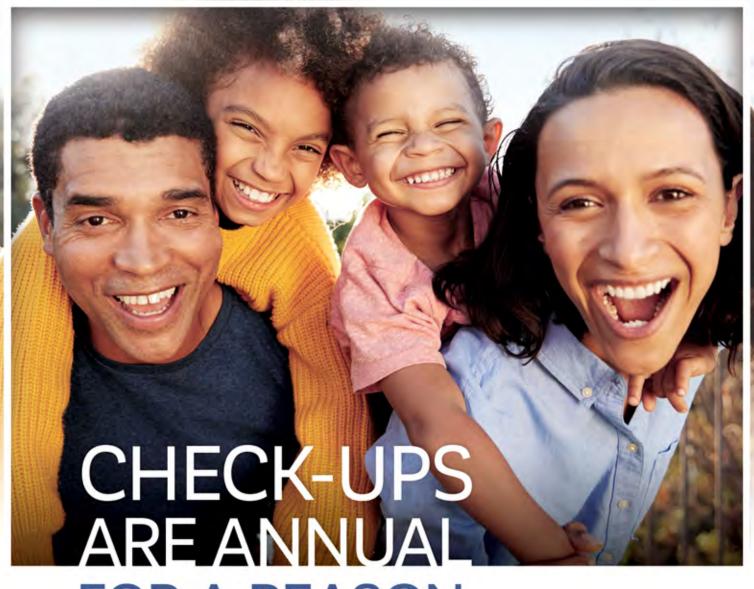
SOUTHWEST FLORIDA'S

Health Style MAGAZINE MAGAZINE September 2021 Charlotte/South Sarasota Edition - Monthly

www.swfhealthandwellness.com FREE 🚮 📵 ANCERS OCLONAL USION THERAP HEALTHY AGING RADIATIONTHE What Does It Really Require?



FOR A REASON.

There's a good reason to keep your health care on schedule. Your family.

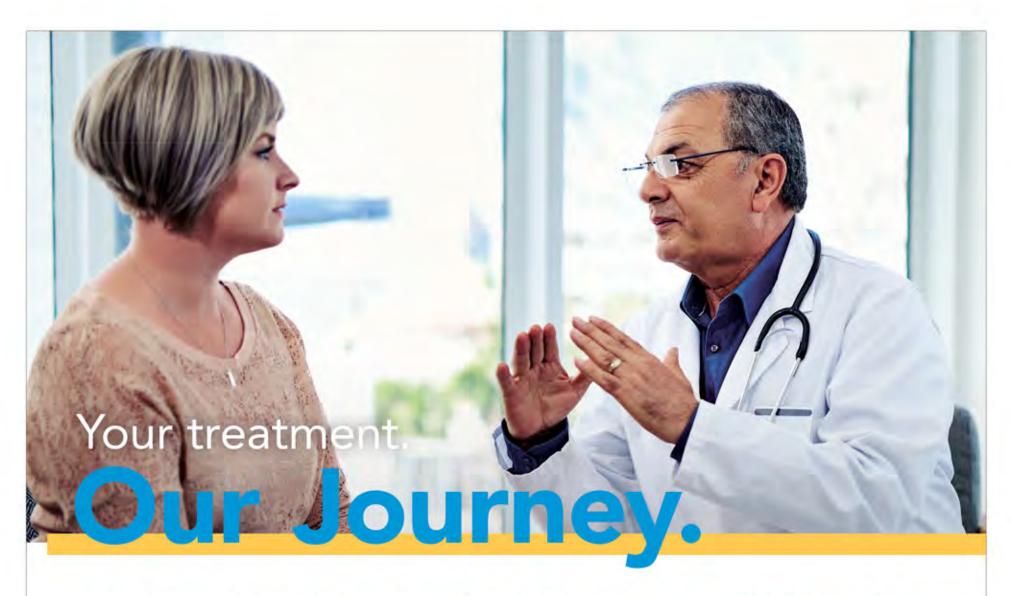
When it comes to keeping your family healthy, annual wellness visits with a health care provider are key. Routine exams and screenings can identify potential health issues early, when they are most treatable. And if you or a loved one gets sick, seeing a doctor is even more important.

We've implemented strict safety standards so that you can come to us confidently – knowing we are providing a safe place with quality care.

Make your appointment today. In-person and telehealth visits are available.

PortCharlottePCP.com





A cancer diagnosis can feel unexpected, leaving you questioning what to do next. But, within 72 hours*, Florida Cancer Specialists gives you and your family the comfort of a personalized treatment plan. Our experienced doctors and nurses provide immunotherapy, the latest technologies from clinical trials and targeted treatment based on your cancer's genomic profile. And with world-class care that's close to home, we're always here to make treatment simple and clear.



By your side - every step of the way.

Caring for patients at our five North Port, Port Charlotte, Venice & Englewood locations.

Lalit Aneja, MD Alexander Glick, MD Paul W. Gonter, MD Kristen Gonter-Aubin, DO Blessy Mathew Jacob, MD Mehnaz Junagadhwalla, MD Robin Lifton, MD Christopher Lobo, MD Noel A. Maun, MD, PhD Ivor Percent, MD Arsh Singh, MD Andres O. Soriano, MD Vance M. Wright-Browne, MD



FLCancer.com

*All required paperwork must be provided at time of referral.





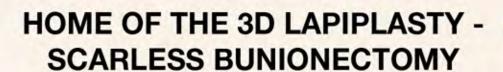
Dr. Isin A. Mustafa, Foot & Ankle Surgeon DPM, MSHS, AACFAS 3161 Harbor Blvd, Suite B Port Charlotte, FL 33952

(833) 366-8534 (FOOT LEG)



www.NaplesPodiatrist.com SAME DAY / NEXT DAY APPOINTMENTS

HOURS: Mon-Fri 8am-5pm





4 New Facts About Your Feet & Ankles

- Heel pain in the morning can be easily resolved.
- Ingrown toenails can lead to bone infection; we treat them fast.
- Diabetic infections kill more people than breast cancer and AIDS. If diabetic, must see us now.
- Top pickleball injuries seen include foot fractures from ankle sprains.

MEDICARE AND MOST PPO'S ACCECPTED





Moving Forward













WE PUT OUR PATIENTS FIRST

Advocate Radiation Oncology is Southwest Florida's local partner in the fight against cancer, bringing world-class radiation treatment closer to home. We are the region's leading locally-owned and operated radiation oncology practice. Our team of board-certified radiation oncologists has decades of experience and is dedicated to working with each patient to develop a compassionate, personalized treatment plan.





Cape Coral Office 909 Del Prado Blvd. S Cape Coral, FL 33990 (239) 217-8070

Bonita Springs Office 25243 Elementary Way Bonita Springs, FL 34135 (239) 317-2772

Fort Myers Office 15681 New Hampshire Ct. Fort Myers, FL 33908 (239) 437-1977

Port Charlotte Office 3080 Harbor Blvd. Port Charlotte, FL 33952 (941) 883-2199

Spanish-fluent doctors and care staff



www.AdvocateRO.com

contents september

- 6 Bayfront Health Punta Gorda Offers Monoclonal Antibody Infusion Therapy
- 7 Progress in Treating Leukemia, Lymphoma & Myeloma Blood Cancers
- 8 Treating Venous Ulcers at Joyce Vein & Aesthetic Institute
- 9 Do Your Shoes Fit Right?
- 10 Dry Eye is an Inflammatory Disease That Should Not be Overlooked
- 11 What Men Should Know About Prostate Cancer and Radiation Therapy
- 12 Quitting Tobacco in Recovery: What You Need to Know
- 13 Not All Imaging Can Detect Prostate Cancer
- 16 Investing During a Pandemic

- 17 Early Detection of Prostate Cancer Saves Lives
- 18 New Combination of Neuro-Psychological Testing and Therapy
- 19 Cure Your Migraines
- 20 A Painful Bladder Condition What You Need to Know About Interstitial Cystitis
- 21 How Often Should I Replace My Hearing Aids?
- 22 Healthy Aging: What Does It Really Require?
- 23 9 Ways to Prepare for a Virtual Showing
- 24 Don't Cut Corners When It Comes to Real Estate Property
- 25 10% THC Cap Proposal
- 26 Spiritual Wellness: Hope and Optimism
- 27 What is Laser Periodontal Therapy?

ASUPERIOR LASER FOR CATARACT SURGERY Technology Leaders in Eye Care, Quigley Eye Specialists is proud to be the first and only private practice in Southwest

Technology Leaders in Eye Care, Quigley Eye Specialists is proud to be the first and only private practice in Southwest Florida to offer patients the next generation laser for cataract surgery. Introducing the Catalys* Laser System. When compared to another leading laser, the Catalys was found to use less energy and demonstrated superior patient outcomes. (Khodabakhsh & Hobauer, 2018) ²

Built from the ground up specifically for cataract surgery, the Catalys is more gentle on the eye and opens the door to laser cataract surgery for patients with glaucoma. If you suffer from cataracts or any other eye condition, call Quigley Eye Specialists today.

Our exceptional medical team specializes in

- Dry Eye
- Laser Cataract
- Glaucoma
- Surgery
- Cornea
- Bladeless
- LASIK
- **Eyelid Surgery**
- Retina
- Routine Eye care



Duane A. Wiggins, MD Board Certified Ophrhalmelogist Cataract & Refractive Surgeon

CONTACT US

OWNER / ACCOUNT EXECUTIVE Cristan Grensing cristan@gwhizmarketing.com

OWNER / CREATIVE DIRECTOR Sonny Grensing sonny@gwhizmarketing.com

EDITOR - Lisa Minic



Publishing • Advertising • Web Design • Graphic Design

239.588.1200

Southwest Florida's Health & Wellness Magazine can be found in over 600 Southwest Florida medical facilities including, hospitals', doctors', chiropractors' and dentist offices. Find a copy of your FREE Southwest Florida's Health&Wellness Magazine in most grocery and convenience stores as well.

To get your article published and for ad rates, call 239.588.1200 Cristan@gwhizmarketing.com

G WHIZ Marketing, LLC | 1630 Caxambas Court | Marco Island, Florida 34145

©Copyright SOUTHWEST FLORIDA'S HEALTH & WELLNESS Magazine 2021. All rights reserved. Any reproduction of the material in this magazine in whole or in part without written prior consent is prohibited. Articles and other material in this Magazine are not necessarily the views of SOUTHWEST FLORIDA'S Health & Wellness Magazine. SOUTHWEST FLORIDA'S Health & Wellness Magazine reserves the right to publish and edit, or not publish any material that is sent. SWFL Health & Wellness Magazine will not knowingly publish any advertisement which is illegal or misleading to its readers. The information in SOUTHWEST FLORIDA'S Health & Wellness Magazine should not be construed as a substitute for medical examination, diagnosis, or treatment.

Schedule your cataract evaluation today!

239-360-9633

Visit QuigleyEye.com or any of our 8 Convenient Locations
BONITA SPRINGS | CAPE CORAL | FORT MYERS | LEHIGH
NAPLES | PORT CHARLOTTE | PUNTA GORDA | SUMMERLIN

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.ncbr.nim.inh.gov/pmc/articles/PMC6087026/
 In addition to the 2018 study noted above, a 2016 study showed that when compared to another leading lases, the other baser showed significantly higher completed energy and phase compared to provide a compared to another leading lases. The other baser showed significantly higher completive
dissipated energy and phase completion power needed in comparison to the Catalys group. https://www.ncbr.nim.oth.gov/pmu/articles/PMC5077266/

Bayfront Health Punta Gorda Offers Monoclonal Antibody Infusion Therapy

ayfront Health Punta Gorda is now offering monoclonal antibody therapies for the treatment of some cases of COVID-19. A physician order is required to schedule an appointment for the monoclonal antibody infusion therapy.

"For certain individuals recently diagnosed with COVID-19, monoclonal antibody therapy may help prevent hospitalization or worsening symptoms," said Simon Grinshteyn, M.D., FAPWHC, BC-ADM, family medicine provider with Bayfront Health Medical Group. "The infusion consists of man-made antibodies that mirror the antibodies of patients that recovered from the COVID-19 virus. The research is showing that this therapy may limit the amount of the virus in the body; therefore, helping symptoms improve sooner."

Monoclonal antibody therapy is approved for certain patients who:

- Have positive results of direct SARS-CoV-2 viral testing,
- Are experiencing mild to moderate COVID-19 symptoms, and
- Are at high-risk for COVID-19 symptoms progressing to severe levels.
- Not fully vaccinated OR
- Not expected to mount an adequate immune response to complete SARS-CoV-2 vaccination (example, individuals with immunocompromising conditions) AND
- Have been exposed to an individual infected with SARS-CoV-2 consistent with close contact criteria per Centers for Disease Control and Prevention (CDC) OR
- Who are at high risk of exposure to an individual infected with SARS-CoV-2 because of occurrence of SARS-CoV-2 infection in other individuals in the same institutional setting (example, nursing homes or prisons)

"This therapy is not for individuals who are already in the hospital because of their COVID-19 symptoms, who require oxygen therapy due to COVID-19, or those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidity," said Grinshteyn. "And patients must be 12 years of age or older, weighing at least 88 pounds."

High risk is defined as patients who meet at least one of the following criteria in addition to meeting the previous criteria:

- Are 65 years of age or older
- Have a body mass index (BMI) of 35 or higher or 12 to 17 yeas of age with a BMI greater than or equal to the 85th percentile for their age and gender based on CDC growth charts
- Are currently pregnant
- Have diabetes, chronic kidney disease, or an immunosuppressive disease
- Are currently receiving immunosuppressive treatment
- Have cardiovascular disease (including congenital heart disease) or hypertension (high blood pressure)
- Have chronic lung disease (for example, chronic obstructive pulmonary disease, asthma [moderate to severe], interstitial lung disease, cystic fibrosis, and pulmonary hypertension)
- Have sickle cell disease
- Have neurodevelopmental disorders (for example, cerebral palsy) or other conditions that confer medical complexity (for example, genetic or metabolic syndromes and severe congenital abnormalities)
- Have a medical-related technological dependence (for example, tracheostomy, gastrostomy, or positive pressure ventilation [not related to COVID-19])



To learn more about this treatment and how Bayfront Health is taking extraordinary measures to provide COVID-safe care, visit: www.bayfrontcharlotte.com/covid-19.

If you need a physician, The following physicians are accepting new patients and offer same-day, walk-in and telehealth visits:

Fatin Albezargan, M.D. 941-255-0032

Luis Casanova, M.D. 941-883-3313

Simon Grinshteyn, M.D., FAPWHc, BC-ADM Yandro Leal, M.D. 941-255-0032

Elena Rodriguez, D.O. 941-575-1514



www.BayfrontCharlotte.com 2500 Harbor Blvd., Port Charlotte, FL 33952

Boyfront Health Accepts most Major Insurance Plans

Progress in Treating Leukemia, Lymphoma & Myeloma Blood Cancers

Blood cancers are the third leading cause of cancer deaths in the U.S. Approximately every three minutes, someone in the United States is diagnosed with a type of blood cancer (leukemia, lymphoma or myeloma).

What Are Blood Cancers and What Causes Them?

According to the American Society of Hematology (ASH) there are three main types of blood cancers: leukemia, lymphoma and myeloma. Leukemia is found in blood and bone marrow and is marked by the rapid production of abnormal white blood cells. These abnormal white blood cells are not able to fight infection like normal white blood cells do. They also impair the ability of bone marrow to produce red blood cells and platelets.

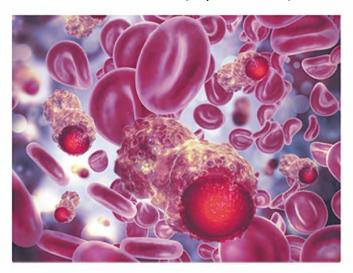
Lymphoma is another type of blood cancer that affects the lymphatic system. The function of the lymphatic system is to remove excess fluids from the body and to produce immune cells. Lymphocytes are a type of white blood cell that fights infection. Abnormal lymphocytes can mutate and become lymphoma cells that multiply uncontrollably and collect in the lymph nodes and other tissues.

Myeloma is a third type of blood cancer that specifically targets plasma cells. Plasma cells are white blood cells that produce antibodies to fight disease and infection in your body. Myeloma cells prevent the normal production of antibodies, leaving the body's immune system weakened and susceptible to infection.

Although the specific causes of blood cancers remain largely unknown, scientists have learned that the DNA of immature blood cells (mainly white cells) can become damaged or mutated in some way. This abnormality causes the blood cells to divide chaotically and grow uncontrollably. As more and more space is occupied by these damaged blood cells, there is less space for normal cells and, as a result, the immune system becomes compromised and does not function normally.

Making Progress Against Blood Cancers

The Leukemia & Lymphoma Society largely attributes the dramatic improvement in blood cancer treatment to research and new, targeted treatments, such as immunotherapies. Research in the past



10-15 years has led to an increased understanding of the many subtypes of each blood cancer and the differences in therapy that are required to treat each of these subtypes.

One of the biggest success stories to date has been the treatment of chronic myelogenous leukemia (CML), which is one of the four main types of leukemia. Treatment of CML has greatly improved since the late 1990s after a new, targeted biologic therapy (imatinib) was introduced. Today, patients with CML take a daily pill and can enjoy a normal life expectancy. This drug, as well as more recent second-generation targeted therapies, has transformed a previously fatal disease into a manageable chronic disease with very few serious side effects.

Most recently, oncologists have been encouraged by the results of a type of immunotherapy, Chimeric Antigen Receptor - T Cell, or CAR-T Cell therapy, which programs the body's T cells to attack cancer cells. There are hundreds of CAR-T clinical trials currently underway and three different CAR-T treatments have already received FDA approval for the treatment of blood cancers, such as follicular non-Hodgkin's lymphoma, mantle cell lymphoma, diffuse large B-cell lymphoma, acute lymphoblastic leukemia (ALL), multiple myeloma and chronic lymphocytic leukemia (CLL).

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.



North Port

3085 Bobcat Village Center Road North Port, Florida 34288

Port Charlotte

22395 Edgewater Drive Port Charlotte, FL 33980

Venice Island

901 South Tamiami Trail Venice, FL 34285

Venice Healthpark

836 Sunset Lake Blvd, Suite 101 Venice, FL 34292

Englewood

714 Doctors Drive Englewood, FL 34223-3992

For more information, visit FLCancer.com

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 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

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

TRAINING

Internship and Surgical Residency Lansing General Hospital, MI

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



941-575-0123 www.jvai.com

25092 Olympia Ave., Suite 500 Punta Gorda, FL 33950



DO YOUR SHOES FIT RIGHT?

hoe gear plays a big part of our everyday lives. Shoes provide protection, cushioning and support to our foot and ankle. You have been wearing shoes since before you could walk. You must be wearing the right size, right? Unfortunately, many people develop foot and ankle issues due to improper shoe fit. Here are some tips to make sure your shoes fit properly and avoid complication related to improper shoe fit.

- 1. Consider having a professional shoe fitting. Many shoe stores can measure your feet for you. As we age, the soft tissue structures and ligaments loosen causing your foot to change in both width and length. You should not assume your past shoe size will always be the same. Make sure you measure both feet as well, one foot is typically longer than the other. You also want to make sure you measure your feet while standing.
- 2. Pay close attention to your arch shape while standing. When looking at shoes makes sure there is a built in arch and that it fits well with you own arch. You can take the insole out and put it against your foot to see if the arch matching. You may also consider adding an arch if the shoe does not have enough arch support.
- 3. New shoes should fit right as soon as you put them on. Don't assume the shoe will expand with time or stretch. If it doesn't fit right at first, it is not the right fit for you. Do not get that shoe.
- 4. Your feet swell and slightly flatten during the day, so measure your feet towards the end of the day.

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.

> 3161 Harbor Blvd., Suite B Port Charlotte, FL 33952

(239) 430 - 3668 (FOOT) www.NaplesPodiatrist.com



- 5. Shoes should have about a half-inch space at the tip of shoe and eight of an inch in the back.
- 6. All shoe brands vary in size. Never assume if you are the same size in all shoes.
- 7. If you are buying athletic shoes, don't have on hose. You should have the type of sock you will wear with that specific shoe.
- 8. Make sure that the widest part of your foot corresponds with the widest part of the shoe.

- 9. Don't buy shoes without wiggle room for your toes. A too narrow toe-box will lead to rubbing, and of friction that can cause corns, calluses, neuromas, or deformed toes.
- 10. Spend amble amount of time walking around in the shoes (both of them) before purchasing. If purchasing online, make sure to review the return

If you have any foot and ankle related issues, make sure to contact your local specialist for an evalua-



Your wound healing experts



At Family Foot & Leg Center, we specialize in the treatment of wounds that are difficult to heal. We use advanced wound healing technologies to help keep patients out of the hospital and onto healing.

Our patients experience:

- · Faster recovery time
- Better results
- · Improved long-term outlook
- · Optimal quality of life

If you have a foot, ankle, or leg wound, do not delay. See us at any of our locations throughout Collier, Lee, and Charlotte Counties.



Virtual Appointments Available!

ied in Reconstructive Ankle Surgery. Board Certified in Foot Surgery.

SAME OR NEXT DAY APPOINTMENTS AVAILABLE 239-430-3668

EASILY SCHEDULE YOUR APPOINTMENT ONLINE AT www.NaplesPodiatrist.com



Dry Eye is an Inflammatory Disease That Should Not be Overlooked

f you wake up and your eyes are barely lubricated, find it hard to blink enough tears, have a gritty sensation in your eyes throughout the day day, or are feeling that your eyes are simply irritated, you might be suffering from "dry eye". It occurs when the quantity or quality of tears diminishes and can no longer lubricate the eye adequately. Quigley Eye Center wants to educate the community on the importance of getting a proper diagnosis and understanding the issues that coincide with Dry Eye by sharing the following publication from the AAO (American Academy of Ophthalmology) concerning dry eye.

American Academy of Ophthalmology—Understanding Dry Eye:

Dry Eye Syndrome is one of the most common problems affecting the general population and can cause problems that range in severity from mildly irritating to debilitating. Dry eye syndrome is a general term that describes the state of the front of the eye in response to a breakdown in the natural layer of tears that coats the front of the eye, called the tear film. Normally, this layer of tears is a stable, homogenous layer that not only provides the cornea and conjunctiva a healthy buffer from damage were it constantly exposed to the air, but this interface between the tear film and the air is also responsible for a significant amount of the focusing power of the eye. When the tear film becomes unhealthy, it breaks down in different places on the cornea and conjunctiva, leading not only to symptoms of irritation, but also to unstable and intermittently changing vision.1

While there are numerous different symptoms one can experience, prominent amongst these symptoms is tearing; naturally, a patient may wonder why their eye can be "dry" despite producing plenty of tears. This is because the unhealthy tear film and the irritation that comes from it stimulates the brain to produce a wave or reflex of tears to help counteract the irritation. However, this reflex tearing is simply insufficient to correct the overall problem. For this reason, dry eye syndrome could more appropriately be termed "Tear Film Dysfunction."

Other symptoms of dry eye syndrome or tear film dysfunction include:1

- Burning
- Stinging
- Itching
- Tearing
- Sandy or gritty feeling
- Scratchy or foreign-body sensation
- Discharge
- Frequent blinking
- Mattering or caking of the eyelashes (usually worse upon waking)
- Redness
- Blurry or fluctuating vision (made worse when reading, computer, watching television, driving, or playing video games)
- Light-sensitivity
- Eye pain and/or headache
- Heavey eye lids
- Eye fatigue¹

Epidemiology

Dry eye is a common ocular condition and a major reason for visits to ophthalmologists. Its prevalence varies widely among epidemiological studies depending on how the disease is defined and diagnosed, and which population is surveyed. It is estimated to be 7.4%–33.7%.¹

Moreover, the definition of dry eye is still under continual revision, and the lack of a single diagnostic tool challenges ophthalmologists worldwide. The 2007 Report of International Dry Eye Workshop recommended to combine subjective symptoms with objective clinical tests to confirm dry eye diagnosis.¹

Causes

- Allergies
- Decreased hormones associated with aging
- pregnancy
- Thyroid eye conditions
- Eyelid inflammation (blepharitis)
- Medication/supplement use, including psychiatric medicines, OTC cold medicines, anti-histamines, beta-blockers, pain relievers, sleeping pills, diuretics, Hormones replacement, and oral contraceptives
- Sjogren's syndrome (dry mucus membranes throughout body)

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, Lehjgh Acres, Bonita Springs, Naples, and Coral Gables.

- Other autoimmune disorders including Lupus and/or Rheumatoid Arthritis
- Chemical splashes / injuries to the eyes
- Eye surgery
- Infrequent blinking, associated with staring at computer or video screens, and Parkinson's
- Environmental (dusty, windy, hot/dry)
- Contact lens use
- Neurologic conditions, including stroke, Bell's palsy, Parkinson's, trigeminal nerve problem,
- Exposure keratitis, in which the eyelids do not close completely during sleep
- Post refractive surgery (LASIK or PRK), it may generally last three to six months, or longer
- Inflammatory eye conditions, including Herpes virus infections and uveitis / iritis
- Diabetes
- Vitamin A deficiency (rare in US)1

Management

Depending on the causes, there are numerous treatments for dry eye syndrome / tear film dysfunction, but the more common treatment modalities include:

- Artificial tears (preferably ones without a rednessreliever component in them)
- Longer acting agents such as artificial tear gel and ointments and lacrisert
- Tear conserving interventions such as punctal plugs
- Warm compresses
- Eyelash scrubs
- Prescription medicines such as Restasis (increase tear-production) or Xiidra (mechanism unclear)
- Topical ophthalmic steroids are helpful in controlling the inflammatory aspect of the disease.
- Oral flaxseed oil or fish oil supplements 2000mg/day has also been found to be useful in alleviating symptoms and decreasing the frequency of topical agents.¹

Reference:

1. D. Bustos, MD, AAO, EyeWiki, "Dry Eye Syndrome," November 8, 2018 eyewikiaao.org



(855) 734-2020 | www.QuigleyEye.com

2529 Tamiami Trail, Punta Gorda, FL 33950 2135 Tamiami Trail, Port Charlotte, FL 33948 20600 Veterans Blvd., Port Charlotte, FL 33954

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.

For more information, call (855) 734-2020 or visit www.QuigleyEye.com.



What Men Should Know About Prostate Cancer and Radiation Therapy

By Dr. Kevin Kozak

very September, National Prostate Cancer Awareness Month presents an opportunity to increase awareness and discussion on prostate cancer, the second most common type of cancer among men in the U.S.

Nearly one in eight men will be diagnosed with prostate cancer during their lifetimes. The American Cancer Society estimates there will be 248,530 new cases diagnosed in 2021, and 34,130 deaths will be attributed to prostate cancer.

While these statistics may come as an unsettling shock, the disease is survivable. In fact, more than 3.1 million men in the U.S. who have been diagnosed with prostate cancer are still alive today.

Early detection, effective treatments and continued research are our best allies in the battle against prostate cancer.

Risk factors

Prostate cancer is more likely to develop among older men. That means the older a man is, the greater the chance of getting prostate cancer. Approximately six in every ten cases of prostate cancer are diagnosed in men 65 and older, and the average age at diagnosis is around 66.

Family history, race and diet are also risk factors associated with the disease. Men have a higher chance of getting or dying from the disease if they have family history of prostate cancer.

Detecting cancer early

Prostate cancer can be found early by testing for prostate-specific antigen (PSA) levels in a man's blood or with a digital rectal exam. Rectal exams are performed by a doctor who feels for any bumps or hard areas on the prostate that might be cancerous. The procedure can be uncomfortable but only requires a short amount of time.

Screening tests remain the most effective way to detect prostate cancer at an early stage, which allows patients to have more treatment options and higher survival rates.

Treatment & radiation therapy

When it comes to treating prostate cancer, it's not a question of which treatment is better but rather which option best fits the patient's specific needs. There are many factors to consider when recommending treatment, some of which include:

- The wishes of the patient.
- The stage of cancer.
- The patient's age and health,
- The recurrence of prostate cancer.



Most men with prostate cancer are diagnosed early, when the cancer hasn't spread beyond the prostate gland. In this case, more management options are available, some of the most common include radiation therapy and surgery. In fact, some patients require no treatment and can be carefully monitored.

Fortunately, if radiation therapy is recommended, advances in technology have dramatically improved. Radiation therapy serves as safe and effective treatment for prostate cancer and uses high-energy rays to precisely target and destroy cancer cells.

Radiation techniques have greatly improved in minimizing the side effects of treatment so that patients can return to their daily lives following each treatment. Using industry-leading machines, patients can complete a full course of radiation with little inconvenience due to more highly effective methods of prostate cancer treatment.

You might find it helpful to discuss your decision with family, friends or more than one medical opinion. At Advocate Radiation Oncology, we continue to stand proudly with our patients in their fight against prostate cancer.

About the Author

Dr. Kevin Kozak is a board-certified radiation oncologist 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.

Cape Coral Office

909 Del Prado Blvd. S Cape Coral, FL 33990 (239) 217-8070

Bonita Springs Office 25243 Elementary Way Bonita Springs, FL 34135

Fort Myers Office

15681 New Hampshire Ct. Fort Myers, FL 33908 (239) 437-1977

Port Charlotte Office 3080 Harbor Blvd.

Port Charlotte, FL 33952 (941) 883-2199

Spanish-fluent doctors and care staff



www.AdvocateRO.com

(239) 317-2772

Quitting Tobacco in Recovery:What You Need to Know

veryone knows that using tobacco is bad for you. Yet in the alcohol and drug addiction treatment arena, helping individuals quit smoking has traditionally been a low priority. This creates a disparity for individuals beginning their recovery journey. Studies show that smoking is highly prevalent among people in treatment for substance use disorders, with most studies finding rates between 65-85 percent among patients in addiction treatment. As a result, clients in substance abuse treatment are at a higher risk for tobaccorelated health issues.

There are several widespread myths when it comes to addictions treatment and smoking cessation:

1. Individuals in treatment do not want to quit smoking. This belief that clients do not want to stop is challenged by recent surveys finding most clients entering drug treatment do express an interest in quitting smoking when asked.¹



- 2. Individuals in treatment would not be able to quit smoking if they tried. On the contrary, evidence supports that smoking cessation interventions can be effective at increasing short-term quit rates in people with substance use disorders.¹
- 3. Individuals in treatment may relapse with another substance if they quit smoking. Studies have shown that treating multiple addictions at once does not seem to make recovery more difficult and, in fact, cigarette smoking increased the likelihood of relapse among people in recovery from substance use disorder.²

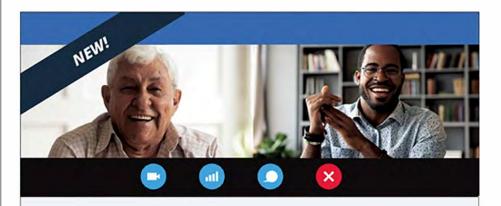
Understanding how nicotine interfaces with chemicals in the brain can be key to understanding the benefits to addressing multiple addictions at one time. Nicotine, the addictive substance in tobacco products, passes to the brain in under 7 seconds.⁴ Nicotine stimulates the brain's reward center which means that it reinforces specific behaviors that are beneficial for survival. Dr. Heather Kimmel, Health Scientist Administrator of NIDA's Epidemiology Research Branch explains that even though various substances have different pharmacological mechanisms, all drugs of abuse ultimately affect the same reward pathway. Abstinence from all of them will help the individual move to a new physiological state and, hopefully, a new mental state as well.²

Help with quitting tobacco is free! Gulfcoast South Area Health Education Center (GSAHEC), as part of the Tobacco Free Florida AHEC Cessation Program—offers free tobacco cessation sessions that are available to help someone quit all forms of tobacco. These group cessation sessions, held virtually and in-person, provide information about the effects of tobacco use, the benefits of quitting, and will assist you with developing your own customized quit plan.

Free nicotine replacement therapy in the form of patches, gum or lozenges (if medically appropriate and while supplies last) are provided with the session. Attendees will also receive a participant workbook, quit kit materials, and follow up support from a trained tobacco treatment specialist. Contact us today at 866-534-7909 or visit www.tobaccofreeflorida.com/groupquitcalendar to schedule a class or learn more about the program!

References

- 1 Mythbusters: One addiction at a time? NZ Drug Foundation At the heart of the matter. (n.d.). https://www.drugfoundation.org.nz/matters-of-substance/archive/may-2007/one-addiction-at-a-time/.
- 2 National Institute on Drug Abuse. (2021, May 10). Cigarette smoking increases the likelihood of drug use relapse. National Institute on Drug Abuse. https://www.drugabuse.gov/news-events/nida-notes/2018/05/cigarette-smoking-increases-likelihood-drug-use-relapse.
- 3 National Institute on Drug Abuse. (2021, April 12). Do people with mental illness and substance use disorders use tobacco more often? National Institute on Drug Abuse, https://www.drugabuse.gov/publications/research-reports/tobacco-nicotine-e-cigarettes/do-people-mental-illness-substance-use-disorders-use-tobacco-more-often.
- 4 Why giving up cigarettes in recovery is good for you. Positive Sobriety Institute. (2018, July 27). https://www.positivesobrietyinstitute.com/quitting-time-giving-cigarettes-recovery-good/.



Quit tobacco with virtual Group Quit.

There's never been a more important time to guit.

Free, expert-led online sessions are now available for all Florida residents. Upon class completion, participants are eligible to receive free nicotine replacement therapy such as gum, patches or logenzes.*

For more information on virtual Group Quit classes, contact

Gulfcoast South AHEC 866-534-7909

*if medically appropriate for those 18 years of age or older

Learn more about all of Tobacco Free Florida's tools and services at tobaccofreeflorida com/quityourway







Not All Imaging Can Detect Prostate Cancer:

Understanding Innovative MRIs and Choosing the Right Imaging Center is Critical

PSA (prostate-specific antigen) count, which tests the blood for specific protein-synthesized prostate cells can help diagnose prostate cancer. The higher the number of PSA, the more likelihood of impending cancer. There is also a more advanced test of free-range prostate PSA cells; this test typically reads higher in men that have undiagnosed prostate cancer. The earlier your PSA levels are checked, the better your chances of successful treatment and survival rate.

However, PSA scores can be somewhat unreliable. Some reasons that PSA scores may be high are due to infections, medications, or pressure from tight clothing or bike riding to name a few.

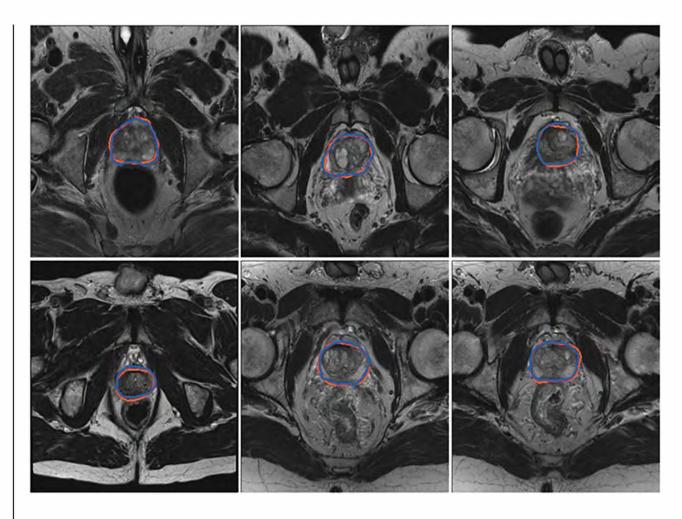
What about detecting prostate cancer via ultrasound? Some physicians simply ordered an ultrasound-guided biopsy for their patients, and while this test can detect prostate cancer, it has limitations, as the images often do not show the cancer inside of the prostate.

It's becoming much more common for physicians to refer their patients with high PSAs or other symptoms for an MRI, which detects cancer on a deeper level; however, not all MRIs are equal.

Advanced MRIs Detect Even the Tiniest Cancer Cells Radiology Regional stays up to date on all advanced testing, screenings, and procedures for the good of the patient. That is why they have the 3-T Wide-8 ore MRI. This machine provides the radiologist with the highest level of images available.

You have the CHOICE of where you get your diagnostic imaging done. Make sure that you are researching your options and getting the most advanced screenings available.

At Radiology Regional, they take your health personally. Radiology Regional has 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 stateof-theart, 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.

Radiology Regional has 13 locations in 3 counties, Lee, Collier and Charlotte. Ask your physician to refer you to Radiology Regional for your imaging needs.

Contact Radiology Regional today at (941) 255-7945, (239) 425-4678 (Español)



18300 Murdock Circle, Building #15 Port Charlotte (Behind the Surgery Center) WWW.RADIOLOGYREGIONAL.COM

You have a choice where you have your imaging performed - choose Radiology Regional today!

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

- Clear up the misconceptions that your CPA, attorney and financial advisor may be missing that could be costing you thousands!
- Two must ask questions you should ask right now if you own bonds or bond funds.
- Clarify the facts surrounding buy and hold versus timing the market.



Margaret Hixon Founder & President



Stuart Dickson Managing Partner



Call 941-925-2121 now or go to www.vimvestadvisors.com

If you would like to learn how wealthy high-income investors avoid myths and misconceptions and shelter income and assets from higher tax rates and risk going forward join us at our complimentary educational dinner event. This is not a product or investment sales presentation and the content is best suited for those with \$500,000 and above in retirement assets.







Your Best Choice for Women's Imaging



OUR DEDICATED TEAM

The most skilled, board-certified and fellowship-trained women's radiologists, and certified technologists



The most advanced imaging technology, including Abbreviated Breast MRI and 3D Mammography



AT YOUR CONVENIENCE

Easy online scheduling available 24/7 at radiologyregional.com

OUR COMPREHENSIVE

women's imaging services



- 3D Mammography
- 3T Breast MRI and Abbreviated Breast MRI (AB-MRI) Screening for Dense Breasts
- Breast Ultrasound
- Breast Biopsies: Stereotactic, Ultrasound and MRI
- DEXA (Bone Density)
- OB Ultrasound
- DVT Ultrasound
- Sonohysterography
- . Cardiac Imaging: CT, MRI, US
- · Pelvic MRI
- Hysterosalpingography

13 CONVENIENT LOCATIONS IN LEE, COLLIER AND CHARLOTTE COUNTIES

To Schedule an Appointment, call: 239-936-4068 or 941-255-7945

For more information, go to www.radiologyregional.com



GENERAL PRACTITIONER IN BRADENTON, FL

YOUR PRIMARY CARE HOME

(941) 748-8069

3303 MANATEE AVE. W. BRADENTON, FL 34205

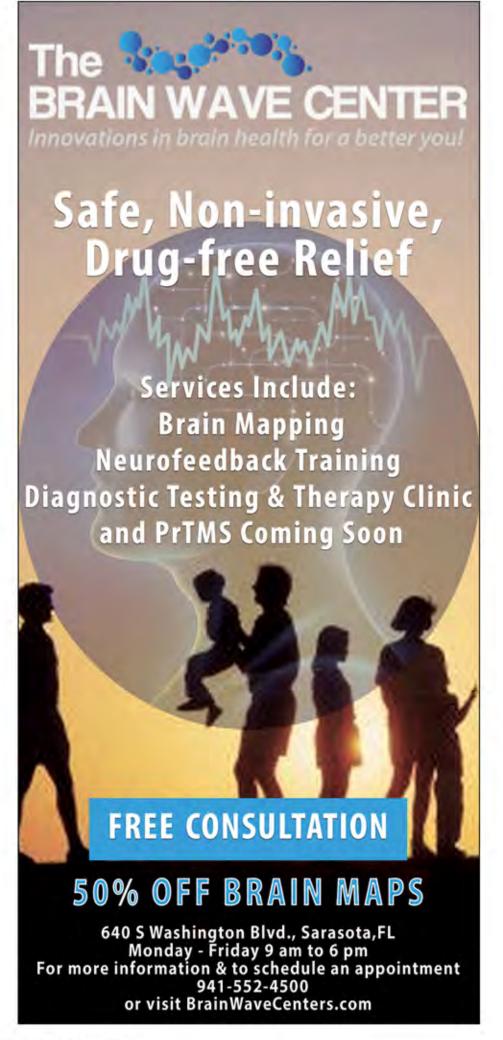
CURRENTLY ACCEPTING NEW PATIENTS AGES 12 AND UP



COMPLETE CARE WELCOMES DR. THOMAS WALSH

Complete Care is open and offering telehealth visits through the COVID-19 crisis. We are maintaining our regular schedule and accepting new patients.

We Accept Medicare & Most Commercial Insurances



Investing During a Pandemic

OVID has caused us all to focus on health issues. It is flaring up again as you read this. We tend to avoid focusing on a major future health issue which is the possible need for Long Term Care or assisted living situations down the road.

There are two main reasons for this. One, people think "I'm healthy. It won't happen to me." And they ignore it. Do they have a family history of medical issues that they aren't thinking about? Could this be a distinct possibility down the road? There are Medicaid spend down rules to think about and Long Term Care nightmares that could happen. People have heard the scare tactics side of it, but they lack the hard evidence that could help them make an informed decision that is right for them.

Roughly 85% of Americans over age 65 don't have Long Term Care insurance even though the government says roughly 70% will need some sort of care. This is a major disconnect. When you think of your home, almost everyone has their home insured but there is a very small chance of fire/hail/hurricane/etc. as only 5% of homes have a claim.

People also think that traditional Long Term Care Insurance is expensive and that they will either use it or lose all the premium cost paid in over the years or decades. This brings up the second reason they don't have coverage as many people are not aware there are other ways to solve for the Long Term Care problem. Obviously, they would benefit from further research like... "Am I in a certain risk group? What options are there other than paying for LTC premiums?" There are many including trust planning, asset based Long Term Care, gifting options, and more.

Vimvest offers educational events and has a no obligation discovery review where you can clearly understand what your options are. Learning more may help you preserve and protect your assets from the Medicaid spend-down rules, perhaps find the money falling through the cracks to pay for part or the entire Long Term Care problem and most importantly... assure your decision is right for you.



YOUR SUCCESS IS OUR GOAL.

To register for our upcoming FREE educational dinner event, please call Sara at 941-925-2121

Ruth's Chris October 5th or October 7th at 6:00pm



941-925-2121 www.vimvestadvisors.com



Early Detection of Prostate Cancer Saves Lives

rostate cancer is a fairly serious blip on the male health radar as the second leading cause of cancer death in American men. Chances are you know someone who has battled prostate cancer because statistically speaking; one in seven men will be diagnosed with prostate cancer during his lifetime. The average age of diagnosis is 65, in fact 60% of those diagnosed are 65 and older.

Prostate cancer – and other prostate issues – can cause considerable discomfort, pain and even death, if they are left undiagnosed and untreated. No man looks forward to the annual prostate exam; but if you're smart, you'll bite the bullet and go anyway because early detection can save your life.

Regular screenings cannot only save you a lot of pain and discomfort they may just save your life.

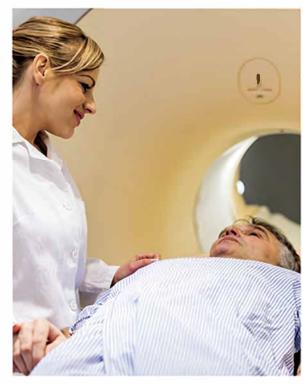
What is the prostate - and why does it need to be examined?

The prostate gland is a doughnut-shaped organ that is part of the male reproductive system. A healthy prostate in a younger man is only about the size of a walnut. The prostate sits just under the bladder and is wrapped around the beginning of the urethra. It is surrounded by nerves that control erections and its primary function is to produce a liquid that enriches and protects sperm.

Unfortunately, as men get older this little organ tends to act up. At times, some of the symptoms are simply a sign of aging; however, in many cases prostate trouble is an indication of a more serious problem. Prostate cancer is a primary concern, but other prostate disorders can be just as uncomfortable and a serious concern for male health.

So if you are experiencing symptoms like difficulty or discomfort while urinating, reduced ability to get an erection, blood in your urine or semen, or painful ejaculation, it's important to have your prostate checked out. Even if you aren't experiencing any symptoms, it's still wise to be screened from time to time, as you can pre-empt and prevent problems before they crop up.

Regular screenings ensure that problems are caught quickly. Catching a prostate problem right at the start, means that it can be treated and cleared up with far less difficulty.



So men, don't wait around till you run into trouble. A little momentary discomfort is a worthwhile trade for a long, happy, healthy life surrounded by your family and friends. Do yourself a favor and get your prostate checked out.

If there is concern as a result from the routine annual prostate exam, diagnostic imaging will be ordered. There are different imaging screenings available, the 3T wide bore MRI provides that best image quality in a non-invasive way.

Men travel from across the United States for advanced imaging with our Phillips 3T wide bore MRI.

Radiology Associates of Venice and Englewood is pleased to offer 3T wide bore MRI scans for obtaining superior-quality MRI images for diagnostic accuracy and exceptional comfort in an expanded range of patient scenarios.

What is a 3T MRI?

The term "3T" stands for "3 Tesla." Tesla is the name given to a measurement unit that expresses the strength of the electromagnetic energy field that MRI devices use for generating images. Standard MRI scanners operate in the range of about 1.5 Tesla. This means that our 3T MRI operates at approximately twice the electromagnetic energy level of a standard MRI.

Benefits of 3T MRI

Our wide bore 3T MRI scanner combines the superb diagnostic image quality gained through a stronger electromagnetic field with the exceptional patient comfort of a wide-bore configuration-70 cm in diameter, a full 10 cm larger than standard MRI scanners. The scanner is also shorter in length than conventional MRI scanners. These factors make this scanner less confining to patients, reducing symptoms of claustrophobia. Additionally, large patients who have trouble fitting into conventional scanners can have their scans done in this machine, which can accommodate patients weighing up to 500 lbs.

The stronger magnetic field allows the machine to detect stronger signals from the patient during the imaging. This increased signal strength can be used to generate more detailed pictures or reduce the total imaging time. Often the imaging protocols are designed to generate better pictures while still saving time compared to other types of MRI scanners, giving patients the benefit of a shorter exam without sacrificing diagnostic quality.



Sarasota, FL 34223

941-342-RAVE (7283)

Hours: 8:00am-5:00pm

NEW COMBINATION OF NEURO-PSYCHOLOGICAL TESTING AND THERAPY AT THE BRAIN WAVE CENTER

Merging advances in applied neuroscience with evidenced based models of psychotherapy to Optimize Success!

Pinpoint the Issue: We provide comprehensive psychological and neuropsychological testing for children, adolescents, families, and adults. Our methodology combines proven testing and assessment methods with qEEG Brain Map analysis to accurately identify underlying issues and correctly identify appropriate therapies.

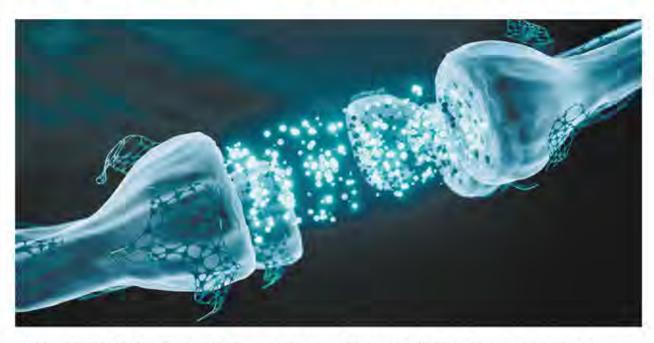
There are Solutions: At The Brain Wave Center, we offer psychotherapy services alone or in combination with neurofeedback training sessions. However, from our own experience and peerreviewed studies, we have discovered that by merging advances in applied neuroscience, specifically, neurofeedback, with evidenced based models of psychotherapy, we often see superior results.

With the addition of Neurofeedback, You become an active part of your Mind and Brain's healing.

How Did the New Clinic Form?

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. Our own private clients have also identified a long waiting time to get tests as a significant problem.

Since we already had two Doctors of Psychology working at the Brain Wave Center, it just made sense to help reduce the backlog and help more children and families get the care they need and deserve. Both of them have experience with standard testing and assessment methods and have utilized qEEG Brain Map analysis. This combination as help them develop successful treatment plans.



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. The stigma of mental health treatment has begun to fade, as people become aware that it's possible to experience a healthier, more fulfilling life.

If you'd like to learn more or set up a consultation, please call us at 941-552-4500 or contact us online on our website at www.BrainWaveCenters.com.

The Tests We offer:

Psychological Testing

- Anxiety Disorders
- Trauma
- Mood Disorders
- · Personality Disorders
- Presurgical Evaluations

Neuropsychological/Neurodevelopmental

- · ASD
- · ADHD
- Developmental Disorders
- Learning Disorders
- · Gifted
- . IQ

Forensic Services

Family Law

Psychotherapy Services

- Individual Therapy
- . Group Based Services
- . Marriage and Family Counseling
- Couples Counseling
- · Behavioral Management
- · Parent Coaching

Brain Mapping

- qEEG Testing
- Neurofeedback



Innovations in brain health for a better you!

941.552.4500

BRAINWAVECENTERS.COM

640 S. Washington Blvd., Sarasota, Florida 34236

CURE YOUR MIGRAINES

By Ian M. Kahane, MD

ine out of ten adults in the U.S. suffer from severe headaches, and women are three times more likely than men to develop migraines. These painful headaches can affect individuals occasionally, frequently, or daily. Some migraines may be sharp and piercing, others may be dull and throbbing, but most migraines cause debilitating pain and nausea.

Migraines have existed since the dawn of humanity. They are a special type of head pain that is more intense than a regular headache. They are often accompanied by a constellation of other symptoms including nausea, numbness, light sensitivity, sound sensitivity, and others. Migraine symptoms and types can vary not only between people, but they can also vary from one migraine to the next within the same person.

Common Conditions that Exacerbate Migraine Headaches

- Muscle tension
- Allergies
- . Bright lights
- Bulged discs
- Cheese
- Chocolate
- Preservatives
- Hormonal imbalance
- Hypermobility syndrome (joint disorder, usually genetic)
- Neck arthritis
- · Red Wine
- Sleep deprivation
- Stress
- Strong odors
- Tight neck and shoulder muscles
- Weather conditions (barometric pressure)

For decades a deluge of medications, like topamax and propranolol, have been used to prevent migraines. There are also medications to help alleviate a migraine in progress like sumatriptan. These medications helped to make migraines tolerable, but for most people these meds remain insufficient. Around five years ago, a new type of medicine class emerged called CGRP antagonists. CGRP stands for Calcitonin Gene Related Peptide. Essentially, it is believed that there are receptors in your brain that when exposed to this CGRP it causes an inflammation that then triggers a terrible migraine. In fact, if



you give a migraine sufferer CGRP directly into their blood, they will get an extremely intense migraine within 3-4 hours.

CGRP Antagonists

These new medicines block the movement of CGRP in one way or another. As of today, there are now five unique medicines in this class each of which preclude the movement of CGRP slightly differently. Anyone who suffers for more than 4 days a month with migraines can qualify for these medications so long as they have failed a few of the other less expensive, earlier options.

For most patients, these medicines reduce the frequency of their migraines by half. For some, they totally remove all migraines, and they never suffer again. In my own practice I have often seen people that suffer from 8 migraines a month, now have 2-3 migraines in a month. I have even seen people with 20 migraines a month go down to zero. Whether the cause of the migraine be hormonal, traumatic, genetic, or otherwise, these meds seem to largely help most migraine sufferers.

While going from enduring 8 days of terrible head pain down to 2-4 might not sound like a tremendous victory on the surface, at the end of the year 4 days x 12 months is a month and a half of your life back! An extra 48 days to enjoy, spend with family, work harder, work smarter, or just be you! Migraines are easy to identify, easy to manage, and as these medications become more ubiquitous, more and more primary care physicians & neurologists are going to get comfortable giving them. I strongly encourage you to talk to your physician about your migraines at your next visit, they may be curable.

Complete Care

Internal Medicine is a specialized kind of primary care physician field. Internal Medicine Doctors are just like your regular general practitioner or family doctor; however, they are trained to handle more complex and difficult diseases.

Internal Medicine doctors are just as happy treating simple sore throats and completing physicals for work or school, but they are also equipped to handle complex cases from heart disease to complicated autoimmune diseases.



lan M. Kahane, MD MBA

Dr Kahane has wanted to become a physician since the age of 3. Very few children complete grade school, middle school, high school and beyond with a singular career vision in mind. However,

Dr. Kahane never wavered from his dream to become a physician.

From kindergarten straight through to medical school, Dr. Kahane never took any time off to achieve his dream. He completed his medical school at Ross University School of Medicine in 2015 and became an established member of the Bradenton community by becoming a part of the first ever residency class at Blake Medical Center.

While there he served 1 year as Chief Internal Medicine resident. He is proficient in complex patient care, autoimmune diseases, and everyday medical concerns. Dr. Kahane is fluent in both English and Spanish and is excited to join the Complete Care team.

In his spare time Dr Kahane enjoys the beach, water sports, politics, watching football, and spending time with his dog.



Come Experience the Difference at Complete Care. Contact us at (941) 748-8069. COMPLETECAREDOCS.COM

A PAINFUL BLADDER CONDITION

What You Need to Know About Interstitial Cystitis

nterstitial Cystitis (IC/BPS) is a bladder condition that often gets misdiagnosed as a urinary tract infection (UTI) in the early stages. Interstitial Cystitis lingers and unlike a UTI, there is no infection present; however, it is a very painful disorder that causes pressure, discomfort, frequency, and an urgency to urinate. IC/BPS inflames and irritates the bladder and can cause scarring and stiffness. This disorder can affect both men and women. With interstitial cystitis, these pelvic nerves miscommunicate with the brain, and patients may feel the need to urinate more often and with smaller volumes of urine than normal.

It is estimated that approximately 12 million people have IC/BPS. It disrupts daily living activities and sleep, and it is a relentless disorder that is often gets underdiagnosed.

The following is information provided by the Urology Foundation:

Causes of Interstitial Cystitis

Experts do not know exactly what causes IC/BPS, but there are many theories, such as:

- A defect in the bladder tissue, which may allow irritating substances in the urine to penetrate the bladder.
- A specific type of inflammatory cell, called a mast cell. This cell releases histamine and other chemicals that lead to IC/BPS symptoms.
- Something in the urine that damages the bladder.
- Changes in the nerves that carry bladder sensations, so pain is caused by events that are not normally painful (such as bladder filling).
- The body's immune system attacks the bladder.
 This is similar to other autoimmune conditions.

No specific behaviors (such as smoking) are known to increase your risk of IC. Having a family member with IC/BPS may increase your risk of getting IC/BPS. Patients with IC/BPS may have a substance in the urine that inhibits the growth of cells in the bladder tissue. So, some people may be more likely to get IC/BPS after an injury to the bladder, such as an infection.

There are ways to alleviate the pain, but the treatment options are done through phases to best treat the patient's individual symptoms and thresholds.



These phases of treatment include:

Lifestyle Changes

- Pelvic Floor Physical Therapy
- Diet and Exercise
- Stress Reduction

Medications

 Oral and intravesical drugs can be administered.
 Intravesical drugs are administered directly into the bladder via a catheter.

Neuromodulation, Ulcer Cauterization, and Injections

- Neuromodulation delivers safe and harmless electrical currents to the damaged areas and nerves
- Ulcer Cauterization-If there is an ulcer present, a urologist can cauterize it to remove and alleviate the issue.
- Injections can include steroid injections to alleviate pain, pressure and urgency or Botox injections to paralyze the muscles temporarily, which helps with urgency.

Cyclosporine

 Cyclosporine is an immunosuppressant and is reserved for only advanced cases that are not responding to other treatment.

Surgery

 Most patients do not require surgery. If necessary, a urologist will perform surgery to try and repair or strengthen the functions of the bladder.

Source

https://www.urologyheolth.org/urology-a-z/i/interstitialcystitis If you have pain, pressure, urgency, or frequent urination, don't put off seeing a urologist, as these conditions only progress with time. Getting a proper diagnosis and early treatment is critical.

The Center for Urogynecology and Female Pelvic Health in Venice, Florida, provides comprehensive and personalized care in a relaxed, spa-like office. Under the care of John Devine, MD, a fellowship-trained urogynecologist, the practice specializes in women's pelvic health and urogynecology, providing care for women of all ages, from adolescents to adults.

Taking a patient-centric approach to care, Dr. Devine schedules ample time for patient appointments. He also makes himself directly available to his patients to answer any clinical questions.

The Center for Urogynecology and Female Pelvic Health provides comprehensive evaluations of female pelvic health concerns. Services include gynecology care to manage general health and wellness, as well as the evaluation and treatment of conditions and symptoms arising from menopause.

The practice also specializes in urogynecology, which is an OB/GYN subspecialty that focuses on the diagnosis and treatment of female urinary incontinence and pelvic floor disorders, like pelvic organ prolapse.

The Center for Urogynecology and Female Pelvic Health also provides care to women struggling with interstitial cystitis or fecal incontinence. Additionally, Dr. Devine offers consultations and surgical treatment for women experiencing complications from mesh.

For patient-centric care from an experienced physician with friendly and accommodating staff, call The Center for Urogynecology and Female Pelvic Health, or request an appointment today. Please call 941-457-7700.

Center for Urogynecology and Female Pelvic Health John B Devine, MD 941.457.7700 www.johndevinemd.com

HOW OFTEN SHOULD I REPLACE MY HEARING AIDS?

By Dr. Noël Crosby, Au.D.

y patients often ask me: "How often should I replace my hearing aids? "The answer to this question can depend upon a number of important factors. Some of these factors are:

- 1. Are your current hearing aids functioning well?
- 2. Are your current hearing aids fully meeting your hearing needs?
- 3. Are your current hearing aids 4-6 years old?
- 4. Is it worth upgrading to take advantage of new hearing aid technology?

1. Are your current hearing aids functioning well? For hearing aids to work correctly they require regular maintenance and an occasional repair. Hearing aids are worn on the body, and they go wherever you go. Hearing aids are exposed to rain, high humidity, extreme temperatures, dust, dirt, etc. Also, the ear is a very hostile environment and at least a portion of every hearing aid sits inside the ear canal. Ear canals contain moisture and earwax and these two things can have the result of a hearing aid not working well or not even working at all. Without regular maintenance, the performance of your hearing aids may change gradually over time because microphones, speakers, and other important components become "clogged up" with moisture, wax, and other debris. If your hearing aid begins to need, frequent repairs, it might be time to look into purchasing new devices. If your hearing aids have been repaired multiple times and they keep breaking, this maybe a sign for you to replace them.



2. Are your current hearing aids fully meeting your hearing needs?

Age-related hearing loss is a degenerative condition, it usually gets worse as you get older. If you're not getting good performance from your hearing aids, it may be time to see your hearing care professional for an adjustment or to find out if your hearing has changed to the point where it's beyond the range of your current hearing aids. You may need to upgrade to a more powerful hearing aid that is capable of meeting your changing needs. If you believe your hearing and hearing aids are working at peak performance one way you can validate it would be to ask family and close friends there opinion too. Sometimes family and friends don't want to tell you that they have noticed changes in a loved ones hearing until that loved one ask!

3. Are your current hearing aids 4-6 years old? Hearing aids generally tend to work at their best until they are about 4-6 years old. After this time frame, internal parts can begin to wear out and the overall performance of your hearing aids won't be as good as it was during the first few years. If your hearing aids have been repaired multiple times and they keep breaking, this maybe is a sign for you to replace them. Consult with your hearing care professional to find out if it is the same problem that keeps occurring, or if it is a different problem every time before you decide to buy new ones. Sometimes the problem can be solved with a repair as minor as an easily replaced part.

4. Is it worth upgrading to take advantage of new hearing aid technology?

Hearing aid companies are technology companies and their technology seems to improve every couple of years. A hearing aid that is 5 years old is most likely at least two generations of technology behind what you are currently wearing. Recent advances in hearing technology have introduced a lot of features that weren't available just a few years ago. They can connect easily to many of the new electronic devices that surround us, computers, smartphones, audio equipment and more. Today there are more options than ever for size and fit. There are more colors, completely invisible devices, and newer more comfortable external hearing aids. It pays to keep up to date with advances in hearing technology, regardless of how well your current hearing aids are performing. It is always worth checking with or asking your hearing care professional if there is anything new that could be worth trying.

All these factors are important to consider if you are thinking of purchasing new hearing aids. If you would like to have more information about new hearing aids, please contact my office to schedule a complimentary consultation.

Call Today to make your appointment 941-474-8393

Beautiful Smiles Begin Here



We Offer:

· Implant & Reconstructive Dentistry

- · Cosmetic Dentistry
 - · Personal Care
- Aesthetic Dentures & Partials
 - · Metal Free Fillings
- · Single Appointment Crowns
 - · Dental Cleanings
 - Laser Gum Surgery

New Patients Welcome



UF Graduate

Port Charlotte Dentalcare

CALL TODAY: 941-764-9555

3441 Conway Blvd - Port Charlotte hours: Mon-Thurs Bam-5pm, Fri by appointment



Hearing Aids - Hearing Aid Repairs Diagnostic Hearing Services Tinnitus Evaluation & Treatment



CALL FOR A FREE CONSULTATION! 941-474-8393

655 S. Indiana Ave., Englewood Also Boca Grande Health Clinic Annex

ADVANCED HEARING SOLUTIONS

AdvancedHearingSolutions.net



Noël Crosby



Doctor of Audiology

HEALTHY AGING: WHAT DOES IT REALLY REQUIRE?

Regenerative Medicine May Play a Larger Role in Healing Than Most People Realize

By Physicians Rehabilitation

e hear so much about Blue Zone centenarians' lifestyles and thoughts on how they age so well without major disease or illness, but when it comes to healthy aging, it's not just about what we eat, exercise, and socialization, although these are definitely critical. However, it is important to mention that the medical treatment you receive is highly subjective to your outcomes, overall health and wellness.

What do we mean by that? Many doctors over prescribe medications to mask your symptoms but these usually fail to get to the root cause of your disorder. If you are injured or suffer from chronic pain, many surgeons will tell you surgical intervention is necessary, but is it? Often these treatment plans leave people sicker, with multiple other symptoms and surgery many times, doesn't relieve the problem long term.

Regenerative medicine is different because it helps the body heal from within on multiple levels. It is never a bandage approach, and it aims to treat the root cause of your condition.

If you want to age well, you might want to reconsider your thoughts on standard treatment. In the case of musculoskeletal conditions, it's always best to start with conservative approaches. Surgery is permanent; there is no going back once you have a knee or shoulder replacement. While those might be necessary in severe cases, they can be treated with regenerative therapies that offer significant optimal restoration.

Regenerative Medicine

The purpose of Regenerative medicine is it to utilize the body's own ability to regenerate cells and tissues that have been damaged back to full functionality. When used in orthopedics, the goal is to regenerate soft tissues, cartilage, muscles, and tendons. Regenerative Medicine should be the first recommendation, and in many cases, it is the only treatment necessary when dealing with muscle strains, tears. When it comes to joint dysfunction or tears such as with sports injuries, physical therapy is also extremely beneficial as an add on treatment.



AT PHYSICIANS REHABILITATION THE TWO PRIMARY REGENERATIVE MEDICAL THERAPEUTICS FOR MOST SPORTS INJURIES ARE VISCOSUPPLEMENTATION AND PLATELET RICH PLASMA (PRP) THERAPIES

Viscosupplementation

Viscosupplementation is an injectable substance that mimics the synovial fluid found naturally in the joint. Synovial fluid is a high concentration of Hyaluronic Acid (HA) and is used to help protect the joint, act as a cushion and protector against damage and most importantly acts as a lubricant to enable smooth function of the joint. As you age, your body supplements with less Hyaluronic Acid (synovial fluid) and an increasingly less viscous Hyaluronic Acid replaces your thick and very well lubricating HA. This lack of fluid creates dried out joints which leads to cartilage, tissue, muscle, and bone breakdown — leading to Osteoarthritis and making it easier to have tissue and muscle damage within and around the joint.



3417 Tamiami Trail, Unit A., Port Charlotte, FL 33952 6150 Diamond Centre Ct Bldg.100, Fort Myers, FL 33912 413 Del Prado Blvd. S., Suite 201, Cape Coral, FL 33990 5668 Strand Ct., Naples, FL 34110

855-276-5989 | www.PhysiciansRehab.com

The procedure can be done in our office and only takes a few minutes. After locally numbing the area of concern, the procedure is monitored under a fluoroscopic image, which is a live X-ray. This allows us to see the inside of your joint while it is in motion and during the injection process. Using the fluoroscope, the practitioner will have the ability to see exactly where the Hyaluronic Acid is being placed to make sure it is in the joint space - because if it is not, it will do NO GOOD! You'll receive approximately five injections at one week apart. The results of the cartilage enhancement will last for around six months or longer. Physicians Rehabilitation has become the expert on providing great results when this process is paired with physical therapy. Many of our patients report feeling pain relief immediately, while others cumulatively see results within a few short weeks.

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 by spiking your body's natural ability to heal by using your own growth factors and proteins in your blood!

Research studies and clinical practice have shown PRP therapy to be 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

Physicians Rehabilitation is a patient-focused practice that provides comprehensive care to eliminate your pain non-surgically. We evaluate each patient and implement an individual care plan specifically designed to alleviate your pain and dysfunction. Trained and licensed providers, with years of clinical experience, work together to provide this plan of care that addresses the specific concerns and problems of each patient.

Ways to Prepare for a Virtual Showing

Tomorrow's market will likely be a mix of in-person and virtual showings. Here's how you can make the best of

your virtual showing.

1: Declutter. Clutter is a major distraction when buyers are viewing a home. You want them to focus on all the great features of the house, not look at the stack of mail cluttering the kitchen counter.

2: Depersonalize. Remove items like framed family photos and memorabilia. It's hard for a buyer to picture living in the home if they see photos of you everywhere.

3: Remove all signs of your pet.

In the same way that you should depersonalize, tuck away your pet's toys, bowl and bed. Not everyone is a pet person.

4: Turn on lights and open doors.

To minimize the surfaces your Realtor® is touching, turn on all the lights and open all doors before your Realtor walks through to livestream or film your home.

5: Open blinds. Natural light is an essential when filming a home. Open the blinds and let as much light in as possible so the camera picks up all the beautiful details of each room.



6: Plan the route around the house.

If you're showing the home without a Realtor present, be sure to work with your agent to plan a clear route around the home that shows off each room and is clear of trip hazards.

7: Think about your prospective buyer.

If your Realtor is doing the showing, be sure to tell them some personal stories or unique details about the home so they can relay it in the livestream or video.

8: Tackle outdoor spaces.

Prune any overgrown landscaping, cut back tree branches and mow the lawn.

9: Clean up the front entrance.

The walkway to your property and the front entrance are your home's first impression. Power wash outside, touch up paint in the entryway and clear out any dirt and grime that has collected around the edges.

BOMBAERT / GETTYIMAGES.COM Source: Florida Realtors®

Contact Denise Henry Today.

Denise Henry GRI, RENE **Broker Associate**

RE/MAX Hall of Fame Realtor RE/MAX Anchor Realty

3941 Tamiami Trail #3121 Punta Gorda, FL 33950

Call or Text 941-628-0856 denisehenry40@comcast.net dhenry.remax.com

Welcome to Punta Gorgeous!



IN the Helite, Broder Associate | RE MAN Anchor Reshy





Call TODAY to schedule your NO COST consultation! That may be just what you need to change your life for the better.



www.PhysiciansRehab.com

Our goal is to decrease the inflammation, promote healing, and eliminate your pain. re Medicare providers and accept most insurance plans.

6 LOCATIONS SERVING FLORIDA (855) 276-5989

3417 Tamlami Trail, Unit A, Port Charlotte, FL 33952 6150 Diamond Centre Court, Bldg.100, Fort Myers, FL 33912 413 Del Prado Blvd. S., Suite 201, Cape Coral, FL 33990 5668 Strand Court, Naples, FL 34110

The Villages 733 CR 466, Lady Lake, FL 32159 The Villages 4076 E SR 44, Wildwood, FL 34785

Stem Cell Therapy | Orthopedies | Osteoarthritis Treatments | Physical Therapy | Platelet Rich Plasma | Spinal Decompression

OWN YOUR PIECE OF PARADISE!



RE/MAX[®]

Denise Henry GRI, RENE Broker/Associate

3941 Tamiami Trail Suite 3121 Punta Gorda, FL 33950

(941) 628-0856 dhenry.remax.com denisehenry40@comcast.net

License #BK 3085228





DON'T CUT CORNERS WHEN IT COMES TO REAL ESTATE PROPERTY

By James W. Mallonee

ve recently had two situations arise that cause me to author this article for the purpose of informing you what not to do when it comes to making real estate titling decisions. The situation is as follows: Prior to getting married, two individuals (I'll call them Mom and Dad) purchased a property. The property was titled in their names but designated its ownership as Tenants in Common because no specific identification as to how each party's interest would be held (e.g. joint tenants with right of survivorship) was stated in the deed. The deed was subsequently recorded in the public records.

Four days later, the deed was changed by typing in Joint Tenants with Right of Survivorship. However, the deed was not re-signed by the Sellers, witnesses or notary public; it was however, re-recorded without anyone re-signing.

Mom and Dad could have recorded their own deed conveying their interest to themselves as Joint Tenants with Rights of Survivorship rather than re-recording, but this did not happen. By failing to re-execute the deed by the Sellers or having Mom and Dad conveying their interest to themselves, the second recorded deed became worthless.

Mom and Dad eventually got married, but nothing was done about the second deed. Both parties had children from a prior relationship. Mom predeceased Dad by about 10 years; Dad subsequently executed a trust instrument following Mom's death and within the instrument he conveyed the real estate to his own children and the step-children in equal shares. Clearly, the intent was to provide for all of the children equally. The problem is that the second deed was a 20 year ticking time bomb that was about to go off at the death of Dad.

Dad eventually dies and at first glance the first and second deeds appear to be legitimate, except when you see the new recording stamp and the recording date differences. The second deed was an exact copy of the first, but with additional language trying to identify Mom and Dad as Joint Tenants with Rights of Survivorship. The second deed is invalid because it was not properly re-executed



prior to being recorded. With the second recording of the deed being illegitimate, we turn back to the first deed and playout what will happen 20 years later.

Remember that the first deed is titled as Joint Tenants in Common. Thus, at Mom's death, her estate takes on a ½ interest in the property. What makes this so interesting is that at the time of Mom's death, the parties were then married. Because there was no Will executed by Mom conveying her interest to Dad, Dad takes a life estate in her 50% ownership with a vested remainder to Mom's children. There was no probate performed at Mom's death because the parties were under the assumption that at Mom's death, the property, by operation of law, would pass to Dad (which it did not due to the fact that the second deed was invalid).

The story gets more complicated when Dad (following Mom's death) transferred what he thought was the entire interest in the property to his Trust, but in fact, it was only a 50% interest because Mom and Dad failed to properly re-execute the deed 20 years earlier. Fortunately for Dad, Florida law provides that Mom's failure to execute a Will makes her estate intestate. The intestate laws state that in a mixed marriage of children, Dad would receive 50% of the Mom's estate, thus, Dad's overall interest in the estate increased to 75% and Mom's children's interest became 25%.

Mom and Dad's clear intent (as stated earlier) was to treat the children from both sides equally. Dad's trust fulfilled that intent by giving everything to the children from both sides of the family in equal shares. But Mom's side of the family is about to get more because of the failure to re-execute the deed when it was improperly changed 20 years earlier. Mom's estate is now administered giving her children 25% of the property. But it gets better, because Dad included all of his and Mom's children exclusively in his trust instrument, Mom's children get the additional 25% to the exclusion of Dad's children. Does this seem fair? Of course not, but the blame rests on Mom and Dad who took it upon themselves to cut a corner without seeking a legal opinion on what could happen 20 years out in time.

The question now is, how does this get resolved? The answer is through a quiet title action which is going to cost (in attorney fees) more than the amount Mom's children are going to receive in the value of the property. This could have been avoided if Mom had executed a Will of her own or Mom and Dad had properly reconveyed the property to themselves as Joint Tenants with Rights of Survivorship. Either one would have worked and all of these problems avoided.

So what is the message here? Prior to conveying property, if you are not experienced in deeding property and understand the long-term effects your actions may have, seek out the attorney of your choice and discuss the proper procedure to ensure what you want to have happen, does in fact happen. Clearly, the intent in this case was to treat all of the children equally, but that did not happen. The message is, don't cut corners.

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, P.A. 946 Tamiami Trail, #206 Port Charlotte, FL 33953 (941) 206-2223

871 Venetia Bay Blvd., #225 Venice, FL 34285 (941) 207-2223

vidently, the last few years within the Florida cannabis industry have progressed rapidly with proposed changes

such as the Smoking amendment that currently allows patients to purchase cannabis for smoking use. Other small victories such as defeating a proposal for recreational cannabis that would have further exacerbated the issue of vertical integration have created quite the storm of optimism among those in the community. But despite these wins, there are other problems surfacing this coming year that could negatively affect both dispensaries and patients.

Rep. Jose Oliva is proposing a hard limit on the percentage of THC allowed in all medical marijuana products; a leap back from the current progression in the program. Cited from a UK study done in the 1950's, Oliva is quoted saying "We're seeing different strains now in Europe that are 100 times stronger, and we're starting to learn that this has some schizophrenic results, especially in young, developing brains." Every year we see similar policies trying to trek its way into senate and undermine Florida's already strict medical program and Florida marijuana cardholders see this as an uphill battle they're willing to fight for. Patients across social media outlets



cannot stress enough how much this could negatively affect them as well as the dispensaries revenue. The bottom line is that this proposal will not benefit anybody in the marijuana industry from the patients all the way to the top executives at places like Trulieve.

While these initiatives have not slowed down yet, it is very important to note that most of these laws have not made it past the House

and should not be a major concern to current card holders. Despite this, it is important to stay up to date with the current direction of Florida's ballooning marijuana industry although this particular proposal shouldn't worry any medical card holders anytime soon.

> Port Charlotte - 941-208-3444 Cape Coral - 239-236-5311 Naples - 239-317-3300 www.cmmdr.com







Hope and Optimism

By Pastor Timothy L. Neptune

ope is confidence in God...not wishful thinking. To have hope is to trust in God to meet our needs...even in the midst of difficult times. When we do go through tough times our confidence in God can get a little rattled, as the Old Testament figure Job experienced. In the midst of his pain and heartache he cried out, "Where then is my hope? Who can see any hope for me?" (Job. 17:15)

Ultimately, hope comes from God. The Scriptures say, "May the God of hope fill you all with joy and peace as you trust in him, so that you may overflow with hope by the power of the Holy Spirit." (Romans 15:13) Hope is an essential element of the Christian's life. In 1 Corinthians 13 the Apostle Paul included hope as one of the top three qualities of a person's life: "And now these three remain: faith, hope and love. But the greatest of these is love." (1 Cor. 13:13)

As followers of Christ, we are called to be dispensers of hope. We should exude a confidence and trust in God that demonstrates that we have hope. Yet I pose the question, "Can a person be filled with hope without being filled with optimism?" According to the encyclopedia, optimism is "to anticipate the best possible outcome." Can we demonstrate hope in God without anticipating the best possible outcomes of the situations we face?

I believe we can. In fact, I think hope is best exemplified when it is demonstrated in the face of negative circumstances. There are many times when hope and optimism go hand in hand. David had both when he faced Goliath. He had confidence in God and he expected the best possible outcomes...Goliath's defeat and an Israelite victory over the Philistines. And yet, there are many examples of people who had hope in God but did not anticipate the best possible outcomes.

Simon Peter is a good example. He and the disciples had been fishing all night and had caught nothing. They had worked so hard and yet still had nothing to show for their labors. And then Jesus tells them to cast out the net one more time. Simon did not expect to catch any fish. He was pessimistic. But, he had confidence in Jesus, so he cast the net. Though the circumstances did not look promising, his hope in God made up for his lack of optimism.

Esther is another good example. She had confidence that God would ultimately provide deliverance for the Jews but as she prepared to go before the King she said, "...I will go to the king, which is against the law; and if I perish, I perish!" (Esther 4:16) She demonstrated hope but not necessarily optimism.

The point is this: hope and optimism are not the same thing. You can still be hopeful even if you are not optimistic. You can still be a dispenser of hope even if you think you are going to face hard times ahead because you know that God will meet your needs.

Jesus didn't sound very optimistic when he said, "These things I have spoken to you, that in Me you may have peace. In the world you will have tribulation (a rather pessimistic view); but be of good cheer (maintain your hope), I have overcome the world (which is the basis of our hope)." (John 16:33)

Hope doesn't mean that the best possible situations will always occur, but it does mean that in some way God will bring something good or useful out of the situation. As we look into the future, we may not always be filled with optimism, but we must always be filled with hope...God is still in control!



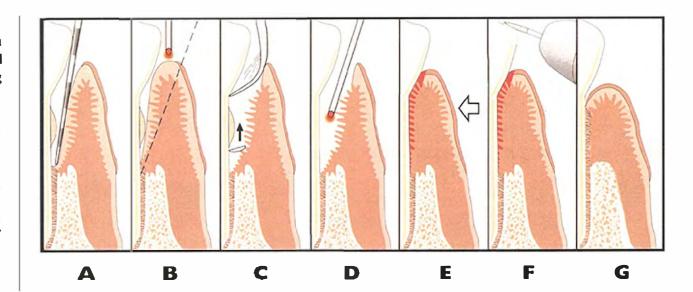


Tim Neptune is the lead pastor of Venture Church in Naples, Florida. Venture Church meets on the campus of FSW State College on Lely Cultural Blvd. in East Naples. For times and directions, visit www.venturenaples.com.

What is Laser Periodontal Therapy?

By Dr. Joseph Faraq

inally, there's good news for those of you who suffer from gum disease (gingivitis and periodontitis). We now offer an exciting laser based technique for treatment of periodontal disease called Laser Periodontal TherapyTM. Through the use of Millenium Dental Technologies, Inc., PerioLase® Laser, designed especially for Laser Periodontal TherapyTM, we can treat your moderate to severe gum disease and you can quickly return to your normal routine! There's no incision (scalpel) and no stitches (sutures). You heal naturally with full retention of your gums. If you suffer from tender, red, swollen, or bleeding gums, call us today for an appointment to evaluate your condition.



Laser Gum Surgery Steps:

- · Periodontal Pockets are measured
- · Laser fiber optic is inserted into gum pocket and removes inflamed diseased tissue with light energy.
- · Ultrasonic instruments are used to "scrub" root surfaces below the gum line and remove tartar and plaque.
- · Laser is reinserted into clean pocket and used to disinfect and sanitize the pocket, a fibrin "bandage" is formed in the pocket.
- Healthy connective tissue is readapted to the root and the healing process begins.
- Teeth are adjusted to eliminate premature contact and heavy contact points, bite is equilibrated.
- · After teeth have been stabilized and approximately 3-4 months after treatment, new attachment of the gum tissue to the tooth and regeneration of the bone is evident.



CALL TODAY: **941-764-9555**

3441 Conway Blvd · Port Charlotte hours: Mon-Thurs 8am-Spm, Fri by appointment



Center for Urogynecology and Female Pelvic Health

John B Devine, MD

Urogynecologist & Female Pelvic Medicine and Reconstructive Surgeon located in Venice, FL

941-457-7700 www.johndevinemd.com

375 Commercial Court, Ste. E Venice, FL 34292

The Center for Urogynecology and Femal Pelvic Health accepts most major insurance plans.



Services:

- Urogynecology
- Gynecology
- Urinary Incontinence
- Menopause
- · Pelvic Prolapse
- Complications from mesh
- Fecal Incontinence
- · Interstitial Cystitis

It's your Choice. 3D Mammography

Radiology Associates of Venice, Englewood and Sarasota



Call to schedule 941-488-7781

CHANGE YOUR LEGS, CHANGE YOUR LIFE!

"I KNOW THIS DISEASE, LET ME HELP YOU REMOVE IT FROM YOUR LIFE."

CALL JOYCE VEIN & AESTHETIC INSTITUTE TO SCHEDULE A CONSULTATION





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

IF YOUR LEGS LOOK LIKE THIS:

- VARICOSE VEINS
- SORES/ULCERS
- DISCOLORATION
- SPIDER VEINS



- · TIRED, HEAVY, RESTLESS
- ITCHY
- ACHY
- SWOLLEN









(941) 575-0123

JVAI.COM

25092 OLYMPIA AVE PUNTA GORDA FL 33950