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Health & Wellness[®] MAGAZINE

August 2016

South Palm Beach Edition - Monthly

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**How to Spot,
Diagnose and
Treat Hair Loss**

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LAW OFFICE OF ANDREW CURTIS, ESQ

- LLM in Taxation New York University Law School 1986
- JD Georgetown University Law School 1983
- MBA University of Michigan 1978
- BS Cornell University 1977

Andrew Curtis is an attorney whose practice concentrates in the areas of trusts, estates, and elder law. He is a graduate of some of the top universities in the country. He devotes his time to estate planning for the middle class, charging moderate fees, and then getting referrals from happy clients.

Revocable Living Trust

ATTENTION SENIORS:

- Why Forbes Magazine says that the middle class may need living trusts
- Why a will may not avoid probate
- How a living trust may avoid probate
- Why you may have probate in more than one state if you own out-of-state real property
- How a trust may protect your child's inheritance from divorce
- How a trust may protect your child's inheritance from sons-in-law and daughters-in-law

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- 6 Trusts are Not Just for the Wealthy
- 8 Help Your Heart, Get a Hearing Test
- 10 How to Spot, Diagnose and Treat Hair Loss
- 13 Are There Any New Technologies for Fat Reduction?
- 14 Retinal Tear and Retinal Detachment
- 15 What Is CBD and the Medical Treatment It Provides?
- 16 Cryoablation for Atrial Fibrillation. The Next Frontier
- 18 Avoid Back and Spine Surgeries!!!
- 19 The Many Options for Replacing Teeth
- 21 Fitness is Fun at ILoveKickboxing
- 22 Focus on the Face
- 24 Why Is My Child Struggling?
- 26 Looking for a Natural & Organic way to Color your Hair? Take a look at Henna
- 27 Underlying Reasons for Limb Swelling
- 28 MINDSET
A New Alzheimer's Clinical Study Opportunity Right Here In Palm Beach
- 30 Protecting Your Eyes
- 31 Breaking Through

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by Andrew M. Curtis, ESQ



TRUSTS ARE NOT JUST FOR THE WEALTHY



Perhaps the most common misconception among the general public concerning the areas of wills and trusts is the notion that if a couple owns less than \$5,000,000.00 in assets, that they don't need a revocable living trust. This is a false notion. For example, I recently had a fellow come to my office whose mother has just died. All she owned was a \$50,000.00 condo, and had a will, which read "I leave my condo to my child". What could be more simple and clearer than that? Well, believe it or not, the child had to go through probate before he could get the condo, and the legal fee was \$2,000.00. A revocable living trust could have avoided this.

Another reason for having a revocable living trust is to protect against incapacity. In the trust, you designate who would manage

your assets in the event, let's say, you get Alzheimer's disease. Without a trust, court proceedings might well be necessary, and a stranger could even be designated by the court to manage your affairs.

Further, once the decision is made to have a trust, the trust can in effect allow you to "rule from the grave"! with your assets distributed the same way you would have done as if you were still alive. For example, most wills simply say that on a person's death that his or her children inherit equally. However, think about it – once your child inherits your money, he or she is completely free to leave it to whomever he or she wants, such as a boyfriend, spouse, or other non-blood relatives. So let's say your daughter dies 5 years after you, and leaves the inheritance she got from you to her husband. Even if you like her husband, this could prove



to be a bad result, because the husband could remarry and the new spouse could have children from a previous marriage, and now all of a sudden your hard earned money is going to support kids you never knew. Further, if you leave your assets to your son in a regular will, his wife could divorce him and take the money. A Solution is to leave you assets to your children in a lifetime trust. They could each use the money for their normal living, but would be protected, and upon death, the remaining assets would pass to the child's children, (your grandchildren), or if none, to the child's siblings, not to some stranger.

Another place where trusts are extremely useful is in second marriage situations. If you simply leave your assets to your new spouse, he or she is free to leave the assets to his or her children, and not to yours, once

you pass on. Instead, a trust could be used, so that your assets would be available to care for your spouse after you die, but upon the spouse's subsequent death, the assets would pass to your children, not theirs. Don't assume your spouse will, follow your wishes, because after you die, his or her relationship with your children could change with the passage of time.

Another use of a trust is to manage assets inherited by children who are not good with money. You could provide that the child would get only the income from his or her inheritance, for example.

Trusts can also be used to protect your children's inheritance in the event they go bankrupt, divorce, or face a lawsuit.. And for persons with handicapped children, a "supple-

mental needs trust" can be utilized, to make sure the government simply doesn't take the disabled child's, inheritance as reimbursement for government benefits, and to make sure the child does not lose such benefits.

Thus, there are many reasons why a trust may be advisable for even a person of modest means.

Andrew Curtis is an attorney whose practice concentrates in the areas of trusts, estates, and elder law. He is a graduate of some of the top universities in the country. He devotes his time to estate planning for the middle class, charging moderate fees, and then getting referrals from happy clients.

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Getting a Hearing Test Just May Help Your Heart,
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Research out of the University of Wisconsin in Madison has reconfirmed the link between hearing and cardiovascular health, suggesting that hearing loss may be an early sign of cardiovascular disease in seemingly healthy middle-aged people. The study also showed that hearing loss is common in people in their forties.

This research is in line with the earlier findings of David R. Friedland, MD, PhD, Professor and Vice-Chair of Otolaryngology and Communication Sciences at the Medical College of Wisconsin in Milwaukee, who explains the cardiovascular-hearing health link:

“The inner ear is so sensitive to blood flow that it is possible that abnormalities in the cardiovascular system could be noted here earlier than in other less sensitive parts of the body.”

In Dr. Friedland’s own 2009 study, published in *The Laryngoscope*, he and fellow researchers found that audiogram pattern correlates strongly with cerebrovascular and peripheral arterial disease and may represent a screening test for those at risk. They even concluded that patients with low-frequency hearing loss should be regarded as at risk for cardiovascular events, and appropriate referrals should be considered.

Research not only shows that hearing loss is affiliated with cardiovascular disease, but it’s linked to other chronic illnesses as well, including diabetes, Alzheimer’s disease, moderate chronic kidney disease, and depression. And when left untreated, hearing loss adversely affects quality of life, earnings, and physical and emotional well-being.

Luckily, the overwhelming majority of people with hearing loss can benefit from hearing aids, which have advanced dramatically in recent years and are designed to help people keep up with youthful, active lifestyles. When people with even mild hearing loss use today’s modern hearing aids, they often improve their job performance; enhance their communication skills; increase their earnings potential; improve their professional and interpersonal relationships; stave off depression; gain an enhanced sense of control over their lives; and better their quality of life.

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FIVE HEART-HEALTHY REASONS TO GET A HEARING TEST

1 Six decades of research points to heart-hearing health link.

A comparative review of more than 60 years of research found a correlation between cardiovascular and hearing health. Specifically, the study authors concluded that the negative influence of impaired cardiovascular health on both the peripheral and central auditory system—and the potential positive influence of improved cardiovascular health on these same systems—have been found through a sizable body of research.

2 The ear may be a window to the heart.

Some experts find the evidence showing a link between cardiovascular and hearing health so compelling that they say the ear may be a window to the heart. They encourage collaboration between hearing care providers, cardiologists, and other healthcare professionals. Some even call on hearing care professionals to include cardiovascular health in patient case history and to measure their patients' blood pressure.

3 The same lifestyle behaviors that affect the heart impact hearing.

More evidence of the interconnectedness between cardiovascular and hearing health is found in three studies on modifiable behaviors: One found that a higher level of physical activity is associated with lower risk of hearing loss in women. Another revealed that smokers and passive smokers are more likely to suffer hearing loss. And a third found that regular fish consumption and higher intake of long-chain omega-3 polyunsaturated fatty acids are associated with lower risk of hearing loss in women. Coincidence? Or does it all come back to blood flow to the inner ear? Research is ongoing.



4 Addressing hearing loss improves quality of life, helps reduce stress.

Eight out of 10 hearing aid users say they're satisfied with the changes that have occurred in their lives due to their hearing aids. Many say they see improvements in their life overall, in interpersonal relationships, and that they experience reduced anger and frustration, and enhanced emotional stability.

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How to Spot, Diagnose and Treat Hair Loss

By Dr. Alan J. Bauman



Roughly 80 million men and women in the U.S. suffer from hair loss. This may sound like a daunting figure, but in reality most hair loss cases today are treatable – thanks to several decades of advanced medical research and high-tech treatment development.

However, the most important weapon in the battle against baldness is a relatively simple one – early detection.

By the time hair loss becomes noticeable to the naked eye, about 50% of the hair follicles have already been lost. The earlier patients can get started on preventive or restorative therapies, the better their odds are for retaining a full and healthy hairline.

Since August is National Hair Loss Awareness Month, it's a good opportunity for all consumers – men and women, old and young – to learn more about the early signs of hair loss and the treatment options available.

DETECTING HAIR LOSS

A common mistake with detecting hair loss is to rely on the “mirror test” before taking action. That is, most people wait until their hair loss becomes readily noticeable – perhaps it's diffuse thinning in the crown for men and women, or a receding hairline in men.

However, relying on this type of visual confirmation puts the patient at a disadvantage because as noted above, by the time hair loss is visible half of the follicles are already gone.

Some people think that a better way to check for early signs of hair loss is to examine how much hair is being shed each day. This also can be tricky because a typical healthy head of hair will lose approximately 100 hair strands per day. If you're noticing an excessive number of hairs on the pillow in the morning, at the bottom of the shower or in the comb, you may be in the active stages of male- or female-pattern hair loss. What's tricky about that? Well, excessive shedding doesn't always mean you have male or female-pattern hair loss. It could be a sign of an underlying health problem or scalp issue, which results in temporary hair loss called telogen effluvium.

Further, patients put themselves at another disadvantage when they tell themselves that their hair loss has stopped. Studies show us that left untreated, hair loss will always get worse over time even though visually it appears to have stopped.

For these reasons, it is important to schedule a visit with a qualified hair restoration physician when these symptoms are observed. He or she will be able to run the proper tests to determine the true cause of your hair loss, and what types of treatments might be needed. A hair restoration physician can also run tests that will help predict the likelihood of future hair loss.

DIAGNOSING THE PROBLEM

Hair restoration physicians have several tools at their disposal to gauge a person's risk of hair loss, and the rate at which active hair loss is progressing.

These include:

- **GENETIC TESTS** – While the results are a little more complicated than a “yes” or “no”, a new genetic test by HairDX can accurately determine a man's (and woman's) risk for losing their hair, so they can begin preventive treatments early. The test uses a simple cheek swab and can determine the genetic risk of developing male and female pattern hair loss. There are also genetic tests that can determine how well you are likely to respond to certain medical treatments. For example, the HairDX Genetic Test for androgen sensitivity can help predict your response to certain types of medical treatment (such as finasteride or Propecia). This information helps the physician tailor a treatment regimen specific to the patient's genetics and therefore patients avoid spending hundreds or thousands of dollars on a treatment that may not be effective for them.

- **HAIR DENSITY MEASUREMENTS** – The HairCheck® device is a highly sensitive hand-held

‘trichometer,’ which measures hair caliber and hair density together, and expresses them as a single number known as the Hair Mass Index (HMI) or “Hair Number.” Doctors can use this number to accurately assess hair loss, growth and breakage on any area of the scalp. By tracking these numbers, a physician can determine the extent and rate of the patient's hair loss and/or breakage, and inform them of any changes over time. This information also helps monitor and track the efficacy of their treatment regimen in case modifications are needed. This type of testing works for both men and women.

- **SCALP EXAMS** – Newly developed “Trico-Tests” are highly effective at determining if an underlying problem with the scalp is the root cause of a hair disorder. Patients are evaluated with non-invasive, pain-free skin diagnostic tests that check the scalp's pH, sebum and hydration levels to determine if there are any abnormalities. A magnified videoscopic examination of the scalp is also performed to examine any signs of scalp flaking or dandruff, excess sebum production, identify bacterial or fungal colonies and assess overall hair follicle health and function. Depending on the patient's symptoms, hair strand cortisol level testing may also be administered (for example: Bauman Medical's “sTRESS Test”). Scalp testing is available for both men and women.

EFFECTIVE TREATMENT OPTIONS

Once the cause of the hair loss has been determined, an effective treatment program can be developed. This is likely to include a multi-therapy approach, and certain lifestyle changes may also be recommended.

Today, there are a variety of effective treatment options available for both men and women:

Topical and Oral Treatments: In addition to the over-the-counter Rogaine, and Rogaine for Women, topical treatments include compounded topical minoxidil Formula 82M and Latisse/Bimatoprost or other prostaglandin analogs. Currently, there is only one FDA-approved oral medication finasteride (brand name Propecia).

Low Level Laser Therapy: In recent years, low-level laser therapy has become a key element of the multi-therapy hair restoration regimen. Thanks to continued support from the FDA, and a wide array of devices, including in-office laser ‘hoods’, at-home handheld units, hats, and brushes, more patients and doctors are utilizing phototherapy as an effective treatment option.

Nutritionals: Many hair loss patients benefit from the addition of nutritional supplementation in their treatment regimen. Hair vitamins and supplements, like Viviscal Pro and “SuperBiotin” are specially-formulated to nourish thinning hair, while also creating a healthy environment for existing hair and hair follicles.

Scalp Makeover: During a scalp makeover, the patient undergoes a simple skin diagnostic test to see if their sebum, pH, hydration, toxin and cortisol levels are imbalanced, and then depending on the results, a variety of scalp therapies are provided. Treatments for the scalp range from sebum-regulating topical serums (as well as hydration, anti-hormonals and blood microcirculation stimulants) to scalp steaming, scalp massage, electrotherapy stimulation, hair boosting dermal patches and laser therapy. A scalp makeover can help overcome common hair problems, including hair thinning, excessive shedding and breakage.

Platelet Rich Plasma Therapy, or PRP: The use of autologous PRP (platelet rich plasma) for wound healing after hair transplants and as a stand-alone treatment for enhancing hair growth has become a promising new treatment for both men and women. The application of PRP to the scalp requires short outpatient visits which can normally be done over a lunch hour.

Hair Transplant Robotics: The first robot designed to perform part of the hair transplant recently became available. Called the ARTAS System, it’s an image-guided robot that harvests up to 1,000 hair grafts in a single hour – which has made hair transplant surgery even more accurate and efficient.

NeoGraft FUE: Less invasive hair transplants allow for the transplantation of hair without the ‘telltale’ signs of old-style hair transplantation such as the linear scar on the back of the head. The automated NeoGraft device helps the surgeon extract hair follicles from the donor area of the scalp individually without the need for scalpel or stitches, leaving no linear scar. Recovery is faster, more comfortable and less restrictive. Artistic hairline design and single-follicle transplantation techniques create hair transplant results that truly defy detection.

3-D Printed Hair: For male or female hair loss patients suffering from severe or extensive hair loss, or those looking for an alternative to hair transplantation, “3D-Printed Hair” is the latest breakthrough in hair replacement. New non-surgical medical-grade hair and scalp prosthesis, like the CNC 3-D Hair System, offers a customized, natural hair replacement option for a complete return to an active lifestyle, without compromise! The 3-D printed hair system can be shampooed, dried and styled as your own hair. With monthly maintenance and proper care, the prosthesis can last up to 4-5 years – much longer than traditional wigs or hairpieces.

SEEING IT THROUGH

Treatment programs should be customized for the individual patient, and based on a full examination of the person’s genetic factors, health history, hair loss progression and lifestyle issues. Routine follow-ups are also important in order to determine how well the follicles are responding to the treatments, and to see if changes should be made in the therapy regimen.

One of the hardest parts of treating hair loss is helping the patient understand that it is a long-term investment and process. Just like hair loss, initial changes in hair regrowth take time and can be subtle before they are noticeable to the naked eye.

When one starts to actually treat their hair loss, it is important to keep in mind that it can take more than a year to see the full, final results from treatment. This is longer than many other treatments or procedures that patients may have had experience with in the the past, therefore patients can be tempted to end their hair treatments too soon. Ending treatment prematurely disrupts any progress that had been made. Regular follow-ups should be performed every 90 days as this helps to reconfirm to the patient that they are responding to their treatment regimen and getting the best results possible. If they are not responding, adjustments to treatments can be made expeditiously.

Hair loss is a treatable condition, but the earlier the problem is detected and treatment started, the better your chances are of keeping your hair and re-growing what has been diminished.

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.

Hair Loss Study Candidates Needed!

Bauman Medical is currently enrolling qualified candidates for exciting Hair Loss Studies. Please visit www.844GETHAIR.COM for more details.

Tips on Finding a Hair Restoration Physician

- A hair restoration physician is someone who specializes exclusively in the medical diagnosis, treatment and tracking of hair loss and its treatment.
- Look for physicians who are board-certified in hair restoration by the American Board of Hair Restoration Surgery and recommended by the American Hair Loss Association.
- Due to the limited number of board-certified hair restoration physicians worldwide, prospective patients should be prepared to travel and consult long-distance.
- Before choosing your doctor, visit the clinic, read reviews, ask for before-and-after pictures and, most importantly, ask questions.
- Medical doctors who do not specialize in hair restoration (general practitioners, dermatologists, etc.) may not be up to date on the latest treatment methods and technologies. This can lead to subpar results and, in some cases, treatment complications.



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Are There Any **New Technologies For Fat Reduction?**



It is interesting to watch technology as it continues to evolve. Many of my patients are up to date with what is trending in aesthetic technology. There is a new exciting technology that melts and tightens skin simultaneously without downtime.

COOLSCULPTING® has been a good fat reduction treatment for many of my patients. It is a way to non-invasively destroy fat cells by freezing fat, however it takes about 1 hour per area and depending on the patient, it could take up to 4 to 6 hours in one day! Also, the cost of CoolSculpting® is pretty much equivalent to liposuction.

A newer technology has just been FDA approved for the same application of destroying fat cells non-invasively, but it uses heat. It's called SculpSure™ by Cynosure®. SculpSure™ is a laser device that uses a 1060 nm wavelength to target fat cells and destroy them without any incisions.

Unlike CoolSculpting®, SculpSure™ takes less time, the treatment areas are much larger and there is no downtime. One treatment takes only 25 minutes and there have been no reported side effects.



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ELIMINATE

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SculpSure™ is a breakthrough non-invasive body contouring treatment for fat that has been unresponsive to diet and exercise.

- **25 minute treatment**
- **Clinically proven to permanently reduce fat**
- **Customized treatment sessions to achieve the look you want**

The treatments applicators are placed on the skin and a balance of laser wavelength with cold is projected to the fat layer, making it hot enough to achieve the right temperatures to destroy fat cells, but cold enough to be comfortable. The destroyed cells are disposed of by the body's lymphatic system.

The results are seen in 6-8 weeks and most people require just 1 treatment. Another major advantage and game changer is the skin tightening effects of this laser.

So in summary, SculpSure™ is less expensive, takes less time and tightens skin very effectively. I'm very excited and happy to share this information!



Medical Director, Daniela Dadurian M.D.

- * Board Certified Anti- Aging Medicine
- * Board Certified Laser Surgery

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.

The specialty recognition identified herein has been received from a private organization not affiliated with or recognized by the Florida Board of Medicine.

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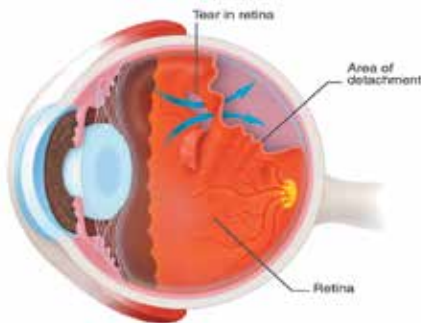
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RETINAL TEAR and RETINAL DETACHMENT



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

The retina is the light-sensitive tissue lining the back of our eye. Light rays are focused onto the retina through our cornea, pupil and lens. The retina converts the light rays into impulses that travel through the optic nerve to our brain, where they are interpreted as the images we see. A healthy, intact retina is key to clear vision.



The middle of our eye is filled with a clear gel called vitreous (vi-tree-us) that is attached to the retina. Sometimes tiny clumps of gel or cells inside the vitreous will cast shadows on the retina, and you may sometimes see small dots, specks, strings or clouds moving in your field of vision. These are called floaters. You can often see them when looking at a plain, light background, like a blank wall or blue sky.

As we get older, the vitreous may shrink and pull on the retina. When this happens, you may notice what look like flashing lights, lightning streaks or the sensation of seeing “stars.” These are called flashes.

Usually, the vitreous moves away from the retina without causing problems. But sometimes the vitreous pulls hard enough to tear the retina in one or more places. Fluid may pass through a retinal tear, lifting the retina off the back of the eye — much as wallpaper can peel off a wall. When the retina is pulled away from the back of the eye like this, it is called a retinal detachment.

The retina does not work when it is detached and vision becomes blurry. A retinal detachment is a very serious problem that almost always causes blindness unless it is treated with detached retina surgery. Torn or Detached Retina Symptoms

Symptoms of a retinal tear and a retinal detachment can include the following:

- A sudden increase in size and number of floaters, indicating a retinal tear may be occurring;
- A sudden appearance of flashes, which could be the first stage of a retinal tear or detachment;
- Having a shadow appear in the periphery (side) of your field of vision;
- Seeing a gray curtain moving across your field of vision;
- A sudden decrease in your vision.

Floaters and flashes in themselves are quite common and do not always mean you have a retinal tear or detachment. However, if they are suddenly more severe and you notice you are losing vision, you should call your ophthalmologist right away.

WHO IS AT RISK FOR A TORN OR DETACHED RETINA?

People with the following conditions have an increased risk for retinal detachment:

- Nearsightedness;
- Previous cataract surgery;
- Glaucoma;
- Severe eye injury;
- Previous retinal detachment in the other eye;
- Family history of retinal detachment;
- Weak areas in the retina that can be seen by an ophthalmologist during an eye exam.

TORN OR DETACHED RETINA DIAGNOSIS

Your ophthalmologist can diagnose retinal tear or retinal detachment during an eye examination where he or she dilates (widens) the pupils of your eyes. An ultrasound of the eye may also be performed to get additional detail of the retina.

Only after careful examination can your ophthalmologist tell whether a retinal tear or early retinal detachment is present. Some retinal detachments are found during a routine eye examination. That is why it is so important to have regular eye exams.

TORN OR DETACHED RETINA TREATMENT

A retinal tear or a detached retina is repaired with a surgical procedure. Based on your specific condition, your ophthalmologist will discuss the type of procedure recommended and will tell you about the various risks and benefits of your treatment options.

TORN RETINA SURGERY

Most retinal tears need to be treated by sealing the retina to the back wall of the eye with laser surgery. Both of these procedures create a scar that helps seal the retina to the back of the eye. This prevents fluid from traveling through the tear and under the retina, which usually prevents the retina from detaching. These treatments cause little or no discomfort and may be performed in your ophthalmologist’s office.

Laser surgery (photocoagulation). With laser surgery, your Eye M.D. uses a laser to make small burns around the retinal tear. The scarring that results seals the retina to the underlying tissue, helping to prevent a retinal detachment.

Detached retina surgery

Almost all patients with retinal detachments must have surgery to place the retina back in its proper position. Otherwise, the retina will lose the ability to function, possibly permanently, and blindness can result. The method for fixing retinal detachment depends on the characteristics of the detachment. In each of the following methods, your Eye M.D. will locate the retinal tears and use laser surgery or cryotherapy to seal the tear.

Vitrectomy

This surgery is commonly used to fix a retinal detachment and is performed in an operating room. The vitreous gel, which is pulling on the retina, is removed from the eye and usually replaced with a gas bubble.

Sometimes an oil bubble is used (instead of a gas bubble) to keep the retina in place. Your body’s own fluids will gradually replace a gas bubble. An oil bubble will need to be removed from the eye at a later date with another surgical procedure. Sometimes vitrectomy is combined with a scleral buckle.

If a gas bubble was placed in your eye, your ophthalmologist may recommend that you keep your head in special positions for a time. Do not fly in an airplane or travel at high altitudes until you are told the gas bubble is gone. A rapid increase in altitude can cause a dangerous rise in eye pressure. With an oil bubble, it is safe to fly on an airplane.

Most retinal detachment surgeries (80 to 90 percent) are successful, although a second operation is sometimes needed.

Some retinal detachments cannot be fixed. The development of scar tissue is the usual reason that a retina is not able to be fixed. If the retina cannot be reattached, the eye will continue to lose sight and ultimately become blind.

After successful surgery for retinal detachment, vision may take many months to improve and, in some cases, may never return fully. Unfortunately, some patients do not recover any vision. The more severe the detachment, the less vision may return. For this reason, it is very important to see your ophthalmologist regularly or at the first sign of any trouble with your vision.



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

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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**.

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.

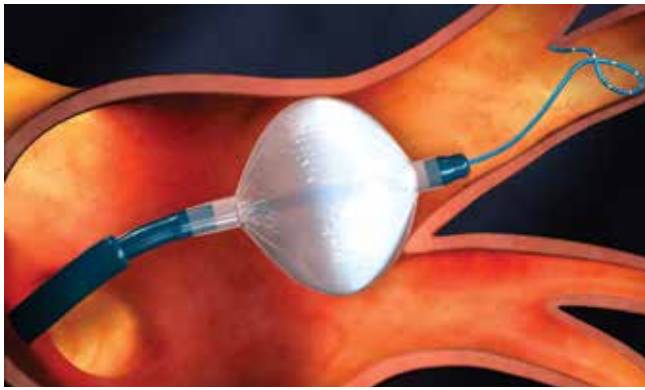
Specializing in treating arrhythmia or irregular heart rhythms, – Yoel R. Vivas, M.D., F.H.R.S., and Luis F. Mora, M.D – say that cryoablation has several advantages over traditional radiofrequency ablation. "Cryoablation is an excellent treatment option for patients with paroxysmal AFib who have not 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.

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is located at 5329 W. Atlantic Ave.
Suite 204 Delray Beach, FL 33484
561-303-3491



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
Cardiovascular Diseases, ABIM
Internal Medicine, ABIM
Nuclear Cardiology, ASNC
Echocardiography, ASE
Clinical Lipidology, NLA



By Aaron Rosenblatt, MD

AVOID BACK AND SPINE SURGERIES!!!



Back surgeries can fail for a devastatingly simple reason; the operation was not the right treatment, because the surgeon never pinpointed the source of the pain. As a result, patients may be just as miserable as they were before, or worse off. Unfortunately a desperate number choose to try surgery again. This is usually the wrong decision as well and this should be avoided. Statistics show also that by two years after a patient's first surgery, about 8% of patients have had another operation and by 10 years after, the rate jumps to 20%, an analysis of Washington State hospital data found.

There is no one best way to treat everyone. But the chance of finding relief for ongoing pain unquestionably lies in understanding what has gone wrong. This is not an easy task. Then seeing the most appropriate specialist for your problem and asking the right questions is quite important. With back problems, perhaps more than with any other medical condition, getting the best care at the utmost importance. The most important doctor you can see, at this point, is an Interventional Pain Management Specialists like Dr. Aaron Rosenblatt. A well qualified and certified doctor like him can evaluate a patient completely. He will order the appropriate scans and or test needed in order to come up with a plan to properly diagnose and the treat the issues WITHOUT SURGERY.

Once all of the appropriate tests are done Dr. Rosenblatt can see what diagnostics need to be completed in his state-of-the-art pain management facility. That's why it's critical to have a thorough workup. To get a sense of the cause of your pain X-rays and MRI/CT scans can be helpful but just because these scan say you have a disc problem here and or an arthritic problem there does not mean that this is where your pain is generated from.

As an interventionalist, Dr. Rosenblatt will take this information and set up diagnostic tests

within his office to properly pinpoint the exact regions of the spine which require any type of treatment. Without these diagnostic tests, the wrong diagnoses can be made and then ineffective treatment with surgery becomes likely. That's because high-tech images routinely uncover bulging discs and other "abnormalities." Dr. Rosenblatt will use this information and interventional techniques to avoid surgery.

Trouble is, many findings on scans often have nothing to do with what's hurting. If you take 100 people off the street and give them MRI's or Cat Scans, 33% of them, even if they had no back pain whatsoever, would have obvious structural problems. Data also points out that less the 5% of all patients who experience back pain will EVER require surgery but, unfortunately, a much higher percent of patients wind up with an operation. We will help avoid this situation.

Here's the real problem... Patients tend to think of back surgery as the BIG CURE or consider it the treatment that will work successfully. Sometimes, in our desperation to get our lives back, it may seem like a good idea to jump over those less invasive procedures and go right to the big one. This is rarely true.

Dr. Rosenblatt says, "Per my experience, it is rarely the case that a patient I see in my office will ever require surgery for pain. I also see too many patients who have already had 1 or more back surgeries without any relief." Surgery should NEVER be seen as worth trying for pain. This approach usually fails to help patients overcome their pain and now their spines are complicated and worse off due to after effect of surgery.

If a doctor recommends an operation, get a second opinion as soon as possible. A good surgeon should understand that you need to be comfortable with any decision and prior to having a surgery other opinions are necessary. For a truly useful second look, Dr. Rosenblatt can fully evaluate this situation and give what options exist.

Dr. Rosenblatt explains, "There have been too many times where patients were scheduled for one type of surgery and something totally different was causing their pain. Specifically, issues with sacroiliac joints, hips and other regions of the body can mimic pain which would also NOT require surgery."

Dr. Rosenblatt continues, "I'm always trying to help a patient fully understand what is causing them a pain issue. This is usually pinpointed easily, diagnosed properly and then treated successfully without the need for any type of surgery."

In Dr. Rosenblatt's beautiful freestanding interventional pain management building in Delray Beach, FL, individuals have been able to benefit and also help avoid surgery. Every patient is evaluated by Dr. Rosenblatt and a comprehensive treatment plan is always made. Patients are all seen by Dr. Rosenblatt himself. Patients are NOT seen by PA's (physician assistants) or NP's (nurse practitioners). Dr. Aaron Rosenblatt is double board certified in Pain Management and also in Physical Medicine and Rehabilitation. He runs on time and does not make patients wait hours in his office to see him. 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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The Many Options for REPLACING TEETH

Written by the doctors at Advanced Dentistry South Florida



It has been said that the first thing someone notices about you is your mouth, or smile. If you are afraid to smile because you have one or more missing teeth, just know that there is more than just one option for replacing them.

At Advanced Dentistry South Florida, we hear many reasons why a patient might not want to replace his or her teeth. A few of the main reasons why someone might choose not to replace their teeth are:

1. The procedure costs too much
2. Fear of the dentist, or dental anxiety
3. Embarrassment
4. Pain

What a lot of people don't realize is the fact that there is more than just one option for replacing missing teeth. There are plenty of options that can be low cost and virtually pain free.

What we try to educate patients on is the fact that the longer you wait to replace your missing teeth, the more expensive it can get to maintain good oral health. Teeth use their neighbors for support, and with one missing, they start to "fall." As this worsens, the bite changes in response to the pressure. This can eventually result in problems with the entire jaw, e.g. TMJ. The surrounding teeth deteriorate and it is just a matter of time before they too are lost. Gum disease becomes a serious problem, with the difficulty of treatment increasing as the neglect continues.

SO WHAT ARE THE OPTIONS FOR REPLACING TEETH?

Although there are quite a few options for replacing missing teeth, the most common procedures will be listed below:



1. Dental Implants: A dental implant is an ideal tooth restoration for people who are missing one or more teeth as a result of injury, periodontal disease, or any other reason. Because dental implants are made from titanium, the body should not reject this metallic substance.



2. Dentures: A denture is a fixed or removable appliance that is crafted to replace your missing teeth. While dental implants are the number one choice for one or more missing teeth, dentures can be a great alternative. Because of our state-of-the-art technology and modern advances in dentistry, your denture will be custom fit and will have a life-like look and feel to them.



3. All Porcelain Ceramic Crowns: A crown (also referred to as a cap) is used to entirely cover a damaged tooth and is shaped to look as natural as possible. A crown not only strengthens a tooth, but it can dramatically improve a tooth's appearance, shape and alignment. Now thanks to the development of modern all-ceramics, which are incredibly strong and natural looking, aesthetics and durability become one with the use of all porcelain crowns.



4. Bridges: A dental bridge is exactly how it sounds. It creates a "bridge" where tooth loss has occurred. There are several types of bridges. If you have healthy, strong teeth on either side of the missing tooth, then you may be a good candidate for a dental bridge.

While these replacement options are the most popular in our office, they may not be the right choice for your particular case. When you make your appointment at Advanced Dentistry South Florida, your doctor will determine which options are best for you after following a complete examination.

Our oral surgeons have extensive education and many years of performing oral surgery procedures such as implants, dentures, crowns and bridges. Our practice has been voted "Best Dental Practice in Delray Beach" for 3 years in a row by Sun Sentinel Delray Forum readers, and we have recently been named the "Best Dental Practice in Delray" as well by the Jewish Journal.

Call our office to make your appointment today to see for yourself why others trust us with their oral care.



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Whether you are looking to lose weight or get toned, ILoveKickboxing is a fun alternative to the normal exercise routine. The concept is simple: members warm up for 15 to 20 minutes doing stretches, burpees, squats and other exercises before taking out their daily frustrations on the bags for 25 to 30 minutes, working through six three-minute bag rounds. This is followed by partner drills, resistance training, and conditioning and finally the cool down. High-spirited instructors lead the participants through different combinations and observe to ensure each person is properly doing the exercises. It is a way to get one-on-one attention while being in a class setting.

Kickboxing has many benefits. In addition to being the perfect catharsis after a hard day at work and relieving stress, it also helps people meet their fitness goals quickly. This form of exercise has been known to burn 700 to 800 calories per hour. At ILoveKickboxing, there are no machines, no competition; no weight training or combat it's just YOU and the BAG.... It is just high energy fun.

Team Boca is stacked with a team of stellar Instructors, all with their own special talents. Each one is gifted in teaching and coaching to push you towards your goals. Each class will be led by a Lead Instructor, Floater Instructor and your first day instructor. So you will never be left to figure it out on your own. We will be there every step and punch of the way.

Our instructors are some of the most outgoing people you will ever meet. They truly enjoy helping others succeed. Their goal is to maintain a supportive and fun environment for you each and every class! It is not a boot camp. You don't have someone barking orders at you. You have someone making sure you are doing the moves properly as you sweat your tail off. It is a monster workout. You are going to be tired. But we make it as fun as possible."

Our studio is a small boutique like fitness facility. When you walk into iLoveKickboxing.com we know your name, your favorite color, and movie and class time. A lot of people with gym memberships swipe their key card, find a TV, do a half hour or 45 minutes of cardio while watching CNN and finish by wiping sweat off machines. This type of routine is mundane and just plain boring. At iLoveKickboxing.com Boca Raton we pride ourselves on having fun. We play loud, high energy music, we have monthly DJ theme parties and on Fridays, we Flex!



A common question, we are asked is "I've never done kickboxing before is there a beginner class?" Please be assured that everyone starts out as a beginner. We encourage everyone to do what they can; we offer modifications to each exercise. "Eighty percent have never done [something like this] before. Maybe they are nervous; they don't want to be a fish out of water. Whether they want to shed a few pounds or get toned, or are bored with what they are doing, [this will work for them]... Many of our members have had surgery, have back problems, leg problems, and gastric bypass. If people are tired or something doesn't feel right, they can stop so there is very little injury, no twisting ankles, lifting weights, etc. It is very body friendly."

Our demographic is 80% women and 20% men. Our facility has both women's as well as men's locker rooms. The average age range is 18-55, however we have some members who are 65+. You are only limited by the limitations you place on yourself. Our classes are primarily for adults,

however children ages 13 to 15 may attend but must be accompanied by a parent or guardian. Ages 16 to 17 must have a parent/guardian with them for the first class and then the parent can sign a waiver. We do offer a family discount (buy two get one free). Ask about other discounts available, for referring others who sign up, etc.

iLoveKickboxing.com Boca Raton is a member of the Chamber of Commerce and wants to get involved as much as possible in the community. We are actively seeking partnerships with other businesses.



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1297 W. Palmetto Park Rd, Boca Raton, FL 33486.
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www.ilovekickboxingbocaraton.com



Focus on the Face

by Dr. Robin Sykes

You look in the mirror in the morning, and the face that greets you makes you exclaim "My face is falling". It can be hard to put your "best face forward" when you know that no amount of makeup or sleep will fill in the hollows of your cheeks, or take away the sad expression around your mouth. Often times, this is what brings a patient to the plastic surgeon.

Fortunately, there are some wonderful ways to fix sad faces, and the results can be natural in appearance. One is the mini-facelift. This procedure is safer and quicker than a standard facelift, and highly effective in making the face look refreshed and natural. It is a great procedure when done earlier in life, and can even be done later in life as a conservative, safer lift.

The other answer is a true revolution. It involves restoring the volumes of the face which have been lost over time primarily through fat and bone loss, as a result of natural aging. The fillers available to do these miracles have been evolving over the past decade, and there are now a number of excellent choices of products to use. It is amazing what a little filler in the cheeks can do to rejuvenate the appearance, taking a "rectangular" face, bottom-heavy due to jowl formation, and to restore a more youthful "oval" or "heart-shaped" face with the use of cheek augmentation.

Over the past two years, even more fillers have also become available, which are able to smooth out fine and deeper lines of the cheeks and lips, in what can be described as "air-brushing" the face. These fillers are very



PRE-RADIESSE AND BELOTERO



10 DAYS POST-RADIESSE AND BELOTERO

soft and pliable, and do not increase volume, but result in a smoother overall appearance.

The best thing about fillers, is that they fill in a void in the surgeon's armamentarium. There is no surgery involved, and they can give results that enhance a surgical procedure. They can be used in place of surgery if surgery is not wanted or not needed. They are great after a prior facelift, when volume loss becomes apparent. They have minimal down-time. The use of topical anesthetic and micro-cannulas can also give a quicker result with less pain and bruising.



Robin A. Sykes, MD is a Board-Certified Plastic Surgeon. She has a BA in Biology from Wells College, an MD from the Johns Hopkins University School of Medicine, General Surgery training at the University of Miami, and Plastic Surgery training at the University of Kansas. She is a National Merit Scholar and Phi Beta Kappa. In addition, she has many years of art training, and brings this to her work in aesthetic plastic surgery. Many new technologies as well as new aesthetic devices and products are available

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WHY IS MY CHILD STRUGGLING?

And what can I do about it?

By Renee Chillcott, LMHC

It's an all-too-familiar story. Parents and their child(ren) sitting across the desk from me, hoping, searching, and desperate for guidance. Comments such as:

- "If it's something he wants to do, he does it, if not, there's a battle."
- "He just needs to make better choices."
- "I think it's just a kid thing."
- "I was the same way when I was his age and look how I turned out."
- "He pays attention when it's something he likes, such as video games."
- "He's just not liking school or getting along with the teacher."

Typically, these children have been diagnosed by a teacher, pediatrician, psychiatrist or therapist and fall into one of these categories:

- **ADHD (Attention Deficit/Hyperactivity Disorder)**
- **ODD (oppositional defiant disorder)**
- **Bipolar Disorder**
- **Mood Disorder**
- **Learning Disorder**

But is this really what's going on? And is medication the only answer?

Developmental Psychologist Erik Erikson calls the years between 5-12 the "Industrious" years. He notes the following in 1959...

INDUSTRY (COMPETENCE) VS. INFERIORITY

Children are at the stage (aged 5 to 12 yrs) where they will be learning to read and write, to do sums, to do things on their own. Teachers begin to take an important role in the child's life as they teach the child specific skills.

It is at this stage that the child's peer group will gain greater significance and will become a major source of the child's self-esteem. The child now feels the need to win approval by demonstrating specific competencies that are valued by society, and begin to develop a sense of pride in their accomplishments.

If children are encouraged and reinforced for their initiative, they begin to feel industrious and feel confident in their ability to achieve goals. If this initiative is not encouraged, if it is restricted by parents or teacher, then the child begins to feel inferior, doubting his own abilities and therefore may not reach his or her potential.

*If the child cannot develop the specific skill they feel society is demanding (e.g. being athletic) then they may develop a sense of inferiority. Some failure may be necessary so that the child can develop some modesty. Yet again, a balance between competence and modesty is necessary. Success in this stage will lead to the virtue of **competence**. (Simply Psychology, by Saul McLeod published 2008, updated 2013)*

Although Erikson's theories are from the late 50's early 60's, his insight and words of wisdom remain. However, today we are beginning to recognize that it's not necessarily the restriction from parents and teachers that cause a disconnect in the fulfillment of this developmental stage, but rather a discord in their brain and/or body.

If your child has not begun speaking by age 4 or 5, then a speech delay diagnosis is made and intervention occurs to improve the situation. Similarly, if your child is not industrious and confident during this period of middle childhood (5-12 years old), they are medicated and told that there's something wrong with them. Or worse, they are told that they are the problem and are not making good choices, which furthers the Inferiority Erikson speaks of.

As a Neurofeedback therapist, I see this inability to enjoy and be successful at school, trouble with peers, and chronic low self-esteem as a delay in functioning and is needing intervention. I look at what is going on inside their brain and body's that is interfering with the child's quest towards competence and then work hard to help correct the situation. By evaluating the child as a whole rather than just identifying behaviors checked off of a checklist, we can then treat the child as a whole, which they are.

Most diagnosis and treatment is done through an evaluation of symptoms. Symptoms such as:

- Always being on the go.
- Can't sit still...anywhere.
- Impulsive behaviors or thoughts.
- Easily distracted.
- Not following directions.
- Requiring multiple re-directions.
- Oppositional, saying NO or refusing to work.



Erikson didn't mention any of these diagnosis or symptoms when he was observing this developmental stage, yet so many kids suffer from an inability to achieve the Competence he speaks of.

SO WHAT COULD IT BE AND WHAT DO WE DO ABOUT IT?

The first step in helping your child is to identify what is delayed and where in the brain and body that may be coming from. In our office we will perform a clinical interview for a history and list of symptoms. Then, through a mix of experience, testing and reporting we can identify what is happening in the brain and in the body. Once identified, we use Neurofeedback and nutritional counseling as modalities for intervention.

WHAT IS NEUROFEEDBACK?

Neurofeedback, also known as EEG biofeedback, has been studied and practiced since the late 60's. Neurofeedback is exercise for your brain. It allows 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 states, 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".

WHAT IS A BRAIN MAP OR QEEG (QUANTITATIVE EEG)?

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 entire head, 19 spots, and then record the brain waves with eyes open for 5 minutes and with eyes closed for 10 minutes. This recording is then read and analyzed. We provide 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 is easy, just give us a call. The Brain and Wellness Center staff will answer all of your questions, and help you get scheduled. If you are wondering what services are best for you? We can help determine that at the time of the intake, in a telephone consultation, or you can schedule a face to face consultation and see our facility. Call, email or message us today! Brain and Wellness Center, 7301 W. Palmetto Park Rd., Suite 102A, Boca Raton, FL 33433. **(561) 206-2706**, e-mail us at info@bocabraincenter.com, or text us at **(561) 206-2706** or visit our website at www.BocaBrainCenter.com.



Renee Chillcott, LMHC

Renee Chillcott is a Licensed Mental Health Counselor that has been practicing Neurofeedback training since 2005. Renee holds a BA degree from The University of Central Florida and a Master's Degree in Psychology from Nova Southeastern University. She is a Licensed Mental Health Counselor and is the owner/operator of The Brain and Wellness Center, located in Boca Raton. At The Brain and 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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Looking for a **Natural & Organic** way to **Color your Hair?** Take a look at **Henna**

If you're looking for an alternative to chemical-laden hair dyes – or if you just want shiny, bouncy hair – stop and take a long look at henna. It is a symbol of modern fashion to many women and men lately. Henna, popularly known as Mehendi is a hair coloring dimension used for hundreds of years. Throughout the expanse of time men and women have been alive, evidence can be found to indicate that from the moment we became aware of ourselves, we became interested in adorning and adjusting our appearance. One of the ways in which we did this was by finding ways to color and adorn the hair. Archaeologists have found evidence to suggest that early man may have used minerals, plants and insects to paint their bodies and hair to appeal or repel. There is also recorded evidence from around 1500 B.C. that the Egyptians used henna as a hair coloring agent. This theme is echoed throughout our history as the color of the hair has been considered important. At the end of the 19th century, women of Istanbul and Smyrna used an estimated 15,000 pounds of henna annually as hair dye. Famous beauties such as Nefertiti and Cleopatra used henna to enhance their hair coloring. Ever wonder how Lucille Ball maintained her strawberry red locks over the years – yes she used Henna.

Henna is a plant that grows in the hot, dry climates of the Eastern hemisphere. For decades, women from North Africa, India, and the Middle East have used henna to stain their hair, skin, and nails. The red henna dye is contained within the leaves of the plant. After the plant is harvested, the leaves are dried, ground, and sifted into a flour-like powder. Henna is gentler on your hair than permanent hair color because it only deposits dye on to the surface, not inside the cortex.

Although most people would associate henna's effect on the hair to changing or enhancing its color, henna can actually play a number of roles. Henna has been proven to increase the strength of the hair and therefore represents a safe natural dye that doesn't permanently affect the health of our follicles. Henna helps seal the hair cuticle, preventing breaking, and increasing the shine and appearance of the hair. For people suffering from hair loss or baldness, henna can also inhibit this from happening.

Some benefits of henna for hair:

- Stronger strands/less breakage
- Balance hair porosity
- Reduces or eliminates dandruff
- Smooths hair cuticle giving hair a healthy appearance
- Thickens hair
- Promotes growth due to antibacterial and antifungal properties
- Less shedding
- It is the best and safest way to color your hair that has no ammonia, chemicals, and toxins.
- Henna can be used to treat dandruff and scalp infections effectively.

Healthy Life Salon offers henna hair color service that will cover your grey hair up to 80% or simply give your hair shine and added volume. Juli Edwards owner of Healthy Life Salon is a hair color specialist and offers henna services Wednesdays



thru Saturdays. She will know the proper application and will custom blend the pure ingredients to achieve your desired hair color. Think red tones are you only options? Think again!! Juli explains that indigo & alma goose-berry are mixed with the henna to create tones of auburn, dark brown, light black and dark blonde, and of course red tones are available as well. Juli emphasizes that henna is deposit only, so it will not lighten ones hair. The henna used at HLS is leaping bunny certified (cruelty-free and vegan), does not contain ammonia, PPD, metallic salts, gluten, peroxide, pesticides, preservatives or synthetics. Our products can also be used on men to color facial hair and chest hair. A basic custom blended plant based henna application with Juli is \$70 and includes a blow out. If the hair is thick or long there will be an additional \$15 fee. Eyebrow, beard or chest hair application is 5- \$50.

At Healthy Life Salon and Organic Wine Bar we specialize in using all organic personal care products that supports a sustainable environment by using fewer damaging chemicals, helping you lead a healthier, more beautiful life. We care about the world around us and take comfort knowing that the products we use are kinder and gentler on our clients and all of its inhabitants. We take care of you head to toe!



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Underlying Reasons for Limb Swelling

By Alyssa Parker

Many people may experience complications after an operation due to the significant amount of trauma your body endures. Whether it's cancer related, non-cancer related, or a minor surgery, patients may develop post-operative symptoms such as swelling in a limb or a particular area of the body. Swelling in the limb which may appear to be temporary can later lead to chronic swelling known as lymphedema.

HOW THE LYMPHATIC SYSTEM WORKS

What does edema have to do with your lymphatic system? The lymphatic system serves as one of the body's main highways. Through its network of vessels and ducts, it works as a filtration system for body fluid entering into the blood stream. This fluid is referred to as "lymph" fluid, which is the interstitial fluid consisting of proteins, wastes, and a collection of white blood cells. The kidneys, skin, lungs, or intestines then eliminate the wastes that have been filtered out of the lymphatic vessels.

WHAT IS LYMPHEDEMA?

Lymphedema is a degenerative condition which means it will only get worse over time without treatment. There is no cure for Lymphedema. Once a lymph node has been damaged, your lymphatic can become compromised. Over the years, as you get older, you may incur irreversible damage to the lymphatic system through medical procedures, injuries, or infection. Examples include cancer radiation, surgical lymph node removal, joint replacements, scarring of the lymphatic vessels through reoccurring infections i.e. cellulitis, or other health problems relating to gall bladder, kidneys, intestines, or reproductive organs. When an obstruction has occurred, a blockage in the lymph nodes can occur. The limb begins to swell with fluid because the lymphatic system is blocked/impaired, unable to move the fluid back into the circulatory system.

COMPRESSION PUMP TREATMENT

One recognized treatment is using a compression pump. This is a safe and effective way to assist your body's lymphatic system in moving the lymph fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility. The compression pump is a gentle massaging technique that compresses in a rhythmic cycle, similar to that of a normally functioning lymphatic system that has not been damaged.

POSSIBLE SYMPTOMS OF LYMPHEDEMA

- Swelling in your legs or arms
- A feeling of heaviness or tightness
- A restricted range of motion
- Aching or discomfort
- Recurring infection/cellulitis
- Hardening or thickening of the skin on your arms or legs

It is important to rule out other causes of edema including nutritional issues, allergies and reactions to medication you may be on. True Lymphedema should not be treated with Diuretics as they draw from the Venus system not the Lymphatic system. Removing fluid from the body in this fashion takes away the wastes' only means of transport and can lead to serious recurrent infections or cellulitis since the lymph waste is now trapped in the limb and has no place to go. If symptoms return when you cease Diuretics, you should be asking questions and seeing a specialist immediately. This is where choosing a physician experienced in recognizing and treating Lymphedema is critical.

SOME GOOD QUESTIONS TO ASK YOUR PHYSICIAN INCLUDE:

- Does my family have a history of swelling (Hereditary Lymphedema)?
- Stemmer's sign present?



- Pitting (push your finger into your skin and count how long it takes to return) or skin hardening?
- Hemosiderin staining (port wine skin stains or "red socks") appear from the ankles down?
- Traumatic injury or surgery potentially damaging Lymph nodes (Hip replacements, etc)?
- Radiation to Lymph areas?

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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 raising 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.



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.

RVT-101 only increases acetylcholine in the brain (not the rest of the body), so researchers believe 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.

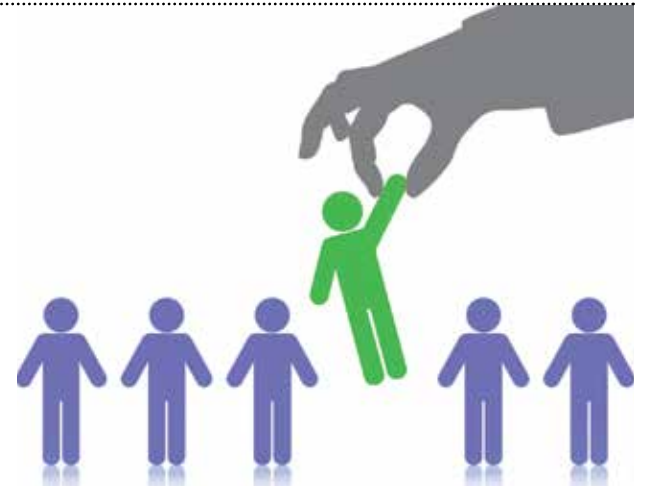
WHAT IS INVOLVED IN STUDY PARTICIPATION

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.

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Protecting Your Eyes

By David A. Goldman MD

Protecting your eyes from injury is one of the most basic things you can do to keep your vision healthy throughout your life.

You may be somewhat aware of the possible risks of eye injuries, but are you taking the easiest step of all to prevent 90 percent of those injuries: wearing the proper protective eyewear?

If you are not taking this step, you are not alone. According to a national survey by the American Academy of Ophthalmology, only 35 percent of respondents said they always wear protective eyewear when performing home repairs or maintenance; even fewer do so while playing sports.

Eye Injury Facts and Myths

- Men are more likely to sustain an eye injury than women.
- Most people believe that eye injuries are most common on the job — especially in the course of work at factories and construction sites. But, in fact, nearly half (44.7 percent) of all eye injuries occurred in the home, as reported during the fifth-annual Eye Injury Snapshot (conducted by the American Academy of Ophthalmology and the American Society of Ocular Trauma).
- More than 40 percent of eye injuries reported in the Eye Injury Snapshot were caused by projects and activities such as home repairs, yard work, cleaning and cooking. More than a third (34.2 percent) of injuries in the home occurred in living areas such as the kitchen, bedroom, bathroom, living or family room.
- More than 40 percent of eye injuries every year are related to sports or recreational activities.
- Eyes can be damaged by sun exposure, not just chemicals, dust or objects.
- Among all eye injuries reported in the Eye Injury Snapshot, more than 78 percent of people were not wearing eyewear at the time of injury. Of those reported to be wearing eyewear of some sort at the time of injury (including glasses or contact lenses), only 5.3 percent were wearing safety or sports glasses.

If you have suffered an eye injury, review these care and treatment recommendations. But most importantly, have an ophthalmologist or other medical doctor examine the eye as soon as possible, even if the injury seems minor.

For all eye injuries:

- DO NOT touch, rub or apply pressure to the eye.
- DO NOT try to remove the object stuck in the eye.
- Do not apply ointment or medication to the eye.
- See a doctor as soon as possible, preferably an ophthalmologist.

If your eye has been cut or punctured:

- Gently place a shield over the eye. The bottom of a paper cup taped to the bones surrounding the eye can serve as a shield until you get medical attention.
- DO NOT rinse with water.
- DO NOT remove the object stuck in eye.
- DO NOT rub or apply pressure to eye.
- Avoid giving aspirin, ibuprofen or other non-steroidal, anti-inflammatory drugs. These drugs thin the blood and may increase bleeding.
- After you have finished protecting the eye, see a physician immediately.

If you get a particle or foreign material in your eye:

- DO NOT rub the eye.
- Lift the upper eyelid over the lashes of your lower lid.
- Blink several times and allow tears to flush out the particle.
- If the particle remains, keep your eye closed and seek medical attention.

In case of a chemical burn to the eye:

- Immediately flush the eye with plenty of clean water
- Seek emergency medical treatment right away.

To treat a blow to the eye:

- Gently apply a small cold compress to reduce pain and swelling.
- DO NOT apply any pressure.
- If a black eye, pain or visual disturbance occurs even after a light blow, immediately contact your Eye M.D. or emergency room.
- Remember that even a light blow can cause a significant eye injury.

To treat sand or small debris in the eye:

- Use eyewash to flush the eye out.
- DO NOT rub the eye.
- If the debris doesn't come out, lightly bandage the eye and see an Eye M.D. or visit the nearest emergency room.

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, microincisional 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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Two years ago this very month I found myself in what was seemingly a perpetual series of events that turned our world upside down. It was one of the most difficult times of my life. In a very short span of a couple of weeks I found myself having been betrayed by people I love very much, criticized, and even cast out. My family experienced the loss of a loved one. And I was without a ministry home – in between jobs.

I needed a breakthrough. I needed the clouds to separate just for a moment so I could make it through the rainstorm of life. I was on the edge of chaos in my life and I needed to keep moving forward. I was faced with a choice: would I give up and stop pursuing God? Or would I press on? Truthfully... I wasn't so sure.

But I knew I had a choice.

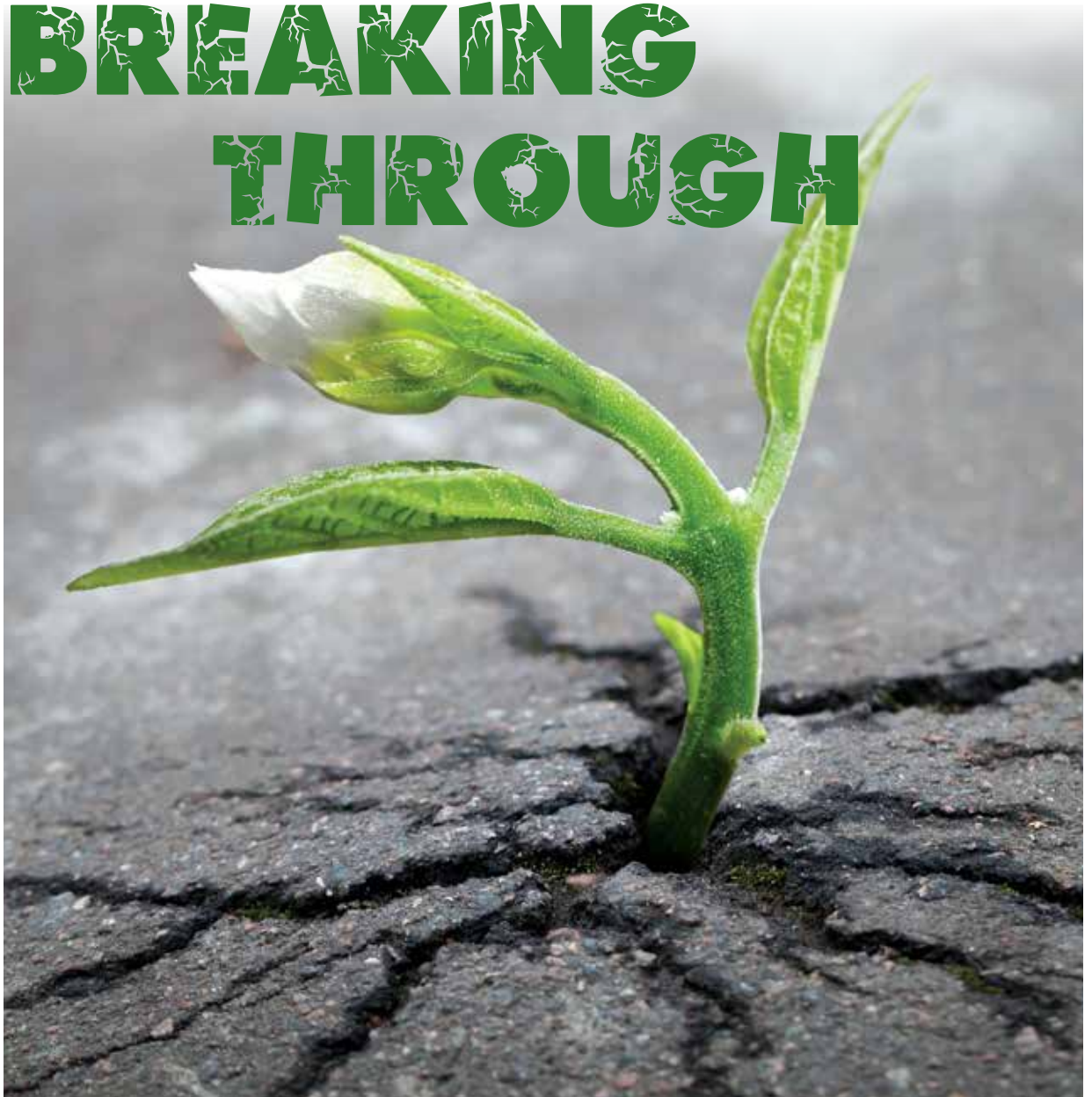
Looking back I've learned that there are four things we can do when needing a breakthrough.

1. DON'T HAVE ALL THE ANSWERS. It's OK to not know why... to not know how... to not know when... God desires for our hearts to be open and honest – to realize that we may never have all the answers. Jesus said, “blessed are the poor in spirit, for theirs is the kingdom of heaven.” (Matthew 5:3) God can much better fill an empty vessel.

2. LISTEN. Once we get to a place where we admit we don't know it all, then we go looking and listening to the One Who does. “For the word of God is living and active, sharper than any two-edged sword, piercing to the division of soul and of spirit, of joints and of marrow, and discerning the thoughts and intentions of the heart.” (Hebrews 4:12). The Bible is God's resource for daily living. It can cut through all the garbage and give us the direction we need.

3. WRITE IT DOWN. When we listen and take heed to what God is saying, I recommend writing it down because I can almost guarantee that at some point, you're going to question whether or not that really happened. Keep a journal of the times you choose to break through. If the Creator of the universe is willing to speak, I should be willing to take notes.

BREAKING THROUGH



4. DO IT. Now the hard part: move on. Whatever you choose to break through, then now get to it. Sitting around waiting for circumstances to be perfect will result in never doing anything because they'll never be perfect. Get to it!

These are the steps that worked for me to experience the breakthrough I longed for during that unbelievable tough time two years ago. I'm grateful today because I can now see the good and the “better” that God had for us on the other side of the tough times.

No matter what you're going through remember this: “And we know that for those who love God all things work together for good, for those who are called according to his purpose... For I am sure that neither death nor life, nor angels nor rulers, nor things present nor things to come, nor powers, nor height nor depth, nor anything else in all creation, will be able to separate us from the love of God in Christ Jesus our Lord.” (Romans 8:28, 38-39)

Brent Myers



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