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# Health & Wellness<sup>®</sup> MAGAZINE

April 2016

South Palm Beach Edition - Monthly

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

By Dr. Laszlo Mate



**T**he 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**.

# Life Hacks for Better Living: 5 EASY STEPS to Help You Address Hearing Loss



Life's "To Do" list can be pretty daunting. And often, getting started on something is the hardest part. This can be especially true for addressing hearing loss.

In fact, most people wait roughly seven years to do anything about it once they realize they have hearing loss. And that's too bad — research shows that when people treat even just mild hearing loss, their quality of life goes up. Plus, when people with hearing loss use hearing aids, they get more pleasure from doing things and feel more engaged in life.

Conversely, non-hearing aid users are more prone to feel down, depressed or hopeless, a Better Hearing Institute (BHI) survey found. They're also more likely than hearing aid users to say they find themselves becoming more forgetful. Groundbreaking studies, in fact, discovered that hearing loss is linked to cognitive decline and dementia. Add to that, BHI research showing that untreated hearing loss can take a significant toll on earnings — up to \$30,000 annually.

The tricky thing is that we live in a noisy world. It's hard not to be affected. Many of us undoubtedly feel the impact of blaring music, earbuds, noisy restaurants, high-decibel ball games and motor sports, ear-piercingly shrill power tools, loud workplaces, and more.

It all boils down to this: You're not alone in the changes and struggles you're experiencing with your hearing. You have lots of company. Almost 40 million others in the U.S. have some degree of hearing loss. Research even suggests that hearing loss is now common among people in their 40's, and is increasing among 20-to-39-year-olds.

Luckily, the vast majority of people with hearing loss can benefit from hearing aids — which are now cooler, sleeker, smaller, more powerful, and work better than ever before. They've transformed dramatically, even in just the last couple of years. So if you're tired of turning up the TV volume, missing what people are saying at work, asking family and friends to repeat things, can barely remember the sound of morning birds, or are simply worn out from coping with a neglected hearing loss, do something about it. This may be your monumental moment. You can make the most of it.

To help, we've put together five easy, achievable steps to get you started. The road to better hearing — and a better quality of life — is a single step away.



### 1. TAKE A CONVENIENT ONLINE HEARING EVALUATION AT [WWW.HEARUSA.COM](http://WWW.HEARUSA.COM).

This free, quick, and confidential online hearing evaluation will help determine if you need a more comprehensive hearing test by a hearing care professional. It's a great way to get started — because you can ease into the possibility that it's time to do something about your hearing difficulty. Useful information on hearing loss and hearing aid technologies awaits you on the site as well.

### 2. VISIT A LOCAL HEARING CARE PROFESSIONAL.

Hearing care professionals — audiologists and hearing aid specialists are best-suited to help you. Audiologists and hearing aid specialists are expressly trained in all aspects of hearing aids and amplification, and are licensed by your state. They have the most appropriate and accurate equipment to give you a precise read on your current hearing level. And they can reliably counsel you on treatment options. Most important, going to a hearing care professional helps ensure that any underlying medical issue behind your hearing loss is identified and addressed. Simply, seeing a hearing care professional is your best safety net for proper diagnosis and treatment. The smartest thing you can do is to get it right the first time. And be assured, research shows that the great majority of people who visit hearing care professionals say they're happy with the quality of service and counseling they receive. Most hearing care professionals even provide free trials so you can see what using hearing aids is like, with a minimal service fee if you decide not to keep them.

### 3. INFORMATION GATHER.

Educating yourself helps you reach acceptance and peace of mind. Visit [www.HearUSA.com](http://www.HearUSA.com) and learn what you need to know. Among other things, you'll find:

- You can do this.
- You're not alone.



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- Many new hearing aids are virtually invisible; they sit inside the ear canal, out of site.
- Treating hearing loss means better quality of life and more effortless living for you.

### 4. WINDOW SHOP. IT'S OK TO "JUST LOOK."

You set the pace. Visit the "Hearing Aids Can Help" tab at [www.BetterHearing.org](http://www.BetterHearing.org). Opportunities to online window shop for hearing aids are right there for you. But most important, be up-front with your hearing care professional. Tell them you're not ready to buy. But do let them know you're ready to learn about the best hearing aid technologies for you if hearing aids are what they recommend, to get demonstrations on how they work, and to try them out at no cost or obligation. And remember,

hearing aids are only sold by licensed hearing care professionals. True hearing aids that are designed to treat hearing loss and are cleared by the U.S. Food and Drug Administration (FDA) need to be fitted, adjusted, and tuned to your ears and specific needs, with appropriate follow-up. This is what makes leading-edge hearing aids so beneficial. So when you do seek out information, make sure you go to a hearing care professional.

### 5. LET IT ALL SINK IN AND MAKE A PLAN.

Consider everything you've learned and take time to think about it. But do give yourself a timeline for making a decision. If — after you've educated yourself about hearing loss and hearing aids — you decide to wait, set a hard date for re-evaluating your decision. Research shows that the sooner you treat hearing loss, the better it is for you and your quality of life.



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# 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.**

**O**ver 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.

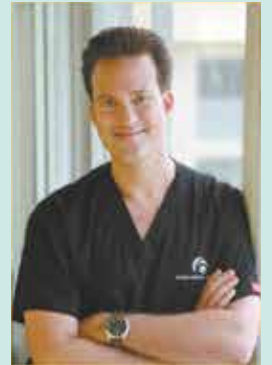
If you are experiencing hair loss or thinning, contact a board-certified hair restoration physician who can work with you to determine the most effective treatment regimen for your specific needs and scientifically track your progress. Patients should look for a doctor who is a full-time medical hair 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****BEFORE****AFTER****Hair Line Lowering****BEFORE****AFTER****Scar Revision****BEFORE****AFTER****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. An international



**Alan J. Bauman, M.D.**  
Hair Loss Expert

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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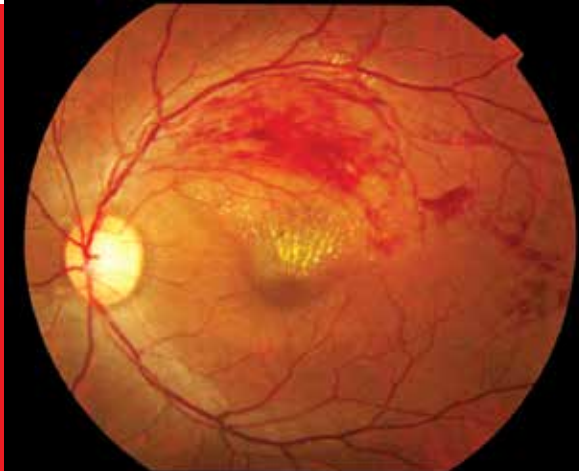
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# WHAT IS BRANCH RETINAL VEIN OCCLUSION (BRVO)?

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

**T**he 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.



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# Are Hormones Driving You Mad?

by Daniela Dadurian, M.D.



---

**H**ormones 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](http://www.drdadurian.com) or call 561-655-6325.



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# CRYOABLATION FOR ATRIAL FIBRILLATION. The Next Frontier



**An estimated 2.7–6.1 million people in the United States have Atrial Fibrillation (often called AFib or AF). With the aging of the U.S. population, this number is expected to increase. Afib is the most common type of heart arrhythmia.**

During AFib, the normal beating in the upper chambers of the heart (the two atria) is irregular, and blood doesn't flow as well as it should from the atria to the lower chambers of the heart.

Now, a new minimally invasive treatment option, cryoablation, has different and unique characteristics that allow doctors to achieve higher therapeutic success rates.

AFib may occur in brief episodes (paroxysmal), or it may become more persistent and even permanent. In paroxysmal Afib the faulty electrical signals and rapid heart rate begin suddenly and then stop on their own. Symptoms can be mild or severe. The most common symptoms include palpitations, a racing or pounding heartbeat, chest discomfort, fainting, light headedness, fatigue, shortness of breath or weakness.

AFib is a serious medical condition associated with an increased risk of stroke, heart failure and other heart-related complications.

Specializing in treating arrhythmia or irregular heart rhythms, – Yoel R. Vivas, M.D., F.H.R.S., and Luis F. Mora, M.D – say that cryoablation has several advantages over traditional radiofrequency ablation. “Cryoablation is an excellent treatment option for patients with paroxysmal AFib who have not responded to medication alone,” explains Dr. Vivas. “It is the future of AFib ablation techniques.” “It is the preferred ablation method at Emory University in Atlanta, where I did my Fellowship training,” adds Dr. Mora.

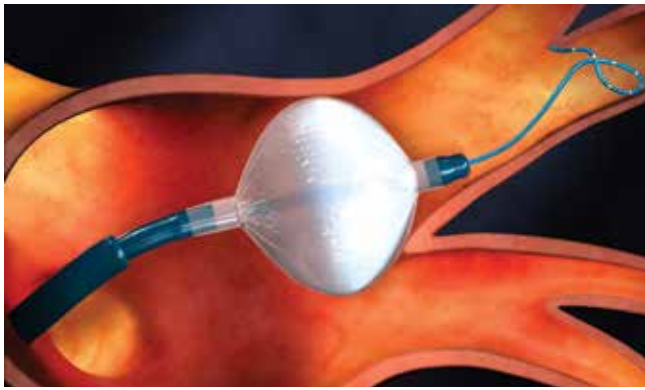
They are now performing cryoablations at Bethesda Heart Hospital and Delray Medical Center.

## ACHIEVING A NORMAL HEART RHYTHM WITH CRYO

Patients that suffer from Paroxysmal Afib most commonly have their arrhythmia arising from the pulmonary veins. These are the four veins that take blood from the lungs and drain it to the left atrium. Once your doctor has decided that you may benefit from being in normal rhythm, medications (antiarrhythmic drugs) or an ablation procedure may be used.

Cardiac electrophysiologist Yoel R. Vivas, M.D., says cryoablation is the future of A-fib ablation treatments.





Cardiac electrophysiologist Luis F. Mora, M.D., says cryoablation takes less time than conventional treatments.

“The principle of ablation consists in blocking or eliminating the electrical impulses that cause the irregular rhythm. We do this by freezing and subsequently creating scar tissue at the point where the pulmonary vein enters the atrium,” Dr. Vivas continued. “Our goal is to electrically isolate the four veins from the left atrium. This is why this procedure is known in the medical community as pulmonary vein isolation”. Cryoablation is a minimally invasive procedure that involve using a catheter inserted through the veins in the groins.

**Cryoablation** disrupts the heart cells that create an irregular heartbeat.

Traditional ablation procedures have used Radiofrequency as a source of energy. This is a technology that warms up and basically “cauterizes” the tissue. The challenge of this technology is that the scar produced is small and multiple lesions are required to “isolate” the veins. The process is repeated all the way around the vein, creating a circle of scar “dots.” This can be technically challenging, and tiny gaps may be left between the scars that will allow the electrical currents to continue to pass. “Cryoablation works on the same principle, but uses cold instead of heat to create a much bigger and durable scar tissue,” added Dr. Vivas.

**Cryoablation** is an effective alternative in the treatment of atrial fibrillation.

With cryoablation, a special balloon is inserted through the catheter and inflated at the junction of each pulmonary vein with the atrium. Then it is filled with a refrigerant nitrogen gas to create a continuous scar area around the entire edge of the vein tissue. “One of the main advantages of cryoablation is that the procedure takes much less time. Instead of two to four hours, it usually takes about one hour,” states Dr. Mora. “That means the patient spends less time under anesthesia.”

**POTENTIAL LESS COLLATERAL DAMAGE**

Although all invasive procedures have risks, cryoablation has a lower risk of damaging the surrounding heart tissue, specifically the esophagus. Dr. Vivas adds, “Patients usually spend one night in the hospital and can return to normal activities within a few days. They may experience cough, minor soreness in the chest, or bruising or soreness in the groin where the catheter was inserted.” In most cases, one cryoablation treatment is enough; however, occasionally patients may need to go back for a repeat procedure.



**Yoel R. Vivas, M.D., F.H.R.S.**

**Dr. Yoel Vivas** is the founder of the Arrhythmia Center of South Florida. He’s been practicing cardiac electrophysiology in Boynton Beach and Delray Beach area since 2012. Dr. Vivas is a Fellow of the Heart Rhythm Society (FHRS).

This distinction recognizes members for their advanced training, certification and commitment to the research and treatment of heart rhythm disorders. Dr. Yoel Vivas offers comprehensive evaluation and treatment of abnormalities of the heart rhythm (Arrhythmia) including but not limited to ablation of atrial fibrillation, atrial flutter, supraventricular and ventricular tachycardia. He also specializes in implantation of pacemakers, defibrillators and devices to treat heart failure (CRT).

Dr. Yoel Vivas is the only electrophysiologist in South Florida who is also board certified in Advanced Heart Failure and Transplant Cardiology. His special clinical interests include the treatment of advanced heart failure with novel devices and ablation of arrhythmias that predispose to heart failure or worsen its clinical symptoms.

**Medical School**

Universidad Central de Venezuela. Magna Cum Laude Internship/Residency Internship and Residency in Internal Medicine, Hospital of St. Raphael, Yale University School of Medicine

**Fellowships**

Fellowship in Cardiovascular Diseases, The Western Pennsylvania Hospital, Temple University Program, Pittsburgh, PA. Chief Cardiology Fellow. The Western Pennsylvania Hospital, Temple University Program. Pittsburgh, PA. Fellowship in Clinical Cardiac Electrophysiology. Lahey Clinic, Tufts University School of Medicine. Burlington, MA.

**Board Certifications**

Clinical Cardiac Electrophysiology, ABIM  
Advanced Heart Failure and Transplant Cardiology, ABIM  
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# PROTECTING YOUR EYESIGHT



**P**rotecting your eyesight is one of the most important things you can do to help maintain your quality of life. Some type of sight-threatening eye problem affects one in six adults age 45 and older. And the risk for vision loss only increases with age.

In fact, a recent American Academy of Ophthalmology (AAO) report estimates that more than 43 million Americans will develop age-related eye diseases by 2020. Since the leading causes of blindness and low vision in the United States are primarily age-related diseases such as macular degeneration, cataract, diabetic retinopathy and glaucoma, protecting your eyesight as you age is an essential part of your health care.

## TIPS FOR PROTECTING YOUR EYES

To protect your eyesight and keep your eyes healthy as you age, consider these simple guidelines:

**1. Find out if you are at higher risk for eye diseases.** Be aware of your family's health history. Do you or any of your family suffer from diabetes or have a history of high blood pressure? Are you over the age of 65? Are you an African-American over the age of 40? Any of these traits increase your risk for sight-threatening eye diseases. Regular eye exams are particularly important, because an early diagnosis can limit any vision loss and help preserve your eyesight.

**2. Have regular physical exams to check for diabetes and high blood pressure.** If left untreated, these diseases can cause eye problems. In particular, diabetes and high blood pressure can lead to vision loss from diabetic retinopathy, macular degeneration and eye strokes.

**3. Look for warning signs of changes in your vision.** If you start noticing changes in your vision, see your eye doctor immediately. Some trouble signs to look for are double vision, hazy vision and difficulty seeing in low light conditions. Other signs and symptoms of potentially serious eye problems that warrant immediate attention include red eyes, frequent flashes of light, floaters, and eye pain and swelling.

**4. Exercise more frequently.** According to the AAO, some studies suggest that regular exercise — such as walking — can reduce the risk of age-related macular degeneration by up to 70 percent.

**5. Protect your eyes from harmful UV light.** When outdoors during daytime, always wear sunglasses that shield your eyes from 100 percent of the sun's harmful ultraviolet rays. This may help reduce your risk of cataracts, pinguecula and other eye problems.

**6. Eat a healthy and balanced diet.** Numerous studies have shown that antioxidants can possibly reduce the risk of cataracts. These antioxidants are obtained from eating a diet containing plentiful amounts of fruits and colorful or dark green vegetables.

Studies also have shown that eating fish rich in omega-3 fatty acids may reduce your risk of

developing macular degeneration. Also, consider supplementing your diet with eye vitamins to make sure you are getting adequate amounts of the nutrients you need to keep your eyes healthy.

**7. Get your eyes checked at least every two years.** A comprehensive eye exam, including dilating your pupils, can determine your risk for major eye diseases such as diabetic retinopathy, which has no early warning signs or symptoms. An eye exam also can ensure that your prescription for eyeglasses or contact lenses is up to date.

**8. Don't smoke.** The many dangers of smoking have been well documented. When it comes to eye health, people who smoke are at greater risk of developing age-related macular degeneration, cataracts, uveitis and other eye problems.

In addition to following these guidelines, be sure to wear safety glasses when working with tools or participating in active sports to help prevent eye injuries that potentially could cause permanent vision loss.

It's true that following these steps is no guarantee of perfect vision throughout your lifetime. But maintaining a healthy lifestyle and having regular eye exams will certainly decrease your risk of developing a sight-stealing eye problem that otherwise might have been prevented.

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# Pain Management for Sciatica

## SCIATICA TREATMENT



By Aaron Rosenblatt, MD



**S**ciatica refers to pain that radiates along the path of the sciatic nerve, which branches from your lower back through your hips and buttocks and down each leg. Typically, sciatica affects only one or both sides of your body.

Sciatica most commonly occurs when a herniated disk, bone spur (arthritis) on the spine or narrowing of the spine (spinal stenosis) compresses part of the nerve. This causes inflammation, pain and often some numbness in the affected leg(s).

Although the pain associated with sciatica can be severe, most cases resolve with non-operative treatments in a few weeks with treatment that Dr. Rosenblatt can easily perform.

Pain that radiates from your lower (lumbar) spine to your buttock and down the back of your leg is the hallmark of sciatica. You might feel the discomfort almost anywhere along the nerve pathway, but it's especially likely to follow a path from your low back to your buttock and the back of your thigh and calf.

The pain can vary widely, from a mild ache to a sharp, burning sensation or excruciating pain. Sometimes it can feel like a jolt or electric shock. It can be worse when you cough or sneeze, and prolonged sitting or walking can aggravate symptoms. Some people also have numbness, tingling or muscle weakness in the affected leg or foot. You might have pain in one part of your leg and numbness in another part. You do not have to have low back pain to have sciatic pain.

Please call Dr. Rosenblatt when self-care measures fail to ease your symptoms or if your pain lasts longer than a week, is severe or becomes progressively worse. Get immediate medical care if:

- You have sudden, severe pain in your low back or leg and numbness or muscle weakness in your leg
- The pain follows a violent injury, such as a traffic accident
- You have trouble controlling your bowels or bladder

Sciatica occurs when the sciatic nerve becomes pinched, usually by a herniated disk in your spine or by an overgrowth of bone (bone spur) on your vertebrae. More rarely, the nerve can be compressed other tissue or damaged by a disease such as diabetes. Shingles is another common cause that would require treatment.

During the physical exam, Dr. Rosenblatt will check your muscle strength and reflexes. For example, you may be asked to walk on your toes or heels, rise from a squatting position and, while lying on your back, lift your legs one at a time. Pain that results from sciatica will usually worsen during these activities.

Many people have herniated disks or bone spurs that will show up on X-rays and other imaging tests but have no symptoms. So doctors don't typically order these tests unless your pain is severe, or it doesn't improve within a few weeks.

- **X-RAY.** An X-ray of your spine may reveal an overgrowth of bone (bone spur) that may be pressing on a nerve.

- **MRI.** This procedure uses a powerful magnet and radio waves to produce cross-sectional images of your back. An MRI produces detailed images of bone and soft tissues such as herniated disks. During the test, you lie on a table that moves into the MRI machine.

- **CT SCAN.** Can also be used for a faster imaging result or when an MRI is not allowed.

After evaluation, Dr. Rosenblatt might recommend injection of a medication into the area around the involved nerve root(s). This can help reduce and or eliminate pain by suppressing inflammation around the irritated nerve. This can greatly improve the pain and discomfort from the multiple causes of sciatica and help improve an individual's overall function. There are several different types of nerve root treatments to consider based on the location and severity of the impingement of the nerve. Usually treatment takes no longer than 5-6 minutes and can provide immediate relief!

Dr. Rosenblatt explains, "This procedure is simple and helps people of all ages to help feel less pain and function at a higher level. It is great for neck and lumbar spine pain. It will also help to avoid unnecessary spine surgery."

In Dr. Rosenblatt's beautiful freestanding interventional pain management building in Delray Beach, FL, thousands of individuals have been able to benefit from this technique. Dr. Rosenblatt has been performing this procedure for more than 17 years with great success. Please look forward to more articles about Dr. Aaron Rosenblatt and the vast number of procedures he performs to help people with all types of pain. His main focus is to help individuals avoid surgery, eliminate pain medications and to ultimately feel much better on a daily basis and enjoy life!

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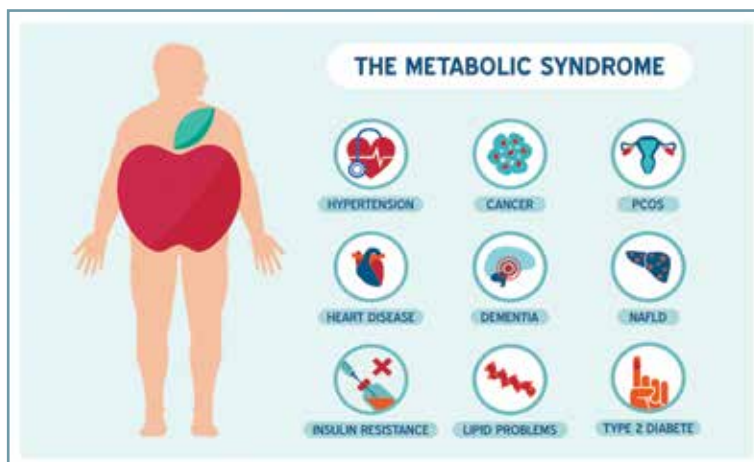
# Your Health by the Numbers.

## 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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# 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**.

# Hand Veins



By John P Landi, MD, FACS, RPVI, RPhS,  
Diplomate of The American Board  
of Venous and Lymphatic Medicine

**W**hen most people think of having veins treated, they are usually concerned with spider veins and varicose veins on their legs. However, with increasing frequency over the last ten years, there is a growing interest in eradicating ugly hand veins and with the advent of modern venous treatment techniques such as laser and sclerotherapy, hand veins can be safely treated in the office under local anesthesia.

Although both men and women develop prominent hand veins with age, women are usually more self-conscious about them. Hand veins tend to become larger and more obvious due to loss of fat volume and muscle tone that occurs with the aging process. In fact, the same tissue deflation that occurs in the aging face occurs in the aging hand. The areas that are the telltale signs of aging are the face, neck and hands.

There are basically two types of hand veins, smaller and larger. Smaller veins can be treated by sclerotherapy (injecting them with a solution) and the larger veins are best treated by inserting a laser into the vein (endovenous) and dissolving the vein just as is done in treating leg veins. This procedure is done under local anesthesia and cosmetically very satisfactory.

The procedure to treat hand veins requires about one hour (one half hour per hand). Both hands are done at the same time and several follow up visits may be necessary. There is essentially no downtime with return to full activities the next day. Usually overnight compressions of the hands is required with an ace bandage and no pain medicine is required.



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# Is your hair color poisoning your body?

*75% of American women color their hair, of this 38 million women turn to a professional hairstylist to change the shade of their locks. In the past ammonia has been the only option in hair color to lighten or darken locks permanently. Previously, ammonia has been used in permanent hair color to give better, long lasting tint and allows for more significant color changes. Ammonia partially removes the natural color from the hair. It opens up the cuticle layer, which is at the surface of the hair strand, so that the color molecules can get in and effectively lifts out the natural hair pigment. For almost a century, ammonia has been largely responsible for hair color's ability to alter natural hair color without washing out after only a few shampoos. This method of depositing tint to the hair has been commonly reported to have many side effects. Ammonia has fumes that can cause stinging the eyes and scalp, and of course there's that distinctive odor...*



**F**ew people realize the serious risk of ammonia and how dangerous a chemical it actually is. There has been an explicit and notable transition of product ingredients away from ammonia to safer and more stable alternatives. The most egregious and dangerous use of ammonia is present in hair coloring products as the dangerous chemical is designed to apply directly to a human's scalp where it will be absorbed into the pores, dermal, papilla, and follicles and goes into the bloodstream. That is not the only choice for long lasting hair color today. Ammonia-free hair color is a major technology break through that offers women and men healthier options to get their locks to the desired shade.

*The major benefits of using ammonia free hair color are:*

## 1. NO FUMES

Ammonia free colors do not have fumes like its precursor made with ammonia. This new technology makes for a better environment for everyone including you and your stylist. Your lungs will thank you! And, there are no harsh side effects to your hair and skin keeping your hair healthy and shiny. And since there are no fumes, it's not necessary to have fragrance added to the product. Dr. Anne Steinmann, and internationally recognized scientist who is dedicated to helping people live healthier lives and improve their working environment stated, "In my epidemiological studies, I found that nearly 30% of the US population experiences adverse health effects when they're exposed to fragranced products" \*

## 2. PROTECTS YOUR SKELTAL SKIN

After using your hair product if you feel a burning sensation or itching then probably your skin is allergic to ammonia and you should change to ammonia free products as soon as possible. Continued use of these colors can have adverse effects on your skin. Sometimes ammonia containing products cause split ends. Ammonia free hair color is particularly beneficial for the people who have dry and frizzy hair.

## 3. AMMONIA CAUSES SINUSITIS PROBLEMS

Besides your skin, ammonia can be very harmful for the sinuses. The pungent smell of the hair color and fragrances added to ammonia based hair color may trigger sinusitis. Ammonia irritates the respiratory tract, and may also cause asthma and other breathing problems.

## 4. AMMONIA-FREE COLORS WORK AT A LOWER PH

The ammonia-free natural color slightly raises the pH to create an alkaline environment, working as a softening agent. It softens the cuticle while coloring the hair. This process makes sure that the ammonia-free color can work at a lower pH value than that of ammonia color. Therefore, protein and other vital nutrients of the hair are preserved. The ammonia free colors open up the strands of the hair so that it can easily penetrate and deposit its pigments.

## HEALTHY LIFE SALON

Healthy Life Salon uses Schwarzkopf Essensity Permanent and Demi-Permanent Ammonia-free Hair Color and Blonding System. This line takes its ammonia-free color to a new level – Healthy Life Sa-

lon only uses color with no ammonia, silicone, sulfates, and artificial fragrances. The European line has out-standing color performance while being committed to a sustainable, free-from philosophy providing permanent ammonia-free oil color that is natural reflecting and intense colors, up to 100% white hair coverage and up to 4 levels of lift. The color stabilizes the hair structure during the coloring process for a healthy – looking color result and helps protect the hair against external influences for long-lasting color and natural shine. The Secret Lies in Phytolipid Technology. ESSENSITY Color is permanent ammonia-free oil-color with Phytolipid Technology which delivers real color results, natural intensity and pure softness while using natural ingredients. Synthetic ingredients were replaced with grape seed oil and other renewable naturally derived ingredients. Free from ammonia, silicones, sulfates and artificial fragrances. The combination of specially re-designed color pigment mixes and plant-based oils that contain lipids found in healthy-looking hair maximizes color performance and color longevity. To find out more about ammonia, fragrance, silicon, sulfate, PPD and mineral oil free hair products and hair color **contact Juli Edwards at Healthy Life Salon 561-891-7527**



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*\*John P Thomas interview Dr. Steinmann by phone on June 5, 2014-See more at: <http://healthimpactnews.com/2014/secondhand-fragrance-contamination-a-public-healthproblem/#sthash.j4mQuNIV.dpuf>*



# Limb Swelling: Medicare Approved Treatment Options

By Alyssa Parker

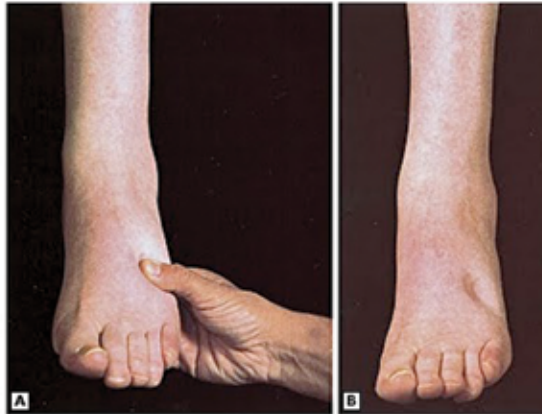
**P**neumatic compression devices are one of the most highly recommended treatments for limb swelling and are a Medicare approved treatment option. Dating back to the 1960's pneumatic compression pumps have been used for the treatment of limb swelling due to acute and chronic conditions. In most cases 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](http://www.AcuteWoundCare.com)

# THE FINANCIAL COSTS OF POOR ORAL HEALTH

By the Doctors at Advanced Dentistry South Florida



Ok, so you're probably thinking there's no way you're saving money by visiting your dentist. However, it's true! For the past three to four decades, studies have shown that the impact of poor oral health on the body's overall health can be quite dangerous, leading to out-of-pocket expenses for the treatment of diabetes, cancer and heart disease to name a few. This goes well beyond the obvious consequence of neglecting to brush your teeth, which is tooth loss.

The National Association of Dental Plans has reported that individuals without dental coverage are less likely to go to the dentist. Many people have elected to opt out of dental coverage and choose to pay the full amount when a dental visit is "necessary" to them. This is no shock, seeing that a lot of people simply don't place routine dental hygiene visits as a priority.

Not surprisingly, the NADP states that individuals without dental health coverage are 67% more likely to have heart disease, 50% are more likely to have osteoporosis and 29% are more likely to have diabetes. If you are thinking short-term, this strategy may be ok, but imagine the expenses you can accumulate in the long run having to deal with all these health issues.

According to the American Dental Hygienist's Association, every \$1 spent on preventive oral care can result in \$8 to \$40 in savings on future dental costs. Factor in also the major dental procedures such as crowns, dentures, implants and oral surgery that can run upwards of double (yes, twice) the amount you would pay if you had insurance.



Regular hygiene visits to your dentist help detect early signs of decay, gum disease and even oral cancer in some patients. If your hygiene visit has been over 6 months, please do yourself and your wallet a favor and call your dentist to schedule an appointment today.


If you don't have a dentist, please call our office in Delray Beach at **561-404-4043** today, or visit us at [www.ad-sf.com](http://www.ad-sf.com) to find out more information about us and the dental services we provide to the cities of Delray Beach, Boca Raton and surrounding communities of South Florida.

You can also stop by during the week for a tour of the office. We would be very delighted to show you around our beautiful office so you can see for yourself why so many patients love coming for their dental visits.





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# NEUROFEEDBACK

## IS AN EFFECTIVE AND SAFE WAY TO TREAT ADHD/ADD FOR ALL AGES!

By Renee Chillcott, LMHC

Research shows that Neurofeedback is a successful alternative for treatment of ADD/ADHD. Attention and Focus problems are brain related. Neurofeedback allows people to work directly on the issue by training the brain to become calmer, more focused, and less impulsive.

### YOU MAY ALREADY KNOW THAT...

- ADD/ADHD is one of the most common neurodevelopmental disorders of childhood, and can persist through adolescence and adulthood.
- Those diagnosed can display a number of symptoms including: inattention, hyperactivity, and impulsivity.
- In the brain, ADD/ADHD often displays as too many slow or too many fast neurons firing, particularly in the frontal and/or central lobes.
- Processing issues — auditory, visual, and/or sensory — can cause Attention and Focus problems.

### WHY TRAIN YOUR BRAIN?

Mental clarity improves when you operate a calmer, more efficient brain. As you learn to slow down “inner chatter” or activate a “sleepy” brain, you become more effective at responding to stress and adapt more readily to different situations, both psychologically and physically. Homework time is smoother and quicker, assignments are more easily remembered, completed and turned in, behavior improves, and mood swings and depression often lift.

Neurofeedback has been shown to be of remarkable value with school-age children who experience focus and learning problems. Through brain training, children can learn to better concentrate on schoolwork, increase their frustration tolerance level, and are less prone to be overwhelmed with sensory overload while seated in a noisy classroom. With their thoughts more organized, they can focus more clearly on what others say to them and can begin to develop friendships and learn effectively.

### WHAT IS NEUROFEEDBACK?

Neurofeedback, also known as EEG biofeedback has been studied and practiced since the late 60's. It is exercise for your brain by allowing you to see the frequencies produced by different parts of your brain in real-time and then through visual and auditory feedback, teaches the brain to better regulate itself. Neurofeedback can be used to help detect, stimulate, and/or inhibit activity in the brain safely and without medication. It can help restore a wider “range of motion” in brain state: much like physical therapy does for the body.

While the client sits comfortably watching a movie or pictures appear on the screen (a calm and focused state), the EEG equipment measures the frequency or speed at which electrical activity moves in the areas where electrodes have been placed. This information is sent to the therapist's computer. The therapist is then able to determine what frequencies are out of balance. For example, when the EEG shows that you are making too many “slow” or “sleepy” waves (delta/theta) or too many “fast” waves (high beta), the therapist adjusts a reward band to encourage more balanced activity. This encouragement or “reward” happens through visual recognition of the changes on the screen and the auditory reinforcement of “beeps”.

It is important to understand that the neurofeedback approach does not magically “cure” or “fix” anything. We teach and guide your brain to produce frequencies which help it relax and/or focus. We provide the brain with gentle “challenges” and encouragement in a user-friendly, stress-free format so it learns to regulate or shift to healthier states more smoothly on its own at the appropriate time.



### HOW DOES A “BEEP” OR SOUND TRAIN MY BRAIN TO WORK BETTER?

The auditory or sound reward that corresponds to an increase or decrease in desired brainwave activity is able to affect the brain on a neurological level. Auditory reward stimulates auditory pathways, impacts the vestibular system, and has many connections to the reticular activating system, which modulates wakefulness and attention. These systems operate in our brains without conscious effort. Therefore, neurofeedback teaches your brain through automated learning with little or no behavioral effort. Another way to say this is that neurofeedback involves operant conditioning or learning. This type of learning teaches us through a reinforced reward system. The auditory reward (beep) is delivered on a schedule of reinforcement that promotes optimal learning; not too hard and not too easy. This schedule of reinforcement or reward provides just the right amount of resistance to evoke a positive learning pattern.

**WHAT ARE THE TYPES OF CONDITIONS NEUROFEEDBACK HELPS?**

Symptoms of these conditions, among others, can improve through neurofeedback training:

- Anxiety • Sleep disorders • Depression
- ADD/ADHD • Sensory processing disorder
- Bipolar disorder • Seizure disorders
- Auditory/visual processing
- Chronic pain/Fibromyalgia • Migraines/headaches
- Traumatic brain injuries • Stroke
- Cognitive decline • Peak performance
- Oppositional defiant disorder
- Rages/mood swings
- Attention/focus/concentration
- Reactive attachment disorder
- Autism/Asperger's • Learning disabilities
- Obsessive compulsive disorder

**HOW MANY SESSIONS ARE NEEDED TO BEGIN SEEING RESULTS?**

As the brain learns, you will see the changes. However, everyone learns at different speeds, so it cannot be determined how quickly someone will learn. On average, children take about 10-20 sessions to see changes and we can discuss what to expect during the intake appointment. For adults changes are usually noticed within 10 sessions. Total treatment is an average of 40 sessions, however we individualize treatment – some people need more and some less.

**NEUROFEEDBACK AND MEDICATION**

As your brain begins to work more efficiently, medications also work better. For those who cannot take or are only marginally responsive to medication, neurofeedback can offer an alternative or supportive role to drug therapy by stimulating or inhibiting brain activity at the same basic neurological level as medication. Eventually with training, many people find they are able to reduce the dosages or cease taking some prescription medications, but only after careful consultation

and planning with the prescribing physician. For this reason, neurofeedback practitioners advocate consistent communication between clients and their physicians during training and encourage discussion of their neurofeedback experience with therapists and doctors so accommodations can be made as training progresses.

**WHAT IS A QEEG (QUANTITATIVE EEG) OR BRAIN MAP AND DO I NEED ONE?**

The QEEG is a quantitative EEG. It's also called a brain map and does just that...it gives us a map of what is going on with the entire brain at one time. We attach electrodes to the whole head, 19 spots, and then record the brain waves with his eyes open for 5 minutes and with his eyes closed for 10 minutes. This recording is then sent to Advanced Psychological Services in North Carolina to be read and analyzed. They are able to give us a summary of significant findings as well as a full report that shows the results of analyzing the data several different ways. The brain activity is not only compared by individual locations over the entire head, but we can also look at connections,

symmetry, how different parts are communicating and all of this data is compared to a database of peers (same sex, handedness and age). It can help us see what areas need to be addressed more efficiently than just training spot by spot.

We don't always need this data to make improvements in symptoms but we do recommend it in certain situations. A QEEG can also be helpful information when diagnosing and/or trying to decide the best medication/supplement recommendations.

**HOW DO I GET STARTED?**

Getting started with Neurofeedback is easy to do. Call, text, or email our office to set up an intake session. At the intake session, you will receive a clinical interview, treatment plan recommendations, and a Neurofeedback session (if warranted in your treatment plan). We will also discuss the necessity or timing of a brain map or QEEG. It is not recommended that you stop your medication and you can continue your therapies. Call to make an appointment today!

**Renee Chillcott, LMHC**

Renee Chillcott is a Licensed Mental Health Counselor that has been practicing Neurofeedback training since 2005. Renee attended The University of Central Florida where she received her Bachelor of Arts Degree in Psychology in 1995. She then went on to complete her Master's Degree in Mental Health Counseling with Nova Southeastern University in 2001. She has been a mental counselor in a variety of settings including Outpatient Treatment Agencies, Alternative Education Settings, and Private Practice. Renee received her license in Mental Health Counseling in 2004. Renee decided to enter the field of Neurofeedback because there was very little information made available to people/parents about alternatives to medication. Through the use of Neurofeedback she saw more significant and permanent changes in not only her clients, but also her own family and herself. This inspired her to become the owner/operator of The Wellness Center, located in Boca Raton. At The Wellness Center, adults, teens, children and families enjoy a variety of services from multiple providers. Neurofeedback, Brain Mapping, Acupuncture, Nutritional Counseling, Learning Programs, and counseling are among a few of the services offered.



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# SEEKING A SECOND OPINION ABOUT YOUR EYE CARE

By David A. Goldman MD

**T**hroughout 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

**Y**ou'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...

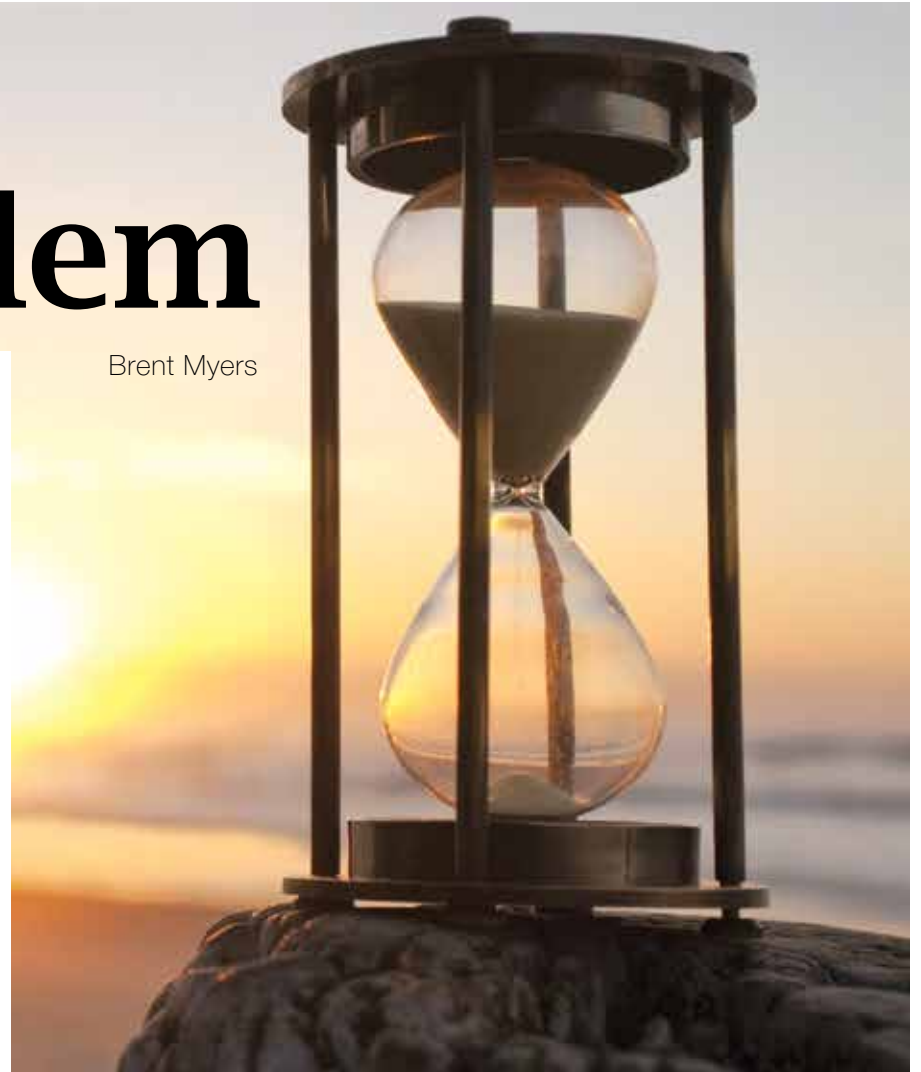
From a spiritual perspective, waiting is very important. So important, in fact, that God talks about it including these words: *"Even youths shall faint and be weary, and young men shall fall exhausted; but they who wait for the LORD shall renew their strength; they shall mount up with wings like eagles; 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)!



# Worried About Memory loss?



A research study in Palm Beach is enrolling patients with mild-to-moderate Alzheimer's disease

## Qualified Patients Must:

- Be between 50 and 85 years old
- Taking the medication donepezil (Aricept®)

*Additional eligibility criteria apply*



Transportation to and from study visits can be provided at no cost or reimbursed



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