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September 2023

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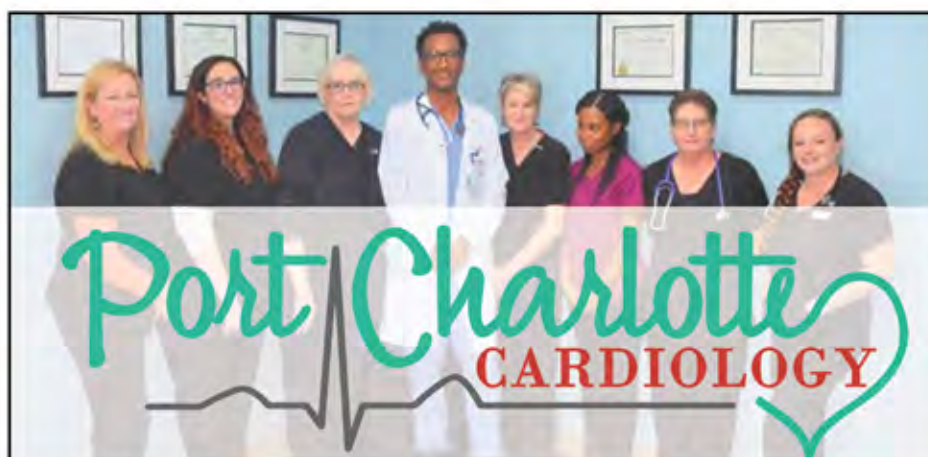
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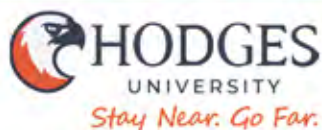
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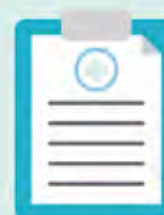
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# contents SEPTEMBER 2023

- 6 Avoiding Nail Fungus
- 7 Complications of Vein Disease
- 8 Finding the Best Orthopedic Specialist for Your Child's Injury is Critical
- 9 Memory Matters
- 10 Career of a Lifetime
- 11 Understanding Peripheral Vascular Disease: Causes, Symptoms, and Treatment
- 12 Managing Arthritis Pain and Discomfort: Why Mitochondrial Health Matters
- 13 What You Need to Know About E-Cigarettes and Vaping as Smoking Cessation Tools
- 14 Leukemia & Advanced Cancer Treatments: A Comprehensive Guide to Different Medications
- 15 What is Laser Periodontal Therapy?
- 16 Weight Loss Makes Your Bones and Joints Happy
- 17 Reclaiming Lives: National Recovery Month Shines a Light on Substance Use Rehabilitation
- 18 Managing Excessive Sweating with Botox: A Closer Look at a Surprising Solution
- 19 Navigating the Link Between Cancer Treatments and Hearing Loss
- 20 Early Detection of Prostate Cancer Saves Lives
- 21 Primer on Medicaid Planning for Married Couples
- 22 It's 2023; Do You Know Where Your Money Is?
- 23 Spiritual Wellness: Hope and Optimism

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# AVOIDING NAIL FUNGUS

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

It's September, but Thanksgiving and Christmas are just around the corner. The holidays will provide some good time and food with your coworker, friends, and family. So, when you slide your feet into your new pair of heels, are you going to be mortified to see your toenails are thick and discolored?

Most commonly, these changes are due to an infection of the nail caused by a fungus. Nail fungus can be difficult to treat, therefore the sooner you begin treatment the better chance you have of eradicating the fungus. Once the nail fungus has been present for an extended period of time, it is much more difficult to treat. Nail fungus, also referred to as onychomycosis, is an infection underneath the surface of the nail caused by fungi or yeast. When the fungi take hold, the nail becomes darker, debris can collect under the nail, and white discoloration may appear. Over time, the affected nails become very thick and difficult to trim. The fungus can even spread to adjacent nails.

You may have been exposed to the fungi when walking around damp areas barefoot like swimming pools, locker rooms, and showers. Injury to the nail bed, even pressure from shoes, will make it more susceptible to the fungi. Anyone can be affected but people with chronic diseases, such as diabetes, circulatory problems, or immune-deficiency conditions, are especially prone to developing a fungal nail infection.

Other contributing factors may be a history of athlete's foot and excessive perspiration. Treatment can take months to a year to completely clear the fungus. Your healthcare provider will discuss treatment options with you to determine what the best option is for you. Unfortunately, recurrence is common. For these reasons, prevention is key. Proper hygiene and performing daily foot exams including your toes are the first line of defense. Clean and dry feet can better resist infection by the fungus.

## Tips to help you avoid nail fungus.

- Never go barefoot.
- Wear flip flops or shower shoes in public areas. For example, at public showers at the pool or gym. Walking around a public pool.



- Wash your feet with soap and water daily. Make sure to thoroughly dry your feet after washing, including between your toes. You may even want to wash your feet after the gym or going to a public pool.
- Disinfect your shoes with an Over-The-Counter antifungal sprays or powders.
- Wear moisture wicking and breathable socks. Socks made of synthetic fibers that wick moisture away from your feet are recommended. If your feet perspire, then you should change your socks throughout the day. Don't share shoes or socks with others. Change your socks after exercise. You may also alternate gym shoes to allow the material to dry completely.
- Don't share clippers or foot products with other people. Disinfect instruments use to cut your nails and other pedicure tools.
- Treat athlete's foot if present.
- Avoid tight fitting shoes and use shoes made with breathable material.
- If signs of nail fungus are present, avoid nail polish.
- Keep nails trimmed and clean. Nails should be at the same length as the tip of the toe.

- Wash your shoes, this includes hiking boots to sandals. Shoes that haven't been cleaned are a great place for fungus to thrive.

For more information about preventing or treating nail fungus 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 & Leg Centers in Port Charlotte, FL. She is a Fellow of the American College of Foot & Ankle Surgeons. Call 239-430-3668 or visit [www.NaplesPodiatrist.com](http://www.NaplesPodiatrist.com) to make an appointment. Visit [FootHealthFacts.org](http://FootHealthFacts.org) to learn more about foot and ankle conditions.



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# Complications of Vein Disease

By Dr. Lackey

**M**illions of people have varicose vein problems, yet only one half of 1 percent seek treatment. Vein disease goes undiagnosed and therefore undertreated. Patients tell us that their physicians have reassured them that the leg symptoms they experience are a part of aging and that it is “nothing to worry about.” Ignoring daily leg swelling, pain, cramping, leg heaviness, fatigue, itching, and discoloration can lead to permanent changes. Vein disease is progressive, meaning it will worsen at a rate of 4 percent every year. This article will discuss the other complications that can lead to serious problems including bleeding, swelling, phlebitis, cellulitis, blood clots, and skin ulcers.

## Skin Changes

Chronic venous insufficiency (CVI) can cause skin changes resulting in discoloration of the lower legs, which is known as hyperpigmentation. It appears as a darkening of the skin often with a rusty-orange color. Stasis dermatitis is inflammation of the skin caused by damage to vein close to the skin's surface. This can appear as a red, violet, or brown rash between the ankle and the knee. Stasis dermatitis is a precursor for the development of cellulitis. Cellulitis is an infection of the skin caused by bacteria. Bacteria normally are present on the skin, but when injured, the bacteria can spread and grow beneath the surface which is made much worse by poor blood flow in the legs or feet. Cellulitis is treated with antibiotics.

## Phlebitis

Thrombophlebitis, a blood clot in a superficial vein, is a common complication of varicose veins. This occurs because the dilated vein makes it easier to injure but can often occur without trauma. It presents as a hot, tender, thickened area along the length of the vein. It is very painful and associated

## Stages of Vein Disease



with fever and fatigue. If phlebitis extends far enough up the leg it can cause a clot in the deep veins, which is a risk for pulmonary embolism, which can be fatal.

## Bleeding

Bleeding from large varicosities is typically from a bump or scrape to the area. Many elderly people with thin-walled veins are at increased risk and may be completely unaware of a vein rupture until they see blood running down their legs or feel faint from blood loss. Bleeding can be life-threatening if unrecognized. If caught early, it can be controlled with leg elevation and compression. Repeated bleeding can occur in the same area until proper treatment of vein disease is performed.

## Swelling

Vein disease causes swelling in the ankles and lower legs which appears worse after a day of standing. In advanced disease the swelling can be present all the time. Typically, just above the ankle is where the swelling begins. If left untreated, this can worsen to lymphedema which is more difficult to manage and treat.

## Skin Ulcers

One of the most challenging vein complications is a skin ulcer. This is an open sore resulting from trauma to the skin. Trauma and chronic vein disease results in skin breakdown where the area around the open sore becomes red, swollen, tender, and painful.

These ulcers typically occur on the inner side of the ankle. Patients are often frustrated by these ulcers as they are frequently sent for lifelong wound care with multiple dressing changes for a wound that never seems to heal. Unless the root cause of the ulcer, vein disease, is treated, the ulcers will recur in under 2 years. Vein treatment involving ablation and sclerotherapy can help these chronic ulcers to heal.

## Blood Clots

A study published by the Journal of American Medical Association suggests that the presence of varicose veins may significantly increase the risk of deep vein thrombosis (DVT), which is better known as blood clots. These can be life-threatening if they travel to the lungs or hearts. Some DVTs may not have any symptoms, but most cause dramatic pain, swelling, and warmth of the leg. Left untreated, people with extensive DVTs are at a higher risk of developing pulmonary embolism where a clot can break away and travel to the lungs where, it can be deadly.

Florida Lakes Vein Center offers convenient appointments in our Lakewood Ranch office Monday - Thursday 8a.m. - 5p.m. and Friday 8a.m. - 3p.m. Call **941.866.8989** to schedule your *free vein screening*.



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

**P**rotecting 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.

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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.

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Christopher Dillingham, M.D., Charles Stewart, M.D., Philip Meinhardt, M.D., Christopher Sforzo, M.D.

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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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# MEMORY MATTERS

By Amy Hoffmann Schenk, RN, BSN, MS Ed, Community Engagement Lead Neuropsychiatric Research Center of SW Florida

"Why is my wife so mean to me?" "My grandfather got downright ornery, wouldn't do anything we asked, and he yells all the time." "My mother is always so nervous and fidgety. When I tell her to relax, she says unkind things to me."

Are any of these situations familiar? For individuals living with Alzheimer's disease or another dementia, sometimes it may seem like your loved one is being difficult. As a caregiver, this can be very frustrating. One of the best phrases to remember goes like this: *a person with dementia is not giving you a hard time they are having a hard time*. What does that mean exactly?

Alzheimer's disease is a brain disease that impacts everything the brain controls. Memory, speech, logical thinking, reasoning, executive functioning, and expressions, are just some of the things that can be impacted. And while it may seem that someone is behaving in a hateful, ornery, or unkind manner, it can be helpful to realize that what is being seen and experienced is likely a result of the impact of the disease on the person. Some of the behavioral expressions may be a result of an underlying unmet need.

According to the Alzheimer's Association, the individual with the disease is experiencing a biologically profound loss of their ability to negotiate new information and stimulus. This is due to disease, versus their personality. This can be difficult to understand for those who do not have the cognitive impact of this disease. To make things more challenging, sometimes the behavior observed is different from day to day, even hour to hour.

It is estimated that between 30 to 50% of individuals with Alzheimer's disease experience agitation and irritability at some time during the course of their illness. What we may see is restlessness, nervousness, short temperedness, expressions of frustration and lack of cooperation. Some individuals may pace, some may perform repetitive motions, others may be quicker to argue and raise their voice and may appear to be in total denial of the facts we present to them.

What looks like denial in someone with the disease may be related to the changes in the brain which impact cognition and awareness. As a result, approaches to address our observations and concerns may not be effective or achieve the response desired. Having a factual, logic based response many times is not effective.

What approaches and techniques can work? Unfortunately, it is true that responses that can be effective with one person may not work with another. As many caregivers know, the same approach used with the same individual may have a different response on a day to day and even on an hour to hour basis. Having some general considerations can be helpful. Here's an acronym to help: **CARE**

**C: Consistently Calm:** That may seem impossible some days, and that is to be expected. Doing your best to respond to what you are seeing in a calm, nonjudgmental and caring manner can help.

**A: Appropriate Activities:** Many times, when individuals are bored or don't have structure, some challenging behavioral expressions may present themselves. Many things can be considered an activity and it's important that the chosen activity is appropriate for the individual and tailored to their interests as much as possible.

Another important consideration is time of day, length of activity and inviting someone to participate versus insisting on participation. A saying that can reflect interacting with someone with Alzheimer's disease is "the more you insist, the more they will resist." None of us like to be told what to do and being invited or asked to do something, versus being told may be more successful.

**R: Regular Routine:** Keeping a consistent routine, based on your loved one's habits can help decrease anxiety and preserve independence. The Alzheimer's Association suggests considering the person's likes, dislikes, strengths, and abilities when developing the routine. Knowing the times of day that the person functions best and allowing ample time for activities is essential. While a consistent schedule is helpful, building in flexibility and going with the flow is also an important consideration.



**E: Engagement and Empathy:** Include the person in everyday activities and let them help, even if they don't do things exactly the way you hope they would. Include them in things they enjoy. Participating in your faith community, helping in the garden, running errands, having a meal are all ways to engage. Being empathetic and understanding are also tools that can be valuable. It can be challenging to be a caregiver, and recognizing that it must also be difficult for the person with the disease as well provides perspective.

**Have you noticed subtle changes in your loved one's memory?** It's not uncommon for memory lapses to occur as we age, but when they start impacting daily life, it's essential to take action.

Connect with the experienced team at the Neuropsychiatric Research Center at 239-939-7777, where we have a proven track record of helping individuals and families navigate memory related challenges. Remember, you're not alone on this journey. #MemoriesMatter

References:  
Anxiety & Agitation | Alzheimer's Association  
<https://www.alz.org/help-support/caregiving/stages-behaviors/anxiety-agitation>

Agitation and Dementia: Prevention and Treatment Strategies in Acute and Chronic Conditions - PMC (nih.gov)



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## CAREER OF A LIFETIME

By Dr. Nashat Abualhajja, Ph.D., MSN, RN

**D**o you like helping people? Do you want to do work that is exciting and rewarding? Do you want a career that has a high job satisfaction rate? Do you want to work in a field that is greatly respected? Do you want to be in a career that is in demand and stable? Do you want work in a career where you can choose your specialty?

If you answer yes, then nursing is a great career choice.

According the Bureau of Labor Statistics (BLS), the average salary in Florida for a nurse is \$72,000, and Florida is in the top five for employing nurses.

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You'll learn from faculty, nurses themselves, who bring the added real life expertise that goes beyond classroom materials. With that knowledge, you'll apply it in our advanced nursing simulation suite, starting with the basics of patient care to advanced scenarios. You'll practice on SIM patients that include newborns, mothers giving birth, children, and adults.

"Tory" is a life-like high-fidelity newborn that weighs just over eight pounds. She can breathe, cry, grunt, open and close her mouth, blink her eyes and move her arms and legs. "Tory's" skin feels like a real newborn and her skin tone can change to become pale, jaundice or cyanotic. Our students can listen to her heartbeat, lung and abdominal sounds, feel her pulse and fontanelles, and assess her muscle tone. She can also suffer seizures if that is part of the simulation scenario. Students can also practice starting IVs on the newborn, perform CPR, and ECG monitoring."

"Hal" is a pediatric patient that can simulate lifelike emotions and phrases. Pediatric "Hal's" emotions, include anger, worry, anxiousness, crying, yawning, and being quizzical and amazed. This helps our



students learn how to communicate with young patients in a variety of settings. For example, if "Hal" is lethargic, his eyelids will droop and his head movements slow, and he may yawn. When he cries, he sheds real tears to further enhance the student learning process related to pediatric patients and communication. Our students practice multiple skills to assess "Hal's" condition, including trauma, neurological diseases, and respiratory distress. His eyes will track when students enter the room and his pupils can dilate and constrict when a penlight is shined on them. Our students can also listen to his heart, lung and bowel sounds, and detect any abnormal respiratory patterns. Students can also practice using airway support devices and hem thorax procedures.

Several adult "Susie" mid-fidelity simulators provide our students the opportunity to learn and practice their clinical skills. Some of the skills taught in the Hodges University nursing skills lab include obtaining vital signs and listening to heart,



lung and bowel sounds. Students can also practice tracheostomy care, nasogastric tube insertion, feeding and care, patient catheterization, correct placement of ECG electrodes, and CPR. "Susie" can also suffer from medical conditions that include a heart attack, heart failure, acute respiratory distress, asthma, chronic obstructive pulmonary disorder, fluid and electrolyte imbalance, hypoglycemia, new onset diabetes, pneumonia and sepsis.

Adult "Hal" gives our students the opportunity to practice connecting monitoring devices for EKGs, defibrillators, oximeters, capnographs and NIBP monitors. Hodges University students can practice various skills, including nasal/oral intubation, surgical airway, feeling carotid, femoral, popliteal, brachial and pedal pulses, listening to airway, bowel and heart sounds, and visualizing tongue edema, pharyngeal swelling, and more. Students can also practice IV insertion and monitoring, intramuscular access, catheterization, and needle decompression.

With classroom and simulation experience, our students graduate prepared, and confident, to be the nurses our community needs.

*Dr. Nashat Abualhajja, Ph.D., MSN, RN, is the Director of the Nursing program at Hodges University. His research foci include transcultural nursing (especially examining cultural competence among health-care professionals, leaders, and systems; evaluating cultural competence among nursing students and faculty), men's health disparities, and student-centeredness and active learning approaches in nursing academia.*



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# UNDERSTANDING PERIPHERAL VASCULAR DISEASE

## Causes, Symptoms, and Treatment

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

**P**eripheral vascular disease (PVD) is a condition that affects the blood vessels outside the heart and brain, commonly referring to issues in the arteries and veins of the extremities. This condition can significantly impact an individual's quality of life, potentially leading to pain, limited mobility, and even serious complications. In this article, we delve into the causes, symptoms, diagnosis, and treatment options for peripheral vascular disease.

### Causes of Peripheral Vascular Disease

PVD is often attributed to atherosclerosis, a condition where fatty deposits build up in the arteries, causing them to narrow and reduce blood flow. This reduced blood flow can lead to pain and other symptoms. Risk factors for PVD include smoking, diabetes, high blood pressure, high cholesterol, obesity, and a family history of cardiovascular diseases.

### Symptoms and Progression

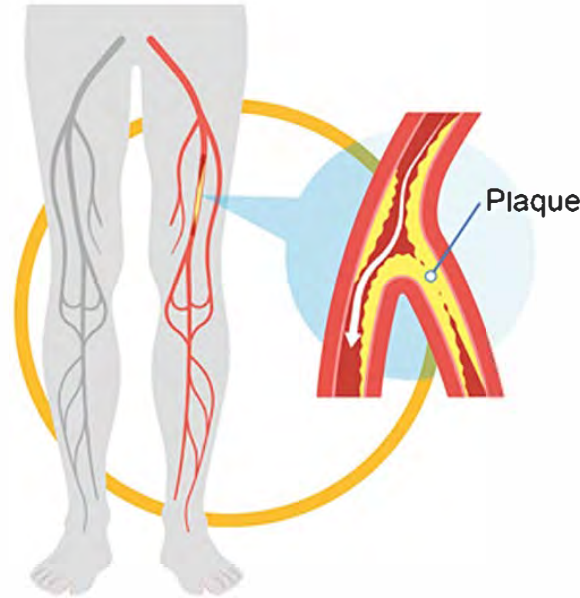
The symptoms of PVD can vary depending on the severity and location of the affected blood vessels. Common symptoms include cramping, pain, or fatigue in the legs or arms during physical activity, known as intermittent claudication. As the condition worsens, pain may also occur during rest. Other signs include numbness, tingling, slow-healing wounds, and changes in skin color or temperature. If left untreated, PVD can lead to complications such as non-healing ulcers and even gangrene.

### Diagnosis and Evaluation

A medical professional will diagnose PVD through a combination of patient history, physical examination, and diagnostic tests. Ankle-brachial index (ABI) is a common test that compares blood pressure in the ankle with that in the arm to determine blood flow. Doppler ultrasound, angiography, and magnetic resonance angiography (MRA) are also used to assess blood vessel condition and location of blockages.

### Treatment Options

**1. Lifestyle Changes:** Adopting a healthy lifestyle is crucial. Quitting smoking, managing diabetes, maintaining a healthy weight, and engaging in regular exercise can improve blood flow and alleviate symptoms.



**2. Medications:** Medications to manage PVD may include antiplatelet drugs to prevent blood clots, cholesterol-lowering medications, and medications to control blood pressure and improve circulation.

**3. Angioplasty and Stenting:** In cases of severe blockages, angioplasty may be performed. This involves inserting a catheter with a deflated balloon into the blocked vessel and inflating it to widen the artery. A stent may also be placed to keep the artery open.

**4. Surgery:** Bypass surgery involves creating a new path for blood flow by grafting a healthy blood vessel to bypass the blocked area. This is typically considered when other treatments are not effective.

**5. Laser and Atherectomy:** These minimally invasive procedures involve using laser or rotating blades to remove plaque from artery walls.

**6. Exercise Programs:** Supervised exercise programs help improve circulation and reduce symptoms in individuals with PVD. These programs combine aerobic and strength exercises.

### Preventive Measures

While PVD is a serious condition, certain measures can reduce the risk of developing it. Regular health check-ups, managing underlying health conditions, eating a balanced diet, staying physically active, and avoiding tobacco are all crucial for maintaining vascular health.

Peripheral vascular disease is a complex condition that can significantly impact an individual's well-being and functionality. Recognizing the risk factors, understanding the symptoms, and seeking timely medical attention are vital steps toward managing the disease effectively. By adopting a healthy lifestyle and following recommended treatments, individuals can improve their vascular health and enhance their overall quality of life. If you suspect you may have symptoms of PVD, consult a medical professional for proper diagnosis and guidance.



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

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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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# Managing Arthritis Pain and Discomfort: WHY MITOCHONDRIAL HEALTH MATTERS

By Dr. Eric Pearson, Chief Medical Officer, Vetirus Pharmaceuticals

**O**steoarthritis (OA) is the most common form of arthritis, a chronic disease of aging. Effective and safe long-term treatment for most OA patients is not available, creating a large unmet medical need. It is estimated that more than 150 million people globally suffer from OA. Many of the symptoms of OA are often overlooked or shrugged off as merely "getting old". The truth is that Osteo Arthritis of the knee affects roughly 12% of all people 60 years or older, and this is just the tip of the iceberg in both undiagnosed and diagnosed arthritic conditions. As the population ages, the number of people with arthritis is projected to grow substantially. The Center for Disease Control is estimating that by 2030, in the U.S. alone, more than 67 million people will have physician diagnosed arthritis. The majority of these people will have OA.

Osteoarthritis (OA) is a chronic degenerative joint disease that causes progressive pain, loss of function, and in many cases, variable levels of disability. It mainly affects individuals over 60. Notable symptoms of OA include the degradation of cartilage, formation of bone spurs and cysts, loss of joint fluid and local and systemic inflammation. The destruction of cartilage plays the most important role in the course of OA. Articular cartilage is comprised of chondrocytes and extracellular matrix. Preventing these chondrocytes from damage is a key factor to the integrity of articular cartilage. Studies have regarded inflammatory response to be the primary cause of chondrocytes injuries and there is growing evidence regarding the role of mitochondrial dysfunction in OA and rheumatoid arthritis (RA). Joint dysfunction and pain are the most common characteristics of all forms of arthritis. Mitochondria are both targets and sources of inflammation-associated injury in the synovial membrane, hence injury and death of synovocytes trigger the release of pro-inflammatory mediators and the activation of inflammatory cells.

While OA has been viewed as a disease of increased joint stress due to heavy load bearing (excessive weight and obesity), recent scientific progress is pointing towards chronic inflammation as the driving factor in OA disease progression. As many healthy, younger patients are developing OA years after acute sports-related injuries, it became evident that more than simple overweight issues contribute to disease pathobiology.

Current treatments for OA include anti-inflammatories such as corticosteroids; non-steroidal anti-inflammatories (NSAIDs) including Celebrex, ibuprofen (Motrin), and Naproxen (Aleve); pain relievers including acetaminophen (Tylenol) and opioids (Tramadol). While short-term partial relief is achieved with steroidal treatments, diminished long-term benefits and significant adverse events prevent long term dosing. Likewise, currently available NSAIDs offer anti-inflammatory action but have

unacceptable long-term adverse side effects including risks of bleeding, gastric ulcers, liver and kidney damage and cardiovascular events. Pain relievers such as acetaminophen have risks of liver toxicity and opioids, of course, are not suitable for long term administration. Ultimately, effective treatment of OA requires a safer, multi-faceted anti-inflammatory molecule able to affect a multitude of OA-related mechanisms with minimal or no adverse effects when used over long time periods. Astaxanthin (ASTX) is that molecule.

ASTX localizes into the mitochondria significantly decreasing oxidative stress while stabilizing the mitochondrial membranes. This stabilizing effect on the mitochondrial membranes has been shown using electron microscopy. (Dr. Mason Preston of Harvard University discovered this). This leads to decreased pro-apoptotic (cell death) mediators and increased anti-apoptotic (cell death) Stabilization of mitochondria and inhibition of these pathways will prolong cell life and contribute to joint matrix maintenance. Likewise, ASTX has been shown to upregulate PGC-1 $\alpha$ , a master regulator of mitochondrial biogenesis, as well as critical metabolic regulators such as CPT-1. All this scientific evidence, in both humans and animal models, highlight the capacity of ASTX to affect important mechanisms critical to osteoarthritis in humans (oxidative stress, inflammation) and underscores the enormous ability of ASTX to slow disease progression and improve symptoms of arthritis.

Vetirus Pharmaceuticals has developed a Natural Biologic compound to bring the benefits of all of this in one easy to use single dose formula named MitoPak™. In summary, it has the below properties:

- 1. Potent Antioxidant Properties:** Mitopak is a powerful antioxidant, which helps protect joints from oxidative stress and inflammation that can lead to joint pain and degradation.
- 2. Anti-inflammatory Effects:** Mitopak has demonstrated anti-inflammatory properties, which can help reduce joint pain and improve overall joint health by decreasing the production of inflammatory mediators.
- 3. Cartilage Protection:** Mitopak has been shown to protect cartilage from degradation by inhibiting the activity of enzymes responsible for breaking down cartilage, such as matrix metalloproteinases (MMPs).
- 4. Reduction of Joint Pain Symptoms:** Studies have reported that Mitopak supplementation can help reduce joint pain symptoms, such as stiffness and discomfort, in people suffering from conditions like osteoarthritis and rheumatoid arthritis.

**5. Improved Joint Mobility:** Mitopak can improve joint mobility by reducing inflammation and promoting the health of joint tissues, making it easier for individuals to move and maintain an active lifestyle.

**6. Enhanced Synovial Fluid Production:** Mitopak has been found to enhance the production of synovial fluid, which lubricates and nourishes the joints, promoting overall joint health.

**7. Supports Collagen Synthesis:** Mitopak can support collagen synthesis, which is crucial for maintaining the integrity of joint structures such as tendons, ligaments, and cartilage.

**8. Slows Age-Related Joint Degeneration:** Mitopak's antioxidant and anti-inflammatory properties can slow down the age-related degeneration of joints, helping to maintain joint health and function in older individuals.

**9. Complementary to Conventional Treatments:** Mitopak can be used as a complementary treatment to conventional therapies for joint pain and inflammation, such as nonsteroidal anti-inflammatory drugs (NSAIDs) or corticosteroids, potentially enhancing their effectiveness or reducing side effects.

**10. Sports Performance and Recovery:** Athletes and active individuals can benefit from Mitopak supplementation, as it may help to reduce exercise-induced joint pain and reduces inflammation, and speeds up muscle recovery while supporting muscle strength, and improve overall sports performance.

All inflammation starts in your mitochondria. MitoPak™ stops the inflammation where it starts. Over 1200 scientific studies have concluded the safety of the active ingredients and they have a long history of use in both Humans and animals. MitoPak™ fights inflammation without harmful side effects found in NSAIDs. It supercharges your mitochondrial energy production, and its unique proprietary formula contains the most powerful known antioxidant allowing your body to function at peak performance,

MitoPAK™ is nature's most potent anti-inflammatory and is:

- 110x stronger than Vitamin E
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- 6000x stronger than Vitamin C

and has grown in popularity as more medical evidence supports its benefits. Regardless of your age, MitoPak™ positively influences mitochondrial function and preserves membrane structure while scavenging radicals. It is a natural therapeutic that reduces inflammation and speeds up muscle recovery without compromising muscle strength.

*Vetirus Pharmaceuticals is based in Naples, Florida and London, England and are focused on searching the world for developing Natural Biologics to advance their mission of changing the way we age in both human and veterinary medicine with purity and precision.*

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# WHAT YOU NEED TO KNOW ABOUT E-CIGARETTES AND VAPING AS SMOKING CESSATION TOOLS

**A**re you looking to quit smoking? Have you tried to quit several times with little to no success? Are you frustrated and running out of ideas that could help you kick the habit for good? You are not alone! In fact, 7 out of 10 tobacco users want to quit and may struggle with these same questions. Some tobacco users might be tempted to turn to electronic cigarettes (e-cigarettes, vape pens, and other vaping devices) to ease the transition from traditional cigarettes to not smoking at all.<sup>1</sup> Though this may seem like a novel option for some, the question we must ask is whether using e-cigarettes or vaping is better for you than using tobacco products. According to Michael Blaha, M.D., M.P.H., director of clinical research at the Johns Hopkins Ciccarone Center for the Prevention of Heart Disease, there are several important factors to consider:



## 1. E-cigarette aerosol is NOT harmless “water vapor.”<sup>2</sup>

The aerosol used in e-cigarettes contains chemicals that can be harmful to health, including:

- Nicotine<sup>2</sup>
- Ultrafine particles that can be inhaled deep into the lungs<sup>2</sup>
- Flavorings such as diacetyl, a chemical linked to a serious lung disease<sup>2</sup>
- Volatile organic compounds<sup>2</sup>
- Cancer-causing chemicals<sup>2</sup>
- Heavy metals such as nickel, tin, and lead<sup>2</sup>

## 2. The nicotine in tobacco and vaping products is addictive.

According to Dr. Blaha, nicotine is a toxic substance that raises your blood pressure and spikes adrenaline which increases your heart rate and the likelihood of having a heart attack.<sup>1</sup> Emerging data also suggests links to chronic lung disease and asthma.<sup>1</sup>

## 3. Electronic cigarettes are just as addictive as traditional ones.<sup>1</sup>

Many e-cigarette users get even more nicotine than they would from a combustible tobacco product as many vaping devices offer extra-strength cartridges, which have a higher concentration of nicotine to get a greater hit of the substance. <sup>1</sup> This can be counterproductive to an individual's goal to quit as higher doses of nicotine result in a stronger nicotine addiction.

## 4. E-cigarettes are not an FDA approved cessation tool.<sup>1</sup>

E-cigarettes have not received Food and Drug Administration (FDA) approval as smoking cessation devices.<sup>1</sup> There are many FDA approved products on the market that are effective for quitting nicotine including the nicotine patches, gum, and lozenges.

If you are a tobacco user looking to quit smoking, help 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.

### References:

1. Blaha, M. J. (2022, January 20). 5 vaping facts you need to know. Johns Hopkins Medicine. Retrieved August 5, 2022, from <https://www.hopkinsmedicine.org/health/wellness-and-prevention/5-truths-you-need-to-know-about-vaping#:~:text=2%3A%20Research%20suggests%20vaping%20is%20bad%20for%20your%20heart%20and%20lungs.&text=It%20causes%20you%20to%20crave,of%20having%20a%20heart%20attack.>
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a class or learn more about the program!

# LEUKEMIA AND ADVANCED CANCER TREATMENTS:

## A Comprehensive Guide to Different Medications

**L**eukemia, a type of blood cancer that affects the bone marrow and blood cells, has long been a formidable challenge in the field of oncology. Over the years, medical advancements have led to the development of diverse treatment options, each targeting specific types of leukemia and offering hope to patients. This article delves into the world of leukemia and cancer treatments, exploring the various medications that play a pivotal role in battling this disease.

### Understanding Leukemia and Its Types

Leukemia originates in the bone marrow, where abnormal blood cells are produced in large quantities, crowding out healthy cells and impairing the body's ability to function properly. There are several types of leukemia, including acute lymphoblastic leukemia (ALL), acute myeloid leukemia (AML), chronic lymphocytic leukemia (CLL), and chronic myeloid leukemia (CML).

### Traditional Treatments and Their Limitations

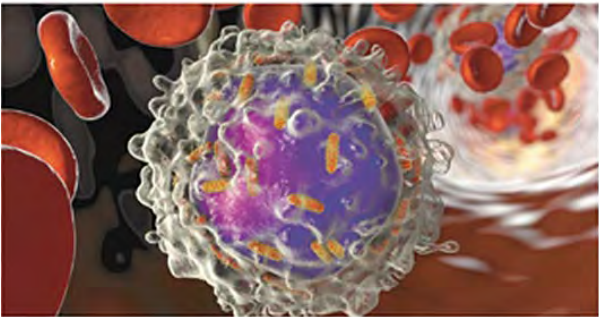
Historically, chemotherapy and radiation therapy have been the primary treatments for leukemia. While effective in many cases, these treatments often come with side effects due to their non-specific nature, impacting both healthy and cancerous cells. The pursuit of targeted therapies has led to a revolution in cancer treatment.

### Targeted Therapies: A Precision Approach

Targeted therapies are medications designed to specifically target the genetic mutations or proteins that drive cancer growth. Tyrosine kinase inhibitors (TKIs) are a class of targeted therapies commonly used in the treatment of chronic myeloid leukemia (CML) and some forms of acute lymphoblastic leukemia (ALL). These medications block the signals that promote abnormal cell growth, leading to more focused and effective treatment with fewer side effects.

### Immunotherapy: Harnessing the Immune System

Immunotherapy has emerged as a groundbreaking approach in leukemia treatment. Monoclonal antibodies, such as rituximab and alemtuzumab, are designed to attach to specific proteins on cancer cells, marking them for destruction by the immune system. Chimeric antigen receptor (CAR) T-cell therapy takes immunotherapy a step further by engineering a patient's own immune cells to recognize and attack cancer cells.



### Stem Cell Transplantation: Rebuilding the Immune System

For certain cases of leukemia, stem cell transplantation is a viable option. This procedure involves replacing the patient's diseased bone marrow with healthy stem cells from a donor. It can provide a new lease on life for those who have not responded to other treatments or who have high-risk forms of the disease.

### Emerging Therapies: The Promise of Novel Agents

Researchers are continually exploring new avenues for leukemia treatment. Small molecule inhibitors, epigenetic therapies, and gene-editing technologies hold promise for precise intervention at the molecular level. Clinical trials are underway to evaluate the safety and efficacy of these emerging treatments.

### Personalized Medicine: Tailoring Treatment to Individuals

Advancements in genomic sequencing have paved the way for personalized medicine, allowing oncologists to identify specific mutations driving a patient's leukemia. This information enables treatment plans to be tailored to an individual's genetic profile, increasing the likelihood of a positive outcome.

### Combination Therapies: Maximizing Effectiveness

Combinations of different medications are often used to enhance treatment efficacy while minimizing resistance. By targeting multiple pathways simultaneously, these combination therapies can disrupt cancer cell survival and growth more effectively than single-agent treatments.

### The Road Ahead: Hope and Progress

Leukemia treatment has evolved significantly, offering new possibilities and improved outcomes for patients. As researchers gain a deeper understanding of the molecular mechanisms driving leukemia, novel treatments will continue to emerge. With each breakthrough, the outlook for individuals facing this challenging disease becomes brighter.

Prescription Hope is a national prescription drug benefit program that offers 1,500 Brand-Name medications at \$50 per medication per month no matter the retail cost.

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Leukemia & Lymphoma			
Drug Name	Retail Cost	Prescription Hope	Total Savings
Arzerra	\$1,916.00	\$50.00	\$1,866.00
Bendeka	\$2,614.00	\$50.00	\$2,564.00
Besponsa	\$23,077.00	\$50.00	\$23,027.00
Bosulif	\$20,524.00	\$50.00	\$20,474.00
Calquence	\$15,721.00	\$50.00	\$15,671.00
Cyclophosphamide	\$95.75	\$50.00	\$45.75
Dasatinib	\$16,532.00	\$50.00	\$16,482.00
Gazyva	\$8,197.00	\$50.00	\$8,147.00
Iclusig	\$21,202.00	\$50.00	\$21,152.00
Idhifa	\$33,780.00	\$50.00	\$33,730.00
Imbruvica	\$11,980.00	\$50.00	\$11,930.00
Kymriah	\$475,000.00	\$50.00	\$474,950.00
Lemtrada	\$29,960.00	\$50.00	\$29,910.00
Mylotarg	\$10,125.00	\$50.00	\$10,075.00
Nilotinib	\$17,821.92	\$50.00	\$17,771.92
Kesimpta	\$8,606.00	\$50.00	\$8,556.00
Onureg	\$20,318.96	\$50.00	\$20,268.96
Rituxan	\$999.00	\$50.00	\$949.00
Imydot	\$10,356.58	\$50.00	\$10,306.58
Scemblix	\$19,308.29	\$50.00	\$19,258.29
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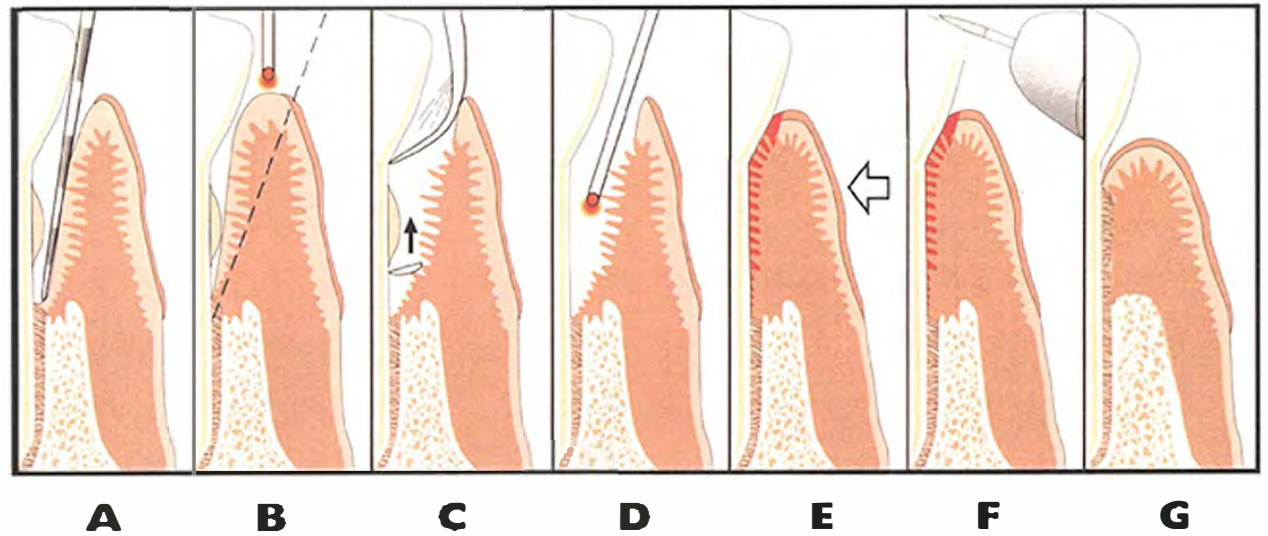
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# What is Laser Periodontal Therapy?

By Dr. Joseph Farag

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



## Laser Gum Surgery Steps:

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



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# WEIGHT LOSS MAKES YOUR BONES AND JOINTS HAPPY

By Physicians Rehabilitation

**D**egenerative joint disease, also known as osteoarthritis, is a condition that affects your joints, causing them to deteriorate over time. It primarily involves the breakdown of the cartilage that cushions the ends of your bones, leading to pain, stiffness, and reduced joint mobility. This condition can affect any joint in the body but commonly occurs in weight-bearing joints like the knees, hips, and spine. To manage and overcome degenerative joint disease and minimize further wear and tear on your joints and spine, Physicians Rehab recommends the following steps:

**1. Exercise:** Engaging in low-impact exercises can help improve joint function and strengthen the supporting muscles. Activities like walking, swimming, and cycling are excellent options. Your doctor or a physical therapist can guide you on suitable exercises based on your condition and fitness level.

**2. Weight management:** Maintaining a healthy weight is crucial since excess weight stresses your joints, accelerating wear and tear. By losing weight or keeping it within a healthy range, you can reduce the strain on your joints and alleviate pain. Being overweight will exacerbate osteoarthritis and can expedite joint degeneration, especially in weight-bearing joints, like the knees, hips, and ankles. For every pound of excess weight carried, 4 pounds of extra pressure is applied to a weight-bearing joint. For example, if you are 10 pounds overweight, that equates to 40 extra pounds of pressure that is applied to the knees. Having your joints, like your knees, absorb all that extra pressure over time can cause significant and irreversible damage to the joints.

**3. Proper posture:** Pay attention to your posture while sitting, standing, and lifting heavy objects. Avoid slouching and try to keep your spine and joints properly aligned. This reduces unnecessary pressure on your joints and promotes better spinal health.

**4. Joint protection:** Be mindful of your activities and avoid repetitive movements that can strain your joints. Use joint-protective devices, such as knee braces or ergonomic tools.



**5. Balanced diet:** A nutritious diet rich in vitamins, minerals, and antioxidants can support joint health. Include foods like fruits, vegetables, whole grains, and lean proteins. Omega-3 fatty acids found in fish may also have anti-inflammatory benefits.

**6. Heat and cold therapy:** Wearing warm compresses or a hot bath can help soothe joint pain and stiffness. Conversely, cold packs can reduce inflammation when applied to the affected area.

**7. Medications:** Over-the-counter pain relievers like acetaminophen or non-steroidal anti-inflammatory drugs (NSAIDs) can help manage pain and inflammation. Always consult your doctor before starting any new medication.

**8. Physical therapy:** Working with a physical therapist can provide targeted exercises and techniques to improve joint flexibility, strength, and range of motion.

**9. Assistive devices:** In some cases, assistive devices like canes or walking aids can help reduce stress on your joints during daily activities.

**10. Avoid smoking and limit alcohol intake:** Smoking and excessive alcohol consumption can contribute to inflammation and may worsen joint problems.



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Everyone's condition is unique, so working closely with your healthcare provider to develop a personalized plan for managing your degenerative joint disease is crucial. Regular check-ups and open communication will ensure you receive the best care and support for your joint health. If necessary, your doctor may recommend more advanced treatments, such as injections or surgery, but these are typically reserved for severe cases when conservative measures are no longer effective.

By taking proactive steps and making lifestyle adjustments, you can effectively manage degenerative joint disease and maintain better joint and spinal health. If you have any questions or concerns, don't hesitate to ask, and together with Physicians Rehab, we'll work towards improving your quality of life.

We, at Physicians Rehabilitation, have always taken a multi-modality approach to treating chronic joint pain and osteoarthritis by offering various types of injection therapies, physical therapy, bracing, and interventional pain management, but now we are also offering medical weight loss options to help you with your long-term health goals. We are focused on helping you gain mobility, improve your strength, and live a pain-free lifestyle, but also getting you to look and feel your best! Call us today to get more information on our weight loss program!

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# Reclaiming Lives: National Recovery Month Shines a Light on Substance Use Rehabilitation

**N**ational Recovery Month, observed every September, serves as a beacon of hope for individuals and families affected by substance use disorders. This annual observance raises awareness about the importance of prevention, treatment, and recovery support, while highlighting the achievements of those who have reclaimed their lives from the clutches of addiction.

Substance use disorders continue to impact millions of lives globally, transcending age, gender, and socioeconomic boundaries. Whether it's alcohol, prescription drugs, or illegal substances, addiction takes a heavy toll on physical health, mental well-being, and interpersonal relationships. National Recovery Month aims to shed light on these challenges and to provide a platform for sharing stories of triumph and resilience.

One of the cornerstones of National Recovery Month is to reduce the stigma associated with addiction. The societal shame and judgment surrounding substance use disorders often act as barriers to seeking help. Through community events, educational campaigns, and personal narratives, the observance works to foster an environment of empathy and understanding. This shift in attitude encourages individuals to step forward, seek treatment, and embark on their journey to recovery.

Recovery is a multifaceted process that involves various stages, including acknowledging the problem, seeking treatment, maintaining sobriety,

and rebuilding one's life. National Recovery Month underscores the significance of each stage and the continuous support needed throughout the journey. Treatment centers, support groups, and mental health professionals play a pivotal role in guiding individuals towards lasting recovery.

Family support is another crucial aspect of the recovery process. Loved ones often bear witness to the pain and challenges brought about by addiction. National Recovery Month emphasizes the significance of family involvement in the recovery journey, fostering healthier relationships and providing a stronger foundation for long-term sobriety.

The COVID-19 pandemic further underscored the importance of recovery resources. The isolation and uncertainty brought about by the pandemic exacerbated substance use disorders for many. National Recovery Month recognizes the need to adapt recovery strategies in changing circumstances and highlights the resilience of individuals who navigated recovery amid unprecedented challenges.

In essence, National Recovery Month serves as a reminder that recovery is possible and that every individual's journey is unique. Personal stories of transformation inspire others to seek help, offer support, and challenge societal stereotypes. By sharing these stories, the observance creates a sense of unity and empowerment within the recovery community.

As National Recovery Month continues to evolve, its impact expands beyond the month of September. It fuels ongoing conversations about mental health, addiction, and the need for comprehensive support systems. While celebrating the successes of those who have overcome addiction, the observance also calls for continued advocacy, improved access to treatment, and research to better understand the complexities of substance use disorders.

In conclusion, National Recovery Month stands as a testament to the human spirit's capacity for change and renewal. It reminds us that recovery is not just a destination; it's a lifelong journey. Through awareness, compassion, and a collective commitment to change, we can create a society that supports individuals in reclaiming their lives from the grip of addiction.

The Kimberly Center utilizes an evidence based program. Its' fundamental goal is to restore the individual to a healthier, happier and more productive life, free from substance dependence and abuse and destructive behaviors.

The goal is based on the belief that successful recovery encompasses improvements in self-esteem, interpersonal relationships, positive family interaction, vocational productivity, the establishment and attainment of realistic life goals and healthy life style adjustments. In addition, we hope to see a consequent reduction in associated health problems, behavioral problems and other psychological pathology.

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# Managing Excessive Sweating with Botox: A Closer Look at a Surprising Solution

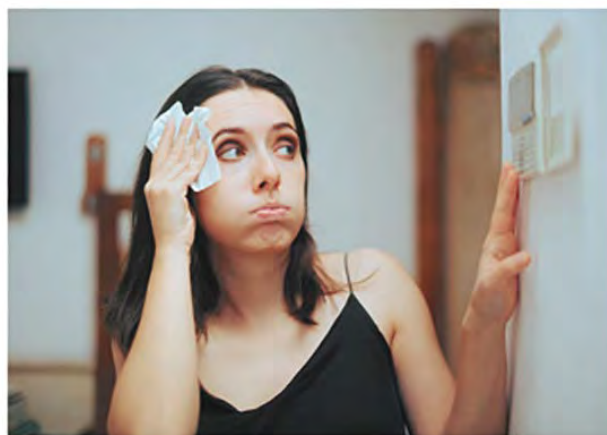
**E**xcessive sweating, also known as hyperhidrosis, can be a distressing and embarrassing condition that affects millions of people worldwide. For those who struggle with overactive sweat glands, finding effective solutions is a top priority. One unexpected option that has gained traction in recent years is the use of Botox injections to alleviate excessive sweating. While traditionally associated with cosmetic procedures, Botox's applications extend far beyond mere aesthetics.

Hyperhidrosis can have a significant impact on a person's quality of life, causing discomfort, social anxiety, and even limitations in daily activities. This condition occurs due to the overactivity of sweat glands, leading to unwarranted and persistent sweating, often regardless of external temperature or physical exertion. Though treatments such as antiperspirants, medications, and surgical interventions exist, Botox injections have emerged as a surprisingly effective approach in managing this condition.

Botox, short for botulinum toxin, is commonly known for its cosmetic use in reducing wrinkles and fine lines. However, its mechanism of action makes it suitable for addressing hyperhidrosis as well. The procedure involves injecting small amounts of Botox into targeted areas of excessive sweating, typically the underarms, palms, or soles of the feet. Botox works by blocking the signals from nerves that stimulate sweat glands, effectively preventing them from producing excess sweat.

What sets Botox apart as a treatment for hyperhidrosis is its non-invasive nature. Unlike surgical options that involve cutting or removing sweat glands, Botox offers a relatively painless and quick solution. The procedure can usually be completed within a short office visit, with minimal downtime and a relatively low risk of complications. Patients often notice a significant reduction in sweating within a few days to a week after treatment.

One of the key advantages of using Botox for sweating is its long-lasting effects. While individual responses may vary, the results of Botox injections typically persist for several months. This extended relief provides patients with a welcome break from



the physical and emotional challenges associated with hyperhidrosis. As the effects gradually wear off, repeat treatments can be scheduled to maintain the desired level of dryness.

It's important to note that while Botox injections for sweating are generally safe, they should only be administered by qualified medical professionals. An experienced practitioner will assess the severity of the hyperhidrosis, determine appropriate injection sites, and administer the treatment with precision. Additionally, discussing any pre-existing medical conditions or medications with the healthcare provider is crucial to ensure the procedure's safety and effectiveness.

While Botox injections can be a game-changer for those battling hyperhidrosis, they may not be the perfect solution for everyone. Factors such as cost, pain tolerance, and personal preferences play a role in deciding whether to pursue this treatment option. Individuals considering Botox for excessive sweating should have a thorough consultation with a healthcare provider to weigh the potential benefits against any concerns.

In conclusion, the use of Botox injections to manage excessive sweating presents a surprising and effective solution for individuals struggling with hyperhidrosis. Beyond its cosmetic applications, Botox's ability to block sweat gland activity offers relief from the physical and emotional challenges associated with this condition. With its non-invasive nature, relatively long-lasting effects, and minimal downtime, Botox injections provide a viable option to enhance the quality of life for those affected by excessive

sweating. As medical advancements continue, it's possible that even more innovative approaches to treating hyperhidrosis will emerge, offering hope for a future with increased comfort and confidence.

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# NAVIGATING THE LINK BETWEEN CANCER TREATMENTS AND HEARING LOSS

## Cancer Treatments and Their Unintended Consequences

By Dr. Noël Crosby, Au.D.

**C**ancer treatments have come a long way in improving the chances of survival and quality of life for patients. However, as with any medical intervention, there can be unintended consequences. One such consequence is the potential for hearing loss associated with certain cancer treatments. This article delves into the connection between cancer treatments and hearing impairment, shedding light on the causes, risk factors, and strategies for prevention and management.

### Understanding the Link

Several cancer treatments, including chemotherapy, radiation therapy, and certain targeted therapies, can contribute to hearing loss. The inner ear, which plays a crucial role in hearing and balance, is sensitive to the effects of these treatments. Chemotherapy drugs and radiation can damage the delicate structures of the inner ear, leading to hearing difficulties.

### Risk Factors and Vulnerable Populations

Not everyone undergoing cancer treatments will experience hearing loss. Certain risk factors can increase the likelihood of this side effect. Factors such as the type and dosage of the treatment, the patient's age, and their overall health play a role. Children and older adults are generally more susceptible to treatment-related hearing loss due to their varying degrees of inner ear resilience.

### Prevention and Management

Preventing hearing loss during cancer treatments requires a multi-faceted approach. Oncologists and healthcare providers need to carefully consider treatment options that minimize the risk of hearing impairment. For patients, advocating for themselves and discussing potential side effects with their medical team is essential.

Patients can also take proactive steps to protect their hearing. For instance, the use of certain protective measures, such as earmuffs or earplugs, during treatments can help mitigate damage. Regular hearing check-ups before, during, and after treatment are crucial for early detection and intervention.

### Support and Awareness

Recognizing the potential impact of hearing loss on cancer patients' overall well-being is crucial. The emotional and psychological toll of hearing impairment can exacerbate the challenges that come with a cancer diagnosis. Providing psychosocial support, counseling, and access to hearing rehabilitation services can significantly improve the quality of life for these patients.

### Research and Advancements

As medical research advances, scientists and clinicians are working to develop cancer treatments that are not only effective against the disease but

also spare healthy tissues, including the inner ear. The field of onco-audiology focuses on understanding the mechanisms behind treatment-related hearing loss and developing strategies to minimize its occurrence.

Cancer treatments have undoubtedly revolutionized patient outcomes, but they also come with potential side effects such as hearing loss. By understanding the link between cancer treatments and hearing impairment, individuals and healthcare providers can work together to make informed decisions that prioritize both cancer treatment effectiveness and patients' quality of life. As research continues to advance, the hope is that innovative approaches will minimize the impact of treatment-related hearing loss, ensuring that cancer survivors can lead fulfilling lives beyond their diagnosis.

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# Early Detection of Prostate Cancer Saves Lives

**P**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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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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# PRIMER ON MEDICAID PLANNING FOR MARRIED COUPLES

By James W. Mallonee

A client recently came in for a consultation about being able to maintain her lifestyle given that her husband had recently died. The surviving spouse admitted that she was beginning to slip mentally and physically. She also expressed that her children were not able to assist in any way. The couple's funds were previously placed into separate trusts (the married couple had their own trusts as opposed to a joint trust) and pour over Wills. Although the old adage of having your assets placed into a trust sounds good, it is not always the best solution because it may cause the surviving spouse to become ineligible for Medicaid assistance and the failure to preserve a family's wealth.

You should know that the disposition of funds from a trust to that of a surviving spouse's trust may not work to preserve Medicaid eligibility should the surviving spouse need the support of a Medicaid government program. The reason for this is Medicaid's statutes specifically state that a trust constitutes a countable asset for purposes of being eligible for such program. The program specially states "if assets of the individual were used to form all or part of the corpus of a trust and if any of the following individuals established such trust other than by Will; a) the individual; or, 2) the individual's spouse..." As you can see the law specifically uses the term "other than by Will" which suggests that a trust immediately knocks out Medicaid eligibility.



Does that mean funding a trust will cause the surviving spouse to lose Medicaid eligibility? The answer is most likely. A means of avoiding this problem is to create a Will which can reference a trust (called a testamentary trust) which can provide the surviving spouse with support without causing his or her loss of Medicaid benefits (including other public benefits).

What are the possible traps? The first one is Florida's elective share which states that the surviving spouse is entitled to 30% of the deceased spouse's estate (remember - the spouses in this situation had separate trusts). If that is the case it is entirely possible that the surviving spouse will lose her eligibility for Medicaid assistance. The reason for this is that a person who is considered eligible for Medicaid will have to count any ownership interest he or she is entitled to by means of inheritance including the elective share. So why can't the surviving spouse elect to disclaim the elective share? Medicaid will view the refusal to accept the elective share as a trigger causing the invocation of a penalty and loss of such benefits. The possible outcome is the loss of benefits until such time as the total value of countable assets have been spent down below the asset eligibility threshold of \$2,000.00.

What could the couple, in this situation, have done to avoid this situation? In the deceased spouses Will they could establish a qualified special needs trust funding it with 30% of the deceased spouse's assets which would satisfy Florida's law and Medicaid's requirements (NOTE: the amount used for funding the special needs trust can be more than 30%). Surprisingly, these funds will not be considered a countable asset. You would need to have a third person (son, daughter, or other person) act as the trustee of such trust to maintain eligibility.

Suppose (like the person who visited the office) you also have a trust and you want to preserve your assets to pass on to your children or charity of choice. An option is to have the trust amended to allow the assets of the trust to pass through the probate estate and then back out to the trust. This could be done via the decedent's pour over Will should the trust be irrevocable.

In short, the simpler alternative is to have a special needs trust for the benefit of the surviving spouse. But the downside is trying to look into the future and know with certainty who is going to pass first.

If you are concerned about preserving your assets as you grow older and more vulnerable to medical needs, contact the attorney of your choice, and have a discussion about preservation of your assets including Medicaid eligibility. Even if you already have testamentary documents prepared, it may be wise to have a "What if" discussion.

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# It's 2023; Do You Know Where Your Money Is?

By Michelle Locke - Master Life and Mindset Coach

**T**he catalyst of any change is awareness. This month is great time to improve your own awareness of your personal finances, especially if you'd like to create better financial habits.

Below are 3 areas of focus to easily increase your financial awareness, and initiate the changes necessary to build better financial future.

What's coming in. Sure, you know your salary or hourly wage, but do you know exactly what "income" that creates? If you are self-employed, do you know your revenue vs. expenses numbers? Don't forget about additional income avenues: interest-bearing accounts, dividends, accounts receivable (including any personal loans you have made), child support, side hustles, etc. Taking the time to investigate what's coming in can give you a "big picture" outlook that is beneficial to short-term planning and long-term financial strategy.

What's going out. Typically we *think* we know where we are spending our money, but in reality, most people are blissfully unaware. I had a client exclaim, "Michelle, I spent \$7,000 on Door Dash in the last six months...I had NO IDEA!" Unfortunately, this isn't all that uncommon. Using a budgeting app like Mint or Rocket Money is a great way to see what's really going on. Alternatively, a good, old-fashioned spreadsheet works just fine. However you choose to track you spending, knowledge is definitely power!

What you're thinking. As strange as this may sound, what you think about money is just as important as what you do with your money. Why? Because what you think (and feel) is what motivates you to act. To be specific, the best way to create and stick to your new healthy money habits, is to start with your money mindset. If someone has anxiety around their money, or doubts their ability to create wealth, they will have much different results than someone who genuinely believes making money is easy for them. Why is this so?



Because each of those people will "show up" differently regarding money decisions and take different actions. As you are becoming aware of your financial income and outgo, take note of how you feel about your budget, and what your inner voice is telling you during the process. I'd wager you'll be surprised at what you find!

Now that you are more aware of your financial picture, what's next? It's time to make some quality decisions, take some quality actions, and build quality habits.

- **Step 1: Define your Goals.** Utilize the S.M.A.R.T. goals method to make both short and long-term goals. Ask pertinent questions such as: What do I want to achieve? What do I want to experience? Who do I want to help? What am I willing to do and to do without to accomplish these goals?
- **Step 2: Divide and Conquer.** For each overarching goal, you need to outline yearly, quarterly, and monthly goals. Each monthly goal can then be broken down into specific tasks and added to a calendar or weekly/daily schedule. (For example, "Pay Off Debt" may be a long-term goal. For each credit card or loan, determine how much you will pay and how often to achieve full

payoff in the designated time. Now add each payment to your monthly bill schedule and watch those balances dwindle!)

- **Step 3: Assess Obstacles.** Clarify what is standing in your way. Is your outgo larger than your income? Is your debt too large to pay off in the desired amount of time? Are there factors outside your control? Identify possible pitfalls and plan for how you will handle each. This is the step where it may be beneficial to get some help. A financial advisor, a life coach, or even a trusted family member or friend may be able to support you through this step. The objectivity of someone outside of your circumstances can often make or break your plan.

- **Step 4: Manage Your Mind.** This is where the rubber really meets the road. You have your plan, you know what you need to do, and perhaps you have even begun to implement. But how do you stay on track when shiny object syndrome and keeping up with the Joneses are real? You'll need more than willpower to make your goals happen. Eradicating limiting beliefs and a compelling reason to follow through with your plan are what will be needed to be successful. Again, employing some outside help here could be the winning move. Mindset coaches are skilled at fleshing out the mental gymnastics necessary to create and sustain new habits, which is the crucial step to any permanent change.

Your current money habits weren't established overnight, and neither will your new ones be. Be patient with yourself as you gain awareness, identify dreams, set goals, and achieve the financial future you desire.

## About Michelle Locke

Michelle Locke is a Master Certified Life and Mindset Coach with eight years experience. Through her coaching and training programs she helps her clients "fix what isn't working" in their lives. About her method, she says, "Life coaching is about systems, plans, and habits; mindset coaching is the 'secret sauce' that makes the latter sustainable." She lives in Ellenton with two of her five (mostly adult) children and a rescue hound named Ivy.

## Michelle Locke Coaching

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# Hope and Optimism

By Pastor Timothy L. Neptune

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

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

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

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

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

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

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

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

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



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*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](http://www.venturenaples.com).*

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Restless Legs

If you said **“YES”** to any of the above, you may have vein disease.



**FLORIDA LAKES**  
VEIN CENTER

[FloridaLakesVeinCenter.com](http://FloridaLakesVeinCenter.com)

Call for a **FREE** vein screening. **It's a no veiner!**<sup>SM</sup>

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