate how things can go from good to bad where calluses are concerned, is to take one finger, and press it against the palm of your hand for 5 seconds, then release. You'll likely notice an area of blanching followed by a return of color to the area where pressure had been applied. The temporary blanching is caused by the pressure from your finger reducing the blood supply to the skin. When you released your finger, blood and normal color returned. If skin on the bottom of the foot or surface of a toe develops a callus over a bony prominence, there should be concern, especially when diabetes is also present. The callus that developed to protect the underlying bone can often create increased pressure underlying the skin, resulting in reduced blood flow to the area. Since the main function of red blood cells is to deliver oxygen, reducing blood flow to the skin by way of a callus development can lead to death of skin cells and hence, the beginning of an ulcer.



**Diabetics are especially at risk for ulceration for several reasons**, including the loss of protective sensation when peripheral neuropathy (damage to the nerves that supply the skin) is involved.



Imagine having a pebble inside your shoe. Walking several steps will cause you to stop and remove the shoe and the pebble, in an otherwise healthy person. The pain that was temporarily present when the pebble was causing irritation, was the body protecting you from more serious injury, such as a blister or possibly an open sore. Someone with diabetes and/or neuropathy may not be able to detect the presence of a pebble, and over the course of a few minutes, not to mention hours or days, can suffer serious injury from something so relatively benign. A callus on a toe or foot represents a similar potential danger, analogous to the pebble inside the shoe. When someone with diabetes and neuropathy develops such a callus, the underlying tissue not only receives less blood flow and oxygen, but the trauma over the course of days and weeks can result in the breakdown of skin at the site. The breakdown of the skin from the reduced blood flow and repetitive trauma is how an ulcer can form. If such an ulcer results, this can become the pathway to amputation should infection or slow healing ensue.

Calluses themselves are not always preventable, and diabetics who have lost sensation and suppleness of their skin should heed these recommendations:

**1. Never attempt self-treatment.** I have seen patients over the years who developed ulcers and infections after attempting to manage their calluses

at home. Over the counter treatments, such as moleskin pads, may contain salicylic acid, which can cause further injury to the skin in the process of attempting to soften or loosen the callus. Likewise, attempting to trim calluses with a pocketknife, for example, while working at an awkward angle (sometimes referred to as "Saturday night bathroom surgery") is a recipe for disaster. I wish these examples were products of my imagination, but they are firsthand accounts and often the reality of what precedes a visit to a hospital emergency department. The best way to manage calluses is a strategy that involves professional care, protective insoles, and daily skin care.

**2. Professional care**, especially when diabetes is present, should be in the form of annual if not more frequent visits to a podiatrist. A podiatrist can not only trim (debride) calluses, but can also check blood flow, nerve function and assess for **additional risk factors**. They can also prescribe protective or custom insoles or orthotics that can accommodate and reduce pressure areas to **slow the return of recurrent callus formation**.

**3. Cushioned socks** (often sold as "diabetic socks") can help reduce pressure and shear, as well as help disperse excessive moisture (that can cause maceration), away from the surface of the skin.





**4. Ultimately**, the individual can play an active role in the prevention of foot ulcers when calluses are present. The **simple act of inspecting the feet twice a day, cannot be emphasized enough**. Looking for redness surrounding a callus is one example. If bloody, clear or foul-smelling drainage is present on a sock or floor (for those not wearing shoes around the house) the source may be from an existing callus. Such a scenario can represent an underlying infection, and immediate medical attention is a must.

**5. Part of the daily skin care routine**, besides inspection, is **moisturizing of skin**. After bathing in the morning and in the evening before bed, applying an emollient to the skin can help reduce the intensity of calluses and make skin more supple. A skin cream or protectant that does not contain alcohol, such as Omeza, is recommended. It's also a great way to further inspect the feet, as feeling for irregularities in addition to visualizing the potentially problematic areas, can provide a much more thorough assessment.

*This article was originally published on omeza.com January 19, 2019.*



**DR. DESMOND BELL,  
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*Chief Medical Officer of Omeza*

Dr. Bell is a Board Certified Wound Specialist (CWS) having served on the Board of Directors of the American Board of Wound Management for 6 years and presently serving on the Board of the American Board of Wound Management Foundation. He has also been elected as a Fellow of the Royal College of Physicians and Surgeons of Glasgow and is a member of the CLI Global Society. He is nationally recognized speaker, with regular faculty roles at AMP, ASCENT and Modern Wound Care Management.

Omeza is a skin science company based in Sarasota, FL USA whose mission is to restore skin integrity for people with serious skin problems and to optimize skin quality for all. For information about Omeza products or clinical trials, please contact [info@omeza.com](mailto:info@omeza.com).

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# CAN BENEFICIARIES CHANGE THE INTENT OF A TRUST

By James W. Mallonee

I've frequently been asked if a trust that becomes irrevocable be changed. The short answer is yes, but that will depend on the intent the Grantor placed into the language of their trust. The biggest example of when this arises is who is chosen as the Trustee. The beneficiaries may not like the ways and means that the Trustee is managing the estate distributions. This is especially true if the beneficiaries are put on a leash as to how much each will receive at one time or the amount paid out over time.

If the material intent of the trust has been lost because of some circumstantial change in events, then it is possible the court will grant a change. The court will not grant a change if the only reason is because the beneficiaries do not agree with the handing of the trust by the Trustee.

To prove that a material change has occurred requires an evidentiary review of the circumstances surrounding the reason for the discord among the beneficiaries. The court will first look at the language of the trust and try to determine why the Grantor chose the person or entity who would manage the trust as well as how it is to be distributed.

For example, did the Grantor chose the Trustee based on friendship, the oldest sibling or because he or she did not want one of the siblings managing the trust for fear of squandering the assets. Although selecting the Trustee based on the oldest sibling or that they are the closest in distance to the Grantor seems plausible, it is a recipe for disaster.

What if all of the beneficiaries consent to a change in Trustees? Although Florida law provides for the beneficiaries to collectively agree to a change does not mean that the Trustee has to agree. Florida law states that the Trustee must agree to any change to a trust. When this happens, the only remedy is to test out the desired change in a court of law and allow a judge to make the decision.

The courts place a great deal of attention on the Grantor's intent when reviewing whether a material change should be made. The evidence the court



will be looking at is the lawyer who prepared the trust and why certain things were placed into the verbiage of the document including why a certain Trustee was selected.

What happens if the Trustee is not performing in accordance with the intent of the trust? If it can be proven that the Trustee is in breach of managing the trust, then in such event, it is highly probable that the Court will remove the Trustee and replace with another. But this brings us back to the intent of the Grantor in selecting a Trustee. Once again testimony will be sought to try and understand what it was the Grantor wanted in his or her selection.

The Court will seek testimony as to what the purpose of the trust was intended to provide and from that evidence select a person or entity best suited to meet those intentions. The selection of a Trustee should be based on the individual's ability to withstand criticism from the beneficiaries, manage your assets and be able to make decisions based on facts and not emotion. Sometimes this is one of the siblings, but also a third party who is independent.

If you are having difficulty deciding who should be your personal representative or Trustee, seek out the attorney of your choice and have that discussion. It may save your family's relationship and not cause war among the siblings.

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

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

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

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

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# MEDICAL MARIJUANA

## Edible Dosing, Certified Physicians and Dispensary Information from Certified Marijuana Doctors

**T**here are various forms of medical marijuana such as smoking, tinctures, vapors and edibles, but many people are still uncertain of which form is best for them personally. And that's a critical question and more importantly, it's why a certified medical marijuana doctor with extensive research and experience is your best option. The physicians at Certified Marijuana Doctors take great care to understand your condition and how best to dose your initial medical marijuana trial, or to tweak dosing for those that are already familiar with how it affects them personally.

Without an expert to guide you, you can end up having adverse side effects like nausea and paranoia. And because edibles are one of the most requested forms of medical marijuana, the fact that they can easily be overeaten, often leads to unpleasant effects. Being certain of if you specific dosing is essential.

### It's important to understand how and why medical marijuana works

The endocannabinoid system was discovered in 1992, yet most medical schools, and nursing programs have not added it to their curriculum. Studies showing the benefits of cannabis (marijuana) on the endocannabinoid system were mostly blocked by the Federal Government.

The endocannabinoid system (ECS) is a group of endogenous cannabinoid receptors located in the mammalian brain and throughout the central and peripheral nervous systems, consisting of neuromodulator lipids and their receptors.

The endocannabinoid system can be found in nearly any mammal with a vertebrae. The endocannabinoid system is involved in regulating many key bodily processes, including blood pressure, immunity, stress, inflammation, neurotoxicity, and digestive functions. The endocannabinoid system within the human body is a network of cell receptors that respond to key molecules found in marijuana – THC and CBD in particular. CB1 receptors are most densely concentrated in parts of the brain and central nervous system, and less densely found throughout the rest of the body. CB2 receptors, on the other hand, are less densely located in the brain regions, and more concentrated in the peripheral nervous system and organs. The mapping of these receptors fits well with the diverse range of symptoms and conditions that are found to respond positively to medical marijuana.

In addition to regulating neuronal excitability and inflammation in pain circuits, the endocannabinoid system has been shown to play a regulatory role in movement, appetite, hypothalamic-pituitary-adrenal axis modulation, immunomodulation, mood, blood pressure, bone density, tumor surveillance, neuroprotection and reproduction. The endocannabinoid system has also been shown to affect sensory perception, cardiac output, cerebral blood flow and intraocular pressure.

### A Note on Dispensaries and Vertical Integration

Since Florida's medical marijuana programs inception, vertical integration has been the main force behind each dispensaries operation. What this means is that each dispensary is responsible all the way from seed to sale, making it extremely costly to get your feet wet in the industry. If you include the cost of obtaining a license

as a medical marijuana business, the cost to get started can get into the tens of millions. This leaves us the question of "when will small businesses be able to flourish and profit from the industry alongside the conglomerates"?

Industry heavy hitters such as Trulieve, which currently holds the title for 54% of the entire market share in Florida, have completely taken over the state and leaves patients yearning for more options and better competition. Vertical integration inadvertently creates an uncompetitive environment as instead of having thousands of businesses compete for the top, there are about ten multi-million dollar firms coming in with millions ready to invest. Some argue it's unfair but there is a reason behind this; liability. Florida has one of the stricter programs in the U.S. and as such, it was started with an extremely limited selection of products and the laws were made this way so that each company had 100% responsibility for every step of the process. This makes regulation easier for the governing heads in charge of such but ultimately leaves out opportunities for small business to get involved, leading to all the profit going straight into the pockets of companies already set up across the states.

What does this mean in 2020? Well, there is one underdog that has finally had its moment with its single brick and mortar location in Spring Hill, Florida and they go by the name "The Botanist". While they aren't a true underdog, with them being a state-wide company, they are still the smallest dispensary to successfully have operations in the state with products that are actually worth making the trip for. Patients from Miami have made the 10 hour round trip just to see the difference between products of theirs and the rest of the competition. While seeing high percentage flower isn't too unusual in Florida (with Rise's Velvet Glove coming in at a hefty 31.8% THC), it is unusual to see consistent 20% and higher strains with proper curing and high percentages of terpenes. A small glimmer of hope that will eventually set the standard for the rest as they open more stores and create a healthier competition of better product rather than micro efficiencies to squeeze every last dollar out of the process."

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# HEALTHY AGING AND HEALTHY VISION GO HAND IN HAND

**T**hey say the eyes are the window to the soul, but did you know that keeping your eyes healthy takes a multifaceted approach. Protecting vision is critical, but many of us often take our eyesight for granted until it's too late.

## HOW CAN YOU PROTECT YOUR EYES?

### Eye Exams

Getting regular dilated eye exams is critical. When your eyes are dilated, the physician can see into the retina and behind the eye to diagnose any conditions in their early stages. With eye diseases, often there are no symptoms until the disease has progressed. Untreated glaucoma and age-related macular degeneration can lead to low vision and blindness.

### Diet

Eating plenty of vegetables, especially dark leafy greens, berries, cold-water fish, and limiting processed foods, sugar, and high sodium is critical for eye health.

### Exercise

Because many eye diseases are interconnected with high blood pressure, high cholesterol, and diabetes, it's important to maintain a regular exercise program to keep your vascular system in optimal condition.

### Supplements

Although you can get most of your key eye nutrients from a healthy diet, it's not always easy to eat perfectly. That is why the American Ophthalmic Association recommends supplementing with Omega-3 fatty acids, zinc, vitamin A, C, lutein, and zeaxanthin, to name a few.

### Wear Sunglasses

The reason we hear so much advice on wearing sunscreen, sunglasses, and avoiding over sun exposure between 10:00 am to 4 pm is due in large part to the sun's harmful UV rays during the time when the sun is the highest in the sky. Sunglasses are fashionable accessories that can indeed help to prevent melanoma from forming in the eyes. Your eyes need protection from both UVA and UVB rays. It's best to choose 100% UV Protection.



### Quit Smoking

Smoking is unhealthy for numerous reasons, but when it comes to vision, it decreases vascular dilation and can contribute to eye diseases such as macular degeneration.

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# Failure is a Part of Growth

By Pastor Timothy L. Neptune

**T**he Apostle Peter was a bold man. He stepped up when others stepped back. He was often the first to speak in a group setting. Because of his faith, he was able to walk on water. And, like most risk takers, he experienced his share of failures.

Faith involves risk. Failure is a possibility. But that's okay. Step out of the boat anyway. I love a small part of a speech given by President Teddy Roosevelt back in 1910. He said,

"It is not the critic who counts; not the man who points out how the strong man stumbles, or where the doer of deeds could have done them better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood; who strives valiantly; who errs, who comes short again and again, because there is no effort without error and shortcoming; but who does actually strive to do the deeds; who knows great enthusiasms, the great devotions; who spends himself in a worthy cause; who at the best knows in the end the triumph of high achievement, and who at the worst, if he fails, at least fails while daring greatly, so that his place shall never be with those cold and timid souls who neither know victory nor defeat."

I would rather die on the playing field engaged in the battle than rot in the grandstands as a spectator.

Did Peter fail when he started to sink? Yes, he failed. But I think there were 11 bigger failures sitting in the boat afraid to even try to walk on water.

We need men and women of courage today. High-impact people who are willing to take risks and trust God with the results.

Failure is an indispensable part of growth.

The greatest lessons I've learned in life are from the many mistakes I've made along the way.

If you want to be a high-impact person, you too, will make some mistakes and need God to bail you out.

Peter took his eyes off of Jesus and his faith began to waver. But give Peter some credit... he was in the middle of a really big storm, he was outside of his boat in the darkest part of the night. Can you imagine

how scary that must have been? I get nervous just standing at the back of cruise ship at night looking out at the sea!

Nevertheless, if we keep our eyes on Christ, what do we really have to fear?

As followers of Jesus Christ, we've been called to live a life of adventure that requires great risk and great faith.

Perhaps you've tried before but failed. That's okay. Admit your lack of faith and move on.

Whatever you do, don't give up, give in, or quit.

You lose more often than you win in life. There are more bad days than good days. You fail more often than you achieve. Remember that God is sovereign and always in control. Nothing can happen to you except by divine permission or divine directive.

Don't live with regrets and second guesses. Learn from your mistakes and then move on. It does no good to dwell on the past and wish you could do it over. Just keep moving forward... that's how your faith grows.

*Tim Neptune is the lead pastor of Venture Church Naples, a new church located on the campus of Florida SouthWestern State College in Naples, FL. For church times and other information, visit [www.venturenaples.com](http://www.venturenaples.com) or call (239) 775-5323.*



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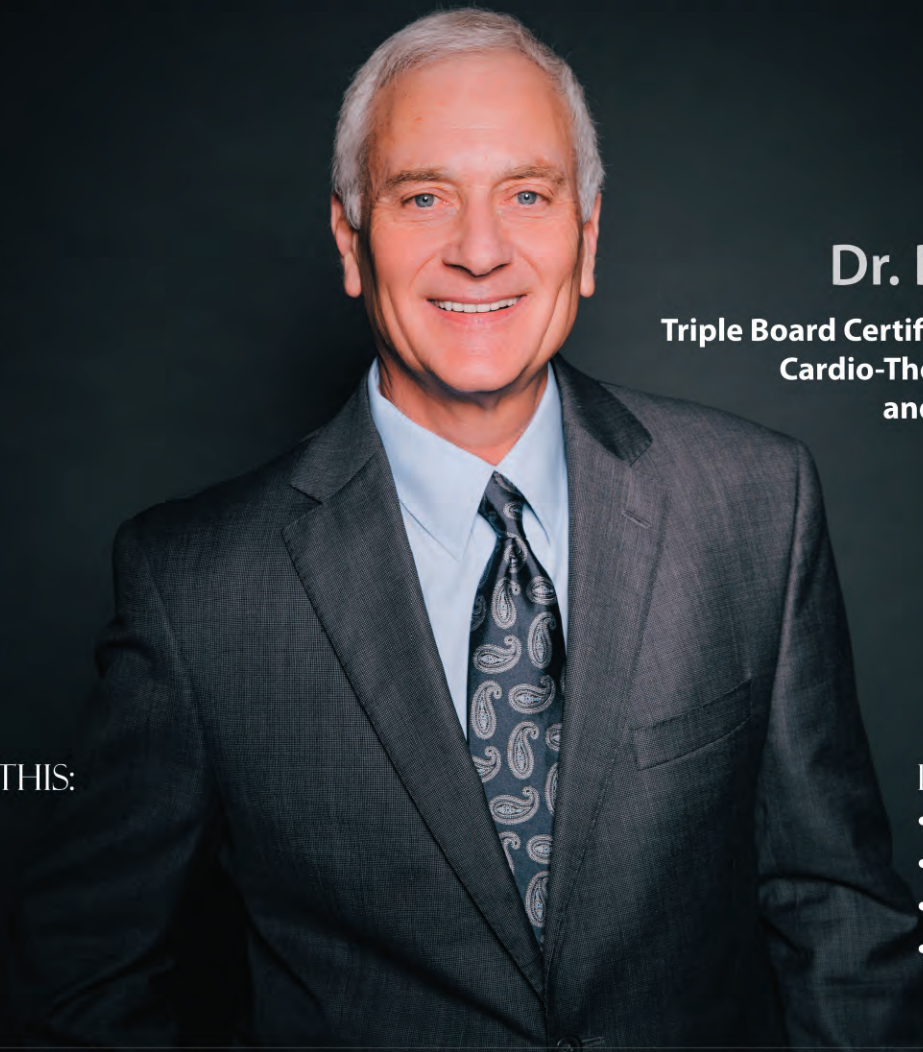
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