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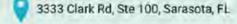


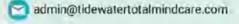
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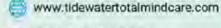
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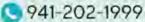
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# **Treating Venous Ulcers at Joyce Vein & Aesthetic Institute**

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

"There are two systems of veins in the leg," explains Dr. Joyce. "The main system, in the middle of the muscles, is called the deep system. The other system is made up of all the veins you see under your skin, and are called the superficial veins. These two systems are connected by perforator veins. If you picture a ladder, with the superficial system being the left rail and the deep system being the right rail, the perforator veins are the rungs on the ladder going across between the two sides. The superficial side of the ladder is under low pressure, and the deep system side is under high pressure. Each perforator vein has a one-way valve. When you relax, the perforator valves open, and blood passively drains from the superficial into the deep system. When you walk, the deep system is compressed, generating the high pressure that returns blood back to the heart against gravity. All the valves in the perforators snap shut, so that the high pressure blood does 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

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

#### DEGREES

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

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

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

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

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



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# **Unveiling the Healing Power of CBD**RELIEVING MIGRAINES NATURALLY



igraines can be debilitating, affecting millions worldwide and impairing daily activities. As traditional treatments often fall short, many individuals are turning to alternative remedies. One such promising option gaining significant attention is cannabidiol, or CBD. Derived from the hemp plant, CBD is a non-intoxicating compound known for its therapeutic properties. This article explores the benefits of using CBD as a natural solution for migraines, highlighting its potential to alleviate symptoms, reduce frequency and severity, and enhance overall well-being.

# Understanding Migraines and Conventional Treatments

Migraines are severe headaches often accompanied by additional symptoms like nausea, sensitivity to light and sound, and visual disturbances. Traditional treatments primarily focus on symptom management through painkillers, anti-inflammatory drugs, and lifestyle modifications. However, these approaches may not provide satisfactory relief for everyone and can have side effects. This calls for exploring alternative options such as CBD, which interacts with the body's endocannabinoid system, offering a new perspective on migraine management.

#### **Alleviating Migraine Symptoms with CBD**

CBD exhibits anti-inflammatory, analgesic, and neuroprotective properties that can be beneficial in mitigating migraine symptoms. By modulating the endocannabinoid system, CBD helps reduce pain perception and inflammation, providing relief during a migraine attack. Furthermore, CBD's anxiolytic properties can help alleviate stress and anxiety, which are often triggers for migraines. Its ability to regulate serotonin levels in the brain may also contribute to managing migraine-related nausea and vomiting.

# Reducing Migraine Frequency and Severity

CBD's potential extends beyond symptom relief; it may also help reduce the frequency and severity of migraines. Regular CBD use may prevent the onset of migraines by addressing underlying factors such as inflammation and neurotransmitter imbalances.

Studies have shown that CBD can modulate pain signals, potentially reducing the intensity of migraines. Additionally, CBD's neuroprotective properties may help prevent or limit the damage caused by migraines, reducing their impact on individuals' lives.

### **Supporting Overall Well-being**

Migraines not only cause physical discomfort but can also disrupt emotional well-being and impair daily functioning. CBD's interaction with the endocannabinoid system has been linked to promoting balance and homeostasis in the body. By reducing pain, anxiety, and stress, CBD can enhance overall well-being and quality of life for migraine sufferers. Furthermore, unlike traditional migraine medications, CBD is generally well-tolerated, with minimal side effects reported.

While more research is needed to fully understand CBD's potential for managing migraines, the current evidence suggests promising benefits. CBD offers a natural, holistic approach to migraine relief, addressing symptoms, reducing frequency and severity, and supporting overall well-being. As with any treatment, it is essential to consult with a healthcare professional before incorporating CBD into a migraine management plan, especially for those on other medications. By embracing the healing power of CBD, migraine sufferers can find hope in a natural remedy that holds the potential to restore balance and improve their daily lives.

# The following are some of the forms in which CBD is available:

- Vapes heat CBD oil giving off an inhalable vapor.
- Flowers (dried hemp plants) can be smoked.
- Gummies are chewable and sweet like the popular candies.
- Oils and tinctures are consumed orally usually from droppers.
- Sprays can be sprayed into the mouth, usually under the tongue.
- Capsules or tablets are taken orally.
- Creams and gels are absorbed through the skin.

#### **About Green Doc**

We believe in improving the wellbeing of others through the proven and natural benefits of cannabis, and with GreenDoc the medical card process couldn't be easier.

We started GreenDoc for two reasons.

To share the healing qualities of marijuana with our community, and in doing so, begin to remove the stigma that has long been accompanied with the medicine.

Our family has a long history of military service, and it was painful to watch many of the veterans in our family and community suffer from chronic pain while being treated with an endless supply of opioid prescriptions pushed by greedy pharmaceutical companies.

We began looking into the research of marijuana and its medicinal qualities and knew this could be a solution for our family and friends. We wanted to make sure that anyone who qualified for, and could use medical marijuana, would be able to find a qualified doctor. Exploring the benefits of cannabis also led us to the new and exciting world of alternative cannabinoids — the other; often psychoactive, compounds in the cannabis plant.

While we are passionate about what medical marijuana and alternative cannabinoids can do for individuals, we understand the negative stigma they still carry. We are also aware that many are afraid to seek the relief that these products can provide because of the stigma. That is why support marijuana education and advocacy in the communities in which we operate.

We're both a medical marijuana facility as well as a no-card-required dispensary, and we seek to provide relief as nature intended.



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# WHAT IS PAD?

By Dr. Isin Mustafa, DPM, MSHS, DABPM, FACPM

AD stands for Peripheral Arterial Disease. PAD is caused by blockages or narrowing of the arteries in the legs from a buildup of fatty deposits aka plaque buildup. This buildup of plaque hardens and narrows the arteries. This is called atherosclerosis and leads to a reduction of blood flow to the legs and feet. PAD is commonly seen in the legs, but it can also affect other arteries in the body, including arteries to the aorta, brain, arms, kidneys, and the stomach. Coronary artery disease or cardiovascular disease is when arteries in the heart are hardened or narrowed. People with PAD have a two-to-six times' greater chance of death from a heart attack or stroke. PAD and diabetes are the leading causes of foot or leg amputations in the United States.

#### **Risk factors**

- Smoking
- · High Cholesterol
- . High Blood Pressure
- · Physical inactivity
- · Obesity
- Diabetes

# Symptoms

- Fatigue, tiredness, or pain in your legs, thighs, or buttocks that happens when you walk and goes away with rest.
- Foot or toe pain at rest that often disturbs your sleep.
- Skin wounds or ulcers on your feet or toes that are slow to heal or fail to heel
- Not everyone will experience these classic symptoms such as cramping, pain or fatigue known as claudication

#### When to see a professional

Do not ignore leg pain. It is important to discuss any leg or thigh pain with your podiatric physician. Early detection of PAD can offer an opportunity to treat risk factors that can slow the progression of the disease and decrease the chance of heart attack and stroke.

#### **Diagnosis and Treatment**

A simple test known as ABI's or ankle-brachial index can be ordered for evaluation of your circulation. It compares the blood pressure in your ankles with



the blood pressure in your arm. If your ABI is abnormal, your physician can order other tests to determine the extent of your PAD.

PAD can be treated with lifestyle changes, medicines, and surgical procedures if necessary. Medical treatment options include:

- · Programs to stop smoking
- Blood pressure control
- · Lowering cholesterol
- · Manage high blood sugar (diabetes)
- Medications to prevent clotting
- · Healthy diet
- Exercise program

A variety of surgical treatment options are available depending on the location and severity of the artery blockage. Your physician can refer you to the appropriate specialist for these procedures such as a vascular surgeon.

For more information about PAD contact your local foot and ankle specialist.

Disclaimer: This content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health care provider with any questions you may have regarding a medical condition.

Isin Mustafa, DPM, MSHS, DABPM, FACPM
Isin Mustafa, DPM, is a Podiatrist at Family Foot &
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# STEM CELL ORTHOPEDICS The Nonsurgical Option

By Mark Walter, M.D.

any of us are excited about stem cell orthopedics and its potential. After all, who wouldn't be interested in a very safe, minimally invasive treatment that uses your own stem cells and growth factors (from your fat and blood) to heal many painful and troublesome orthopedic problems? Not only is it safer but for certain types of problems, the results with stem cells may be much better!

Can stem cells fix everything? Of course not. But it can fix at least 80% of common orthopedic problems like knee or hip arthritis, disc problems in the back or neck, rotator cuff or shoulder arthritis and many other degenerative conditions or injuries. The treatment is minimally invasive and super safe. In my own practice, my protocol is done in a single day as an outpatient procedure. You walk in, we take a little blood and about 60-120ccs of fat in a painless harvesting procedure (with only local anesthesia). You take a break and relax while we prepare the stem cells. Then we inject the stem cells and PRP in and around the specific area involved. And you walk out. The whole thing takes 3-4 hours, start to finish. Yes, you'll be a little sore for a day or two but downtime is minimal and you can return to activities of daily living within 24 hours.

What's the downside? The main risk is you may pay your money (because it's so new, stem cells are not yet covered by any insurance!) and it may not work as hoped.

Sound too good to be true? Actually, it's not, but there is a big caveat. To get the best results you need to do the treatment properly. The field of stem cell orthopedics has grown rapidly over the last decade and of course, as with any new field, there is no standardization and much misconception and misinformation. It is also true that many doctors who are attempting to do these treatments do not have the right training or background to do it properly. I call them dabblers! They may mean well but their lack of knowledge, training and experience in regenerative orthopedics can greatly jeopardize the outcome. If someone has had a stem cell procedure and if the outcome of the treatment was poor, the first question is: who did it? And what type of stem cells did they use? Certainly, when it comes to healing, there can be poor biologic outcomes, but far more common is poor diagnostic and injection technique, improper selection or preparation of the stem cells or regenerative solution, and failure to educate the patient properly for follow-up and rehab.

There are three major determinants of the outcome of any stem cell orthopedic procedure. First and of prime importance, you need to make the correct diagnosis of the primary pain generators and inject them properly. Good medicine starts with the right diagnosis! For this, you need the right doctor with the right background and skill set. Make no mistake, regenerative orthopedics is a highly specialized field that is a totally different specialty than conventional surgical orthopedics. The outcome, as with any skilled procedure, will totally depend on the training, skill and knowledge of the practitioner.

The best regenerative doctors will have mastered a highly effective technique called Prolotherapy. It is a little known fact that the majority of pain actually comes from micro tears in the attachments of ligaments, tendons and joint capsules. These loose attachments and the resultant joint instability, are crucial concepts to understanding the pain picture in a patient, Unfortunately MRI and ultrasound are not sensitive enough to make these distinctions and really the only way to make a precise diagnosis and prioritize the primary pain generators in any given patient, is with a technique called palpation interrogation. If I palpate a specific site on a specific structure and it reproduces the pain, we call this the "jump sign". The bigger the jump sign the more important that specific structure is in the pain picture and the more crucial that we address that exact spot with injections.

Second, you need to use the right kind of stem cells and prepare them properly. For our purposes, autologous tissue (from your own body) is far safer and more effective than any other type of stem cells. In my experience, freshly prepared, DNA-matched stem cells are far more effective than umbilical tissue from a donor. There are two sources of autologous stem cells- fat and bone marrow. I prefer fat since it's easier to get and fat has a higher concentration of mesenchymal stem cells, which are the precursors of ligaments, tendons, cartilage and bone.



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Finally you need the right follow-up and rehab program to give the stem cells the best healing environment to work optimally. After the stem cells are placed they live and continue to grow for at least 4-5 months. If, for any reason, a patient is slow to respond and fails to progress after 6-8 weeks, we usually suggest one or two PRP boosters at weeks 6-12 to help reignite the stem cells. The treatment plan for any given patient needs to be individualized depending on the severity and urgency of the problem, number of joints or regions injected, timeline and availability/willingness to come for several visits etc. If the problem is severe, I usually recommend to start with a stem cell/PRP combo to all affected regions, since this gives us the best chance for a rapid and substantial improvement. After all, I only get one chance to make a first impression. I want to turn every patient into a huge success case— and as quickly as possible!

Proper rehab is also important for optimal healing. The patient needs to use and move the areas involved without over-loading the attachments. If needed, pain-killers such as tylenol and tramadol can be quite helpful to ease pain while the patient heals, but pharmaceutical anti-inflammatories are to be avoided as they interfere with healing. Good nutrition, reducing stress and proper sleep hygiene also help the healing process.

If you or someone close to you has a serious orthopedic problem I urge you to consider the stem cell option. If you do the treatment properly and optimize all the above factors, your chances of success are 80-85% for a long-lasting, great result. In the end it's all about quality of life. This is the medicine of the future!

#### About Dr. Walter

Mark Walter, M.D. has pioneered the field of regenerative orthopedics for the last 22 years and is considered one of the top stem cell orthopedic specialists in Florida. Dr. Walter completed his MD degree at McGill University (1980) and went on to do five years of post-doc work in regenerative orthopedics with the world famous Hackett-Hemwall foundation (in association with the University of Wisconsin). He is a master Prolotherapist and a leading proponent of offering patients non-surgical alternatives for serious orthopedic issues. Dr. Walter has just released his new book Stem Cell Orthopedics- A New Way to Fix Joint, Back and Neck Problems (available on amazon).

For additional information, to book a phone or in-person consultation or reserve a seat at an upcoming free seminar (given monthly) please call Dr. Walter's office in Sarasota at (941) 955-4325, text the Stem Cell Hotline at (941) 376-2100 or visit us at regenortho.com.

Please call today for more information or to book a PERSONAL CONSULTATION or a FREE SEMINAR June 14th & 28th @ 4 P.M.



# Intranasal Esketamine (Spravato®) A Promising Treatment Modality for Treatment-Resistant Depression

By Steven Stein, MD - Board-certified Psychiatrist

epression affects millions of people worldwide, with a significant number experiencing treatment-resistant depression (TRD) that doesn't respond to traditional therapies. However, an exciting breakthrough treatment modality known as intranasal esketamine, marketed as Spravato<sup>®</sup>, has emerged as a promising option for patients battling TRD. This article explores the concept of treatment-resistant depression, its impact on patients' lives, and the effectiveness of intranasal esketamine in providing new hope and relief to those who have not responded to conventional treatments.

### **Understanding Treatment-Resistant Depression**

Treatment-resistant depression is a condition where one has continuous depression despite multiple attempts at treating the disorder with antidepressant medications, procedures and/or psychotherapies. Approximately 30% of people diagnosed with depression are considered treatment-resistant. TRD can have devastating effects on practically all aspects of one's life, including mental and physical health, job performance, relationships and more. This condition affects far too many of us and our overall quality of life, but there is a new and exciting FDA-approved treatment now available.

### The Rise of Intranasal Esketamine

Esketamine was approved in March of 2019 and is the first new therapy indicated for TRD in over 30 years. In the few years since, intranasal esketamine, marketed under the brand name Spravato®, has gained recognition as an innovative, safe and effective treatment option for TRD. Esketamine is a derivative of ketamine, an anesthetic, and has shown rapid-acting antidepressant effects in several studies in recent years. Spravato<sup>®</sup> has been approved by the U.S. Food and Drug Administration (FDA) for use in conjunction with an oral antidepressant for patients with TRD, is covered by most insurance providers, and can offer long-lasting symptom relief. Unlike some procedures that are more invasive or may require additional anesthesia or needles, esketamine is delivered under the supervision of a healthcare provider at a certified treatment center as a nasal spray (also referred to as intranasal).

# The Evidence and Efficacy of Intranasal Esketamine

To obtain FDA approval, investigators conducted a phase 3, multicenter, double-blind withdrawal study involving 297 patients who achieved stable

remission or response after 16 weeks of esketamine (56 or 84 mg), plus oral antidepressant treatment. Of the people suffering from treatment-resistant depression involved in the study, almost 70% achieved a response to esketamine plus an oral antidepressant after 4 weeks of use. Over 50% of these people had a full remission after the first 4 weeks. This therapy has also been shown to decrease the risk of depression returning by >50%. Most of the commonly used antidepressants treat depression by increasing levels of the neurotransmitters serotonin, norepinephrine, and/or dopamine in certain areas of the brain. Esketamine instead works on the brain's glutamate system by targeting the N-methyl-D-aspartate receptor. It is characterized by its fast-acting benefits due to restoring patients' synaptic connections between neurons. This is a unique mechanism of action of that differs from traditional antidepressants. This distinct approach allows for faster symptom relief, often within hours or days.

#### **Safety and Considerations**

Spravato is not for everyone, so to best determine if a person can safely receive this therapy, they must first be evaluated by a REMS-certified healthcare provider. This initial consultation should also provide a full list of risks, benefits, contraindications, typical and serious side effects, alternative treatments and allow for the time and space for any additional questions. Once a determination has been made that a person is a good and safe candidate to receive this therapy, studies have indicated intranasal esketamine has a favorable safety profile. Common side effects such as dissociations and dizziness, are typically transient and resolve shortly after treatment. Clinicians closely monitor patients during and after each session to ensure their well-being.

The availability of intranasal esketamine as a treatment option offers new hope to individuals struggling with TRD. It provides an alternative to those who have not responded to other treatments and the hope of depression relief. However, it is important to note that esketamine treatment requires close medical supervision and must be administered in a healthcare setting.

Treatment-resistant depression can be a debilitating condition, but intranasal esketamine, marketed as Spravato®, has emerged as a promising treatment modality with the potential to provide rapid relief from depressive symptoms, even in individuals who have not responded to traditional therapies. While further research is needed to fully understand the exact way it works and its long-term effects, esketamine offers hope for patients grappling with TRD, providing an opportunity for improved wellness, mental health and a better quality of life.

# Steven Stein, MD

I am a board-certified general psychiatrist who works with adolescents, adults, and geriatric patients. I specialize in the evaluation and treatment of a wide array of psychiatric conditions including depressive and mood disorders, anxiety and panic disorders, ADHD, OCD, PTSD, personality disorders, and bipolar and schizophrenia spectrum illnesses. My clinic provides comprehensive care with a patient-centered approach and concentration on psychopharmacological interventions, while implementing supportive and motivational psychotherapies. All my staff are highly qualified, professional and courteous.

I am originally from the Tampa Bay, FL area where I completed my undergraduate and master's degrees at the University of South Florida. I attended medical school at Ross University School of Medicine and completed my psychiatric residency training at Tulane University School of Medicine.

I am based in Sarasota, FL and see local patients in person or virtually. I also accept patients virtually throughout the state of Florida. Outside of TTMC, I continue to treat patients in the hospital setting. I believe that stable mental health is a fundamental cornerstone of achieving overall optimal health, vitality, satisfaction, success and purpose.

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# UNDERSTANDING THE AMERICAN COLLEGE OF CARDIOLOGY'S GUIDELINES ON CHOLESTEROL

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

n the United States, heart disease remains the leading cause of death, and elevated cholesterol levels are a significant risk factor. To combat this widespread health concern, the American College of Cardiology (ACC) plays a pivotal role in establishing guidelines for cholesterol management. These guidelines, based on rigorous research and expert consensus, help healthcare professionals make informed decisions to reduce cardiovascular risk. In this article, we will delve into the key principles of the ACC's guidelines on cholesterol, exploring their impact on preventive care and highlighting the latest recommendations for patients.

# **Understanding Cholesterol and Its Role**

Before diving into the guidelines, it's crucial to understand cholesterol and its role in cardiovascular health. Cholesterol is a waxy substance produced naturally by the liver and is also found in certain foods. While cholesterol is necessary for various bodily functions, excessive levels can lead to the buildup of plaque in the arteries, increasing the risk of heart disease, heart attacks, and strokes.

# The ACC's Approach to Cholesterol Management

The American College of Cardiology's guidelines on cholesterol management emphasize a comprehensive approach to prevent cardiovascular events. The guidelines emphasize a shift from a specific focus on low-density lipoprotein (LDL) cholesterol levels to a broader assessment of overall cardiovascular risk. This approach takes into account factors such as age, sex, race, blood pressure, smoking status, and diabetes to determine an individual's risk profile.

The guidelines outline four major groups for prevention of cardiovascular disease, each with different LDL cholesterol goals: patients with clinical atherosclerotic cardiovascular disease (ASCVD), patients with very high-risk conditions, patients with diabetes aged 40-75 years, and patients with an estimated 10-year ASCVD risk greater than 20%.1

### Reference:

1. American College of Cardiology. 2019 ACC/AHA Guideline on the Primary Prevention of Cardiovascular Disease. https://www.acc.org/latest-in-cardiology/ten-points-toremember/2019/03/07/16/00/2019-acc-aha-guidelineon-primary-prevention-gl-prevention



Table Treatment Goals

Risk Category	Treatment Goal		
	Non-HDL-C	LDL-C	Аро В*
Low	<130 mg/dL	<100 mg/dL	<90 mg/dL
Moderate	<130 mg/dL	<100 mg/dL	<90 mg/dL
High	<130 mg/dL	<100 mg/dL	<90 mg/dL
Very High	<100 mg/dL	<70 mg/dL	<80 mg/dL

"Apo B is a secondary, optional target of treatment.

Abbreviations: Apo, apolipoprotein; LDL-C, LDL cholasterol; non-HDL-C, non-HDL cholesteral

Source: Adapted from: Jacobson T, et al. J Clin Ligidal, 2014;8:473-488.

In terms of treatment, the guidelines emphasize the use of statins as the primary medication to reduce LDL cholesterol levels. Statins have been proven to be effective in reducing cardiovascular events in various patient populations. Additionally, the guidelines highlight the importance of lifestyle modifications, such as a heart-healthy diet, regular physical activity, smoking cessation, and weight management, as crucial components of cholesterol management.

# **Recent Updates and Controversies**

Guidelines are constantly evolving as new evidence emerges. Recent updates to the ACC's cholesterol guidelines include a focus on non-statin therapies for patients who require additional cholesterol-lowering treatments. These may include drugs like ezetimibe or PCSK9 inhibitors, which can be considered for patients who are unable to reach their LDL cholesterol goals despite optimal statin therapy.

Controversies surrounding cholesterol guidelines primarily revolve around the optimal thresholds for treatment and the utilization of newer cholesterol-lowering medications. Critics argue that the guidelines may overestimate an individual's risk, leading to unnecessary treatment or potential side effects. However, the ACC's guidelines continue to be backed by scientific evidence and are continuously reviewed and updated to ensure the best possible outcomes for patients.

The American College of Cardiology's guidelines on cholesterol management serve as a crucial resource for healthcare professionals and patients alike. By emphasizing a comprehensive approach to cardiovascular risk assessment and providing evidence-based recommendations, these guidelines aim to reduce the burden of heart disease in the United States. With ongoing research and advancements in treatment options, the guidelines will continue to evolve, ensuring that patients receive the most effective care and interventions to maintain optimal heart health.



Dr. Aneley Yegezu Hundae, M.D., FACC INVASIVE CARDIOLOGY AND ADVANCED HEART **FAILURE MANAGEMENT** 

Dr. Hundae received his Premedical and Doctor of Medicine Degree from Jimma University School of Medicine. He completed his Internal medicine Residency at Mercer University School of Medicine, His Heart Failure/Heart Transplant fellowship at the University of Miami Cardiovascular Fellowship Program, Cardiovascular fellowship at Baylor University Medical Center.

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# THE POWER OF UNDERSTANDING YOURSELF AND OTHERS

By Dr. Thomas Hofmann, PhD, LCSW, LMFT

hy are people the way they are? How does understanding people help you personally and professionally?

Having a deeper understanding about yourself – your behavior patterns and thoughts – gives you the ability to better understand others. Ultimately, it means being more self-aware. Reaching a higher level of self-awareness is a journey you can take while also training for a meaningful career.

Our bachelor's degree in applied psychology accomplishes that. Each class is designed to help you grow personally, which in turn helps you grow professionally. You'll gain a dynamic skill set that can be applied in a variety of career paths. These paths include child and family services, human resources, sales, case management, community agencies and as counselor aides in hospitals. The people you work, depending on your chosen path, can range from children and adolescents to adults, the elderly, and veterans.

In addition to understanding what motivates people and influences their behaviors, you'll learn the scientific methodology behind psychology, along with gaining stronger oral, written, and critical thinking skills. The degree is online, but you'll participate in live-chat discussions and other shared experiences in a virtual environment designed to encourage and challenge your thinking.

Each class you take is an immersion into the subject, and you'll learn from practicing experts in the field. Some of the classes include general, experimental and educational psychology, organizational psychology, cognitive and social psychology, plus the principles of analytic techniques and the psychology of conflict management.

As you near graduation from this program, your interest in helping others may mean the desire to become a clinical mental health counselor. Our master's in clinical mental health counseling will take all that you've learned at the bachelor's level to a whole new level of expertise. This program is accredited by the Council for Accreditation of Counseling



and Related Educational Programs (CACREP). This will help you prepare for the licensing board exam to become a mental health counselor.

This master's program offers the benefit of learning online, and is enhanced further with an internship and on-campus residencies. Some of the classes you'll take include counseling in community settings, social and cultural foundations of counseling practice, group theories and practice, human growth and development, and legal, ethical and professional standards of counseling practice.

As you prepare to graduate with your master's degree, you'll also have your professional career plan completed.

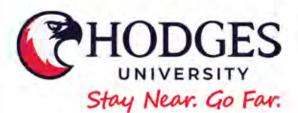
As we know, the need for mental health counselors continue to rise. According to o'net, the demand will grow 11 percent by the year 2031. Nationally, that's over 45,000 jobs!

Ultimately, both of these degrees can offer you a better understanding of yourself. This knowledge can then take you on a career path of your choice.

To learn more, visit Hodges.edu.

Dr. Thomas Hofmann is the Clinical Mental Health Counseling master's degree program director at Hodges University. He is a Florida Approved Supervisor for Mental Health, Family Therapy, and Social Work Registered interns and a licensed social work and marriage and family therapist.





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# Treating Skin Cancer on the Face Requires Aggressive Removal, Along with a Delicate, Aesthetic Eye

kin cancer is a growing concern. Every hour a person dies of melanoma, and this year alone, over 76,000 new cases of melanoma will be diagnosed. On average skin cancer screenings take about 10 minutes, which could potentially save your life.

Skin cancers often occur on the face, around the eyes, ears, lips and on the nose. When dealing with removing cancerous tissue on the face, patients will require Mohs surgery. While removing the margins of the cancer fully is critical, making the incisions and closures as aesthetically pleasing is also a primary goal.

Mohs micrographic surgery is a safe and effective treatment for skin cancer. During Mohs surgery, cancerous tissue is removed in small sections. While the patient waits, a pathologist examines each tissue specimen for malignant cells. If malignant cells are found, more tissue is removed until the cancer is eradicated. This comprehensive microscopic examination helps to target only cancerous tissue, significantly reducing damage to healthy surrounding tissue. Developed by Frederic E. Mohs, M.D., in the 1930s, Mohs surgery excises not only the visible tumor, but any "roots" extending beneath the surface of the skin. Five-year cure rates of up to 99 percent for first-time cancers and 95 percent for recurring cancers have been documented.

Mohs surgery is primarily used to treat basal and squamous cell carcinomas, the two most common types of skin cancer, although it can be used for melanoma and other types of cancer. Mohs surgery is often recommended for recurring cancers, as well as those in difficult-to-treat areas, such as the nose, eyelids, lips, hairline, hands, feet and genitals, in which preserving as much tissue as possible is extremely important.

#### The Mohs Surgery Procedure

Mohs surgery is performed as an outpatient procedure in a physician's office. It may be performed by a team of highly trained specialists, each member of which specializes in a different part of the surgery, or by one experienced surgeon capable of performing the entire procedure. During Mohs surgery, the treatment area is numbed with a local anesthetic.



Small layers of skin are removed, and each layer is examined microscopically to see if it contains malignant cells. Excision continues until the cancer is completely removed. Most Mohs procedures can be performed in three or fewer stages and take approximately 4 hours.

At Luminary Dermatology, we have three fellowship trained Mohs surgeons, Dr. Cary Dunn, Dr. Shauntell Solomon, and Dr. Harib Ezaldein, and have recently added a highly respected board-certified plastic surgeon, Dr. Michael Van Vliet, who is doing Mohs closures to close the loop on the full spectrum of services for our patients. Patients no longer need to be referred out to a plastic surgeon for closure of their excisions.

### **Recovery from Mohs Surgery**

After Mohs surgery, patients experience mild discomfort, bleeding, bruising, and swelling. Pain medication is prescribed if needed, although most patients require only over-the-counter medication.

Mohs surgery leaves scars, although they are often smaller than those from other excision procedures. Reconstructive procedures, including skin flaps and skin grafts, can reduce the prominence of, or even eliminate, scars; they can be performed at the same time as the Mohs surgery or at a later date. If possible, surgical techniques, including placing stitches in the skin's natural creases or out-of-sight areas, are used to make scarring less visible.

Luminary Dermatology is located in Sarasota, FL, where the sun is hot, beaches are bustling, and someone always forgets to wear their sunscreen. The multi-specialty group was founded by board-certified dermatologist and fellowship-trained Mohs micrographic surgeon Dr. Cary L. Dunn. We now provide patient-centered medical care to Sarasota, Bradenton, Venice, Homestead and Kendall areas of Miami. FL., and many other Southwest Florida communities as well as Midwest City, Oklahoma.

Our mission is to provide compassionate care to the people of our community and beyond, with excellence in service, quality, and accessibility.

To schedule your appointment please call 941-926-6553 or visit luminarydermatology.com.



Cary L. Dunn, M.D.



Janet Delaney, ARNP-BC



Cynthia Spencer, APRN-BC



Michael Van Vliet, M.D., FACS



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# NEW TECHNOLOGY TO RESOLVE SYMPTOMS FROM NEUROPATHY AND CHRONIC JOINT PAIN



# **TESTIMONIALS**

I have been a patient of Dr. Larry Johnson for over ten years for different low back and various joint pains. However, last year I started to suffer with pain and tingling in both of my legs and feet that would keep me from sleeping. Dr. Johnson explained to me that I was dealing with neuropathy and he could help to resolve my pain with a laser light therapy machine that he has used many times before for my condition. After six treatments, my pain was starting to go away and was finally gone after a few more treatments. I have always relied on Dr. Johnson to help me for any problems I have encountered over the years and I have always recommended him to my family and friends. Shirley W.

I travel a lot as a Realtor in Lee County, and also very active with physical activities. On a couple of occasions in the past, my feet would burn and hurt with walking and riding my bike. I was referred to Dr. Johnson by my father who had been a patient for several years. He used a light therapy treatment that eliminated my pain. I have always been very happy with the care I have received and the staff are very knowledgeable, caring and friendly. I would recommend his clinic to anyone suffering with any type of pain. Cathy S.

When I first came to DR. Larry Johnson's office everyone was very friendly and made me feel so welcomed. I could hardly walk, but after a couple weeks of vitamin injection and Sanexas treatments I improved dramatically. I now recommend him to everyone. Ken F.

I came to Dr. Larry Johnson at the end of November 2022 with severe pain on my right knee. I was not able to walk without a walker because the pain was so bad. After receiving Sanexas treatments, along with Chiropractic care, I was able to walk without any assistance in about 3 weeks. I am still receiving weekly treatments and I have seen big improvements. I am very pleased with the results and I continue to feel better every day. Thank you to Dr Larry and his amazing staff. Tomi B.

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#### WHAT IT TREATS

The SANEXAS Electric Cell Signaling Treatment treats (but is not limited to) the following:

- · Neuropathy/radiculopathy pain
- · Improve nerve health and regeneration
- · Neuromuscular reeducation and training
- Creates relief of chronic intractable pain (osteoarthritis)
- · Muscle spasms relaxation
- · Increased local blood circulation
- Prevents the retardation of disuse atrophy
- Acute/chronic pain conditions
- · Post-traumatic pain syndromes
- Aids in treatment in post-surgical pain conditions
- Improved tissue/organ function

# **HOW MANY TREATMENTS**

The average person will start noticing changes after 10-18 treatments. Some may notice changes earlier than later depending on the person and area receiving treatment, but it is necessary to receive a series (multiple) treatments for the SANEXAS treatment to be effective.

# TESTIMONIAL

A few years ago, I began to lose the feeling in my feet. This progressed into a pain so severe it interfered with my ability to walk. When my wife told Dr. Johnson about my condition, he called me into his office and said, "David, you know I can treat that." Actually, I didn't know he treated neuropathy, and besides that, I was cynical. My understanding was that the success rate for reversing neuropathy is abysmal. The reality was I didn't think he... or anyone else, for that matter, could do anything about it. But Dr. Johnson and I have been friends for twenty-eight years, so telling him I didn't think he could ease my pain was ot an option.

Well, surprise for me the old cynic. From the very first treatment, the result was so dramatic that because of my disbelief, I did not say a word to anyone. Not a comment until I knew this treatment was the real deal. I started to experience relief, and by the end of the third week, I was asymptomatic.

Your milage may vary, but that's how my body responded. Now, I am able once again to walk my dog two to five miles a day, five days a week. Great staff. Thanks for all your care. David R.

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# Things to Remember..... When Traveling this Summer.....

By Dr. Noël Crosby, Au.D.

he summer travel season is almost upon us. Whether for business or vacation, traveling can be as stressful as it is enjoyable, and for the more than 20 million people in the U.S. with hearing loss, travel can be especially difficult. If you are a hearing aid user there are a few things you should consider when creating your travel plans. The following list includes those items that you should bring with you when vacationing or traveling.

- Basic maintenance tools such as wax picks and brushes.
- A carrying case to protect your hearing aids anytime they're out of your ears.
- A dehumidifier to protect your hearing aids from moisture – especially if you're travelling to a humid climate.
- A stock of extra parts such as tubing and domes.
   Extra batteries.
- A copy of your audiogram, along with your audiologist's phone number.
- Accessories such as portable phone amplifiers, vibrating alarm clocks and devices to help with hearing the TV.
- A spare hearing aid if you have one but make sure it's working.
- To prevent loss, avoid storing your hearing aid equipment in checked luggage.

There are many travel arrangements that can be made that will provide less stress when you are travelling. Some of these are:

Try to make all travel arrangements in advance. Once your transportation arrangements have been made, request a written confirmation to ensure that all information is correct. Always inform whomever you are making the arrangements with that you are hearing-impaired.

If at all possible, meet with a travel agent to allow the opportunity for lip reading, or if necessary, written exchange to help confirm travel plans. Agents can then contact airlines, hotels, and attractions to make necessary reservations and also inform them that you are hearing impaired.



Travel information and reservation services are also available on the internet. Be sure to print copies of important information such as confirmation numbers, reservations, and maps. Keep copies of your travel arrangements, including confirmation numbers, easily available.

Try to arrive early at the airport, bus terminal, or train station. Inform the agent at the boarding gate that you are hearing-impaired and need to be notified in person when it's time to board.

Check the display board repeatedly while waiting in the terminal to confirm your flight destination and departure time as there may be delays or the departure gate may change. Confirm the flight number and destination before boarding.

Inform the senior flight attendant that you are hearing-impaired and request that any in-flight announcements be communicated to you in person. Requesting an aisle seats can allow easier communication with the flight staff.

Do not be afraid to ask for help from fellow travelers. Most are more than willing to offer assistance.

It is important to know that in most cases, hearing aids worn on or in the ears will not set off the alarms during security screening at airports. Keeping the hearing aids on will allow you to communicate with the security officers during screening. It is ok to ask a security officer if it would be advisable to take your hearing aids off; however, body worn hearing aids and personal listening devices may contain enough metal parts that they should be packed in your carryon bag. If the security scanner is operating correctly it will not harm your hearing aids or other related devices.

Many major airlines and transportation companies have Telecommunication Devices for the Deaf (TDD) services to assist passengers. Hand-held personal communication devices provide the ability to send and receive text messages without the need to access public resources.

Once you arrive at your hotel, notify hotel personnel of your hearing impairment and request that you be informed of any emergency. Become familiar with the "A.D.A. Requirements for Services and Aids for People Who Have Hearing impairments or Deafness". You should check in advance to find out if your hotel is in compliance with A.D.A. In advance of your trip, contact your local organization for the hearing impaired for the address of a possible counterpart agency at your travel destination. This agency will likely have a TTY and interpretation service, if one is needed.

It is important to remember, that in many cases, hearing impairment is invisible to those around you; this means that the people around you are unaware of your hearing impairment. I can't stress enough the importance, at every step of your travels, to let key personnel know about your hearing impairment so that proper arrangements can be made that will ensure your enjoyment and safety while traveling or vacationing.

.............

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By Physicians Rehabilitation

ave you seen doctor after doctor for your pain with little to no relief? Do they spend three minutes listening to your symptoms and then write you an RX for daily pain meds and only move on to the next patient? Then you look at that script and wonder, what are the side effects? Is this addictive? Is this even safe?

For the past 10 years at Physicians Rehabilitation, we have made it our mission to get people out of pain and back into an active lifestyle. Our goal is for you to be pain-free without any surgery or prescription medications. We do this by finding the root cause of Physician's Rehabilitation focuses on your pain. reducing inflammation with injections, regenerating worn tissues with regenerative medicine, and training with physical therapists on proper form and function. These three key components all increase activity levels and decrease pain levels.

New offerings in the specialty of "Interventional Pain Management" combine injections to remove pain with therapy to increase motion and movement without drugs or prescriptions. Physician's Rehabilitation offers procedures for pain management in our office. Some of our most successful treatments are discussed below.

## Medial Branch Block for the Facet Joints

Medial branch nerves are very small nerve branches that carry pain messages from facet joints to the brain where they are experienced. The facet joints are small joints in the back of the spine that form connections between each vertebra. If these nerves are blocked or numbed, they will not be able to transfer the painful sensation from the joints to the brain. Therefore, this procedure is completed to see if your back pain is caused by the facet joints. The effect will last several hours or more. This is strictly a diagnostic block to test if the facet joints are the source of some of your pain.

#### **Facet Joints**

The facet joints are small joints in the back of the spine that form connections between each vertebra. If these joints are blocked or numbed, they will not be able to transfer the painful sensation to the brain. Therefore, this procedure is completed to see if your back pain is caused by the facet joints.



### Sacroiliac Joint dysfunction

Sacrolliac joint dysfunction is an injury or inflammation of the sacroiliac (SI) joint which causes pain in the lower back region. The SI joint is formed by the connection of the sacrum with the ilium. This injection is used to both diagnose and treat your low back pain caused by inflammation of the joint. The effect might last a few hours to a few weeks or much longer. Pain relief in the first couple of hours after the injection is the most important as this tells us our diagnosis of SI joint-mediated pain is correct. If the symptoms do return, we will discuss other options available for extended pain relief.



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## **Epidural steroid injection**

An epidural injection is an injection of steroids into the epidural space. The epidural space is located in the spine between the vertebrae and the dural sac, which surrounds the spinal cord. Theoretically, the steroid reduces the inflammation of the nerve roots as they exit the spine, which can help alleviate pain in the neck, back, and/or limbs.

#### Radiofrequency Ablation (RFA)

Radiofrequency Ablation is an injection that uses a specialized machine that generates a radiofrequency current. The current is then passed through a special needle placed next to the nerve (medial branch) which carries pain from the facet joints to the spinal cord. The current generates heat or other physical forces which interrupt the transmission of pain. Radiofrequency ablation is performed after the patient has benefitted from diagnostic medial branch nerve blocks. The effect will hopefully last for an extended period (one year on average). You will likely experience some increase in your neck or back pain over the next several days and then your pain should improve.

### 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. Our clinical care providers can employ a wide variety of physical modalities by utilizing state-of-the-art tools.

Our goal is to identify the source of your pain, promote healing and eliminate your pain. We begin by giving you a thorough examination and quickly address outward symptoms of pain, such as inflammation while gathering your medical history and evaluating your symptoms to get to the root of your pain and dysfunction. Our therapists have found that these advanced technologies, along with a specialized physical therapy program specific to the individual condition, make for extremely successful pain relief treatments. If you or a loved one is suffering from pain, please call our office at (855) 276-5989, or visit us online at www.PhysiciansRehabilitation.com for more information.

# **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.

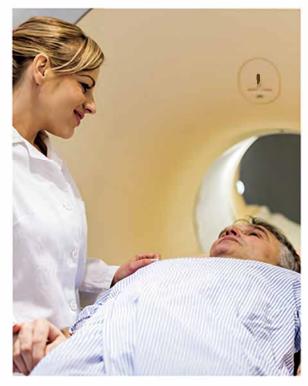
# What is the prostate – and why does it need to be examined?

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.

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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.

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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.



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# CAN I AVOID ESTATE TAX WITH AN LLC?

By James W. Mallonee

get calls from time to time about individuals who want to avoid estate taxes and how to do it. The short answer is if you do not have greater than a \$10 million dollar estate (a single person) or \$20 million dollar estate (a married person) you do not need to be concerned with estate taxes in Florida or with the Federal Government. If you do have greater than the amounts stated then you might be open to learning about IRS Section 2036 tax planning under Florida law.

Generally speaking, upon death, all of a person's assets are grouped together to form the decedent's gross estate. It is the gross estate that needs to be reduced to avoid Federal estate taxes. The federal government looks at the estate to see who retains power over such assets as to its control or beneficial enjoyment. For example, if a house on the beach is used by both the decedent and children prior to his or her death, then the control of the residence is suspect and may be included in the decedent's estate. The reason being that the decedent maintained beneficial enjoyment.

How is the beneficial ownership of the beach property (previously mentioned) removed from the decedent's estate? In many cases it is by transferring the ownership to an LLC where the decedent had no control over the Company except for decisions involving the maintenance of the property. The decedent cannot have the LLC pay for his or her living expenses while alive, nor can any rental amounts be used to pay the decedent's spouse or



decedent while alive as income. The IRS uses the term "Substantial Present Economic Benefit" which is translated to mean benefiting from the property. Once this test is overcome, then placing the LLC into a trust is the next step.

The decedent must also not have any right to designate interests. For example, if the LLC owner designates that the beach house is to be placed into a trust for the benefit of the children then this is a form of designation interests. Which translates into the decedent designating the individuals who will benefit from the use of the property while in the trust. In addition, the person transferring the property into an LLC should not have any control over who will benefit from any of the rental or sale proceeds earned by the property. In essence, the decedent (while alive) could not have any control or benefit over the LLC.

Generally speaking, if a taxpayer desires to protect LLC assets placed into a trust from IRS scrutiny, the following suggestions are recommended:

- I. A well prepared and coordinated LLC operating agreement showing the trust grantor did not retain any control over the LLC or trust instrument.
- 2. A well-documented control sheet showing trust administration along the lines of the trust agreement and the operating agreement of the LLC.
- 3. Clearly defined duties and documentation of those duties being carried out.
- 4. Limitations to the person who transferred the property to the LLC or trust from being able to determine any allocation of income or property to the members of the LLC or trust beneficiaries.
- 5. Avoidance of any conflicts of interest among the beneficiaries, trustees or members of the LLC.

In short, to take advantage of moving an estate into an LLC and the LLC placed into a trust to avoid scrutiny by the IRS takes careful planning and review on an annual basis. These types of estates require continuous assurance that the decedent had no real interest in the plan once it is set up. In essence, seek out the attorney of your choice and confer with him or her on what it is that you want to accomplish prior to death to avoid IRS scrutiny.

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





# HORMONE OPTIMIZATION

# The Good and The Bad

ormone optimization is a topic that has gained a lot of attention in recent years, particularly among individuals who are interested in achieving an increase in their quality of life, energy, overall health and well-being. Hormones are chemical messengers in the body that regulate most bodily functions, including growth and development, metabolism, reproduction and many more. As we age, our hormone levels naturally decline, this leads to a variety of health issues. There is a debate about whether hormone optimization is good for you. This is particularly true when it comes to the use of synthetic versus bio-identical hormones.

Synthetic hormones are created in a laboratory by altering a natural hormone or deriving it from a non-human source. These are not identical to the hormones produced by the human body. They are commonly used in hormone replacement therapy (HRT) to treat symptoms of menopause or andropause. Synthetic hormones are the most studied and have the side effects (heart disease, strokes, and certain cancers) that were discovered in the Womans Health Initiative.

Bio-identical hormones, on the other hand, are derived from natural sources, such as soy or yam plants, and are chemically identical to the hormones produced by the human body. This is what we use when we talk about bioidentical hormone replacement therapy (BHRT), which is a natural approach to hormone optimization.

There is a great deal of misinformation and confusion surrounding hormone optimization, particularly when it comes to the use of synthetic versus bio-identical hormones. Basically synthetic hormones created by the Pharmaceutical companies have alterations to the natural (Bio-Identical) hormones. These can cause the side effects that have given hormones an undeserved bad name.

On the other hand, bio-identical hormones are a safer and more natural alternative to synthetic hormones. These are the same your body has been making and using since you were born. Bio-identical hormones are derived from natural sources and are chemically identical to the hormones produced by the human body, your body knows what to do with them.



Another common misconception is that hormone optimization is only necessary for women going through menopause. While it is true that women experience a significant decline in hormone levels during menopause or after total hysterectomy, men also experience a slow decline in testosterone levels as they age, a condition known as andropause. This can lead to a variety of symptoms, including decreased energy and libido, loss of muscle mass, increased body fat, fatigue, and deminerilization of bones (Osteoporosis).

Hormone optimization is beneficial for both men and women, regardless of age, provided that it is done under the guidance of a medically trained hormone healthcare professional and tailored to the individual's specific needs.

In conclusion, hormone optimization is beneficial for individuals looking to improve their overall health and well-being. Bio-identical hormone optimization is the only rational evidence based therapy that gives the most benefit with the lowest risk. It is important to work with a qualified (Hormone Trained) healthcare professional who can help guide you through the process and monitor your hormone levels and symptoms.

Misinformation and confusion surrounding hormone optimization can be addressed by educating individuals about the pros and cons of different hormone therapies, as well as the importance of individualized treatment plans. With the right guidance and support, hormone optimization is a safe and effective way to improve your health and quality of life.

The Miley Clinic is known for its successful approach to healing from within. We curated a unique approach to diagnosing and treating symptoms. Call us today to learn more about our bio-identical hormone replacement therapy, nutrtion and life style services in Sarasota, FI.



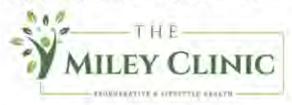
### STEPHEN MILEY, MD

Dr. Miley is a native Floridian. He received his BS in Chemistry with Honors from The University of Florida, and his Doctorate of Medicine from The University of South Florida.

He has practiced as a Board-Certified Emergency Physician for the past 42 years. He has served as the Director of the Emergency Department for several large hospitals.

Dr. Miley now sees a changing trend in medicine. Our traditional "sick care model" has many wonderful treatments if you are ill. However, the new health care model uses the best science of traditional evidence based medicine, in combination with functional medicine, to solve diseases at the root cause, rather than just treating symptoms with another prescription.

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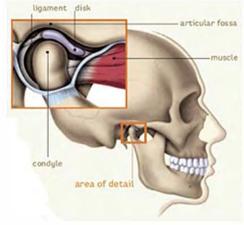


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# The Daily "Grind"

By Dr. Joseph Farag

oo much stress can contribute to a wide range of health problems. From a dental perspective, stress often plays a role in the development of Temporomandibular Disorders, or TMD. Grinding of teeth which causes headaches, jaw soreness and pain, among many other symptoms can be exacerbated during times of high stress. The temporomandibular joint (TMJ) is the hinge joint that connects the lower jaw to the temporal bone of the skull, which is immediately in front of the ear on the side of your head. The cause of TMD is not clear, but dentists believe that symptoms arise from problems with the muscles of the jaw. Severe cases can be caused by injury to the jaw. In more common cases, grinding or clenching of the teeth puts a lot of pressure on the TMJ and people feel tooth sensitivity, caraches, and neck tension and pain.





# **Treatment Options**

If stress is causing you to grind your teeth, ask your doctor or dentist about options to reduce your stress. Also, avoid foods and drinks that contain caffeine, alcohol, and do not chew gum. Relax your jaw muscles at night by holding a warm washcloth against your cheek. When these



hours: Mon-Thurs 8am-5pm, Fri by appointment

options do not relieve your pain, your dentist can offer a variety of treatment modalities for your specific case. An occlusal guard, often called a nightguard, can be fabricated by your dentist to allow your muscles to rest and protect your teeth from further wear.

# Patients who present with TMD should also have an occlusal analysis

This helps determine if there are any bite discrepancies that may be corrected with a simple procedure to reshape how the teeth come together when you bite. Medications such as over the counter ibuprofen are helpful because they reduce inflammation to aid in the healing process. Occasionally, a mild muscle relaxant may be prescribed for a few days or weeks to help relieve pain. Surgery for TMD should only be considered after all other treatment options have been tried and you are still experiencing severe, persistent pain.

# **Relaxation Techniques May Help Alleviate TMJ Symptoms**

Simply becoming more aware of tension-related habits — clenching your jaw or grinding your teeth — will help you reduce their frequency. Because stress can contribute to TMJ disorders, relaxation techniques like yoga, meditation and deep breathing may also help alleviate TMJ symptoms.

This season, survive the holiday grind with a little planning, prioritizing and perhaps a trip to your dentist. To learn more about TMD or to schedule an appointment, please call Dr. Joseph Farag at Port Charlotte Dentalcare, 941-764-9555.



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# Can Omega-3 Fish Oil Prevent Muscle Wasting?

By Anne-Marie Chalmers, MD

uscle wasting. It's a nasty phenomenon that scares many of us over the age of 40 – especially when we stand naked in front of the mirror!

Known more formally as sarcopenia, muscle wasting is a major issue. As many as 25-45% of older adults in the USA suffer from problematic loss of muscle mass and strength. Besides making it harder to carry out everyday physical tasks, sarcopenia is associated with a long list of negative health outcomes, like fractures, hospitalization and early death.

The good news is that there are ways to fight muscle loss. In addition to traditional measures — like regular exercise, getting enough protein, and maintaining healthy vitamin D levels — research indicates that omega-3 fatty acids may also be important for preserving our muscles.

#### Does Omega-3 Affect Muscle Growth?

A number of studies suggest that omega-3s play a role in muscle growth.

A 2020 study from South Korea found that older women with higher omega-3 levels had a lower risk of sarcopenic obesity.

Another 2020 meta-analysis of 10 randomized controlled trials found that taking more than 2000 mg of omega-3s daily was associated with a 0.73 pound increase in muscle mass in elderly individuals. While such improvements may seem minor, keep in mind that most people after age 50 lose 2% of their muscle mass on a yearly basis. That's why even small improvements in muscle mass can be meaningful.

Notably, these findings reiterate the results from previous trials. For example, one 2015 study gave healthy older adults 3360 mg of omega-3s from eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) daily for 6 months. When compared to the control group, the adults who received the omega-3 supplements had increased thigh muscle volume, handgrip strength, and one-repetition muscle strength.

The researchers noted that, in functional terms, the omega-3s had prevented 2-3 years worth of normal age-associated losses in muscle mass and function.

# Why Does Fish Oil Help Build Muscle?

While researchers are still working to understand exactly why omega-3s influence muscle mass, they have some educated ideas:



•Omega-3s fight "inflammaging." Inflammaging refers to age-related chronic low-grade inflammation. With inflammaging, the body produces higher levels of pro-inflammatory cytokines that affect muscle anabolism (ie. muscle building) and catabolism (ie. muscle breakdown). Since omega-3s have been shown to reduce inflammatory cytokines, they may help resolve destructive inflammation and make the body more effective at building muscle.

•Omega-3s protect against oxidative stress. Oxidative stress — which is generally caused by poor eating habits, inactivity, smoking, pollution, etc. — contributes to sarcopenia by decreasing muscle protein synthesis. Over time, prolonged oxidative stress can reduce muscle mass. Promisingly, omega-3s have been shown to reduce certain oxidative stress markers.

•Omega-3s may address anabolic resistance. Anabolic resistance refers to the body's reduced ability to build muscle, even when getting enough exercise, amino acids, protein, etc. Anabolic resistance increases with age, and is considered one of the biggest challenges in fighting sarcopenia. Some researchers believe that adding omega-3s to the mix of interventions could be key to achieving better exercise results in older individuals.

### How Much Omega-3 Do You Need?

One of the tricky things about the current omega-3 literature on muscle building is that trials use a variety of supplement sources, exercise protocols, and other variables. Therefore, the findings are not conclusive.

With that said, several reviews have identified that getting at least 3000 mg of EPA/DHA omega-3s daily may be necessary to achieve muscle mass results in older adults. Since most fish oil capsules contain just 10% of that amount (approximately 300 mg of EPA/DHA per gel cap), this dosage can be hard to replicate through regular omega-3 supplements.

For easier-to-swallow alternatives, liquid products like Omega Cure® Extra Strength and Omega Restore provide 3000 mg of EPA/DHA in pre-measured vials. That's roughly the same amount of omega-3s found in a 6 oz fillet of wild-caught salmon.

This article was abbreviated from a longer version published on omega3innovations.com. For the full text and references, visit: https://omega3innovations.com/blog/can-omega-3-fish-oil-help-prevent-muscle-wasting/



#### About Anne-Marie Chalmers, MD

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





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# KEEP YOUR PET SAFE FROM THE CANE TOAD

species of warty, toxic toads invades Florida backyards every year as it multiplies across the southern part of the state. When you see heavy rains, be on the lookout for the Cane Toad. The cane toad, also known as the bufo toad, is a poisonous amphibian that, when provoked, can produce a milky white toxin on its back, a substance that is particularly dangerous to house pets.

The toxin could leave a dog or cat in serious distress or dead in as little as 15 minutes, according to the Florida Fish and Wildlife Commission. The creatures breed after periods of rainy weather, according to Toad Busters, a south Florida company specializing in the removal of the dangerous toads. The rainy season lasts through the summer.

The state's wildlife commission encourages homeowners to kill Cane Toads whenever possible. The white toxin is visible near the sacs on the left side of the toad. What do they look like? Honestly, cane toads are gross. They're tan to reddish-brown, dark brown or gray, and their backs are marked with dark spots, according to the University of Florida. They have warty skin. Cane toads have large, triangular parotoid glands on their shoulders that secrete a milky toxin. (Native toads' parotoid glands are oval.) Unlike native southern toads, cane toads do not have ridges or "crests" on top of the head.

Even cane toad tadpoles are toxic. You can spot a cane toad by its size and its triangular glands. Cane toads usually are 4-6 inches long, sometimes growing to 91/2 inches. With very few exceptions, any toad in Florida that is larger than 4 inches is not native and almost certainly is an invasive cane toad,



according to the University of Florida. A cane toad's favorite place is the ground. They don't like to climb.

Cane toads are native to South and Central America and were introduced into Palm Beach County to control pests in sugar cane fields, according to the University of Florida. They can be found in central and south Florida and in an isolated population along the Florida Panhandle. They live in urbanized habitats and agricultural lands but also in some natural areas, including floodplain and mangrove swamps. The cane toad (Bufo marinus) can hurt or kill pets.

Cane toads prey on anything they can get into their mouths, according to the University of Florida, but they normally feed on beetles, centipedes, crabs, millipedes, roaches, scorpions, spiders and other invertebrates. They also have been known to eat frogs, snakes, small reptiles, small birds and small mammals.

If a pet bites, licks or even sniffs a cane toad, it could become sick and, if not treated, it could die. Symptoms of poisoning in pets include excessive drooling and extremely red gums, headshaking, crying, loss of coordination and sometimes convulsions. If a dog bites or encounters a cane toad, use a damp cloth or towel and wipe the inside of the dog's mouth to make sure no toxins were swallowed. Do not flush the dog's mouth with a hose. It could send toxins down the animal's throat.

Dogs should be taken to a veterinarian as soon as possible to treat symptoms such as seizures, heart problems such as arrhythmia and body temperatures that skyrocket, then plunge. Dog droppings should be picked up; cane toads are attracted to proteins in the droppings.

There is a humane way to get rid of cane toads. The University of Florida recommends euthanizing them by rubbing or spraying 20% benzocaine toothache gel or sunburn spray (not 5% lidocaine) on the toad. In a few minutes, it will become unconscious. Put the toad in a sealed plastic bag in the freezer for 24-48 hours to ensure it is humanely euthanized.

The best trapping method is a net and a deep bucket with steep sides, according to the University of Florida. Make sure to put a board or lid on top of the bucket. The Florida wildlife commission recommends wearing latex, rubber, or nitrile gloves to safely handle the toads.





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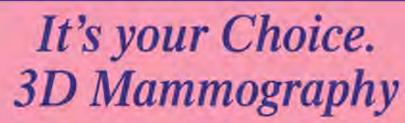
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# ADVANCED URINARY INCONTINENCE PROCEDURES

pproximately 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 procures 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 to 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.

Source: https://bulkamid.com/us/

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 fellow-ship-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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# When You Are At Your Wits End

By Pastor Timothy Neptune

ave you ever been at your wits' end? Have you ever been so confused that you didn't really know which way was up? Have you ever had the feeling, "I know I need to do something...but I don't know what 'something' to do."

The Bible tells the story of a group of sailors who went out to sea and encountered a huge storm that almost killed them:

<sup>23</sup>Others went out on the sea in ships; they were merchants on the mighty waters. <sup>24</sup>They saw the works of the LORD, his wonderful deeds in the deep. <sup>25</sup>For he spoke and stirred up a tempest that lifted high the waves. <sup>26</sup>They mounted up to the heavens and went down to the depths; in their peril their courage melted away. <sup>27</sup>They reeled and staggered like drunken men; they were <u>at their wits' end.</u> <sup>28</sup>Then they cried out to the LORD in their trouble, and he brought them out of their distress. <sup>29</sup>He stilled the storm to a whisper; the waves of the sea were hushed. <sup>30</sup>They were glad when it grew calm, and he guided them to their desired haven. <sup>31</sup>Let them give thanks to the LORD for his unfailing love and his wonderful deeds for men. Psalm 107:23-31

Can you relate to this group of sailors? Maybe the circumstances in your life have caused your courage to melt away. Perhaps you are going through a storm of your own. You may find yourself at your wits' end without any clear direction as to what to do next. If so, follow the example of the sailors in the Bible.

There first thing they did was cry out to the LORD in their trouble. Don't underestimate the power of prayer. An old gospel song says, "when God is all you have, you'll find He's all you need." God responded to the sailor's prayer by bringing them out of their distress. In fact, it says he stilled the storm to a whisper and the waves of the sea were hushed. God can do that in your life and in your situation as well. Call out to him. His timing is not always as quick as we may like but He knows what is best for each of us.

When the storm was over, the text says that God guided the sailors to their desired haven. They found their place of rest and peace. Storms don't last forever... and neither will yours. Keep your faith in God. Cry out to Him in your pain. Trust that He knows what's best and keep praying and seeking your desired haven... it may be just around the corner.

And then, don't forget to thank God when He does bring you through the storm. The story concludes by saying, "Let them give thanks to the LORD for his unfailing love and his wonderful deeds for men."

Storms, crises, pain and problems are an unfortunate reality of life. We grow through the pain and learn valuable lessons during these times. Don't give up, give in, or quit. When you find yourself at your wits' end...hang on, cry out to God, and look for His deliverance.



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.



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