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Health & Wellness[®] MAGAZINE

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CATARACTS: YOUR TREATMENT OPTIONS

By Duane Wiggins, M.D.

Board Certified Ophthalmologist, Cataract & Refractive Surgeon with Quigley Eye Specialists

Your eyes have a natural lens. The lens bends or refracts light rays that come into your eye to help you see. This lens should be clear. As we age, most of us will develop cataracts, which is when our lens becomes cloudy. Seeing through a cloudy lens is a bit like looking through a frosted or foggy window.

What are the symptoms?

Most cataracts develop slowly and don't disturb your eyesight early on. You may not even know you have a cataract. But with time, cataracts can interfere with your vision and can negatively affect your quality of life. Symptoms may include:

- Blurry vision
- Light sensitivity
- Bright colors are faded
- Difficulty seeing at night
- Double vision

How did I get Cataracts?

If you have been diagnosed with cataracts, you're not alone. Cataracts affect more than 24 million Americans aged 40 and older. By age 75, approximately half of all Americans have cataracts.¹

The most common reason people develop cataracts is age. According to Johns Hopkins Medicine, age-related cataracts may begin to develop as early as 40 years old.

Over time, cataracts become worse and start to interfere with vision. This can affect your overall quality of life in many ways including reading, working, hobbies and sports. If left untreated, cataracts can cause total blindness.

How do I treat my Cataracts?

If cataracts are impacting your quality of life or you're experiencing symptoms that interfere with daily tasks, your ophthalmologist may recommend treatment.

About Quigley Eye Specialists

Dr. Wiggins is a board-certified Ophthalmologist, Cataract and Refractive Surgeon with Quigley Eye Specialists, a world-class eye care practice specializing in cataracts, laser cataract surgery, glaucoma, iLASIK, dry eye, eyelid surgery, retinal issues, corneal conditions, facial plastic surgery and routine eye care. Quigley Eye Specialists has served the region for more than 30 years with locations throughout Florida including Sarasota, Venice, North Port, Port Charlotte, Punta Gorda, Cape Coral, Fort Myers, Lehigh Acres, Bonita Springs, Naples and Coral Gables.



The only way to treat cataracts is to remove the cloudy lens and replace it with a clear, artificial lens, called an intraocular lens or IOL.

The procedure is about 15 to 20 minutes. It's very safe and painless with little downtime. Although you're awake, you're given a "twilight" anesthesia so you're comfortable.

What is an IOL?

An intraocular lens or IOL is a tiny, artificial lens for the eye. It replaces the eye's natural lens that is removed during cataract surgery.

IOLs come in different focusing powers, just like prescription eyeglasses or contact lenses. For example, a basic IOL has only one focusing power, which means you will need glasses for all tasks. On the other hand, a multifocal IOL gives you focusing powers at various focal points, so you may not need glasses after your procedure.

Many patients with multifocal IOL implants enjoy reading again or playing golf without worrying about glasses or contacts. Many of them also report seeing more clearly with brighter colors.

Which IOL is Best for Me?

Based on your lifestyle and the health of your eyes, your ophthalmologist will recommend a cataract vision package customized for you. For example, if you have cataracts with astigmatism, your ophthalmologist may recommend a Toric lens with laser cataract surgery.

Cataracts with Astigmatism

Astigmatism is an imperfection in the curvature of your eye's cornea or lens and can impact your vision. When combined with cataracts, your vision may be even more impacted. During your evaluation, your eye specialist will let you know if you have cataracts with astigmatism. If so, your eye surgeon can correct your astigmatism during your cataract procedure to help you achieve your best possible vision.

Laser Cataract Surgery

Technology Leaders in Eye Care, Quigley Eye Specialists offers patients the Catalys® Laser System. Compared to another leading laser, the Catalys was found to use less energy and demonstrated superior patient outcomes (Khodabakhsh & Hobauer, 2018).² Built 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, Quigley Eye Specialists can help you see the life you love.

If you have blurry vision, double vision, floaters, eye pain, headaches, trouble seeing up close or far away, you absolutely need to be seeing an ophthalmologist on a regular basis. Eye disorders can escalate quickly, and many times, eye problems are overlooked but can be debilitating or even cause blindness. Keep in mind that many eye diseases do not have any initial symptoms.

References:

1. National Institute of Health, 2021
2. In addition to the 2018 study noted above, a 2016 study showed that when compared to another leading laser, the other laser showed significantly higher cumulative dissipated energy and phacoemulsification power needed in comparison to the Catalys group. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5077266/>



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

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THE PROMISE OF IMMUNOTHERAPY

One of the most promising and successful new treatments for cancer is immunotherapy, which uses the body's own immune system to find, target and fight many forms of the disease, even at advanced stages.

The immune system is a complex collection of organs, including the spleen, thymus and bone marrow, white blood cells, tissues and proteins. These special substances travel through the body, protecting it from germs that cause infection. When it encounters a new substance that it doesn't recognize, it signals an alarm and works to destroy anything containing the foreign substance.

A closer look at immunotherapy

Cancer starts when normal, healthy cells become changed or altered and begin to grow out of control. Immunotherapies boost or change the immune system to work harder and smarter to find, target and attack cancer cells.

Chemotherapy and radiation have been widely used for decades, and directly target cancer cells. While effective, these treatments can also destroy healthy blood cells and harm the body's production of new cells.

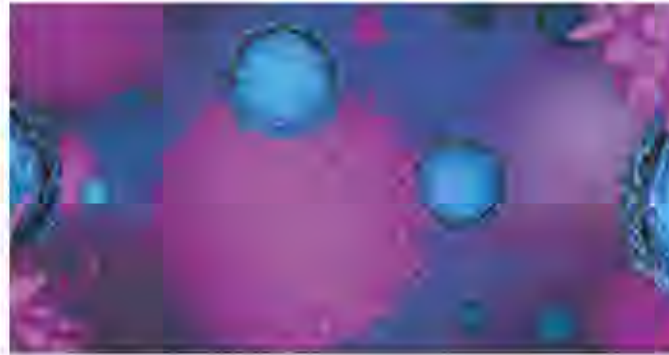
Immunotherapy may be used alone or in combination with chemotherapy, radiation and/or surgery. While side effects can occur with immunotherapy, a key difference is that they are often less severe than those encountered with conventional therapies.

How immunotherapy works

Immunotherapies work to stimulate or boost the immune system's natural defenses to work harder to fight cancer. They can be injected directly into a vein, swallowed in pill or capsule form or applied topically through a cream that is rubbed onto the skin.

Some of the most common types of immunotherapies used to treat cancer include:

- **Immune checkpoint inhibitors:** These are drugs that block immune checkpoints, which are a normal part of the immune system, and allow cells to respond more strongly to cancer.
- **CarT-cell therapy:** Sometimes talked about as a type of cell-based gene therapy, this involves altering immune cells called T cells (a type of white blood cell) in a laboratory so that they are better able to find and destroy cancer cells. They are placed back into the body intravenously, through a needle in a vein.
- **Monoclonal antibodies:** These immune system proteins are created in a lab and designed to bind to specific targets on cancer cells. They are then marked so that they will be better seen and destroyed by the immune system.



- **Vaccines:** These treatments are different than vaccines that help prevent disease; they work against cancer by boosting the body's response to cancer cells.

In the last few decades immunotherapy has been approved for the treatment of many cancers, including bladder, cervical, breast, colorectal, lymphoma and melanoma, among others. Patients may receive immunotherapy in a doctor's office, an oncology clinic or, in some cases, in a hospital setting.

More promise on the horizon

Thanks to ongoing rapid advancements, the outlook for those diagnosed with cancer is becoming brighter all the time. Increasingly, many patients are living with cancer more like a chronic disease than a dim prognosis.

Even though immunotherapy can prevent or slow cancer growth, cancer cells do have ways to avoid destruction by the immune system. New ways of working with the immune system and new immunotherapy treatments are being discovered at a very fast pace.

Researchers are focusing on several major areas to improve immunotherapy. Increased understanding of how cancer cells get around the immune system could lead to the development of new drugs that block those processes. Other areas of focus include finding ways to overcome the body's resistance to immunotherapy, finding ways to predict which patients will respond best to this form of treatment and ways to reduce the side effects of treatment.

Every person and every cancer is unique. Medical oncologists work with each patient and their entire healthcare team to devise a personalized treatment plan using every resource available to achieve the best possible outcome.

Immunotherapy and other exciting new advancements are leading to the development of truly targeted therapies individualized for each patient's unique genetic profile. Increasing numbers of cancer survivors are living longer than ever and enjoying all the special moments in life.

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Recognized by the American Society of Clinical Oncology (ASCO) with a national Clinical Trials Participation Award, Florida Cancer Specialists & Research Institute (FCSI) offers patients access to more clinical trials than any private oncology practice in Florida. The majority of new cancer drugs recently approved for use in the U.S. were studied in clinical trials with Florida Cancer Specialists participation. *Trained in prestigious medical schools and research institutes, our physicians are consistently ranked nationally as Top Doctors by U.S. News & World Report.

Founded in 1984, Florida Cancer Specialists has built a national reputation for excellence that is reflected in exceptional and compassionate patient care, driven by innovative clinical research, cutting-edge technologies and advanced treatments, including targeted therapies, genomic-based treatment, and immunotherapy. Our highest values are embodied by our outstanding team of highly trained and dedicated physicians, clinicians and staff.

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BREAKTHROUGH TREATMENTS IN WOUND CARE

Advanced therapies in the treatment of complicated diabetic and non-diabetic foot wounds are helping save limbs and improve the quality of life for individual plagued by wounds that just won't heal. Specifically, for the diabetic population, impaired healing of wounds often leads to frequent hospitalizations, increased health care costs and limb loss. Advanced wound healing therapies are now offered at Family Foot and Leg center.

Foot ulcers develop in about 15 % of the 25 million American's living with diabetes. These foot ulcers can lead to serious complications including infection, osteomyelitis (bone infection), decreased quality of life and limb loss. Today's advanced treatment options help stimulate wound healing in people who would likely not be able to heal these wounds on their own. These advanced treatments are critical in the diabetic population who frequently have poor circulation, nerve damage and impaired immune response which all negatively affect the body ability to heal wounds.

One ground breaking therapy is the use of stem cells. Stem cells are undifferentiated cells found in blood, bone marrow and other human tissue. Stem cells have the ability to develop into many different types of cells. When applied directly to a wound, stem cells can help the body grow new tissue in order to heal the wound. The use of stem cells in diabetic related foot wounds has shown favorable



results when looking at time to wound closure, number of treatments needed, and number of adverse events related to the wound. Other advanced wound healing therapy is the use of negative pressure wound therapy (NPWT). This consists of a wound dressing with an air tight seal and a drainage tube connected to a suction device. The suction enables healthy new tissue to grow. This device can also be combine with stem cells and other types of grafts.

If you or someone you know has a wound that has been present for a long time or is showing slow progress make sure to schedule an appointment with Family Foot and Leg center immediately. The longer you wait for treatment, there is a greater risk of limb loss. Your physician will evaluate you and determine why your wound is not healing. They can then develop a treatment plan with advance wound healing therapies if indicated. To learn more contact Family Foot and Leg center, in Port Charlotte.

Isin Mustafa DPM, MSHS, AACFAS

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

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CHOLESTEROL: NUTRITION SMART

Many people worry about cholesterol - and with good reason. According to the American Heart Association (AHA), more than one-third of American adults have high cholesterol, putting them at greater risk of heart disease - the leading cause of death in the United States. What you eat can be essential in maintaining your cholesterol and cardiovascular health.

But first, what is cholesterol.

Cholesterol is a waxy, fat-like substance made naturally by your liver. It is essential to perform various functions in the right amounts, such as making sex hormones, digesting fatty foods, and converting sunlight into vitamin D.

Cholesterol travels through our blood on proteins called lipoproteins. One type - low-density lipoprotein (LDL) - is coined the "bad" cholesterol, as high levels lead to a buildup of plaque in your arteries. Arteries + plaque buildup = an increased risk of heart disease. Another type - high-density lipoprotein (HDL) - is considered the "good" cholesterol. HDL carries cholesterol and plaque from our arteries back to our liver, so it can be flushed from the body.

Cholesterol levels vary naturally by age, weight, and sex. Total and LDL cholesterol levels should be low. But having more HDL, or "good," cholesterol in the blood may balance the "bad" by reducing the risk of a heart attack or stroke.

AHA-recommended cholesterol levels.

- Total cholesterol levels: under 200 mg/dl (milligrams per deciliter)
- LDL: less than 100 mg/dl
- HDL: Men - 40 mg/dl or higher
Women - 50 mg/dl or higher

Cholesterol and nutrition connection.

Your diet plays an important purpose in maintaining cardiovascular health, so it's reasonable to think eating cholesterol-rich foods will raise your cholesterol levels. However, the connection isn't quite that simple. The cholesterol we get from our diets comes from eating animal products - namely meat and dairy, which are also factors in saturated fat.

So, while foods rich in cholesterol minimally increase blood cholesterol, saturated fat is of greater concern.

According to the AHA, saturated fat is a bigger culprit for raising blood cholesterol, in general, than dietary cholesterol.



Heart-healthy foods.

Changing the foods you eat can lower your cholesterol and improve the flow of fats in your blood.

- **Increase soluble fiber.** Soluble fiber reduces cholesterol absorption into your bloodstream and lowers blood pressure. It is also perhaps the easiest dietary impact on your heart health. Oats and other whole grains are an easy addition to your meals or snacks (think oatmeal, Cheerios, granola bars, whole grain rice). Many fruits - especially the exotic type - are super rich in fiber, including raspberries, strawberries, apples (mainly in the peel), bananas, mango, and guava. In general, the darker-colored the vegetable, the higher the fiber content. Carrots, beets, and broccoli are good choices. Artichokes are among the highest-fiber veggie.

Beans are fiber-packed and high in protein, so they are a healthy, filling substitute for red meats. They make great soups and are a flavorful addition to salads. These are a good choice for your shopping cart: garbanzo, Northern white, lima, or pinto beans.

- **Reduce saturated fats.** Saturated fats, found primarily in red meat, are the primary culprit of high cholesterol. Steak, beef roast, ribs, pork chops, and ground beef all tend to have high saturated fat and cholesterol content. Choose lean (90 percent lean) cuts of beef or pork, such as sirloin, filet, flank, pork loin, or tenderloin. Better still - focus on lower fat sources such as chicken or turkey filets or ground.

Avoid fried foods, which are high in saturated fat and cholesterol due to the oil they're soaked in. Instead, opt for olive or avocado oil and choose healthier cooking methods, like grilling, baking, or air frying.

- **Eggs.** Eggs are a great source of protein and low in calories, but they tend to get a bad rap. Eggs are low in saturated fat and calories but can be high in calories.

This may be due to how eggs are prepared, such as frying in oils or butter. Water-poached, hard-boiled eggs, or egg whites are healthy substitutes for meats.

- **Eat foods rich in omega-3 fatty acids.** Eating fish two or three times a week can lower LDL in two ways: by replacing meat, which has LDL-boosting saturated fats, and by delivering LDL-lowering omega-3 fats. Foods with omega-3 fatty acids include salmon, mackerel, herring, walnuts, and flaxseeds. Omega-3s reduce triglycerides in the bloodstream and protect the heart by helping prevent the onset of abnormal heart rhythms.

- **Lower dairy fats.** Whole milk, full-fat yogurt, cheese, and butter are super high in saturated fat. Instead, opt for skim (non-fat), 1% or 2% milk, and non-fat or low-fat yogurt varieties for calcium intake. Limit cheeses and choose part-skim (Swiss, mozzarella, ricotta) when possible. Use extra-virgin olive oil or avocado oil instead of butter.

- **Add whey protein.** Whey protein, found in dairy products, may account for many health benefits of dairy.

- **Nuts.** Studies show that eating almonds, walnuts, peanuts, and other nuts are good for the heart.

What we eat can impact our cholesterol levels and help reduce our risk of heart disease. The American Heart Association recommends following a heart-healthy diet. So, the next time you go to the grocer, stock up on some of the above.

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VALVULAR HEART DISEASE: MITRAL AND AORTIC VALVES

By Dr. Aneley Yegezu Hundae, M.D., FACC

Valvular heart disease is when any valve in the heart is damaged or is diseased. There are several causes of valve disease.

- The normal heart has four chambers (right and left atria, and the right and left ventricles) and four valves.
- The mitral valve allows blood to flow from the left atrium to the left ventricle.
- The tricuspid valve allows blood to flow from the right atrium to the right ventricle.
- The aortic valve allows blood to flow from the left ventricle to the aorta.
- The pulmonary valve allows blood to flow from the right ventricle to the pulmonary artery.

These valves open and close to control or regulate the blood flowing into the heart and then away from the heart.

Healthy heart valve leaflets can fully open and close the valve during the heartbeat, but diseased valves might not full open and close. Any valve in the heart can become diseased, but the aortic valve and mitral valve are commonly affected.

Diseased valves can become "leaky" where they don't completely close; this is called regurgitation. If this happens, blood leaks back into the chamber that it came from, and not enough blood can be pushed forward through the heart.

The other common type of heart valve condition happens when the opening of the valve is narrowed and stiff and the valve is not able to open fully when blood is trying to pass through; this is called stenosis.

If the heart valves are diseased, the heart can't effectively pump blood throughout the body and must work harder to pump, either while the blood is leaking back into the chamber or against a narrowed opening. This can lead to heart failure and death.

- About 2.5% of the USA population has **valvular heart disease**, but it is more common in older adults. About 13% of people born before 1943 have valvular heart disease.

The Heart, Heart Valves, and Blood Flow

- Nearly 25,000 deaths in the USA each year are due to heart valve disease from causes other than rheumatic disease.

Causes of Valvular Heart Disease:

Valvular heart disease can be caused by congenital conditions (being born with it), infections, degenerative conditions (wearing out with age), or they may be caused by other types of heart diseases such as coronary artery heart diseases or cardiomyopathy, (both conditions are know to cause leaky mitral valve).

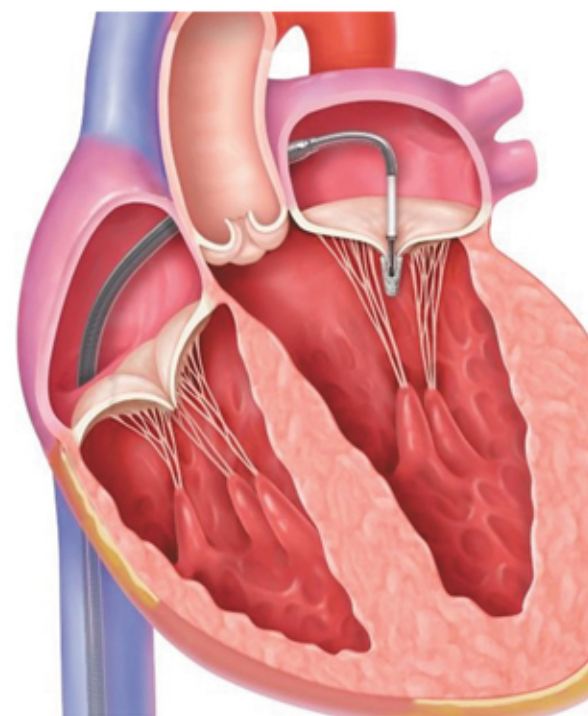
Aortic and Mitral valve commonly affected, and hence we will focus on those two valves.

Aortic valve stenosis (AS) is a condition when the aortic valve doesn't open well. This can lead to shortness of breath, chest pain and passing out. Aortic valve regurgitation (AR) on the other hand is when the aortic valve leaks. This can also lead to shortness of breath.

Mitral valve regurgitation (MR) is when the valve leaks. Mitral valves stenosis is when the valve is narrow. They both can cause shortness of breath. Mitral regurgitation is much more common in the US than Mitral stenosis. Mitral valve stenosis nowadays is becoming less common as it was typically associated with Rheumatic heart disease.

Rheumatic heart disease has decline significantly in the western world eventhough it continues to be a major public health concern in the developing world.

Fortunately in the last few years, minimally invasive innovative treatments have emerged addressing those two valvular diseases.



Transcatheter aortic valve replacement (TAVR) is a minimally invasive procedure to replace a narrowed aortic valve that fails to open. In this procedure a doctor inserts a catheter in your groin to replace the aortic valve without cutting your chest open. Often times you will be able to go home the next day and resume regular activities.

Mitral Clip is another minimally invasive treatment available for the leaky mitral valve. In this procedure, a doctor inserts a catheter in your groin and goes up in your heart to deliver a clip to the mitral valve that makes the leak less. Usually the patient in able to go home the next day.

If you have valvular heart disease, you can reach out to Port Charlotte Cardiology. Port Charlotte Cardiology, partnering with Riverview Cardiac Surgery (Dr. Golino Group), can help you get the treatment you need at your doorstep.

Reference:
https://www.cdc.gov/heartdisease/valvular_disease.htm



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QUITTING TOBACCO IN RECOVERY:

What You Need to Know

Everyone 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.⁴ 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.³ As a result, clients in substance abuse treatment are at a higher risk for tobacco-related 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

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/>.

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.

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"This flexible schedule is great for students that are balancing a full-time job, a family or a shift schedule," added Dr. Meyer. "There is the added benefit of building a network and a sense of camaraderie with your classmates."

Classes start at the end of August. To find out more about The Wheel, you can visit Hodges.edu, stop by the Hodges University campus at 4501 Colonial Blvd. in Fort Myers, call (239) 938-7700, or email Admissions@hodges.edu. Scholarships and financial aid are available.



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

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

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



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

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

For more information and to schedule an appointment, call Dr. Joyce at 941-575-0123 or visit www.jvai.com

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



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THE IMPORTANCE OF MENTAL HEALTH CARE FOR PATIENTS: CARING FOR THE WHOLE PERSON

By Dr. Arie Dosoretz

Cancer and the process around its treatment can have a profound effect on the whole person. We often focus on the physical aspects of cancer, but it is important to recognize the mental aspects associated with this diagnosis as well. An individual's mental and emotional well-being before, during and after treatment demands our focus through every step of a patient's journey.

According to the American Cancer Society, one in four cancer patients experiences clinical depression. The National Cancer Institute defines clinical depression as having one or more of the following symptoms, which persist for more than two weeks.

- Persisting feelings of sadness or emptiness
- Having a sense of guilt or feeling unworthy
- Feelings of helplessness or hopelessness
- Moodiness or a short-temper
- Insomnia or oversleeping
- Feeling guilty or worthless
- Difficulty concentrating
- Feeling emotionally numb
- Loss of pleasure and interest in activities
- Withdrawing or isolating from friends and family
- Changes in weight, not due to illness or treatment
- Feeling nervous, tearful or shaky
- Thoughts about self-harm or suicide

Understanding the Connection Between Mental Health and Cancer

If unaddressed, these mental health symptoms can develop into psychosocial problems that affect one's body image, and relationships with others. Naturally, many patients feel a loss of control and increased vulnerability. The common uncertainty about one's future is often accompanied by anxiety, fatigue and general emotional distress. Oncologists must always provide mental health support as soon as possible to minimize emotional distress and its downstream effects.



At the time of diagnosis, a patient may experience fear, numbness, sadness or anger. During treatment, complications such as hair loss or nerve pain can take a heavy toll on one's mental health. Patients may experience psychological distress from a lengthy course associated with chemotherapy, radiation and surgery. Financial concerns around the cost of treatment are frequent as well. Anxiety commonly develops from anticipating medical appointments or results. Physical side effects related to a particular course of treatment may limit freedom and keep patients from doing what they love most.

The time after treatment also poses unique challenges. Patients must often adapt to a "new normal" as their bodies recover and slowly heal from treatment. The transition from being constantly surrounded by a caring medical team to less frequent visits can also be difficult and follow-up visits often revolve around important test results that generate fear and anxiety as well.

The global pandemic has introduced further challenges to patients and their caregivers in recent times. Patients have faced heightened stress amidst a constantly changing health care landscape while managing the challenges of living with a weakened immune system.

Choosing the Right Medical Partner

Experiencing these symptoms should be viewed as a natural part of the cancer journey. While still at times unfortunately overlooked, the connection between a patient's mental and physical health is increasingly considered a core component of high-quality patient care.

Partnering with a medical provider who understands these struggles is the best approach to ensure one receives the support that every patient needs and deserves. At Advocate Radiation Oncology, we believe it is critical that conversations about mental health should be deeply ingrained in the diagnosis and treatment process. We frequently partner with the mental health professionals in our community as well as part of our multi-disciplinary approach.

As your partner in the fight against cancer, our compassionate team of world-class experts knows how critical mental health care is for every cancer patient we diagnose and treat. We are here to care for the whole person as each patient gets the personalized support they need.



About the Author

Dr. Arie Dosoretz is a board-certified radiation oncologist at Advocate Radiation Oncology.

For more information, please visit AdvocateRO.com.

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AGING AT HOME



The vast majority of seniors prefer to "age-in-place" or continue living in their own homes or communities. According to aarp.org, "nearly 90 percent of people over age 65 want to stay in their home for as long as possible, and 80 percent believe their current residence is where they will always live."

While it is a fantastic feat for seniors to continue to care for themselves as they age; eventually, adult children of these wildly independent baby boomers realize that their aging parents need more support – and likely are not asking for it.

Baby-boomers are stubborn about maintaining their independence and for excellent reasons. These reasons are shaking up traditional senior living and senior care programs.

They are Living Longer

Statista reports a higher life-expectancy for baby boomers. Women can look forward to a life expectancy of 81 years while men are averaging a 76-year life expectancy.

Not only are they living longer, but medical and technological advancements have promoted healthier, fuller lives for this generation, more than any generation before. These advancements are how baby boomers have more drive, ambition and desire to maintain independent living.

They are Passionate about Hobbies, Jobs, Activities and Lifestyle

Don't expect to see baby boomers sitting around knitting with NPR on the radio station. You're more likely to see this age group hiking a popular trail with friends, participating in triathlons, volunteering at their grandchildren's schools and working from the comfort of their home.

Baby boomers DO NOT sit still. They are tech-savvy, active, social and are retiring at older ages than previous generations. They are more educated and on-base with modern technology. You might see them playing games on their smartphones, taking online courses or listening to podcasts. One thing is for sure – they are not sitting around waiting for other people to tell them what the rules are, what's for dinner and what time lights are out.

With the lifestyles that baby boomers are living, it is easy to see why this age group fearlessly challenges any threat of losing it. However, just because an aging parent has lived a strongly independent life does not mean that they will be capable of living without assistance forever. When the time comes for support to step in, in-home care provides the best type of care for individuals who want to remain in their homes, participating in the community and continue to enjoy a self-reliant lifestyle.

Gone are the days where senior living facilities were the "go-to" method of support for seniors. With in-home services, your bold and active parents can rely on assistance catered to their individual needs. Suppose mom and dad enjoy decorating their homes, choosing their meals, keeping beloved pet companions and caring for their gardens, but struggle with personal hygiene and housework or have limited sight or mobility. In that case, an in-home aide can provide that extra support so that they can stay comfortable and happy.

If you have a baby boomer in your family who is adamantly guarding their self-reliance but requires day-to-day or constant support, in-home care services are an ideal option that you can mold to meet specific needs. This way, they still get to live in the home they love, do the things they love without the fear of losing their beloved independence.

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Communication Strategies for the Hearing Aid Wearer:

Using Listening and Speechreading Skills to Enhance Communication While Removing Barriers to Understanding

By Dr. Noël Crosby, Au.D.

For those who experience any level of hearing loss (including hearing loss treated by the use of hearing aids) communication can be greatly augmented through the use of active listening and effective speechreading skills.

Sometimes called empathetic listening, active listening can be described as a way of listening and responding to another person that improves mutual understanding. Speechreading is the act or process of determining the intended meaning of a speaker by utilizing all visual cues that accompany speech, including lip movements, facial expressions and body language.

As a partner in the communication process, the speaker also has a role to play when it comes to maximizing communication effectiveness. By removing all physical barriers to speech, the speaker can control the environment to ensure understanding takes place. These communication strategies are reviewed below.

Communication Strategies for the LISTENER with Hearing Loss:

Step #5: Develop active listening and speechreading skills.

1. Make direct eye-contact with the speaker.
2. Wear your glasses, if appropriate, to aid in speechreading.
3. Sit no more than 3-5 feet away from the speaker.
4. If one ear is better than the other, sit with the better one closer to the speaker.
5. Concentrate on the ideas that the speaker is expressing rather than trying to understand every word that is said.
6. Don't pretend you understand when you don't.
7. Be willing to acknowledge your hearing loss and ask for help.
8. Maximize the use of lighting. Have the light behind you, not behind the speaker where it may cast a shadow.

9. Eliminate interfering background noise. Make plans in advance when going to a restaurant, church service so you can sit in the best seat available. Request an assistive listening device.

10. When talking on the phone, verify what you heard by repeating it back to the speaker.

Communication Strategies for the Listener with Hearing Loss

Step #1:

Recognize and understand the signs and symptoms of hearing loss.

Step #2:

Understand treatment options.

Step #3:

Have realistic expectations while implementing strategies for successful adaptation

Step #4:

Make an unwavering commitment to wearing hearing aids or using assistive listening devices.

Step #5:

Develop listening and speech reading skills.

Step #6:

Be assertive. Take responsibility for speech comprehension by taking steps for controlling the listening environment and giving honest and direct feedback to the speaker.

Communication Strategies the Speaker

Step #1:

Stop enabling the hearing impaired listener.

Step #2:

Support and encourage all efforts to get treatment.

Step #3:

Develop strategies for clear speech. (voice intensity, projection, rate and clarity)

Step #4:

Learn to understand and use body language.

Step #5:

Remove physical barriers to speech.

Step #6:

Learn to make the message interesting.

And above all, maintain realistic expectations about what you will be able to hear in various situations. Even listeners with normal hearing often struggle to hear in difficult listening environments.

While most people with hearing loss pick up some aspects of speechreading on their own, skills can be improved through training. Speech Pathologists and Audiologists can recommend specific training programs and suggest classes, books and CDs on the topic.

Communication Strategies for the SPEAKER: *Step #5: Remove physical barriers to speech*

As always, the speaker must share in the responsibility for ensuring effective two-way communication. Some "common sense" strategies that optimize the opportunity for effective communication include the following:

1. Reduce background noise and other distractions.
2. Encourage the hearing-impaired person to use assistive listening devices or to bring a non-hearing impaired support person
3. Make sure you have the person's attention before you begin speaking.
4. Ensure your face is not blocked. Adjust lighting if necessary. Do not sit behind a laptop so your face cannot be seen. Remind the listener to wear eyeglasses if necessary.
5. Speak distinctly and clearly without shouting
6. Don't put your hand, a pencil or other object in front of your mouth.
7. Don't chew gum or suck on candy while talking
8. Use body language and facial expressions to emphasize message.
9. Use visual aids.
10. Check for understanding.



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Breast MRI

Breast MRI uses Magnetic Resonance Imaging (MRI) to look specifically at the breast. It is a non-invasive procedure that doctors can use to determine what the inside of the breast looks like without having to do surgery or flatten the breast (as in a mammogram).

MRA

Magnetic Resonance Angiography - Magnetic Resonance Angiography (MRA) uses the same MRI scanner to get its images, however it is a special type of MRI scan that looks at blood vessels and blood flow. MRA can help diagnose aneurysms, and also detect narrowing or blockages of blood vessels. If there is decreased or blocked flow leading to the



brain this can be the cause of a stroke. Additionally, it can be an ideal aid to the physician for surgical planning. Some MRA's, as with MRI's, require a contrast medium.

CT Scan

CT Scan sometimes called CAT scanning is a painless and a non-invasive medical test that helps physicians diagnose and treat medical conditions.

Ultrasound

A process that uses high-frequency sound waves to produce pictures of the inside of the body. Because ultrasound images are captured in real time, they are able to show blood flowing through the blood vessels, as well as the movement of the body's organs and its structure.

Nuclear Medicine

Nuclear medicine is a specialized form of radiology. Patients are given a radioactive substance either by mouth or intravenously that collects in specific body organs. Then the gamma camera detects the energy being emitted from that substance and an image can then be captured.

Digital X-Ray & Fluoroscopy

An X-ray is a painless and quick test for the patient to endure. It involves exposing the part of the body that is being examined to a small dose of ionizing radiation to produce pictures of the inside of the body.

3D Mammography

3D mammography is a new technology in the fight against breast cancer that allows doctors to examine your breast tissue one layer at a time. 3D mammography uses high-powered computing to convert digital breast images into a stack of very thin layers or "slices" - building what is essentially a "3-dimensional mammogram".

Bone Density DEXA

Bone density scanning, also called dual-energy x-ray absorptiometry (DXA) or bone densitometry, is an enhanced form of x-ray technology that is used to measure bone loss.

PET Scan

Positron emission tomography, also called PET imaging or a PET scan, is a type of nuclear medicine imaging.

For more information about the diagnostic imaging services available at Radiology Associates of Venice, Englewood and Sarasota. Call the Venice office at 941-488-7781 or the Englewood office at 941-475-5471 or the Sarasota office at 941-342-7283.



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FINALLY, THERE'S REAL RELIEF FOR LOWER BACK PAIN

By Omar Henriquez, M.D.

When you're dealing with chronic low back pain, it's difficult to focus on anything other than your discomfort. The agonizing and sometimes debilitating pain can cause us to lose out on the important things, like spending time with our families, being productive at work, and even the simplest daily activities can require monumental strength to muster through them.

The statistics are overwhelming. Millions of individuals that suffer from low back pain and are not getting the relief that they could simply because their condition is often misdiagnosed. One of the most widespread causes of low back pain known as sacroiliac joint instability demands a specially trained health care provider to diagnose and treat the condition.

Sacroiliac (SI) joint instability, also known as SI dysfunction is very often undiagnosed because most physicians are not trained in this ligament sprain or joint malalignment disorder. The sacrum is the bottom portion of the spine, and its L-shaped vertebrae are fused together. The Ilium are the two large bones on each side of the sacrum that form the pelvic region. Very often, this area is misaligned, and the joints are under extreme tension and/or are offset.

The Symptoms of SI Joint Instability:

- Pain with sitting, standing, lying down or walking
- Numbness or tingling
- Pain that permeates down the legs
- Sciatic pain
- Groin and hip pain
- Pain just under the tailbone
- Gait issues
- Constant pain

Sacroiliac Joint Instability Causes

The most common cause of SI dysfunction is injury or trauma. If you've been in an auto accident or fallen on your hip or buttocks, you may have sprained or misaligned your SI joint. Transition syndrome also causes SI issues.

Other causes of Sacroiliac joint instability are, no precise cause at all. Some individuals are uncertain of how they may have injured themselves or why they have SI joint pain, and it takes an expert to diagnose and treat their condition properly. For women, being pregnant can cause some issues with joint pain due to

the hormonal release that causes the pelvic region to relax and stretch as it prepares to make room within the birth canal. Other issues that cause SI dysfunction are spine misalignment, stenosis, and leg length discrepancies to name a few.



Instead of masking the pain with addictive medications or undergoing risky, unnecessary surgery, Dr. Henriquez, with Family Spine and Pain Care Institute, has been offering patient's real relief and a restorative effect for their SI dysfunction. His technique, methods, and experience are the answer that many individuals have been waiting for to alleviate their back pain.

For SI Joint Instability, Dr. Henriquez performs the following techniques: radiofrequency denervation, regenerative treatments (as non-surgical options), and minimally invasive SI joint fusion.

Family Spine and Pain Care Institute, utilizes the most advanced, innovative methods from radiofrequency to spinal stimulation to treat pain from surgical complications as well as the following:

- Back and neck pain, including herniated discs, spinal stenosis, tumors and fibrositis.
- Cancer Pain.
- Neuropathic Pain.
- Complex regional pain syndrome (also known as reflex sympathetic dystrophy or RSD).
- Muscle and joint pain.
- Disorders of the nervous system, including shingles and trigeminal neuralgia (facial pain).
- Chronic abdominal pain and pelvic pain.
- Pain from traumatic injuries including auto accidents
- Pain associated with osteoporosis and vertebral compression fractures.
- Sports related injuries.

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No one deserves to live a life of pain. Our goal is to help our patients break the cycle of pain, so you can take back control of your life, and start doing what you love most. Trust, compassion, communication, and care formulate the core foundations of our beliefs. Our team wants each one of our patients to feel like they are part of our family.

Omar Henriquez, M.D.

Dr. Henriquez is double board certified in Anesthesiology and Pain Management by the American Board of Anesthesiology.

He is well versed in the use of fluoroscopy and ultrasound guidance to perform many spine and joint procedures such as epidurals, facet blocks, spinal cord stimulators, kyphoplasty for vertebral fractures, nerve blocks, migraine headaches, joint injections, and much more. He is very passionate about the new innovative field of regenerative medicine and has dedicated much of his time to learning and researching the best options out there for his patients.

"The one thing missing in the medical field today is being able to take the time to listen and understand our patients. It is through this process where we can formulate a comprehensive plan to produce the best possible outcomes." – Dr. Omar H. Henriquez

Dr. Henriquez is a true Florida native having lived most of his life in Florida. When he is at home he enjoys spending time with his wife and four children, exploring their city, and playing outdoors. They are very excited to have chosen Sarasota County as their home and continue their journey as a family and helping out in the community through charities and fundraisers.



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WHAT IV THERAPY CAN DO FOR YOU

By Amanda Tezyk, APRN, BSN, RN

Sufficient vitamin levels hold the key to improving health and well-being. A good number of those suffering from certain ailments respond positively to vitamin supplementation. You forget to take them daily, and vitamins often take several weeks of use before you notice any changes. If you're looking for another way to enhance your immune system and improve your overall health, consider intravenous (IV) vitamin drips.

There are a myriad of vitamin supplementations out there, so finding the right one depends on your health goals. A Myers Cocktail infusion is a common blend of vitamins used to treat common chronic conditions such as Asthma, Fibromyalgia, and even upper respiratory infections. An infusion of Vitamin B12 is essential for creating healthy blood cells and metabolizing food. Vitamin D deficiency is more common than you might expect, and yearly injections are an excellent service for improving Vitamin D levels and treating conditions like diabetes and hypertension. Multivitamin infusions are suitable for those with restricted diets or who cannot properly absorb all necessary vitamins.

Intravenous therapy delivers vitamins and amino acids directly into your vein through an IV drip, bypassing your digestive system. This means faster and more effective results. Many individuals seek IV treatments for the following advantages.

1. Increased Energy Levels

If you're like many Americans, you probably live a busy life and may even feel overworked or fatigued. Whether it's from a lack of sleep or stress, ongoing fatigue can quickly drain you of energy. Over time, your electrolyte levels and hormones can become thrown off. Fortunately, IV infusions, like the Myer's cocktail, may improve and restore your energy reserves. As you absorb and utilize the solution's nutrients, your body and immune system get back into balance, and you're often left feeling more energized and ready to take on the day.

2. Maintained Hydration

Your body consists of approximately 60 percent water and thrives on it for survival and functioning. However, dehydration is common. Many activities, including running, dancing, and spending too much time in the sun, or consuming too much alcohol can leave you dehydrated. IV infusions can help your body reach ideal hydration levels.



3. Improved Vitamin Absorption

One of the most well-known advantages of IV therapy is how quickly and sufficiently vitamins absorb through the bloodstream. Unlike oral supplements, which first must pass through your gut, IV infusions go straight into your blood. By skipping the digestive process, the nutrients get to work almost immediately. As a result, your body can recover faster from sicknesses, injuries, and even hangovers.

4. Individualized Treatment Options

Often, people with a specific health condition or concern respond well to particular vitamins, such as calcium, B vitamins, or Vitamin C. Whatever you're struggling with, there are a variety of IV choices to meet your needs. The Myers Cocktail, for example, is a great option for those suffering from allergies, chronic fatigue, and muscle spasms. Each treatment option targets your nutrient deficiencies and is personalized to support your body's unique makeup.

5. Reduced Need to Buy Supplements

IV therapy may make it unnecessary to rely on multiple supplements for your healthcare needs. Instead of remembering to take a pill every day, you can receive treatments only when you need them. Your doctor can work out a schedule with you based on your current health and goals.

6. Fast Results

Generally, your body needs two days to digest a meal and fully absorb nutrients. It also takes several weeks of daily multivitamin use before you notice any significant effects. IV drips, on the other hand, can work almost immediately. Some people

see positive changes within the same day of receiving treatment. After several hours, you'll likely feel energized and have clearer thoughts.

As with any medical service, IV treatment outcomes and results vary from person to person. You may find one multivitamin solution to work better than another. At BR Rejuvenation and Hydration, we understand the importance of offering you an individualized approach and will work with you closely to find the right solution.

If you're struggling with low energy levels, dehydration, or a chronic condition, such as fibromyalgia or chronic fatigue syndrome, contact BR Rejuvenation and Hydration. We've treated and provided relief for many patients with IV therapy at your door or your office in the Punta Gorda area. Our specialists are happy to customize a treatment plan based on your individual needs and goals. Book an appointment to discuss your symptoms and get started today!

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ARTHRITIC KNEE PAIN: DO YOU REALLY NEED SURGERY?

By Physicians Rehabilitation

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

What is Osteoarthritis (OA) of the Knee?

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

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

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

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

Knee Replacement Surgery is Permanent

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

Physicians Rehabilitation's Knee Therapy Program Includes:

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

Viscosupplementation

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

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

PRP (Platelet-Rich Plasma)

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

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

Physicians Rehabilitation

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



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

Defeat Gum Disease

There is a silent oral disease affecting more than 80% of adults. Chances are you either have had or are currently battling periodontal (gum) disease. Unfortunately, in many cases, the disease goes undetected until painful symptoms begin occurring. At which time the disease and any adverse conditions have already set in. Because there are no early signs of periodontal disease, it often goes untreated until the physical symptoms surface and by then the concern is treatment not prevention. It is extremely important for everyone to have regular dental check ups at the recommended six month interval. Without these check ups and proper oral care, periodontal disease can silently cause not only oral health problems but can also contribute to other major health concerns.

Periodontal disease, also known as gum disease, is the chronic infection of the soft tissue around the teeth caused by plaque producing bacteria. The gums hold the teeth in place. As the gums become infected, they loosen their hold on the teeth and pockets are formed. These pockets collect debris and cause more infection and bone loss to the tooth. Gum disease is infectious and contagious. It can spread from tooth to tooth in the mouth and from one person's mouth to another through saliva.

As with other diseases, prevention is key to good oral health. It is important for everyone to practice diligent, thorough, and proper oral care by scheduling check ups every six months. At which time, your dentist will be able to detect and treat any signs of periodontal disease before symptoms begin to show and the damage is done. As mentioned earlier, most people do not know they have periodontal disease until they begin suffering from any combination of the following signs:

- Chronic bad breath
- Red or swollen gums
- Bleeding gums especially after tooth brushing
- Tender or sore gums
- Loose or shifting teeth
- Receding gums
- Sensitive teeth



If you have been diagnosed with periodontal disease, there are various treatment plans your dentist may recommend depending on the severity of your case. The most important action is meticulous at home daily oral care. Teeth must be brushed twice or more times each day for at least two minutes and flossed at least once per day. Other treatments include oral rinses, periodontal cleanings, and sometimes surgery.

Traditional periodontal surgery involves cutting and suturing of the gums and recovery time can be long and painful. With the advancement of modern laser technology, there is an alternative. Joseph H. Farag, DMD offers a better alternative for patients battling periodontal disease. Dr. Farag offers patients laser-assisted new attachment procedure (LANAP™) which is a no-cut, no-sew procedure to treat mild to advanced periodontal disease. The advancements in laser surgery techniques, have made treating periodontal faster and less painful. LANAP™ is much less invasive than traditional surgery, allowing patients to return to work the next day if desired.

Even with the benefits of LANAP™ it is obviously best to practice good oral care. The most important preventative measure to avoid the insidious gum disease is to take excellent care of your teeth. Proper cleaning at least twice a day is imperative. The goal is to keep the bacteria that cause the plaque at very low levels.

If your gums are painful, red, or swollen don't ignore the signs; make an appointment today that may save your teeth and gums. Treating periodontal disease sooner is always better than later.

Benefits of LANAP™

EASY – LANAP™ is about as EASY as erasing a blackboard – unlike older techniques, there is no cutting and no suturing of the gums.

MINIMAL DISCOMFORT – Both during and post procedure, the patient experiences very minimal discomfort with LANAP™ than with prior standard surgery techniques.

SHORTER PROCEDURE TIME – It takes less time to complete LANAP™ than traditional surgery. Typically it takes is two 2-hour visits to the office and two follow up visits. Traditional surgery requires four sessions of about one hour each, with subsequent visits for suture removal and additional check-ups.

LESS GUM LOSS – LANAP™ minimizes the loss of gum tissue, traditional surgery often involves removing a significant amount of gum tissue. This tissue loss can lead to sensitive teeth since your roots are exposed. Also, if the treatment needs to be performed again in the future, you have not removed the bone and gums during the first LANAP™ treatment. Typically with LANAP™, any gum tissue shrinkage is actually due to reduced swelling of the area that was previously diseased and inflamed.

SHORT RECOVERY – Many patients fully recover from LANAP™ within 24 hours. In most cases, patients feel just fine post surgery and daily activities are not interrupted. On the other hand, recovery after traditional surgery can take up to 4 weeks during which patients can experience considerable pain and swelling.

SAFE – LANAP™ with the PerioLase is SAFE for patients with health concerns such as diabetes, heart disease, high blood pressure or those taking medications such as Coumadin or Cyclosporine.

Dr. Joseph Farag - Port Charlotte Dentalcare
941.764.9555

3441 Conway Blvd, Port Charlotte
www.Drfarag.com

PRESERVING ASSETS FROM NURSING HOMES

By James W. Mallonee

As persons get older there is the fear that they may be placed in a nursing facility and whatever assets they have will be absorbed by such facility leaving nothing for their children. But this does not necessarily have to happen provided you spend some time with the attorney of your choice and devise a plan to avoid losing everything. More importantly, allowing you to stay with family and avoid a nursing facility altogether. One of those plans that can be executed is called an "In-kind Support and Maintenance" (ISM) plan. An ISM plan consists of a contract primarily designed to allow an elder adult or child to live at home with another as opposed to being relegated to a nursing home.

An ISM plan is different from a plan involving both a personal services contract and a Qualified Income Trust, because the ISM plan can involve a person who is not relegated to a nursing facility to receive Social Security support. An ISM recipient can live in the comfort of a sibling or child's home.

An example might be where Sister1 transfers to Sister2 \$58,000.00 based on a written contract where Sister2 agrees to provide food and shelter to Sister1 for a period of 7 years. Sister2 places a value on the amount of additional expense for shelter and food to be \$700.00 per month. The amount of the contract comes to \$58,000.00 which coincidentally is equal to the amount transferred. Sister1 moves in with Sister2 and begins paying \$700 per month. At the end of the 7 years, another agreement can be prepared to continue the services being received.

Thus, Sister1 can avoid losing a portion of her Social Security Benefits and not be placed into a nursing facility. To complete this transaction, Sister2 will need to complete SSA's Statement of Household Expenses and Contributions.

Sister1 could also arrange for the agreement to be for life. To accomplish this Sister2 will need to use Social Security's years of life remaining chart to determine if the amount being received will be fully amortized. Suppose Sister1 needs to stay with Sister2 for her life. In that case, Sister1 could transfer to Sister2 almost all of her savings in exchange for a lifetime of room and board in Sister2's residence. Once again, the statistical remaining years of life is calculated against the current market value of expected expenses to come to a value being received by Sister1. The statistical number of years Sister1 has remaining times the fair market value of what she will receive results in a compensable value to be paid to Sister2. The downside here is that Sister2 may have to claim the amount of funds received as income.

Is it possible when multiplying the statistical number of years remaining in life multiplied by the amount being paid to stay with Sister2 not be equal in value? Yes, and when that occurs, Sister1 may be ineligible to receive benefits for a period of years. The period of ineligibility normally is calculated by taking the balance of funds transferred to Sister2 and dividing it by the amount dollars Social Security determines to be the fair market value of the services received. But that amount will be capped at 36 months. Therefore, in this example Sister1 is penalized for only for 36 months.

Are there other options? Yes, one option is to simply give the money to Sister2 with no agreement. However, the penalty would be to divide the amount of the gift by \$794 and the number would be the number of months of ineligibility to receive benefits. Fortunately, the number of months of ineligibility would be capped at 36 months should this example be used.

Another alternative of the ISM is to prepare a contract where Sister1 and Sister2 are going to "share" food and shelter costs with no requirement to maintain an account for such services. Thus, accounting fees are eliminated. More importantly, since the room and board agreement to "share" food and shelter expenses is the basis of the agreement no federal income tax consequences would be incurred by Sister2.

Remember that this type of program gives the recipient (Sister1) the ability to avoid going into a nursing facility. This type plan only works provided that the makers of the plan are willing to cohabitate. If that possibility is off the table, then a direct personal services contract and possibly qualified income trust may be the best way to preserve your assets should you have to be placed into a nursing facility. In essence an ISM contract may not be feasible.

If you are not sure what plan is best for you (as you approach a period of time where you may need more health care services) seek out the attorney of your choice and let them lay out various plans to help you decide. It might be a means of leaving a legacy to your loved ones.

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

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Ketamine for Pain Management

In the U.S., over 100 million people reportedly suffer from some form of chronic pain. Most people can relate to having experienced physical pain in their lifetime, but to have to live with that pain daily can become intolerable. Neuropathic pain syndromes are the root cause of many individuals' chronic discomfort. Neuropathic pain syndromes are related to disorders like diabetes, fibromyalgia, CRPS, Lyme disease, and migraines.

The most common treatment for neuropathy is to mask it with narcotic prescription pain medications. Narcotics such as opioids are highly addictive, and Florida is currently leading the country in abusing drugs and overdose episodes. The CDC reports that nearly half of all opioid-related deaths are due to the narcotics being prescribed for pain-related circumstances.

Pain medications have adverse side effects and, in many cases, show signs of cognitive decline in long-term use. The other issue with standard pain medication is that they often become ineffective and are unable to mask the pain signals. This is called treatment resistance.

Opioids fool the body by binding to the opioid receptors in the brain, spine, and other areas of the body. They DON'T treat the health condition; they merely mask the pain by disrupting the signals to the brain. Opioids are one of the most highly addictive classes of drugs available.

ONE OF THE MOST PROMISING ALTERNATIVE METHODS IS KETAMINE IV THERAPY

How does ketamine work?

Ketamine is an NMDA receptor antagonist. Through this mechanism, it is able to modulate the neurotransmitter glutamate. This, in turn, leads to a cascade of events that can allow for "hardwired" changes in the brain which may result in lifting of depression, reductions in anxiety as well as improvements in other mood disorders. It also allows for a "resetting" of the pathways responsible for central pain, which is a large component of chronic pain in many patients.

A recent study conducted at Thomas Jefferson University Hospital involved 61 patients with intractable migraines. Of the 61 patients in the study, 75%



showed a decrease in the intensity of their headaches after receiving low dose IV ketamine infusions over five days. On a scale of zero to 10 (10 being the highest), the self-reported pain score from patients was an average 7.5 before the initiation of the study and 3.4 at the conclusion of the IV ketamine infusions.

IV ketamine is currently used to help treat neuropathic pain syndromes such as CRPS, fibromyalgia, trigeminal neuralgia, migraines, and herpetic neuralgias. There is a growing body of evidence to support that it may have also have long term effects for pain relief.

In recent FDA and other professional associated studies, patient results with ketamine show:

- Reduced pain
- Decrease depression
- Diminished suicidal thoughts and episodes
- Rapid ability to reverse depression and symptoms

How is ketamine administered?

In our office, ketamine is administered intravenously. The initial series of infusions for pain are completed over a one week period and over a two week period for mental health and mood disorders.

Ketamine IV therapy impacts pain relief, mood, and anxiety and can result in positive treatment outcomes for the following disorders:

- Severe or chronic depression
- Chronic pain
- Bipolar disorder
- Obsessive compulsive disorder OCD
- Post-traumatic stress disorder PTSD

With our ongoing drug related epidemic, ketamine therapy can reduce the risk of opioid, benzodiazepine, and other narcotic addictions. Physicians are

often overprescribing these types of highly addictive drugs to help minimize or mask patients' chronic pain, depression, or other ailments. With ketamine therapy, the treatment is safe, non-habit forming and highly effective.

Reichbach Center

Selecting a practitioner with a significant amount of Ketamine experience who follows and practices evidence-based medicine, and who tailors each patient's individual protocol as best suited to their clinical situation, is essential.

Dr. Steven Reichbach states, "In our opinion, IV Ketamine infusions are the gold standard for patients suffering from chronic pain. It is now purported as a viable option for those that suffer from addictions as well."

"IV ketamine provides 100% bioavailability meaning that 100% of the drug administered gets where it needs to go (the brain). This provides easier titration and a higher likelihood for a positive response."

Steven Reichbach, MD, Board-Certified Anesthesiologist, specializes in pain management. For more information, please contact their office today at 941-213-4444, or visit their website at www.findpainrelief.com.



Steven Reichbach, MD
Board-Certified Anesthesiologist
President and Founder



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ADVANCED URINARY INCONTINENCE PROCEDURES

Approximately 10 to 20 million people in the United States are suffering from urinary incontinence. If you have issues with leaking when coughing, jumping, or laughing, or if you have severe urgency to urinate day and night, you are not alone. Correct diagnosis of the type of incontinence is the first and most important step in developing an appropriate and effective treatment plan for incontinence.

There are several types of urinary incontinence:

- Stress incontinence
- Urge incontinence
- Mixed incontinence
- Overflow incontinence
- Functional incontinence

The good news is that you are not stuck with wearing pads or pull up for the rest of your life. There are viable treatment options from medications, Botox injections, nerve stimulators and implantable slings to name a few. Two of the more advance innovative procedures that are noninvasive are sacral neuromodulation and urethral bulking.

Sacral Neuromodulation

Sacral neuromodulation is an advanced procedure that uses a tiny wire that is placed on the glut muscle with a quarter-size impulse device that sends messages to the brain to regulate urination. This procedure takes around 30 minutes to perform, and if the procedure does not work, or if a patient decides they want it removed, we can take it out quite easily. Other similar devices can also be placed on the sacral nerve to induce sacral neuromodulation to send small impulses to the bladder.

Bulkamid—Urethral Bulking

Bulkamid is a soft, smooth hydrogel that consists of 97.5% water and 2.5% polyacrylamide. Once injected, Bulkamid provides additional volume to the urethra and acts as a scaffold for cells to grow through helping to provide long lasting relief of stress urinary incontinence symptoms. Bulkamid is noninvasive and requires no surgery, it is injected directly into the closing mechanism of the urethra. More than 70,000 patients have been treated with Bulkamid.

What is urethral bulking?

Urethral bulking involves the injection of a soft hydrogel (the size of a pea) like Bulkamid, into 3 or 4 locations in the urethral wall using a small telescope. The total volume injected is around 2mls.

Bulkamid aims to restore the natural closing pressure of the urethra preventing urine from leaking out unintentionally during normal daily activities (e.g., when you cough, laugh, walk or exercise).

Short procedure

Urethral bulking takes around 10 – 15 minutes and is usually done in day surgery or out-patient clinic with a local anesthetic.

No incisions

A series of small injections are used, you may feel a sting, however, no cuts are made.

Quick recovery

In most cases patients can get back to their normal activities within a day.

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.

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FINDING THE BEST ORTHOPEDIC SPECIALIST FOR YOUR CHILD'S INJURY IS CRITICAL

Protecting your child entails many different aspects throughout their lives, but unfortunately, you can't always control when things go wrong such as injuries and accidents. If your child has an injury, it's important to be seen by an orthopedic specialist that is board certified, with a high-level of experience, and one that is also comfortable treating children.

At Sforzo | Dillingham | Stewart Orthopedics + Sports Medicine, they treat children from age three and up, and their specialists are fathers themselves, so they understand what an injury can mean from parent's perspective. After all, it's not just an injury, it is your child. Additionally, the physicians are extremely active with youth activities, therefore they very informed about competitive team dynamics.

Making sure the physician you select has the credentials and experience necessary is essential, when it comes to healing your child's injury, and improving range of motion and functionality, finding the best orthopedic surgeon is critical.

You have a choice when deciding on an orthopedic surgeon. It is essential for patients to do their research, look at real reviews and patient testimonials, and most importantly, to go with a physician or group that has the experience level and training necessary to improve your child's condition and keep them active now – and for their future.

Board certification and fellowship trained doctors are the elite in the orthopedic industry. Their training, skills, and experience are without exception; it is an important factor to consider when choosing an orthopedic surgeon.

**Sforzo | Dillingham | Stewart
Orthopedics + Sports Medicine
EVERYTHING HEALTHCARE SHOULD BE**

Providing advanced meticulous orthopedic care is what Dr. Christopher Sforzo envisioned when he opened the doors to Sforzo | Dillingham | Stewart Orthopedics + Sports Medicine in 2006. And that is just what you can expect today when you choose the practice for your orthopedic and sports medicine needs.

Treating All Generations

Dr. Sforzo, Dr. Christopher Dillingham, Dr. Charles Stewart, and Dr. Philip Meinhardt specialize in both

non-surgical and surgical treatment for the shoulders, hand, wrists, elbows, hips, knees, ankles, spine and neck. This includes unparalleled

expertise in fracture care, sports injuries, tendonitis, arthritis, bursitis, joint replacement, rotator cuff repair, carpal tunnel syndrome, reverse shoulder replacement, ACL reconstruction, reconstruction of spinal deformities, fusion procedures, knee replacement, total hip replacement both traditional and anterior approach. Additionally, the doctors offer the latest in regenerative treatments helping many patients eliminate the need for surgery.

You are more than your injury, more than your pain. And so, the true healthcare practiced at Sforzo | Dillingham | Stewart Orthopedics + Sports Medicine offers a much more personal approach.

From the sincerity of their hand-selected staff of Sarasota's elite medical and service professionals to ample time with and full attention from Drs. Sforzo, Dillingham, Stewart, and Meinhardt provide dedicated care where a doctor, not a policy, determines your best interests.

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Christopher R. Sforzo, M.D. is a board-certified orthopedic surgeon and fellowship-trained in hand and upper extremity surgery. He provides expert care in the treatment of problems involving the shoulder, arm, elbow, forearm, wrist, and hand. Including, carpal tunnel syndrome, joint replacement, fracture and tendon repair.

Christopher L. Dillingham, M.D. is a board-certified orthopedic surgeon and fellowship-trained in hand, shoulder, and arm surgery. He is an expert in the treatment of problems with rotator cuff disorders, carpal tunnel syndrome and nerve injury, joint replacement, arthritis surgery, fracture repair, tendon repair and total reverse shoulder surgery.

Charles E. Stewart, M.D. is a Johns Hopkins fellowship-trained and board-certified orthopedic surgeon specializing in adult complex reconstruction of the lower extremity. His specialties include lower extremity sports injuries, meniscal injuries, ACL reconstruction, partial knee replacement, total hip and knee arthroplasty (replacement), as well as, the reconstruction of failed hip and knee arthroplasties, and complete fracture care.

Philip A. Meinhardt, M.D. is a board-certified orthopedic surgeon and fellowship-trained spine surgeon. He specializes in adult spinal surgeries, including reconstruction of spinal deformities, minimally invasive/microscopic spinal procedures, decompression, spinal instrumentation, fusion procedures, and microscopic cervical disc replacements.



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Dealing With Life's Painful Situations

By Pastor Timothy Neptune

On Father's Day in 2005 my dad came to my office to visit and talk about how things were going. In the course of our discussion he mentioned that he experienced a terrible night's sleep because his back was causing him so much pain. I told him that it was time to go to the ER and get checked out to find out what was causing all of his pain. He did, and that started a two-year battle with pancreatic cancer. My dad fought an incredible fight with this terrible cancer but passed away in August of 2007.

Many people have faced the pain of having to bury a loved one. The question is, "How do I deal with the pain?" We may have confidence that our loved one is in a better place, but do we do with the pain that we still feel?

As you read this, maybe your pain is not in the loss associated with death, but rather you have faced the end of a relationship, or perhaps have received bad news regarding your own health. The question still remains, "what are we to do with these painful situations?"

As we turn through the pages of Scripture, we find that the thoughts and writings of the Psalmist David bring comfort and hope to those in pain. David understood painful situations for he faced many of them in his own life. He too, buried many loved ones and faced enormous family problems. How did he get through these challenges? He turned to God for help.

David tells us in the book of Psalms, ¹⁸ *The LORD is close to the brokenhearted and saves those who are crushed in spirit. Psalms 34:18*

You are never closer to God than when you are hurting. David knew that from personal experience. David took his pain and his problems to the Lord and asked for His help. In Psalm 142:1-2 David wrote, *"I cry aloud to the LORD; I lift up my voice to the LORD for mercy. I pour out my complaint before him; before him I tell my trouble."*

Our natural tendency is to suffer in silence. We put on a smile and pretend that everything is fine in our lives. Yet in reality, we know that ignoring our pain does not bring relief. We hope that time will heal all wounds but we know it does not. In fact, time often makes matters even worse.

Pain is our body's way of letting us know that we need to deal with something. Whether it is physical, emotional, or relational, pain should not be ignored. And yet still, we try to run from it.

It is human nature to run from painful situations. By law, all doors in public buildings swing out. When people panic, they run. They try to escape. When we face pain, loss and hurt, we look for ways to escape. We dream



of running away from reality in hopes of finding peace and comfort over the next rainbow. Sometimes people try to escape by turning to alcohol, drugs, food, or even inappropriate relationships. Running from your problems never brings resolution.

David went on to say in Psalm 142:3 that ³ *"When my spirit grows faint within me, it is you who knows my way..."* God knows the pain we feel and He wants us to run to Him with our troubles.

As you read his Psalms, you will quickly notice that David was very open about what he was going through. And yet, through it all, he learned to trust and depend on God.

When dealing with the pressures and strains of life and the emotional challenges we face, we can learn much from David's example. Stop pretending that you can handle everything in your own strength and turn to God who loves you and cares about you. He specializes in mending broken hearts.

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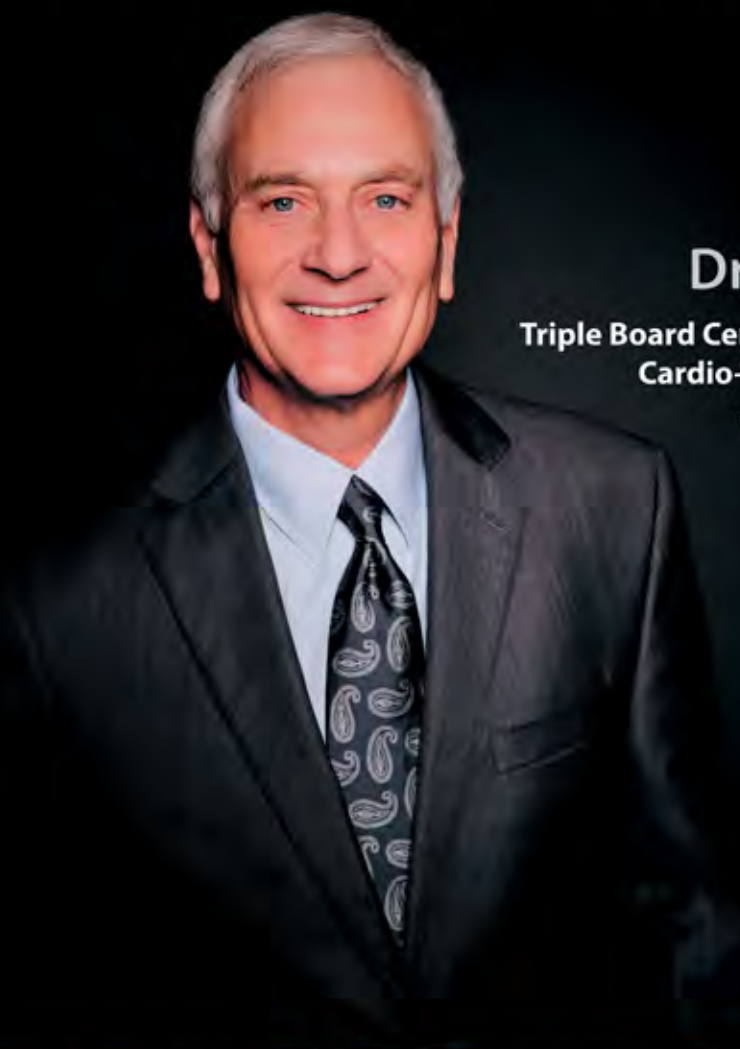


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