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April 2016

North Palm Beach Edition - Monthly

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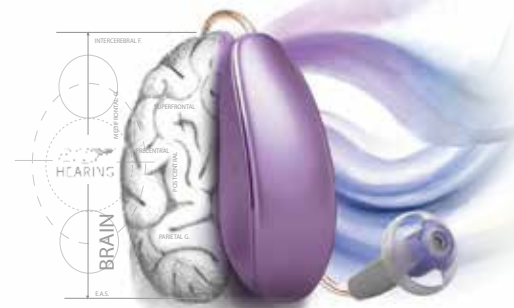
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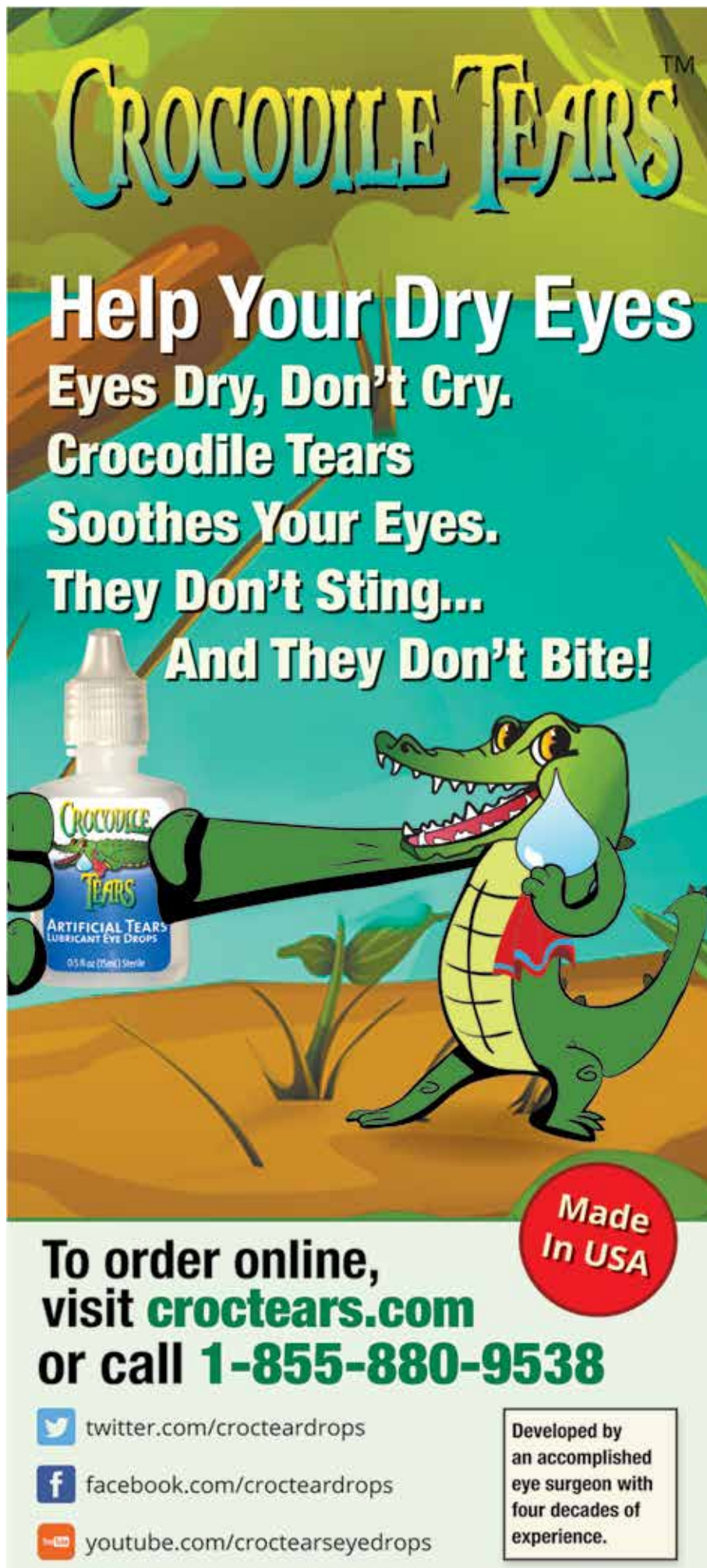

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A New Alzheimer's Clinical Study Opportunity Right Here In Palm Beach

By Dr. Laszlo Mate



The MINDSET study is a phase 3 clinical research study evaluating a new investigational treatment for mild-to-moderate Alzheimer's disease.

This study drug, known as RVT-101, is being studied as an add-on therapy to donepezil (sometimes known as Aricept®), the most widely used medicine to treat Alzheimer's disease today. In a previous 684-patient clinical study, the combination of RVT-101 and donepezil provided patients with statistically significant benefits in cognition and ability to perform daily living activities, as compared to donepezil alone.

The MINDSET study is designed to confirm these results and could be the final study required for the FDA approval of RVT-101.

The study involves approximately 170 expert physicians at clinics around the world, referred to as research "investigators." I am pleased to be one of these investigators, and will be seeing patients for the study at my clinic right here in Palm Beach.

ABOUT RVT-101, A POTENTIAL TREATMENT FOR MILD-TO-MODERATE ALZHEIMER'S DISEASE

RVT-101 works by raising levels of acetylcholine, a vital chemical in the brain that is believed to help with cognition and performing daily living activities. RVT-101 works by rais-



Participating in clinical studies allows dementia patients and caregivers to contribute to the development of new treatments and access potential treatments that are only available through study participation. The MINDSET study is evaluating an important potential oral treatment, and I encourage patients and caregivers to learn more.

ing levels of acetylcholine directly, similar to turning up a faucet. Donepezil also increases acetylcholine, but does so indirectly by preventing acetylcholine from being cleared from the brain, similar to blocking a drain. In combination, RVT-101 and donepezil work together to increase acetylcholine by both turning up the faucet and blocking the drain.

RVT-101 only increases acetylcholine in the brain (not the rest of the body), so researchers believe drug the drug avoids some of the unwanted side effects associated with donepezil. RVT-101 has already been studied in 13 clinical trials and administered in over 1,250 individuals, and showed a favorable safety and tolerability profile in those studies.

RVT-101 is administered as a once-daily, oral therapy without the need for PET imaging, MRI monitoring or IV infusions.

WHAT IS INVOLVED IN STUDY PARTICIPATION

The MINDSET program will consist of a 6-month double-blind study, in which patients will have a 50-50 chance of receiving RVT-101 or placebo. "Double-blind" means that neither the

patient nor the investigator knows whether the patient is receiving RVT-101 or placebo. All patients who complete the double-blind study will be eligible to enroll in a 12-month open-label extension study in which all patients will receive RVT-101.

Study participants will receive the study medication, study-related medical care, and study-provided donepezil at no cost to them. Transportation to and from study visits can be provided or reimbursed. Compensation for study-related time may also be available. Insurance is not required to participate.



WHO IS ELIGIBLE

Individuals between the ages of 50 and 85 who are suffering from Alzheimer's disease or memory loss and taking the medication donepezil (often known as Aricept®) may be eligible to participate.

If you or a loved one might be interested in participating in the MINDSET study, please call the practice of Dr. Laszlo Mate at **561-626-5551**

Editor's Note: Dr. Laszlo Mate, a neurologist in Palm Beach who specializes in the treatment of Alzheimer's disease and dementia, recently began enrolling patients in a clinical study evaluating a potential new treatment for mild-to-moderate Alzheimer's disease. We invited Dr. Mate to share more information about this study, called MINDSET. If you or a loved one might be interested in participating, please call Dr. Mate's office at **561-626-5551**.

Hair Loss

HAS DEEP ROOTED EFFECTS ON WOMEN

By Alan J. Bauman, M.D.

**A woman's hair is her crowning glory.
Until you start to lose it.**

Over 30 million women in the U.S. are suffering from hair loss or thinning, and while hair loss is often falsely thought of as merely a cosmetic problem, surveys and studies have found that hair loss can have wide-ranging effects on those afflicted, including loss of confidence and self-esteem, and in some cases, depression, anxiety and other emotional issues. The psychological effects of hair loss can be especially damaging to women.



A study conducted by the Journal of the American Academy of Dermatology found that women suffered more emotionally and mentally, and were more likely to develop a negative body image due to hair loss when compared to men who were dealing with the same issue. Why is hair loss so emotionally and psychologically devastating to women? In nearly every culture, hair is associated with youth, beauty, and good health, which explains why we try so hard to hold onto it.

There are many misconceptions about female hair loss, most notably how common it is. Roughly half of all women over the age of 40 suffer from some form of hair loss. That's right – half. While most people tend to think of hair loss as a man's problem, the reality is that women are almost just as likely as men to lose their hair. They do however lose their hair differently, the main difference being that female hair loss occurs more diffusely over the affected areas of scalp, leaving some follicles unscathed while severely miniaturizing others.

Genetics and other factors determine the time of onset, speed and severity of loss over time. Female hair loss can be mild or severe, and there are

a variety of factors at work that determine how a woman's hair will change over time. Hair loss can start at any age - teens, twenties, thirties, forties, and a woman's risk skyrockets after menopause. But despite its prevalence, there is an undeniable societal stigma associated with female hair loss. When men experience hair loss, they have the option to simply shave it off and forget about it, where unfortunately for women, there isn't a similar socially-acceptable option. This is where the higher risk of depression, anxiety and embarrassment comes into play for women.

Luckily, today, there are a wide-range of treatments for women that can help combat hair loss and thinning at all stages. From FDA-approved minoxidil to special marine-derived supplements, low-level laser therapy, prostaglandin analogs, platelet-rich plasma (PRP) therapy and NeoGraft and ARTAS robotic-assisted FUE hair transplants, there are several highly effective medical treatment options available for female hair loss patients. There are also genetic tests available that can predict a woman's hair loss risk later in life and a scientific measuring tool called HairCheck that can help professionals accurately measure, ana-

lyze and track the amount of hair in various areas of scalp over time. This can help monitor hair loss or hair regrowth from treatments over time.

Whether the hair loss is the result of aging, natural hormonal changes, and/or other underlying causes, in most cases, hair loss is a treatable condition and not something you have to live with or hide. Preventing further hair loss and improving hair growth can help restore a feeling of vitality, youth and confidence for women.

If you are experiencing hair loss or thinning, contact a board-certified hair restoration physician who can work with you to determine the most effective treatment regimen for your specific needs and scientifically track your progress. Patients should look for a doctor who is a full-time medical hair loss specialist who is certified by the American Board of Hair Restoration Surgery and recommended by the American Hair Loss Association. Only a qualified and experienced hair restoration physician can perform natural-looking hair transplants and prescribe the most effective multi-therapy treatment options, including the latest available products.

Low Level Laser



Hair Line Lowering



Scar Revision



ABOUT FEMALE HAIR LOSS:

- A woman's chance of losing hair after menopause is almost just as high as it is for men at that age, but female pattern hair loss looks different.
- It's easy to miss the early warning signs of female pattern hair loss – but catching it early is key, as 50% loss can occur before it's noticeable to the human eye. There are a number of effective treatments for female hair loss, but the best results occur when they're started early on.
- Hair loss around menopause is common due to changes in hormone levels and activity, but it cannot be commonly cured with hormone replacement alone.
- Genetic predisposition, unusual levels of stress, hormonal imbalances, vitamin deficiencies, crash diets, medications, as well as a history of illness and surgery can also be contributing factors to female hair loss.
- Most women benefit from a combination of pharmaceutical and lifestyle changes in treating their hair loss and thinning. Results are proportional to your level of discipline and compliance with the prescribed regimen.
- Medical treatments to protect and enhance hair follicle functioning may include compounded topical minoxidil Formula 82M, platelet-rich plasma injections, Latisse/Bimatoprost or other prostaglandin analogs, low-level laser therapy, off-label anti-androgens (for post-menopausal women only) and nutritional supplements like Viviscal Professional and pharmaceutical grade biotin.
- Routine diagnostic and tracking methods with scientific HairCam™ microscopic scalp analysis and HairCheck™ measurements are key to help you and your doctor determine how well your treatments are working and when to make changes to your regimen.
- No-scalpel/No-stitch hair transplant harvesting techniques like NeoGraft and ARTAS robotic-assisted FUE can restore density in severely depleted areas of scalp without the risks of scarring, discomfort, downtime and unnaturalness of old-style procedures.

About Dr. Alan J. Bauman, M.D.

Dr. Alan J. Bauman is the Founder and Medical Director of Bauman Medical Group in Boca Raton, Florida. Since 1997, he has treated nearly 15,000 hair loss patients and performed nearly 7,000 hair transplant procedures. A international lecturer and frequent faculty member of major medical conferences, Dr. Bauman's work has been featured in prestigious media outlets such as The Doctors Show, CNN, NBC Today, ABC Good Morning America, CBS Early Show, Men's Health, The New York Times, Women's Health, The Wall Street Journal, Newsweek, Dateline NBC, FOX News, MSNBC, Vogue, Allure, Harpers Bazaar and more. A minimally-invasive hair transplant pioneer, in 2008 Dr. Bauman became the first ABHRS-certified Hair Restoration Physician to routinely use NeoGraft FUE for hair transplant procedures.



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Are Hormones Driving You Mad?

by Daniela Dadurian, M.D.



Hormones are literally one of the body's important driving forces. They are chemicals made by glands and act to control certain actions of cells and organs which make them messengers of the body. Hormones play a critical role in several areas of our body. They control many facets of our emotional and physical health. If you have ever suffered from fatigue, mental fog, depression, anxiety, mood swings, hot flashes, night sweats, low libido, tension, headaches, hair loss, acne, weight gain or weight loss then you have been directly impacted by your hormones.



Each hormone in the body is responsible for a different function and the imbalance of those hormones may trigger unwanted responses from your body.

To diagnose a hormonal imbalance a blood test is used to measure the levels of hormones in the body. Some of the most common hormones to measure are FSH, LH, Estradiol, Testosterone levels. There are many ways to treat hormonal imbalances either by using synthetic hormones which include pills, patches and/or shots, or by using Bio-identical Hormones which include pills, creams, troches, and pellets.

Once the hormones are measured, we can accurately assess whether a patient is a candidate for replacement. The most common misconception usually seen from a lab result is that all levels are within normal limits. That does not mean they are optimal. The goal is to optimize hormones in order to achieve the best medical benefits.

Estrogen alone has over 400 functions in our body. It helps to control hot flashes, maintain bone density, maintain memory, reduces the risk of colon cancer, increases serotonin and dopamine (happy hormones). If you have a history of drinking or smoking, these habits can decrease estrogen.

Testosterone is vital to protecting your heart, bones, brains, joints and breasts. Both men and women need testosterone and lose testosterone every year. The benefits of a truly balanced testosterone level are truly remarkable. It can help to increase energy, decrease anxiety and depression, improve memory, improve focus, increase libido and enhance performance.

Traditional medicine has known only one way to treat hormone imbalance in women and that is prescribing synthetic hormones. However clinical trials show an increase in strokes, heart attacks, breast cancer, blood clots and Alzheimer's disease in women with this type of replacement. Other methods of hormone delivery include:

Patches – are not easily absorbed; need to be changed throughout the week

Creams/ Gels – can be difficult to determine if you have applied enough or remembered to apply daily

Injectable Testosterone – tends to have a “roller coaster” effect due to a very uneven absorption.

Pellets – are a natural, non synthetic option derived of soy and yams. They are bioidentical which means they have the same molecular structure as human hormones. Once pellets are inserted under the skin, little blood vessels form around the pellets, which ensure a daily even delivery of hormones. In women they last 3-4 months and in men 5-6 months.

Pellet therapy using bioidentical hormones has been by far the most effective in my practice. Patients are happier and healthier. They are finding that they are more energetic, sleeping better, have better focus and clarity. Spouses are thankful for the boost in libido and word travels fast of the many benefits of pellet therapy. For more information, visit www.drdadurian.com or call 561-655-6325.



Medical Director, Daniela Dadurian M.D.

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MD Beauty Labs at The Whitney in West Palm Beach was established by Dr. Daniela Dadurian. Board Certified in Anti-aging Medicine, she's well trained to offer proven and effective cosmetic and wellness services. MDBL's state-of-the-art facility offers Medical, Aesthetics, Body Contouring & Spa Treatments in a luxurious, contemporary loft environment. With Dr. Dadurian's team of Nurses, Medical Estheticians, Massage Therapists, Permanent Makeup Specialists and Medical Spa Concierge, MD Beauty Labs is dedicated to providing the best in restoring and revitalizing experiences.

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WHAT IS BRANCH RETINAL VEIN OCCLUSION (BRVO)?

By Lauren R. Rosecan, M.D., Ph.D., F.A.C.S.

The retina — the layer of light-sensitive cells at the back of the eye — is nourished by the flow of blood, which provides nutrients and oxygen that nerve cells need. When there is a blockage in the veins into the retina, retinal vein occlusion may occur.



BRANCH RETINAL VEIN OCCLUSION (BRVO) SYMPTOMS

Because the macula—the part of the retina responsible for central vision—is affected by blocked veins, some central vision is lost.

The most common symptom of BRVO is vision loss or blurring in part or all of one eye. The vision loss or blurring is painless and may happen suddenly or become worse over several hours or days. Sometimes there is a sudden and complete loss of vision. BRVO almost always happens only in one eye.

WHO IS AT RISK FOR BRANCH RETINAL VEIN OCCLUSION (BRVO)?

BRVO is associated with aging and is usually diagnosed in people who are aged 50 and older. High blood pressure is commonly associated with BRVO.

In addition, people with diabetes are at increased risk for BRVO. About 10 percent to 12 percent of the people who have BRVO also have glaucoma. People with atherosclerosis (hardening of the arteries) are also more likely to develop BRVO.

The same measures used to prevent coronary artery disease may reduce your risk for BRVO. These include:

- eating a low-fat diet;
- getting regular exercise;
- maintaining an ideal weight; and
- not smoking.

BRANCH RETINAL VEIN OCCLUSION (BRVO) DIAGNOSIS

If you experience sudden vision loss, you should contact your ophthalmologist immediately. He or she will conduct a thorough examination to determine if you have branch retinal vein occlusion (BRVO). Your ophthalmologist will dilate your eyes with dilating eye drops, which will allow him or her to examine more thoroughly the retina for signs of damage. Among the other tests that your Eye M.D. may conduct are:

- Fluorescein angiography. This is a diagnostic procedure that uses a special camera to take a series of photographs of the retina after a small amount of yellow dye (fluorescein) is injected into a vein in your arm. The photographs of fluorescein dye traveling throughout the retinal vessels show how many blood vessels are closed.
- Intraocular pressure.
- Pupil reflex response.
- Retinal photography.
- Slit-lamp examination.
- Testing of side vision (visual field examination).
- Visual acuity, to determine how well you can read an eye chart.

In addition, you may be tested to determine your blood sugar and cholesterol levels. People under the age of 40 with BRVO may be tested to look for a problem with clotting or blood thickening.

BRANCH RETINAL VEIN OCCLUSION (BRVO) TREATMENT

Because there is no cure for branch retinal vein occlusion, the main goal of treatment is to stabilize vision by sealing off leaking blood vessels. Treatments may include laser treatment and injections.

Finding out what caused the blockage is the first step in treatment. Your Eye M.D. may recommend a period of observation following your diagnosis. During the course of BRVO, many patients will have swelling in the central macular area. This swelling, called macular edema, can last more than one year.

MicroPulse Focal laser treatment can be used to reduce swelling of the macula. With this form of laser surgery, your Eye M.D. applies many non-scarring laser burns to areas of fluid leakage around the macula. The main goal of treatment is to stabilize vision by sealing off leaking blood vessels that interfere with the proper function of the macula. Treatment with injections of Avastin or Eylea in the eye may also be done.



The Retina Institute of Florida

Lauren R. Rosecan

M.D., Ph.D., F.A.C.S.

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ENCOURAGING THOSE WE LOVE TO GET THE HEARING HELP THEY NEED

Tips to being a good hearing advocate

By Dana Luzon, Au.D. CC-A, FAAA

Written by Tara Brink, Doctoral Extern at HearLife of MN

According to the American Speech, Language & Hearing Association (ASHA), hearing loss is the third most prevalent chronic health condition facing older adults. Unfortunately, only about 20% of those individuals who may benefit from treatment actually seek help, and most tend to delay treatment until they are unable to communicate in even the best possible listening conditions.



As hearing health care providers, we often observe denial in many patients who are only seeing us because a family member has “forced” them into our clinic. Although I am going to encourage the patient to seek the help that they need, I am also understanding of why they are in the situation that they are facing. We have to remember that, in most cases, hearing loss is a very gradual event. What that means is that the individual is constantly compensating for their loss over time. For example, a patient with a mild hearing loss that has developed over many years may not feel that they have lost anything. However, if they were to experience that same degree of loss in a short amount of time, let’s say overnight, it would be more apparent to them that their hearing is not normal. As the hearing loss progresses over time, the individuals who interact with the patient often are the most observant of its effects.

When you begin to notice a friend or family member struggling with hearing and understanding, it is instinctive to want to jump in and help. Since most patients often do not realize the extent of their hearing loss and how it is affecting others around them, simply voicing your concerns can be enough to convince them to seek help. But how do you be an advocate for someone who is hesitant, without being pushy or invasive? Here are some helpful tips to encourage your friend or family member to get their hearing tested, while also respecting their feelings:

TALK WITH THEM, NOT AT THEM

Instead of talking at them about their hearing and hearing loss, talk with them. Let them know you are there to listen and encourage them to be open about difficulties they may be facing. Try to get a discussion going. Rather than lecturing them about what they did and did not hear, ask questions about what they have noticed in their situations and environments.

INFORM THEM THAT HEARING LOSS IS COMMON, AND CAN EASILY BE MANAGED

According to the Better Hearing Institute, there are an estimated 48 million individuals in the United States with hearing loss, including 1 in 6 baby boomers (ages 41-59). However, individuals of all ages are affected; approximately 3 million children in the U.S. have a hearing loss (Center for Hearing and Communication). Hearing loss is not just a natural process of aging. It can be a truly debilitating disease. Let them know that hearing loss is common and that they are not alone. Furthermore, many patients are unaware at the technological advances in the hearing industry. Hearing aids are not what they used to be 10 to 20 years ago. Every year the technology is improving. There are all types and styles of hearing aids that can be customized to fit anyone’s hearing needs.

TWO MINDS THINK ALIKE

If you have other friends or acquaintances who have hearing loss or wear hearing aids, talk to them about how their experiences have been. Sometimes it takes another individual with hearing loss to help a patient see how much he or she is missing, and how much getting treatment can improve quality of life.

OFFER TO GO WITH THEM, AND GET YOUR HEARING CHECKED AS WELL

Let them know that they have your support and are not alone. I cannot stress enough how important it is to have a companion join a patient at their initial appointment. Not only can you help to provide important information regarding the environments that the patient is struggling, but the patient overall may feel less reluctant to the idea if you are there to join them.

BE PATIENT

Try not to become impatient or frustrated when communication difficulties arise and you find yourself having to repeat yourself or others multiple times. Becoming angry or annoyed can make you less trustworthy as an advocate and may make the patient feel that you don’t support them anymore. Continue to advocate about improving quality of life through hearing to the patient. Everyone eventually reaches a point at which help is the only option left.

WE CAN HELP

If you or a loved one would be interested in coming into our offices and learning more, or to get a free hearing test, please your AudigyCertified provider for an appointment.

Dana Luzon,
Au. D. , CCC-A, FAA,
Doctor of Audiology



Originally from Southern NJ, Dana Luzon received her undergraduate degree in Speech Pathology and Audiology from the Richard Stockton College of NJ, and continued on to receive her Doctorate of Audiology at Salus University’s residential program. Her varied clinical experiences throughout her doctoral studies include: VA hospitals, rehabilitation clinics, ENT and private practice settings. Her professional interests include: audiologic rehabilitation and progressive tinnitus devices. Her interests in the field outside of the clinic include: Humanitarian Audiology, and Audiology Awareness. Dr. Luzon currently lives in West Palm Beach, FL.



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What is CBD

AND THE MEDICAL TREATMENT IT PROVIDES?

Jeff Mandall, owner of Vapor Rocket, South Florida CBD, and an advisor to the board of directors for Miami Beach Community Health Centers is the local expert about CBD and its use. He prides himself in working with area medical providers to educate and facilitate treatment of patients with a multitude of different health problems. We went straight to the expert to get our questions answered and here's what we learned:

CANABIDIOL—CBD—is a cannabis compound that has significant medical benefits, but does not make people feel “stoned” and can actually counteract the psycho activity of THC. The fact that CBD-rich cannabis is non-psychoactive makes it an appealing option for patients looking for relief from inflammation, pain, anxiety, psychosis, seizures, spasms, and other conditions without disconcerting feelings of lethargy or dysphoria.

Scientific and clinical research—much of it sponsored by the US government—underscores CBD’s potential as a treatment for a wide range of conditions, including arthritis, diabetes, alcoholism, MS, chronic pain, schizophrenia, PTSD, depression, antibiotic-resistant infections, epilepsy, and other neurological disorders. CBD has demonstrable neuroprotective and neurogenic effects, and its anti-cancer properties are currently being investigated at several academic research centers in the United States and elsewhere.

Extensive preclinical research—much of it sponsored by the U.S. government—indicates that CBD has potent anti-tumoral, antioxidant, anti-spasmodic, anti-psychotic, anti-convulsive, and neuroprotective properties. CBD directly activates serotonin receptors, causing an anti-depressant effect, as well.

Here are five facts that you should know about this unique compound:

1. CBD is a key ingredient in cannabis

CBD is one of over 60 compounds found in cannabis that belong to a class of molecules called cannabinoids. Of these compounds, CBD and THC are usually present in the highest concentrations, and are therefore the most recognized and studied.

CBD and THC levels tend to vary among different plants. Marijuana grown for recreational purposes often contains more THC than CBD.

However, by using selective breeding techniques, cannabis breeders have managed to create varieties with high levels of CBD and next to zero levels of THC. These strains are rare but have become more popular in recent years.

2. CBD is non-psychoactive

Unlike THC, CBD does NOT cause a high. While this makes CBD a poor choice for recreational users, it gives the chemical a significant advantage as a medi-

cine, since health professionals prefer treatments with minimal side effects.

CBD is non-psychoactive because it does not act on the same pathways as THC. These pathways, called CB1 receptors, are highly concentrated in the brain and are responsible for the mind-altering effects of THC.

A 2011 review published in Current Drug Safety concludes that CBD “does not interfere with several psychomotor and psychological functions.” The authors add that several studies suggest that CBD is “well tolerated and safe” even at high doses.

3. CBD has a wide range of medical benefits

Although CBD and THC act on different pathways of the body, they seem to have many of the same medical benefits. According to a 2013 review published in the British Journal of Clinical Pharmacology, studies have found CBD to possess the following medical properties:

MEDICAL PROPERTIES OF CBD	EFFECTS
Antiemetic	Reduces nausea and vomiting
Anticonvulsant	Suppresses seizure activity
Antipsychotic	Combats psychosis disorders
Anti-inflammatory	Combats inflammatory disorders
Anti-oxidant	Combats neurodegenerative disorders
Anti-tumoral/ Anti-cancer	Combats tumor and cancer cells
Anxiolytic/ Anti-depressant	Combats anxiety and depression disorders

Unfortunately, most of this evidence comes from animals, since very few studies on CBD have been carried out in human patients.

But a pharmaceutical version of CBD was recently developed by a drug company based in the UK. The company, GW Pharmaceuticals, is now funding clinical trials on CBD as a treatment for schizophrenia and certain types of epilepsy.

Likewise, a team of researchers at the California Pacific Medical Center, led by Dr. Sean McAllister, has stated that they hope to begin trials on CBD as a breast cancer therapy.



4. CBD reduces the negative effects of THC

CBD seems to offer natural protection against the marijuana high. Numerous studies suggest that CBD acts to reduce the intoxicating effects of THC, such as memory impairment and paranoia.

CBD also appears to counteract the sleep-inducing effects of THC, which may explain why some strains of cannabis are known to increase alertness.

5. CBD is legal in the US and many other countries:

If you live in the US, you can legally purchase and consume Cannabidiol in any state.

Cannabidiol from industrial hemp also has the added benefit of having virtually no THC. This is why it’s not possible to get “high” from CBD.

In fact various government agencies are taking notice to the clinical research supporting the medical benefits of CBD. The U.S. Food and Drug Administration recently approved a request to trial a pharmaceutical version of CBD in children with rare forms of epilepsy. The drug is made by GW Pharmaceuticals and is called Epidiolex.

According to the company, the drug consists of “more than 98 percent CBD, trace quantities of some other cannabinoids, and zero THC.” GW Pharmaceuticals makes another cannabis-based drug called Sativex, which has been approved in over 24 countries for treating multiple sclerosis.

We at Vapor Rocket are not medical doctors, however, we do pride ourselves on working closely with treating medical physicians, scientists, and leading researchers in the CBD field to ensure we provide our patients with the highest quality CBD to treat identified medical conditions. If you are interested in using CBD for treatment of an ailment, we recommend you consult your doctor to make sure it’s right for you.

Vapor Rocket provides top of the line, high quality organic botanical oils, waxes, and pastes that offer numerous medicinal benefits. With no prescription required, our product captures the highest concentration of cannabidiol available, a chemical compound that triggers and modulates receptors in the brain to offer the following benefits: Anti-seizure, Easing chronic pain, Psychological Health Benefits, Anti-inflammatory properties. If you have further questions about CBD or request that we work with your medical professional, please contact Vapor Rocket’s knowledgeable staff at **561-200-0122**.



Imagine a world where you can eat anything you want, taste food again, have no pain when you chew or eat, no longer have bad breath and have a beautiful healthy smile.

USEFUL INFORMATION ON DENTAL IMPLANTS

A dental implant may be the best option for restoring your smile when you have lost or broken a tooth. Learn more about dental implants and when they are right for you.

NEXT BEST THING TO HEALTHY, NATURAL TEETH.

Strong and stable, a dental implant restores a lost tooth so that it looks, feels, fits and functions like a natural tooth. Other options can lead to bone deterioration, and may interfere with eating, smiling, speaking and other activities.

DENTAL IMPLANTS ARE A LONG-TERM SOLUTION.

Traditional, tooth-supported dental bridges only last five to seven years. At some point they may need to be replaced. While dental implants may need periodic adjustments, they can last a lifetime when properly placed and cared for over time.

ENJOY LIFE WITHOUT WORRYING ABOUT YOUR TEETH!

No need to stay home or feel uncomfortable in public, embarrassed because your smile looks different, or worrying that missing teeth will limit your ability to join in the fun or that removable dentures or tooth-supported replacement teeth will loosen or fall out when you talk, eat or laugh. Teeth restored with dental implants are teeth that let you enjoy your life.

RETAIN YOUR NATURAL FACE SHAPE, AND SMILE.

A face without teeth can sag and appear sunken and sad. Dental implants allow you to maintain the natural shape of your face and smile.

KEEP YOUR TEETH IN YOUR MOUTH – NOT IN A CUP.

Dental implants allow you to keep your teeth where they belong – in your mouth. No more

worrying that your dentures might slip or fall out. Dentures may slip when you eat, talk, smile, laugh, kiss, yawn or cough. Dental implants are fixed in place and fuse naturally with your jawbone, meaning your replacement teeth won't move, click or shift.

EAT YOUR FAVORITE FOODS!

Taste and enjoy the foods you love without hesitation. You can bite naturally, eat virtually anything you want and, unlike removable dentures that can feel uncomfortable, you can experience the full taste of the food you eat with dental implants, too.

PROTECT YOUR HEALTHY TEETH.

Placing a tooth-supported bridge requires grinding away the teeth on one or both sides of the missing tooth or teeth. This damages healthy teeth to restore those that are missing. Dental implants go in the jawbone, in the spot where your missing tooth root was, without impacting healthy teeth.

MORE PREDICTABLE THAN OTHER REPAIR AND RESTORATION METHODS.

Dental implant treatment has a track record of reliable, long-term successful outcomes and is

often considered more predictable than other treatments to repair or replace missing teeth, including bridgework, removable appliances and retreatment of failing root canal teeth.

THE RIGHT CHOICE

The dental team at Drs. Lerner and Lemongello's office is available to ensure your comfort and safety and are available to answer any of your concerns. So whether it is for a dental check up, a simple tooth restoration, a smile makeover, dental implants, or complete mouth restorations our team is ready to help you achieve the smile you deserve and the dental health you want.

Get the beautiful smile you have always dreamed of, make an appointment today! Contact Drs. Lerner and Lemongello for an appointment and information on all dental procedures at **561-627-9000**. Visit our website at **www.lernerlemongello.com** and view our "Smile Gallery" for examples of some of South Florida's most beautiful smiles.

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Gerard J. Lemongello DMD



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DO YOU SUFFER FROM CHRONIC PAIN?

FEEL LIKE YOU'VE TRIED EVERYTHING?

YOUR DOCTOR DOESN'T KNOW
WHAT ELSE TO DO?

MEDICATION NOT A GOOD SOLUTION?



By Mike Cohen, Director, Center for Brain

YOU DON'T HAVE TO STRUGGLE WITH CHRONIC PAIN FOR THE REST OF YOUR LIFE

If you're reading this, you're probably desperately seeking a solution for chronic pain. You've likely sought help from several healthcare professionals, tried medications, pursued yoga or chiropractic or maybe even seen a mental health professional in case "it's all in your head."

**YOU MAY BE WONDERING:
WILL I HAVE TO LIVE WITH CHRONIC
PAIN FOR THE REST OF MY LIFE?**

The answer is **NO**.

**WITH THE HELP OF BIOREGULATION
THERAPY (BRT)...
YOU CAN RETRAIN YOUR NERVOUS
SYSTEM TO REDUCE PAIN.**

You've heard it before. Some great new machine or procedure will solve your problem or reduce your pain. Then... it doesn't live up to its promises.

At Center for Brain you'll never be offered a treatment that we haven't thoroughly investigated and tested, no matter how good it sounds in theory.

In 2013 we learned of BRT being used in Europe with great success. We were cautiously optimistic about its potential for our practice. However, we've built a solid reputation in South Florida for providing dependable, effective non-drug therapies such as neurofeedback that really do help patients with chronic pain (and other disorders such as anxiety and insomnia) who haven't responded to conventional treatments.

To be incorporated into our sophisticated toolbox, BRT had to meet my very stringent criteria (which few of the dozens of technologies I've evaluated over the years have): (1) Does it work consistently, beyond a doubt, with *complicated*, chronic, treatment-resistant cases? (2) And do results sustain over time?

To find out I put it to the test for six weeks – with some very difficult chronic cases, including this one:

A 37-year-old woman had suffered for ten years with daily headaches and chronic back and neck pain. Just getting out of bed triggered severe pain throughout her body. She was unable to lift anything, turn her neck or lift her constantly-stiff and painful shoulders. After undergoing one session, she reported for five days that she had been able to get out of bed easily for the first time in years, had had no headaches and had 70 percent improvement in her pain. (Author's note: Despite expecting some sort of improvement, the extent of her response surprised us. Over time we've seen other equally-impressive results, although usually it takes more than one session. The client needed more sessions to produce sustained progress, but the amount of change in one session was remarkable – and gave an indication of what was possible).

With the results we saw with this client and others during our six-week trial, we committed to invest in the technology. Consistent results are, after all, the only thing that counts with pain.

We refined how to combine the treatments with our neurofeedback tools and have seen our clients improve to an extent that astounded us. Frankly, after more than a decade of searching for a new technology to complement or enhance the benefits of our neurofeedback technology, BRT revolutionized how Center for Brain treats chronic pain.

We can't say how long it will take for any given individual to see results, or even guarantee that you'll get results at all, but in the two years that we've been providing BRT, at least 75 percent of our clients have reported consistent improvement, and even more improvement when combined with neurofeedback. In complicated chronic cases, pain reduction often occurs in as little as one session but more commonly in six sessions.

Here are two more of our success stories:

A client had been plagued by chronic back pain since the age of 16. She tried many solutions, eventually seeking help from a pain doctor and becoming addicted to pain medication. She was confined to her bed and couch three to four days a week and struggled to get anything done. After four bioregulation treatments over the course of a month, she reported an 80% reduction in pain and a significant reduction in pain medications. After two more sessions she discontinued her pain medications and resumed normal life, including working in her yard. One year later she was still pain- and pain medication-free.

A woman had 40 years of chronic headaches, neck and back pain she attributed to a car accident at age 19. She had seen more than 50 healthcare specialists, including neurologists, chiropractors and acupuncturists, without any relief. After four sessions she reported significantly reduced pain, and after a month she had had no headaches and reported a 75% reduction of her pain.

WHAT IS BIOREGULATION THERAPY

BioRegulation Therapy has its roots in acupuncture but with the added advantage of modern-day technology. It's a body balancing method whereby a computerized machine reads the electrical impulses (frequencies) being emitted by the cells in your body. It filters out the disharmonic "unhealthy" vibrations that interfere with optimal cell communication (and thus interfere with their optimal functioning),



Since combining BioRegulation Therapy with neurofeedback, the results in pain reduction astounded even us. Neurofeedback helps pain but it's not enough. Pain is tough. We spent more than a decade searching for a technology to enhance neurofeedback. BRT revolutionized how Center for Brain treats chronic pain.

amplifies the "healthy" harmonic frequencies, and sends them back to the cells. These harmonic frequencies "invigorate" the cells and encourage them to function the way they are supposed to.

Once the cells are doing their jobs better, the nervous system calms down and pain signals, which have become magnified over time, diminish.

All you have to do is recline on a comfortable chair or table in one of our pleasantly-decorated treatment rooms and relax. Our computer does the rest. You feel nothing during your treatment.

WHY YOU MIGHT NOT HAVE HEARD OF BIOREGULATION THERAPY FROM YOUR DOCTOR

Because BioRegulation Therapy is a non-drug treatment for pain, many doctors and other health professionals are unaware of the technology and its effectiveness. In the United States, our health culture is centered on drugs. Therefore other approaches, even though they are effective, are often overlooked because they lack large promotional budgets such as those of pharmaceutical companies.

Important things to know about us before turning to Center for Brain for help:

- We see you as a person in distress, not a "patient" or a "case."
- We believe you when you say you're hurting.
- We listen to you. With care and compassion. Without judgment.
- We ask a lot of questions to get to know who you are and what makes your problem unique.

- In addition to BioRegulation therapy, we have an array of other specialized tools designed to help re-program your out-of-whack electrical signals that are at the root of chronic pain.
- We take a holistic approach to your healing by offering complementary modalities, such as nutrition and counseling, available from our team of highly-credentialed specialists.

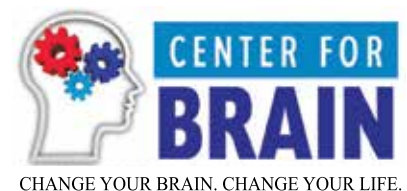
You have nothing to lose but your pain by calling Center for Brain to learn more about chronic pain treatments at **(561) 744-7616** or visit **www.CenterforBrain.com**.

Take your first step toward pain relief by calling today.



Michael Cohen,
President and Founder of the
Center for Brain.

He's one of the leading experts in brain biofeedback. For 18 years, he's taught courses and provided consulting to MD's and mental health professionals around the world to help incorporate new biofeedback technologies that help individuals adapt and strengthen their nervous system through neuroplasticity. This helps sleep, mood, attention and neurological function.



Jupiter/Abacoa 561.744.7616

www.CenterforBrain.com

Limb Swelling: Medicare Approved Treatment Options

By Alyssa Parker

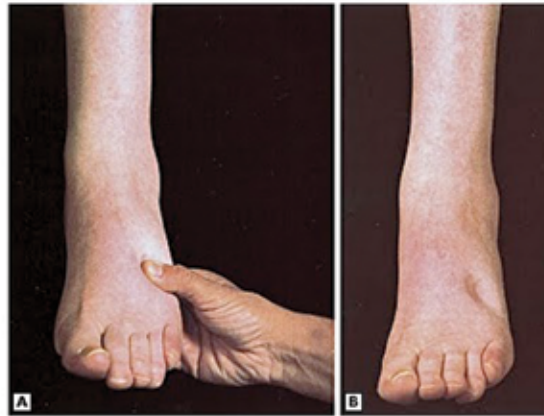
Pneumatic compression devices are one of the most highly recommended treatments for limb swelling and are a Medicare approved treatment option. Dating back to the 1960's pneumatic compression pumps have been used for the treatment of limb swelling due to acute and chronic conditions. In most cases compression pumps are used for swelling associated with lymphedema as well as venous insufficiency. Limb swelling left untreated without a clinical diagnosis and lack of proper treatment may lead to a variety of problems.

Patient's with Venous Insufficiency who experience severe and persistent edema overtime can lead to trapped protein-rich fluid also referred to as secondary lymphedema. The lower region of the leg becomes permanently swollen and may start to harden. Due to poor circulation and protein-rich fluid buildup wounds may become chronic and appear more frequently. Common signs and symptoms that occur are fluid accumulation in a limb, a feeling of heaviness or tightness, thickening of the skin, pain or redness, or chronic ulcers in the affected limb.

How does compression therapy work?

A compression device is used for both acute care (short term in the hospital) as well as chronic care (long term in the home). The compression pump increases blood flow and lymphatic flow. By increasing the circulation in the affected limb many painful symptoms will be alleviated. When compression treatment is used on a limb the excess fluid is removed and worked back into the lymphatic system the natural way. For patients with chronic ulcers using a compression device will help heal the wound from the inside out, by increasing the circulation in the return of the blood from the heart. The heart delivers oxygen rich blood back to the legs and the tissue.

The pneumatic sequential compression relieves the pain and pressure in the swollen area and reduces the size of the limb. The sequential inflation of the chambers, of the sleeve around the affected limb, begins distal (lower region of the limb furthest from attachment) to proximal (area of attachment to the body) naturally mimicking your bodies lymph return while stimulating the blood flow in the legs.



What causes limb swelling?

There can be many different causes for limb swelling, however, two of the most common diseases for chronic limb swelling are Lymphedema and Venous insufficiency. After having a surgical procedure cancer or non-cancer related (example hysterectomy or gallbladder removal) it may take months or years for Lymphedema to manifest because of its slow progression. It is imperative that Lymphedema is treated quick and effectively, regardless of the severity. Complications dramatically decrease when treatment is started in the earliest stage of Lymphedema.

Chronic venous insufficiency is another condition that causes swelling in the legs along with open wounds. CVI occurs when the valves in the veins that normally channel the blood to the heart become damaged which then leads to pooling of the blood in the lower extremities.

Discoloration of the skin, referred to as hemosiderin staining, is identified by a reddish staining of the lower limb. Poor circulation may cause shallow wounds to develop due to the stagnant blood that would normally return to the heart. Symptoms vary but may include swelling, aching, itching or burning, varicose veins, infection, chronic venous ulcer, and decreased mobility.

Is a Compression Device the right treatment for me?

Using a compression device is a great treatment option for patients who have tried compression stocking, elevation, diuretics, and massage with little or no relief. It's also a treatment option for individuals who have chronic venous ulcers. When compression stockings get worn out or stretched over time; many patients aren't receiving the needed compression. When using a compression pump the pressure is locked in, ensuring that you're getting the appropriate amount of pressure each treatment.

Diuretics may be useless and harmful over time if your edema (swelling) is a symptom of chronic venous insufficiency or lymphedema. Diuretics draw fluid from your venous system that your body must have in order to balance the continual fluid deposit from your arterial capillaries; if the needed interstitial fluid is not present because you are taking a diuretic, this will only aggravate your lymphatic system which may lead to additional fluid retention and additional swelling. Also, using a pneumatic compression device may help the prevention of blood clotting along with deep vein thrombosis or those individuals who are at risk for it.

If you or someone you love suffers from limb swelling it is important to keep a few things in mind. If any of the following apply, seeking medical advice is recommended.

- Family history of edema, venous insufficiency, or lymphedema
- Pitting or skin hardening: push your finger into your skin and count how long it takes to return
- Hemosiderin staining: "red socks" appear from the ankles down
- Traumatic injury or surgery potentially damaging your circulatory system (knee replacement etc)
- Radiation exposure

For patients who many have Chronic venous insufficiency a test called a vascular or duplex ultrasound may be used to examine the blood circulation in your legs.

The compression pump is approved by Medicare and covered by many commercial insurers; Actual coverage varies with individual commercial insurance policies. Acute Wound Care, LLC is a highly focused local provider of wound products and compression pumps working with select area physicians highly versed in this condition.



ACUTE WOUND CARE

Contact Acute Wound Care today and speak with a specialist by calling

239-949-4412

www.AcuteWoundCare.com

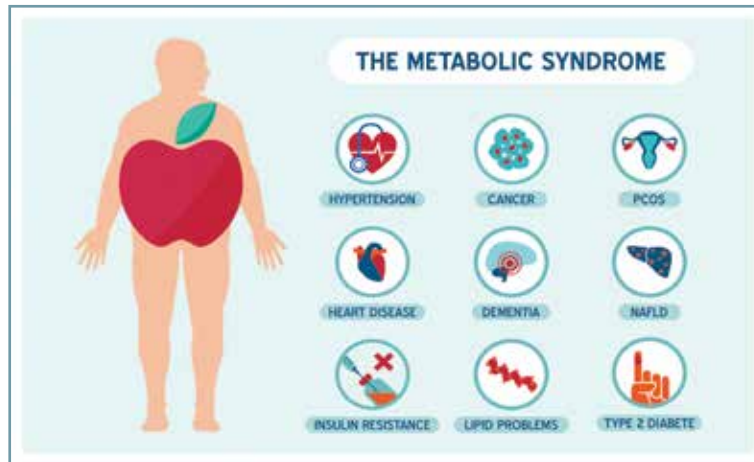
Your Health by the Numbers.

What Is Metabolic Syndrome?

By Susan Peacock MSRDN

Your body lives by rules measured by numbers. Metabolic syndrome is the name for a group of risk factors that raises your risk for heart disease, *diabetes* and *stroke*.

The term "metabolic" refers to the biochemical processes involved in the body's normal functioning. Risk factors are traits, conditions, or habits that increase your chance of developing a disease.



Here you will find the healthy numbers the biochemical processes live by to maintain a healthy body. "Heart disease" refers to *coronary heart disease* (CHD). CHD is a condition in which a waxy substance called plaque builds up inside the coronary arteries.

Plaque hardens and narrows the arteries, reducing blood flow to your heart muscle. This can lead to *chest pain*, a *heart attack*, heart damage, or even death.

METABOLIC RISK FACTORS

The **five conditions** described below are metabolic risk factors. You can have any one of these risk factors by itself, but they tend to occur together. You must have at least **three metabolic risk factors to be diagnosed with metabolic syndrome**.

- **A large waistline.** That would be 35" for women and 40" for men. This also is called abdominal obesity or "having an apple shape." Excess fat in the stomach area is a greater risk factor for heart disease than excess fat in other parts of the body, such as on the hips.

- **A high triglyceride level:** 150 mg/dL or higher (or being on medicine to treat high triglycerides) is a metabolic risk factor. Triglycerides are a type of fat found in the blood. (The mg/dL is milligrams per deciliter—the units used to measure triglycerides, cholesterol, and blood sugar.)

- **A low HDL cholesterol level** (or you're on medicine to treat low HDL cholesterol). HDL sometimes is called "Happy" cholesterol. This is because it helps remove cholesterol from your arteries.

A low HDL cholesterol level raises your risk for heart disease. An HDL cholesterol level of less than 50 mg/dL for women and less than 40 mg/dL for men is a metabolic risk factor.

- **High blood pressure** (or you're on medicine to treat high blood pressure).

If this pressure rises and stays high over time, it can damage your heart and lead to plaque buildup. A blood pressure of 130/85 mmHg or higher blood pressure is a metabolic risk factor.

If only one of your two blood pressure numbers is high, you're still at risk for metabolic syndrome.

- **High fasting blood sugar.**

A normal fasting blood sugar level is less than 100 mg/dL. A fasting blood sugar level between 100–125 mg/dL is considered prediabetes. A fasting blood sugar level of 126 mg/dL or higher is considered diabetes.

A fasting blood sugar level of 100 mg/dL or higher (or being on medicine to treat high blood sugar) is a metabolic risk factor.

About 85 percent of people who have type 2 diabetes—the most common type of diabetes—also have metabolic syndrome.

These people have a much higher risk for heart disease than the 15 percent of people who have type 2 diabetes without metabolic syndrome.

- **(If you are on medicine to treat high blood sugar).** Mildly high blood sugar may be an early sign of diabetes.

OVERVIEW

Your risk for heart disease, diabetes, and stroke increases with the number of metabolic risk factors you have.

In general, a person who has metabolic syndrome is twice as likely to develop heart disease and five times as likely to develop diabetes as someone who doesn't have metabolic syndrome.

Other risk factors such as smoking are major risk factors for heart disease but are not part of the metabolic syndrome.

Having even one risk factor raises your risk for heart disease. You should try to control every risk factor you can to reduce your risk.

The risk of having metabolic syndrome is closely linked to *overweight and obesity* and a lack of *physical activity*. *Insulin resistance* also may increase your risk for metabolic syndrome.

Your genetics and older age are other factors that may play a role in causing metabolic syndrome.

OUTLOOK

Metabolic syndrome is becoming more common due to a rise in obesity rates among adults. The United States is 2nd in the world for obesity.

In the future, metabolic syndrome may overtake smoking as the leading risk factor for heart disease.

It is possible to prevent or delay metabolic syndrome, mainly with lifestyle changes. A healthy lifestyle is a lifelong commitment. Knowing the numbers your body lives by and living within those parameters will help you control metabolic syndrome.



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Wellington, FL 33414

DELRAY

4600 Linton Boulevard, Suite 250
Delray Beach, FL 33445

MIAMI

8501 S.W. 124th Avenue, Suite 101
Miami, FL 33183

COCONUT CREEK

4848 Coconut Creek Parkway, Suite 200
Coconut Creek, FL 33063

STUART

789 South Federal Highway, Suite 102
Stuart, FL 34994

561-500-HOPE(4673)
www.weightlosshope.com

Cancer Nutrition Drink is a Must Have

By Dr. Stan Headley

20-40% of cancer patients actually die from malnutrition (cachexia) and not cancer itself!

As a physician I am shocked and alarmed by that factual statistic. How can that be in this day and age of advanced medicine you might ask? The answer is simple - pharmaceutical companies have invested billions into advancing cancer medicines but medical nutrition for cancer patients has been massively neglected in comparison – until now.

I'm going to share two quick stories with you that at first will seem unrelated, but later they come together to change the world!

Story 1. Cancer is without a doubt the fight of your life, and it's the one fight that you didn't ask for. That was the case for my wife when she was diagnosed with stage III ovarian cancer 7 years ago. Right now is a good time to tell you that I am both dual credentialed as both an MD and a ND (Naturopathic Physician) with 24 years of nutritional medicine behind me. We fought the fight but I lost her to cachexia (severe weight loss) in the end – and thus began my mission to find a solution.

Story 2. The founder and CEO of an international pharmaceutical company (47 countries) received the news of his brother being diagnosed with throat cancer. His brother was young, tall and very handsome - but the fight he didn't seek came to him. He beat the cancer, but he lost the fight due to severe weight loss (cachexia) and passed away. This was a life-changing moment for the CEO and he vowed to change the world of cancer forever – and thus began his mission to find a solution. This is a good time to mention that the CEO's degree was in dietetics and he just happened to work with some of the world's best cancer experts.

Fate would bring myself and the CEO together and allow me to see things never done before in nutritional medicine which are giving cancer patients more than just a fighting chance! The must have product for cancer patients that was developed is called CellAssure. Cancer is one fight that you do not want to face alone, and CellAssure makes sure you have nutritional medicine fighting for you every single day from your day of diagnosis to the day you are cancer free!

CellAssure is a simple once a day drink created from direct requests by physicians, dietitians and patients battling cancer. CellAssure includes ingredients clinically proven to:

- Demonstrate Anti-Cancer / Anti-tumor effects
- Provide needed nutrition for cancer patients with zero sugar in formula
- Improve immune system response
- Maintain or increase appetite
- Increase LBM (lean body mass)
- Reduce stress / anxiety and lower cortisol levels
- Provide relief with nausea/vomiting and diarrhea
- Mitigate anemia and improve my liver function

Cancer is a multi-faceted disease that attacks the body in many ways causing multiple serious side effects, each which needs to be addressed strongly in order for the patient to maintain their health. CellAssure's mission is simple – keeping cancer patients as healthy as possible so their oncologist can kill their cancer with the least amount of side effects/health issues/problems.

Cancer weight loss is associated with poor outcomes for cancer patients—reduced response to therapy, reduced ability to deliver full doses of chemotherapy, stoppages of cancer therapies, increased toxicity, more complications and infections, lower quality of life, and reduced survival.

CellAssure gives patients the essential daily medical nutrition needed to maintain their bodyweight and allow their body to better withstand the rigors of cancer treatments. Remember – staying as healthy as possible allows you to fight cancer without having to stop critical oncology therapies and protocols.



Proper identification of nutrition problems and treatment of nutrition-related symptoms have been shown to stabilize or reverse weight loss in 50% to 88% of oncology patients.

When do I start taking CellAssure?

While most people think that their 'Day of Diagnosis' is when their battle with cancer begins – we know better. The fact is on the 'Day of Diagnosis' their body has already been compromised by the cancer and their nutritional challenges have already started. Cancer has already started waging war and the need for additional nutritional medication is now. It is recommended that you start taking CellAssure from your day of diagnosis forward. Proper nutrition is something helpful regardless of where you are in the cancer process. Of course following a healthy diet along with CellAssure makes the most sense and your healthy eating should continue even after you've won your battle against cancer!

CellAssure is scientifically formulated to help "Fuel the Fight Against Cancer". CellAssure delivers on a level that brings smiles to patients, their families, as well as the physicians taking care of them – and as cancer patients we need a reason to smile. We need a reason to believe that we can overcome, conquer and beat cancer head on.

CellMark Biopharma™ is the leader in advanced medical nutrition for all cancer patients offering science-based products for cancer nutrition/cachexia (CellAssure), and chemo brain (Cognify) which are physician and pharmacist recommended.

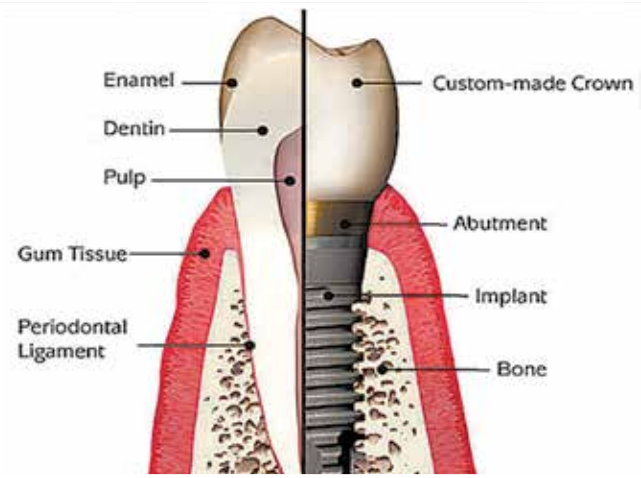
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WHAT ARE THE DIFFERENCES BETWEEN a Tooth and a Dental Implant

Many of our patients are excited about the opportunity to replace a missing or broken tooth with a “new tooth”. Losing a tooth can impact you in a number of ways ranging from an embarrassing space in the mouth to difficulty chewing. There are a number of options when a patient is choosing to replace a tooth. One very popular choice is the placement of a dental implant.

THE TOOTH:

To understand a dental implant, one must first understand the simple anatomy of a tooth. Our teeth consist of 2 parts: Crown (the part you can see when you smile) and Root (the part beneath the gum that anchors the entire tooth in bone). The tooth itself is not actually fused to the surrounding bone, but is attached via small ligaments. These ligaments act as a shock absorber for the teeth during chewing and function. A nerve lives inside the tooth that helps sense temperature changes. In addition, the outer part of the crown has enamel which helps resist decay that leads to cavities.



THE IMPLANT:

A dental implant is simply a “root replacement”. When a tooth is removed, a socket in the bone exists where the root used to live. A new root (the dental implant) can be placed in the site. The implant is shaped like the root of a tooth and is made of surgical grade titanium (similar to those used in many hip and knee replacements). It is set in the socket below the gum line and is not visible in the mouth. Once placed in the site, the implant and bone fuse together (this typically occurs 95+% of the time). A number of health issues or habits, such as smoking and diabetes, can alter this success rate. Since the implant itself is made of titanium, no decay can occur. In addition, the need for any future root canals is eliminated.

Once the implant has healed and fused to the bone, the dentist can proceed with making the crown that will be attached to this new “root”. Continued check-ups are needed to be sure the implant and surrounding gum and bone tissues remain healthy.

Dental implants have become a very straight forward way for a tooth to be replaced in a fashion that provides a replacement that is almost exactly like the tooth that has been lost. It is important to note that every patient has a different set of needs and circumstances. Evaluation by your dental surgeon can help determine what options are best for you. Typically this examination will include the use of a 3D x-ray to help determine the jaw bone available and the safest options in each individual case.

Lee R. Cohen, D.D.S., M.S., M.S.

Lee R. Cohen, D.D.S., M.S., M.S., is a Dual Board Certified Periodontal and Dental Implant Surgeon. He is a graduate of **Emory University** and **New York University College of Dentistry**.



Dr. Cohen completed his surgical training at the University of Florida / Shands Hospital in Gainesville, Florida. He served as Chief Resident and currently holds a staff appointment as a Clinical Associate Professor in the Department of Periodontics and Dental Implantology. Dr. Cohen lectures, teaches and performs clinical research on topics related to his surgical specialty.

The focus of his interests are conservative approaches to treating gum, bone and tooth loss. He utilizes advanced techniques including the use of the Periolas Dental Laser (LANAP procedure) to help save teeth and treat periodontal disease without the use of traditional surgical procedures. Additionally, he uses in-office, state of the art 3D CT imaging to develop the least invasive dental implant and bone regeneration treatment options. Dr. Cohen and his facility are state certified to perform both IV and Oral Sedation procedures. Botox® and Dermal Fillers are also utilized to enhance patients' cosmetic outcomes.

Dr. Cohen formerly served on the Board of Trustees for the American Academy of Periodontology and the Florida Dental Association. He is past president of the Florida Association of Periodontists and the Atlantic Coast District Dental Association. Dr. Cohen is a member of the American College of Maxillofacial Implantology and the American Academy of Facial Esthetics. In addition, he has been awarded Fellowship in the American College of Dentists, International College of Dentists and the Pierre Fauchard Academy.



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Effective Treatment for Menopause and Weight Gain

Menopause is an inevitable part of a woman's life, whether brought on by necessary surgery or the natural progression of time. The symptoms often interfere with daily living and change women in a way that interferes with positive self image and emotions. As women approach menopause they endure many symptoms, but one that proves the most difficult for many women to accept is menopausal weight gain. Not only can a few extra pounds (or maybe more) ravage a woman's self-esteem and self-image, but weight gain can usher in a host of health concerns that put a woman at risk of developing life-threatening conditions. These include:

- Heart disease, stroke
- High blood pressure
- Osteoarthritis
- Breast cancer
- High cholesterol
- Kidney disease
- Sleep apnea
- Insulin resistance
(increasing diabetes risks)

WHAT IS MENOPAUSE?

Menopause is a transitional period marking the cessation of ovulation in a woman's body. This time of change may last a few months to several years. Symptoms vary from mild to severe, and are brought on as our bodies try to adapt to decreasing amounts of estrogen. Symptoms include hot flashes, night sweats, insomnia, fatigue, mood swings, memory loss, vaginal dryness, headaches, joint pain, and weight gain.





About 90% of menopausal women experience some amount of weight gain. Although weight gain is a natural and common aspect of getting older, there are ways to reduce it. Women who are educated about this symptom are more likely to find ways around the typical spare-tire waist or extra inches here and there. On average, women gain between 12 and 15 pounds between the ages of 45 and 55, the stage in life when menopause typically occurs. This extra weight generally does not evenly distribute itself throughout a woman's body. The weight tends instead to accumulate around the abdomen, and women often notice the shape of their bodies slowly lose their hour-glass figure and begin to take on a rounded shape.

DIAGNOSIS AND TREATMENT OF MENOPAUSE

Few areas of women's health stir up as much debate as Hormone Replacement Therapy (HRT), which is normally started when the first symptoms of menopause appear. While they may alleviate hot flashes and prevent osteoporosis, they will also increase the risk of breast, ovarian and uterine cancer, and have a number of significant side-effects. But HRT isn't the only solution. Menopause is an area in which Chinese Medicine shines. Acupuncture and Chinese herbal medicine have the ability to detect energetic changes that occur in the body and quickly relieve symptoms such as hot flashes, foggy mind, irritability and weight gain.

Evidence that Acupuncture and Herbal Medicine have been used for women's health can be found in early medical literature dating back to 3 AD.

STUDIES ON ACUPUNCTURE AND MENOPAUSE

Since the early seventies, studies around the globe have suggested that acupuncture and Chinese herbal medicine are effective treatments for hot flashes, anxiety, insomnia, vaginal dryness and many other symptoms associated with menopause. Recent studies show extremely positive results.

From 1997 to 1999, one of the first studies in the United States to explore the effectiveness of acupuncture in alleviating hot flashes, insomnia and nervousness was conducted by Dr. Susan Cohen, D.S.N., APRN, associate professor of the University of Pittsburgh. It was found that during the course of acupuncture treatments, hot flashes decreased by 35% and insomnia decreased by 50%. A follow-up study revealed hot flashes significantly decreased in those receiving acupuncture, compared to those receiving routine care.

In a research review published in 2009, scientists analyzed 31 studies (with a total of 3,013 participants) and found that acupuncture was associated with a significant reduction of average body weight and improvement in obesity.

While these results are promising and the United Nations World Health Organization has approved acupuncture as a treatment for symptoms associated with menopause, further clinical trials with larger samples are currently underway.

A drop in estrogen and progesterone can increase a woman's appetite and cause her to eat up to 67% more, according to one study. An increase in appetite coupled with a slower metabolism with the onset of menopause can cause weight gain in women. This could, perhaps, account for the 12% jump in the number of women who are overweight in midlife compared to women in their 20's and 30's.

Women who gain in excess of 20 pounds after menopause increase their breast cancer risk by nearly 20%, but those who lose 20 pounds after menopause reduce their breast cancer risk by as much as 23%

Yanhong Meng, AP, DOM



Dr. Meng, MD (China), AP, received her medical degree from the prestigious Shandong University in China and has also completed several advanced training courses in oriental medicine from well-respected TCM hospitals in China. She has over 18 years of experience as a doctor of Chinese medicine. She has owned and operated Meng's Acupuncture Medical Center since 2007.

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By Mitchell Ghen, D.O., Ph.D.

INTRAVENOUS NUTRITION

part two

This article is part two of a two-part essay on intravenous nutrition. Let's start with the most important concept, All IVs are not created equal. There is a tremendous variation that can occur from one intravenous nutrition treatment to another. This depends on many factors which include where the practitioner got their nutrients, which nutrients were placed into the bag, which fluid was used to dilute the nutrients, the type of tubing that allows the nutrients to be delivered into the patient, the correct combination of nutrients (since many products are not compatible), the speed in which the mixture was given, and the correct combination of nutrients that are specific for your condition. If you think that's complex.. your right! And like any medication that you're given you want to make sure that what you're receiving is not only safe but it ensures efficacy for your specific condition. So this article will be a primer so you make good choices when deciding which physician you'll allow to place nutrients inside your body. We will review several important questions that you should be asking prior to allowing anyone to become invasive. For example, anyone that would propose giving an IV that would be tailored for you would require a history and physical and a certain amount of blood diagnostic studies. It just makes good sense for many reasons. One making sure that you're getting the right nutrients for your condition, making sure that they don't give you something that may be harmful or even dangerous. Just because something is labeled a vitamin or mineral and it does have a much larger safety margin doesn't mean that individually or in combination with other nutrients it doesn't have potential harmful effects. Everyone of our cells in the human body require certain levels of nutrients to perform properly. When an overabundance of one specific nutrient in absence of another occurs, a similar situation is created equivalent to a disease entity. Basically, the wrong nutrients for your body can make you



Everyone of our cells in the human body require certain levels of nutrients to perform properly. When an overabundance of one specific nutrient in absence of another occurs, a similar situation is created equivalent to a disease entity. Basically, the wrong nutrients for your body can make you sick.

sick. IV nutrients need to be made in a sterile environment, with the different components at room temperature. IV nutrient bag should never be made prior to your visit to the clinic, because the pH and energy of the nutrients, alone could leach dangerous phthalates from the plastic bag holding the liquid Material. Material in the bag should have no precipitates and the Ph (acid-base balance), too high or too low. If either of these parameters are inappropriate it could mean that the solution could cause a inflammation of your vein or even worse. A precipitate introduced into a patient can act like an embolism and could cause either a stroke or heart attack. Therefore, always make sure the solution is totally clear without any material in it. The nutrient formula prepared for you should be done under the most sterile circumstances, that means both the mixing

of the bag and the placement of the catheter into your vein. And also make sure that the person who has made your bag and the one that puts in your IV, holds an active R.N. License in your state. No one and I mean no one should give you an I.V. without a Physician, PA or Nurse Practitioner, first reviewing your lab work and adapting the IV to your specific needs.

In intravenous nutrition speed is not your friend and the real truth about IV nutrition is that, the slower you give a solution, the more likely it is to have a positive effect on you. Doctors often offer a fast IV like a Myers cocktail which was the only type of IV we had years ago. That old formula has been replaced with much better and superior types of intravenous combinations that can help many disease entities in so many different ways.



Summary of what you should look and ask for BEFORE and AFTER you let someone give you an IV.

- Ask the healthcare practioner where they where trained and by whom.
- How many IVs have they given.
- Did a doctor review an extensive group of lab tests on you before they decided what IV to give you.
- Are there RN's mixing and giving you your IV
- Are you scheduled for follow up labs, reviews and IV changes.

- Are you feeling better within 30 days of starting your IV therapy. If not, be reevaluated perhaps the wrong nutrients are in your formula.
- If you get chills, pains, aches, shortness of breath, chest pain, blurry vision, inflammation anywhere, fevers, calf pains or simply don't feel well after your IV; stop the treatments and get evaluated and proper treatment to correct the problem.
- Was you IV made when you arrived? If not, don't take it.
- Is the IV clear and have no pieces in It. If not, don't take it.
- And don't be stupid, taking an IV after a workout, or when your hung over without appropriate labs is a recipe for the wrong IV and some serious side effects.
- Does your IV bag have a label on it that clearly states your name, concentration and volume of the solution, date and time of initiation of this IV, expiration date of the solution, the lot numbers if applicable and the prescribed rate of administration.
- The rate of administration should be no more than four ML's per minute; the typical connector tubing delivers one drop per second which under normal circumstances yields 4 ml per second. Not sure, ask questions.
- Is the IV protected from light wrapped in aluminum foil or a dark color bag? If not, the common ingredient Vitamin C losses potency very quickly. Why pay for something your not getting.
- And IV that's running properly at the correct rate should be comfortable with little or no pain. Painful area at the IV site requires immediate attention.

- If you have coronary artery disease, kidney disease, high Oxalic acid, heart failure or liver disease your IV may have to be adjusted significantly.

As I stated in the first part of the series IV nutrition hold so much promise for helping people reach their optimal health. However, with investing time in making sure the above rules are in effect you will be assured the best chance for getting a great result and being safe. As I said all IV's are not created equal. anyone can just throw some nutrients in a bag, the real challenge is to make the solution perfect for the patient. At the end of the day it should be only about one person and their health... you!



Dr. Mitchell Ghen
The Doctor's Doctor
 Consultant
 to Physicians Worldwide
561. 508. 3095



In addition to being a Board-Certified physician, Dr. Ghen holds a Master's Degree in Biomechanical Trauma and has a Ph.D. in nutrition and psychoneuroimmunology.



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Monthly Series: Helping You Make Educated Decisions About Your Skin

ELECTROLYSIS OR LASER HAIR REMOVAL WHICH IS RIGHT FOR YOU?

by Janet Robbins

Looking to get rid of unwanted hair? It's a common concern. And there are two primary options available, electrolysis and laser treatment, but how do you know which one is best for you. Well, read on. There are many factors to consider, and it's always best to meet with your specialist first (I give a free consultation for first-time patients), so that you can make a smart decision. Even if you think you know what you want, everyone is different, and hair removal is customized to each individual.

WHAT'S THE DIFFERENCE?

- The biggest difference between electrolysis and laser hair removal is that electrolysis eventually eliminates hair growth permanently with enough treatment sessions. Laser treatments are a form of hair reduction but are not approved as "permanent" by the U.S. Food & Drug Administration (FDA); whereas, electrolysis is. The FDA does approve all medical-laser devices and specifies that laser services may make the claim of "permanent hair reduction." In the FDA's words, this means a steady reduction in re-growth after a treatment regime. Ultimately, both can be highly effective, but electrolysis will achieve a more sustained and intensified result.
- Another big difference is hair color. If you have blonde, white or red hair, you will only benefit from electrolysis.
- Several other variables should be taken into consideration by the consumer who's undecided between these two methods--namely, the amount of time you have to devote to getting rid of body hair, how much discomfort you are willing to tolerate, how much money you can spend (don't forget to consider the cost of razors, which has skyrocketed) and if these various procedures will give you your desired results.



ABOUT ELECTROLYSIS

- If you choose Electrolysis, be sure to select an experienced, skilled professional. Electrolysis can be a time-consuming procedure, depending on the size of area treated and the hair density of that area. Electrolysis involves removing one hair follicle at a time. A thin probe is inserted into the skin next to the hair root and delivers a small jolt of electricity that kills the root.
- Getting rid of hair on a small area of the body, such as the upper lip, can take only an hour, while removing hair from a large body part, such as the back, can take upward of 150 hours. Some hair follicles will grow back and require additional electrolysis treatment. Electrolysis also can be used to clean up hair in between and around the eyebrow area, while laser hair removal cannot be used to remove hair around the area of the eyes due to safety issues.

ABOUT LASER HAIR REMOVAL

- Removing hair using laser treatments is far less time-consuming, less painful and can be less expensive than electrolysis. Laser treats a cluster of hair and is a technology of light looking for a dark attraction. The darker the hair, the better the results. The follicles themselves are destroyed using heat without causing permanent damage to the skin.
- Some people see up to 80 to 90 percent permanent hair reduction with treatments. Removing hair from a small area on the face can take minutes, while removing hair from the legs or back could take 45 minutes to an hour. The Laser Hair Journal, a site maintained by professional dermatologists, states that between four and seven laser hair-removal sessions are usually required to get the best results for "good candidates" for this procedure.



THE "GOOD CANDIDATE" FACTOR

• Electrolysis works the same for everyone, regardless of skin tone and hair color. But when it comes to laser hair removal, there are other considerations. Genetics, lifestyle, medications and age all come into play. In fact, all of these individual facets should be taken into account for any skincare treatment.

WHAT'S THE BOTTOM LINE?

• In the battle of laser versus electrolysis, how do you know which one is right for you? Sometimes it's a combination of both for best results. For instance, using laser on larger areas or areas that have a lot of thick, dark hairs and

then use electrolysis to get rid of whatever is left over. I prefer electrolysis for the eye area and areas where you have thin, sparse hairs.

- Most importantly, consult with a professional who specializes in both procedures and has years of experience.

At Reflections Laser & Wellness Center we have been providing both Electrolysis and Laser Hair Removal for over 20 years. Let us help you determine the best option for your hair removal needs you can reach our offices at **561-221-1462**, and visit our website for more information about the services we offer www.reflectionsflorida.com.

JANET ROBBINS, Ceo And Founder of Reflections

Laser & Wellness Center

Janet Robbins is considered a pioneer in her field as a clinical medical esthetician, certified clinical electrologist, licensed massage therapist and certified skincare instructor for GlymedPlus Skin Science Institute. With more than 20 years of experience and a degree from the Florida College of Natural Health, she maintains a commitment to ongoing self education, including in the areas of anti-aging and bioidentical hormone replacement modalities.

In 2004, she opened her first laser and wellness center with the belief that healthy skin starts from within. Janet's scientific approach to rejuvenating skin led her to expand into a total health and wellness field, bringing eastern and western medicine to her practice.

Janet is the creator of the 350-hour aesthetic program at the Alpha Institute of Massage & Aesthetics, now known as the Palm Beach Academy in Lake Park. She now has her own advanced training facility for licensed professionals. She sits on the Electrology Advisory Board for Anton Academy of Massage & Aesthetic in West Palm Beach, is a consultant with Health & Wellness Magazine and has been featured in Society Magazine and Florida Woman.

My passion is to educate both the professional and the consumer.

Janet and her Center support the American Cancer Society, the Cancer Alliance of Help & Hope and Susan G. Komen South Florida.

Ask about a complimentary consultation.



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The "Gold Standard" For Eliminating Spider Veins

For men and women plagued with unsightly spider and varicose veins the choice to wear shorts or sandals may be non-existent. There are a variety of treatments available claiming to eliminate these pesky veins, however, sclerotherapy remains the “gold standard” for elimination. Sclerotherapy is the art and science of collapsing or closing veins. A very tiny needle is carefully placed in the lumen or middle of the vein and medication is slowly injected to close the vein. The outcome of treatment depends on two things: the skill of the injector and the medication injected. Healthcare providers that have performed large numbers of sclerotherapy are, of course, more skilled in this procedure than those who perform this procedure less often.

You may wonder if sclerotherapy interferes with circulation. The answer is no. Once you visualize ugly spider and varicose veins they are no longer doing their job appropriately. Veins have tiny valves inside that work to bring blood back to the heart. The veins that you can see are no longer working effectively to bring blood back to the heart, but rather allowing blood to flow away and then back. In essence, a one-way valve becomes an ineffective and inefficient two-way valve. You still have miles of appropriately functioning veins deep within your legs and feet. The risk of sclerotherapy includes bruising and ulceration. The bruising that results is due to your body's unique ability to eliminate waste. Once a vein is closed your body sends cells that gobble up and eliminate the un-needed end product as waste. The bruising clears up within a matter of weeks. Eventually, the unsightly veins will disappear and the person will have clear legs and feet again! Unfortunately, insurance does not pay for this procedure, as sclerotherapy is considered “cosmetic.” Sclerotherapy was once considered financially unattainable for the average person. Now there is an option for those who desire clear legs and feet at an affordable price.

Oceanside Vein Center in Jupiter, Florida prides itself in improving the lives of others at affordable prices.

Victoria Zimmer, MSN, Family Nurse Practitioner—certified by the American Association of Nurse Practitioners—has over 20 years of experience in Palm Beach County working in various facilities in the emergency room, intensive care unit, open heart step-down unit, recovery room, telemetry, and home health care. She has years of experience injecting and treating others.

Victoria maintains and performs services using the most current evidence-based guidelines and uses only FDA-approved medications. Through her work as an adjunct clinical instructor at a local university, Victoria remains current and up-to-date in the latest FDA recommendations and esthetics guidelines, while motivating baccalaureate prepared nursing students to excel in a wide variety of clinical endeavors. Victoria has extensive experience injecting unwanted veins in legs. This procedure is known as “sclerotherapy.” In addition, Victoria is extremely proficient in providing Botox and dermal fillers in order to maintain or achieve a beautiful face. Love your legs and face!

Victoria is passionate about providing excellence in your personal treatment. Whether you are coming in for sclerotherapy (spider vein treatment), Botox, or dermal fillers, she guarantees your personal satisfaction.

OUR MISSION STATEMENT

At Oceanside Vein Center, we pledge to deliver quality services at an improved price. Our hours and scheduling are convenient for patients, and our easy-to-find, beautiful location is directly across from the Jupiter Maltz Theatre on East Indiantown Road. Our convenient parking is at the rear of the building, notably the south side. The south entrance is most convenient to locate our Suite 106-B (on the first floor). As a brand-new business owned by a nurse practitioner that truly cares about your health and satisfaction, we are determined to provide you with the absolute best in customer service and patient care.



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We look forward to meeting you!



Oceanside Vein Center

Staying a Step Ahead of COPD

Chronic Obstructive Pulmonary Disease (COPD) has grown in prevalence over the last decade and is now the third leading cause of death in America. When diagnosed with an incurable chronic illness, people tend to search for alternatives to traditional medicine. The quest for treatment options can leave a patient feeling overwhelmed. Anxiety and depression can exacerbate symptoms, creating a vicious cycle. Despite the grim outlook a COPD diagnosis can produce, alternative ways exist to treat not only the symptoms of COPD, but the disease itself.

COPING STRATEGIES

Stay Positive

Talk with someone when feeling anxious or depressed, whether it's a friend or a professional. Enjoy favorite activities, and explore alternative forms of stress management like yoga, tai chi and meditation. These produce mental benefits as well as physical. Find reasons to laugh often. Maintaining a positive outlook can improve overall quality of life.

Bolster Resilience

Choose activities that create a sense of accomplishment. For those who, for instance, love gardening but feel short of breath, a container garden could bring a goal within reach. If the pots are too heavy, a friend could help, and the results could be healthy, growing plants and a new gardening friend.

Pulmonary Rehabilitation

Consider a pulmonary rehabilitation class to address the disease head-on by improving lung capacity and blood oxygen levels. Rehab also involves nutrition.

A good diet for someone with COPD includes iron-rich foods, such as red meat and green, leafy vegetables that promote oxygenation of the blood.

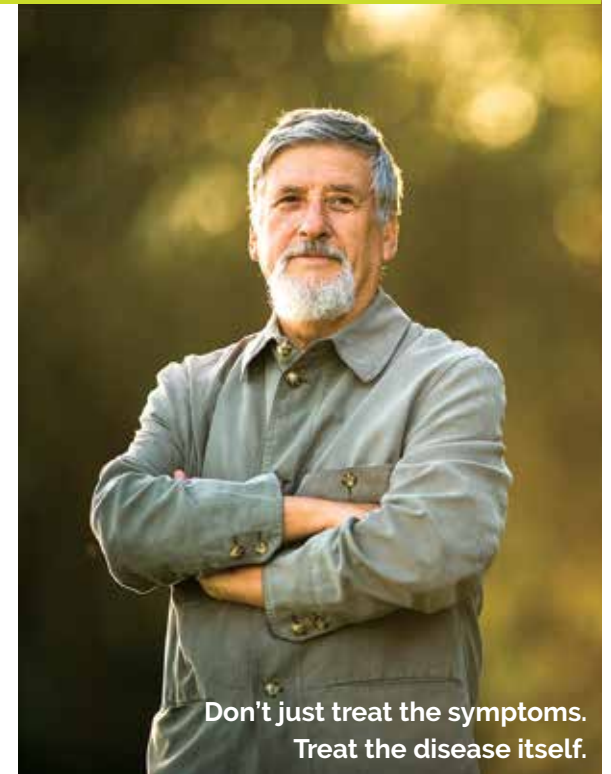
Alternative Therapy

There are many things people can do every day to stay a step ahead of COPD, but to treat the disease, rather than only the symptoms, alternative therapy using the patient's own stem cells has shown potential. The same cells that repair a simple cut on the skin, properly harnessed, can promote healing in damaged lung tissue. Adult stem cells do this naturally, only not at a rate fast enough to keep up with degenerative lung disease.

One medical clinic, the Lung Institute, is using adult, or autologous, stem cells, harvested from patients' blood or bone marrow, to boost the body's natural healing process. The Lung Institute's Jack Coleman, Jr., MD, recently released a white paper outlining a study showing that stem cell therapy in patients with lung diseases has the potential to improve pulmonary function and quality of life.

Dr. Coleman's white paper, titled "Autologous Stem Cell Therapy and its Effects on COPD: A Pilot Study," mentions that he tested approximately 100 patients with COPD. Within three months of therapy, 84 percent of patients found their quality of life improved, with an average improvement of 35 percent.

Coleman said in a press release, "COPD is currently the third leading cause of death in the United States, and we give our patients an alternative that doesn't just mask the symptoms."



People hear things like, "COPD is a chronic illness that is both progressive and terminal," and hear that the traditional options all consist of prescription medications, supplemental oxygen and a highly invasive lung transplant. People are dissatisfied with this prognosis. With a rise in alternative options like stem cell therapy, revolutionary medical advancements to better address COPD could be just around the corner.

If you or a loved one suffer from a chronic lung disease, the specialists at the Lung Institute may be able to help. You can contact the Lung Institute at **800-921-4631** or visit lunginstitute.com/health to find out if you qualify for these new treatments.

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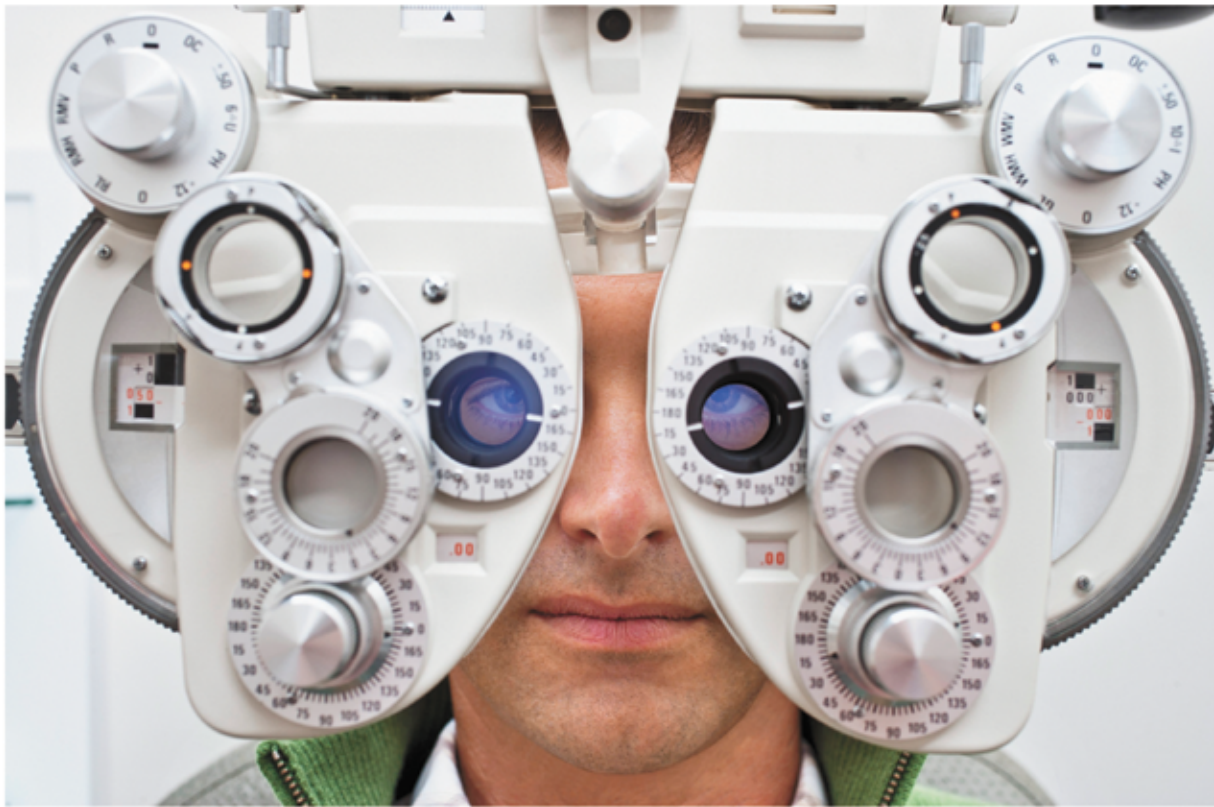
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SEEKING A SECOND OPINION ABOUT YOUR EYE CARE

By David A. Goldman MD

Throughout my career I have seen patients come to me for second opinions, and I have also had patients ask me if I would ‘mind’ if they saw another specialist for a second opinion.

For the patient, seeking a second opinion is a difficult thing to do. To begin, he or she may not know who is a reputable person to seek for second opinion. Furthermore, they may have a good relationship with their ophthalmologist and may feel they are betraying their doctor’s confidence by seeking another MD. Finally, they may be concerned whether their insurance will cover a visit for second opinion.

For the doctor, discovering a patient has seen another physician may make them feel that they are not trusted or even felt to be incompetent. In some cases, when a patient seeks second opinion it may completely end their care with the first physician.

It has always been my belief that second opinions are an excellent idea. If the care rendered to date is appropriate, the second physician can confirm that and set the patient’s mind at ease. In some cases, the physician may actually find something that the first doctor missed, and in these cases both the physician and patient still benefit. This is because at the end of the day, doctors want their patients to do well. If I am unable to treat a patient completely, I am thankful that another doctor could. On the other side, I am happy to help out my colleagues when they have gotten stuck, or just to tell their patients that everything is going well. Medicine is not performed in a vortex - referrals to subspecialists are very common place. While intra-subspecialty referrals are less common, I am always comfortable recommending the patient seek second opinion if they have any questions or concerns. In this way, doctor-patient relationships are strengthened rather than weakened and care can be given the best way possible.



DAVID A. GOLDMAN

Prior to founding his own private practice, Dr. David A. Goldman served as Assistant Professor of Clinical Ophthalmology at the Bascom Palmer Eye Institute in Palm Beach Gardens. Within the first of his five years of employment there, Dr. Goldman quickly became the highest volume surgeon. He has been recognized as one of the top 250 US surgeons by Premier Surgeon, as well as being awarded a Best Doctor and Top Ophthalmologist.

Dr. Goldman received his Bachelor of Arts cum laude and with distinction in all subjects from Cornell University and Doctor of Medicine with distinction in research from the Tufts School of Medicine. This was followed by a medical internship at Mt. Sinai – Cabrini Medical Center in New York City. He then completed his residency and cornea fellowship at the Bascom Palmer Eye Institute in Miami, Florida. Throughout his training, he received multiple awards including 2nd place in the American College of Eye Surgeons Bloomberg memorial national cataract competition, nomination for the Ophthalmology Times writer’s award program, 2006 Paul Kayser International Scholar, and the American Society of Cataract and Refractive Surgery (ASCRS) research award in 2005, 2006, and 2007. Dr. Goldman currently serves as councilor from ASCRS to the American Academy of Ophthalmology. In addition to serving as an examiner for board certification, Dr. Goldman also serves on committees to revise maintenance of certification exams for current ophthalmologists.

Dr. Goldman’s clinical practice encompasses medical, refractive, and non-refractive surgical diseases of the cornea, anterior segment, and lens. This includes, but is not limited to, corneal transplantation, micro-incisional cataract surgery, and LASIK. His research interests include advances in cataract and refractive technology, dry eye management, and internet applications of ophthalmology.

Dr. Goldman speaks English and Spanish.

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I Have A Wait Problem

Brent Myers

You're reading a health and wellness magazine and you're thinking: that guy can't spell. But the truth is that you read it correctly: I have a wait problem: I don't like to wait. But who does?

Think about it... do you like to wait? Do you love sitting in the waiting room at the doctor's office? Do you look for the longest line at the grocery store so you can spend more time waiting? When the light turns green, does it make you happy when the car in front of you just sits there? Do you keep your fingers crossed that wait times are an hour at the amusement park? If you answered "no" to the questions above, then you have a wait problem too.

It's been estimated that we spend ten percent of our lives waiting. That comes out to be over two hours of everyday. I have a wait problem: I'm not very good at it. But I don't have a choice. Waiting is a part of our lives.

And waiting isn't just a part of everyday menial tasks, but big things in life too. Things like waiting for Mr. Right or Miss Perfect; waiting for your first grandchild; waiting for retirement; waiting on test results; waiting to hear back about the interview; waiting...

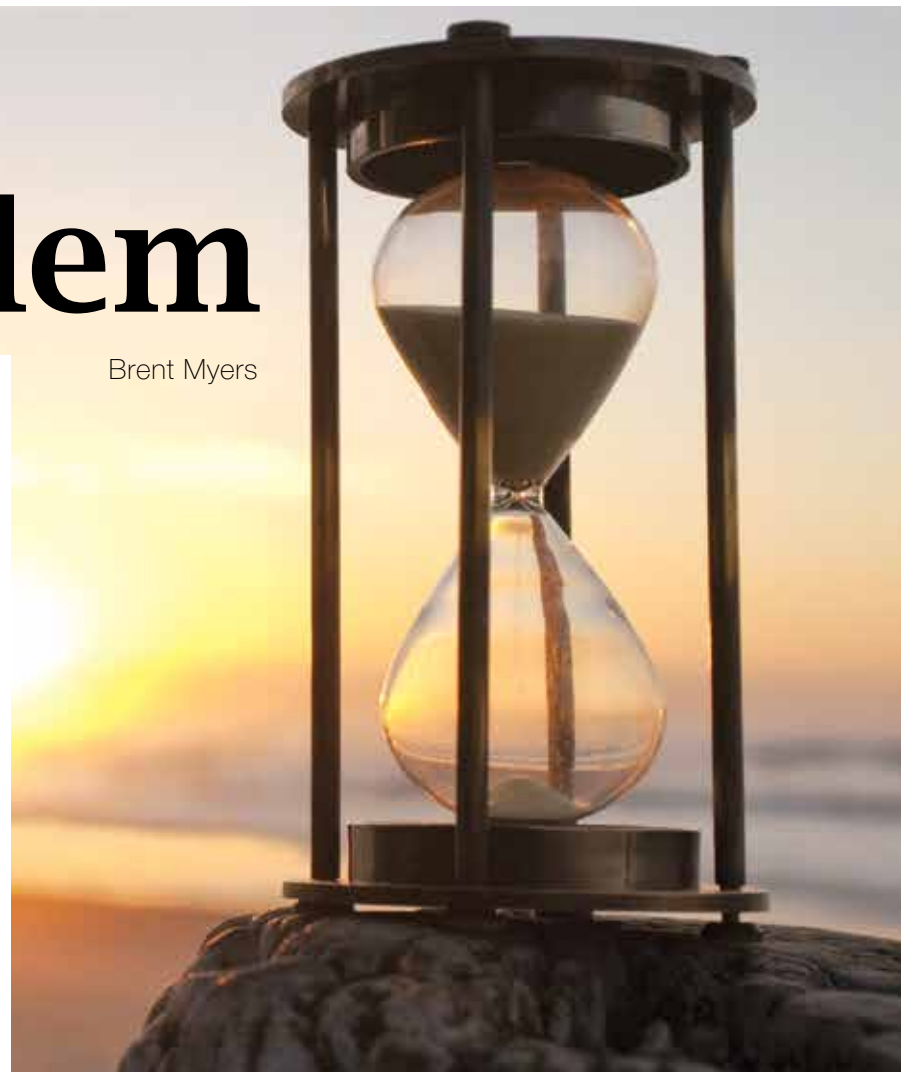
From a spiritual perspective, waiting is very important. So important, in fact, that God talks about it including these words: *"Even youths shall faint and be weary, and young men shall fall exhausted; but they who wait for the LORD shall renew their strength; they shall mount up with wings like eagles; they shall run and not be weary; they shall walk and not faint."* (Isaiah 40:30-31, ESV)

Waiting is expected by God.

Notice what he says... "...they who wait for the LORD..." Isaiah doesn't single out an individual or use the word "if". God – the creator and controller of time and all circumstances – knows we will have seasons of waiting. And He expects us to wait on Him.

God uses waiting to build our character.

Look at the different stages of development: flying high (wings), running, and walking. Waiting gets us to a place where we learn to take in the highest highs, but at the same time realize that slow and steady gets us where we need to go. Waiting helps us grow into constant and consistent forward movement in our lives... even when we are waiting.



Waiting is rewarded by God.

Isaiah shows us that waiting has its rewards. Tired of being tired? Close to giving up? Don't want to wait anymore? Read the passage again: "...and not be weary..." "...and not faint..." God honors us when we wait. God rewards our faithfulness in the midst of our waiting.

Waiting is the fruit of our faith.

Finally look at this: "...but they who wait for the LORD..." When we learn to trust our circumstances to God, we show that we really believe that He is in control. We demonstrate that we actually believe that He knows best and that He works all things together for good. When we wait on the LORD, we show the depth of our faith. So... how do I get better at waiting? The ability to wait on the Lord stems from being confident and focused on who God is and in what God is doing. It sounds simple – and it is – but simple is not the same as easy (because it's not).

But look at it like this... I heard the other day, "there are no problems, only opportunities". So at least now I know I don't have a wait problem after all – just a wait opportunity (and lots of them)!



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