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January 2017

North Palm Beach Edition - Monthly

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How To 'Banish Baldness' in the New Year

By Dr. Alan J. Bauman

As we kick off the New Year, many people are working hard to keep their resolutions to improve their health and appearance. For some, this means diets and gym memberships, and for others, it means not only admitting they're losing their hair, but taking action and actually doing something about it.

If you think you're losing your hair, you're not alone --consider that over 80 million men and women in the U.S. suffer from hair loss. Unfortunately, seeking help for hair loss still seems to have a negative stigma attached to it. Not seeking professional help at the first signs of hair loss means we are only hurting ourselves. Delaying treatment is especially detrimental because in most cases, hair loss is a progressive

condition that advances and worsens over time; the sooner we act, the better the chances of slowing, stopping and perhaps even reversing the hair loss process. The good news is that for mostly everyone, hair loss is a treatable condition, and the earlier we get started on preventive or restorative therapies, the better the odds for banishing baldness and retaining a full, healthy head of hair.

For those seeking their best possible head of hair as part of their resolutions this coming year, here is a look at what the process should look like:

STEP 1: FINDING A DOCTOR

The first step in treating hair loss is finding the right doctor. Many hair loss patients are unaware of the qualifications, training and expertise required to properly treat hair loss. After a chat at the salon with their hairstylist, they may end up asking their primary doctor, visiting their general dermatologist or hometown cosmetic surgeon for advice. However, in order to achieve optimal results, it is important to consult with an experienced hair restoration physician—a doctor who specializes exclusively in the medical diagnosis, treatment and tracking of hair loss and hair growth. You should look for someone who is board-certified in hair restoration. Only a qualified and experienced hair restoration physician can prescribe the latest and most effective multi-therapy treatment options, as well as track your progress and make sure your hair loss treatments are in fact working.

STEP 2: DIAGNOSING THE PROBLEM

Once you've found a doctor, he or she will help you identify risk factors and assess where you are in the hair loss process. This requires a discipline, methodology and science that is much more involved than merely looking for bald spots. This is one of the reasons why new diagnostic tools, like HairCheck, are so important. HairCheck is a highly sensitive hand-held 'trichometer,' device that measures hair caliber and density together and expresses them as a single number (called the Hair Mass Index (HMI) or "Hair Number"). This number is then used to accurately assess hair loss, growth and breakage on any area of the scalp. By tracking these numbers, your doctor can help you determine the extent and rate of your hair loss and/or breakage and inform you of any changes over time. This information also makes it infinitely easier to catch hair loss before it becomes significantly noticeable. Another tool that a doctor can use to help diagnose and treat hair loss is a genetic test which can determine a man's (and woman's) risk for losing hair; This is valuable information to help justify starting preventative hair loss treatments early.

STEP 3: TREATMENT OPTIONS

Once the extent of your hair loss and the causes behind it have been evaluated, your physician may recommend both medical therapies and lifestyle changes. Medical treatments that may help mitigate hair loss include a specially compounded

prescription minoxidil solution, platelet-rich plasma (PRP) treatments, prostaglandin analogs, low-level laser light therapy, and nutritional supplements. In advanced cases, hair transplantation may be the best strategy for permanently banishing hair loss. New microsurgical no-scalpel/no-stitch hair follicle harvesting techniques like NeoGraft FUE or ARTAS robotic-assisted transplants allow for a comfortable and minimally-invasive no-linear-scar “follicle-by-follicle” approach. For those who aren’t candidates for transplantation or certain medical treatments due to autoimmune alopecias, scalp injury or chemotherapy, new 3D printed hair and scalp cranial prosthesis devices are a promising and life-changing option. Depending on your evaluation, the best strategy may require a multi-therapy approach with routine follow-ups to track and see how well everything is working.

STEP 4: MAKING THE COMMITMENT

There is one more critical step required once a person decides to start any type of treatment for their hair loss; they need to make a commitment to stick with their treatment regimen. One of the hardest parts of treating hair loss in both men and women, is helping the person understand that it is a long-term 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 treating hair loss, it is important to keep in mind that it can take more than a year to see the full, final results from treatments, so many end their treatment early, disrupting and reversing any progress that had been made. Regular follow-up appointments should be performed every 90 days while undergoing treatment. These visits can help ensure the person is responding to their treatment regimen and getting the best results possible.

Hair loss is a progressive but treatable condition, which means that the earlier the treatment is started, the better your chances of success.

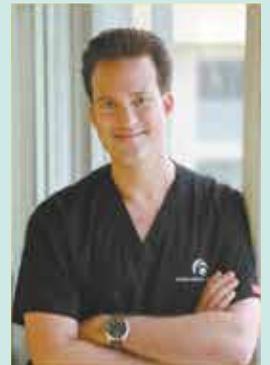


FINDING A HAIR RESTORATION PHYSICIAN WHO CAN PROVIDE YOU WITH A “MASTER PLAN”

- A hair restoration physician is someone who specializes exclusively in the medical diagnosis, treatment and tracking of hair loss.
- Look for physicians who are board-certified in hair restoration by the American Board of Hair Restoration Surgery, accepted members of the International Alliance of Hair Restoration Surgeons and recommended by the American Hair Loss Association.
- Due to the limited number of board-certified hair restoration physicians worldwide, prospective patients should absolutely be able to consult with the physician long-distance.
- 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. Before choosing your doctor, check their level of experience and qualifications, read their patient reviews, ask for before-and-after pictures and, most importantly, ask lots of questions.

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

Dr. Alan J. Bauman is the Founder and Medical Director of Bauman Medical Group in Boca Raton, Florida. Since 1997, he has treated nearly 15,000 hair loss patients and performed nearly 7,000 hair transplant procedures. An international



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

lecturer and frequent faculty member of major medical conferences, Dr. Bauman’s work has been featured in prestigious media outlets such as The Doctors Show, CNN, NBC Today, ABC Good Morning America, CBS Early Show, Men’s Health, The New York Times, Women’s Health, The Wall Street Journal, Newsweek, Dateline NBC, FOX News, MSNBC, Vogue, Allure, Harpers Bazaar and more. A minimally-invasive hair transplant pioneer, in 2008 Dr. Bauman became the first ABHRS-certified Hair Restoration Physician to routinely use NeoGraft FUE for hair transplant procedures.

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January is Thyroid Awareness Month

Forgetful or Feeling Fatigue?

You might have *Hypothyroidism*

We've all experienced changes in our bodies from time to time that seem more of a nuisance than a medical issue. Take, for example, forgetfulness or fatigue, difficulty falling asleep or staying asleep, perhaps even muscle or joint pain. Too often we chalk these symptoms up to the stresses of modern life or simply getting older. And that may seem to be reasonable.....that is, until these changes become pervasive, persistent and bring day-to-day life as you know it to a grinding halt.

Hypothyroidism, an often-hidden health problem in which the thyroid, the master gland of metabolism, produces less hormones than the body needs, impacting virtually all organ systems in the body. It is one of the most misunderstood, misdiagnosed and prevalent medical conditions in the U.S. Studies estimate that more than 10 percent of the general population suffers from the disease. Yet hypothyroidism frequently goes undiagnosed.

Here are the fundamentals regarding what you need to know about the symptoms of hypothyroidism, how the disease is diagnosed and treatment options.

Suspect.

For a condition that affects so many and whose impact can be devastating, it might seem odd that there seems to be a lack of knowledge about hypothyroidism (and thyroid disease in general). But there are several reasons for this.

The early effects of hypothyroidism are often mild, appear gradually and aren't concentrated in a single area of the body, so it's easy to disregard them or attribute them to other causes. Also, two people with the disease may have entirely different symptoms, and one person's symptoms can develop quickly, while the other



person's may take years to emerge. Some people with hypothyroidism have no symptoms at all. And as we age, diminished or faulty hormone production is common, so it's understandable that older patients in particular often go undiagnosed. Plus the body has the ability to compensate somewhat over the short term by increasing the stimulation to the thyroid to produce more hormones.

However, as production of thyroid hormone decreases and the body slows down, the disease progresses and classic symptoms of the condition begin to appear. They may include any of the following:

- **Constant fatigue:** Low thyroid function results in less energy.
- **Depression:** Fatigue is often accompanied by depression. Body functions slow down, including the brain. Routine mental tasks become more difficult. Appetite may decrease and you may sleep more.

- **Weight gain and fluid retention:** An underactive thyroid slows down all your body processes (your metabolism). With lower energy needs, you require fewer calories, so your appetite can decline, but your body converts fewer calories into energy, leading to weight gain. Fluid retention occurs due to decreased excretion of sodium and water by the kidneys.

- **Dry, brittle hair and nails:** Nails and hair are composed of very active cells that are highly sensitive to the metabolic slowdown seen in hypothyroidism.

- **Dry, itchy skin:** Skin issues are among the most common symptoms of hypothyroidism. When your body slows down it produces less heat and you sweat less, leading to dry skin.

- **Muscle or joint pain or stiffness:** Many people with hypothyroidism experience aches and pains that resemble arthritis.

- **Constipation:** The muscles of the digestive tract contract to move its contents through the bowel. Hypothyroidism slows down these contractions.
- **Sensitivity to cold:** This is due to the body conserving heat energy by constricting the blood vessels to the skin, minimizing heat loss.
- **Menstrual cycle changes:** Hypothyroidism causes an imbalance of female hormones, leading to excessive and irregular menstrual bleeding.
- **Slow pulse:** Low levels of thyroid hormone commonly cause the heart to beat more slowly than normal, a condition called bradycardia.
- **High cholesterol:** Low levels of thyroid hormone cause the liver to make fewer LDL receptors, which pull LDL (bad) cholesterol out of the blood.
- **Increased sensitivity to medication:** A slower metabolism alters the way in which the body processes medication or clears it from the system, causing medications to be more potent or have more side effects.

Although symptoms can vary dramatically from person to person, and not every symptom means that you have an underactive thyroid, if you have been suffering from health issues and your physician has yet to determine what the underlying cause is, ask to have your thyroid function checked.

Before you can fully understand what doctors are looking for when they suspect hypothyroidism, it is helpful to know some details regarding how the complex interactions and connections between the thyroid and the body's other endocrine systems work together to keep your body in balance.

The thyroid gland weighs less than 1 ounce and is located at the front of your throat below the voice box (larynx). Shaped like a butterfly, the thyroid has two lobes connected by a middle section of tissue called the isthmus. The thyroid extracts iodine that has been passed into the bloodstream from food that we eat and uses it to make two kinds of hormone: T4, or thyroxine, which is relatively inactive, and T3, or triiodothyronine, the more active thyroid hormone. As thyroid hormone is produced, it is stored in microscopic follicles in the thyroid gland. When your body needs the hormone, the thyroid releases a

small amount of T3 into the bloodstream along with T4, which is converted to "active" T3. The T3 travels through the blood to the liver and other organs in quantities needed to meet your cells' metabolic needs. The thyroid itself gets its direction from the pituitary gland, a pea-sized structure located at the base of the brain which releases thyroid stimulating hormone (TSH) that tells the thyroid how much hormone to make. When the thyroid does not produce enough hormone, the pituitary gland produces more TSH in order to stimulate it. Hence, an elevated TSH level indicates hypothyroidism.

Detect.

When visiting a doctor to be assessed for possible thyroid problems, you will be asked to provide a medical history, highlight any troubling symptoms you are experiencing. The physician will also perform a physical exam to look for signs of the disease. He/she will assess the size of your thyroid gland and look for enlargement by manually feeling around your neck area. He/she will also check for any signs of hypothyroidism, such as dry skin, a puffy appearance and coarse or thinning hair.

If your doctor suspects thyroid dysfunction, diagnostic tests will be ordered, beginning with blood work. Only blood tests can confirm if you are hypothyroid, and a test that measures TSH levels in your blood is the single best indicator. Thyroid hormone levels may be checked to determine the severity of disease as well as antibodies against the thyroid to determine its cause.

If you are found to have a TSH level that does not fall within an established "reference range," your doctor may likely recommend treatment. And if a primary care physician diagnoses your thyroid disorder, you may be referred to an endocrinologist, a medical doctor whose specialty is the body's glandular, or endocrine, system.

Defeat.

The goal of hypothyroidism treatment is to replicate normal thyroid function and return your body to a balanced state. Standard treatment consists of daily intake of a synthetic thyroid hormone, levothyroxine sodium, which comes in pill form and works in the same way your own thyroid hormone would normally work. The initial dose is carefully selected by the physician based on your age, weight, gender, other medical conditions and the

severity of your hypothyroidism. You should consult with your endocrinologist about other medications you are taking, such as iron or calcium supplements, antacids, and cholesterol-lowering medications, since they can interfere with the effectiveness of thyroid medicines.

Because each person's thyroid hormone needs are very precise, finding the proper dose of levothyroxine can take some time and adjustments in medication dosage are typical until the patient's TSH level is within normal range. Keep in mind that the medication is slow-acting, so you are unlikely to feel its full effects immediately.

Once the thyroid hormone dosage that is right for you has been determined, you should stick to the same dosage of the same medication, whether brand name or generic manufacturer, and take it at the same time each day.

Once you and your doctor agree on the brand and thyroid hormone dosage that is right for you, you should not switch the brand of hormone replacement medication you are taking. While each brand is FDA-approved and all have the same active ingredient, inactive ingredients vary from brand to brand and can have a significant impact on how much T4 your body absorbs. However, sticking with the same generic formulations may be difficult. Pharmacies often dispense different generic drugs based on what is in stock, the cost of the medicines and the formulation's availability. If your insurance plan only covers generic drugs, make sure your pharmacist provides the same pills from the same manufacturer every time.

Patients should experience relief from some symptoms within a few weeks, while some changes such as dry skin may not improve until several months after starting treatment. Once your TSH levels are stabilized, they'll typically be checked every six months and the dosage adjusted if necessary.

Since most cases of hypothyroidism in adults are permanent and often progressive, many patients need to take thyroid medication throughout their lives. The good news is that the medication is relatively inexpensive, has minimal side effects and can restore a hypothyroid patient to optimal health.

Source: thyroidawareness.com



MY STORY

Providing medically advanced care to his patients is a top priority for Marc Weinberg, DC, of Active Health Center. When a neck injury nearly caused him to sell his practice almost nine years ago, he was devastated with the prospect. But constant, debilitating pain nearly left him with no other choice.

“I was at a Miami Dolphins football game when suddenly I was hit in the back of the neck with a water bottle that came flying at me like a missile from the upper deck,” Dr. Weinberg recalls. “It definitely hurt a lot, trust me. I managed to make it through the remainder of the game, but over the next few days, I noticed swelling and I started to experience regular headaches.

“Over a period of months, my condition worsened, every little thing I did triggered pain,” he continues. “I experienced confusion, or commonly called *brain fog*. It became more and more difficult to concentrate. I feared I was at a point where I needed to sell my practice as could no longer see my patients, and care for them, due to my own injury and its effects.”

Dr. Weinberg describes how the injury also affected his personal life.

“I couldn’t even sit on the bleachers to watch my kids play baseball. I was very active and I enjoyed playing racquetball, golf and tennis and had to stop all three.”

Dr. Weinberg had two torn ligaments in his neck, an injury similar to whiplash resulting from a car accident. There was no strength in his neck to support the head on his shoulders.

“I lived in constant pain,” he explains. “I couldn’t sit in a chair or on the couch. At the end of my workday, I would lie on my office floor in agony hoping to get relief.”

He tried chiropractic and physical therapy, but to no avail. At one point, he was told that he needed to stabilize his neck by wearing a collar.

“At that point, I thought to myself, *I can’t imagine walking into a chiropractor’s office and seeing the doctor in a neck brace*. All I could think of was how that would look to my own patients. That was my turning point. If I wanted to continue to treat my own patients, I needed to find a way to fix this problem. I dove into researching evidence-based *neck rehabilitation*, and I found information on the MCU, or Multi-Cervical Unit, machine.

“I read about an upcoming physical therapy convention in Orlando where this machine would be on display, and I went to see it for myself.”

HOW IT WORKS

Dr. Weinberg says that the MCU is both diagnostic and therapeutic, so going to the convention to see it was a great opportunity for him to try it out himself.

“At the convention, I used the machine, and what’s great about it is that it performs both the diagnostic testing and the treatment, so there is no guesswork. This makes the treatment precisely targeted and individualized for each patient’s specific needs.”

“During testing, a person is put through a series of isometric strength exercises where you don’t even need to move, while the machine records sixteen different ranges of motion. If it is determined that you are a candidate for the MCU, you are then prescribed a customized series of exercises, as I was. The MCU helps to restore strength and function of the cervical spine. The average treatment regimen is nine weeks, but for many the prescribed regimen is shorter. The treatment is completely painless.”

Dr. Weinberg’s own evaluation showed that there was no strength in his neck to support his head. “This is why no matter what I did, even something as simple as picking up a bag of groceries, my neck would flare up,” he describes. “I was so impressed with the way this machine works that I knew I had to have one in my own office. I wanted to provide my patients with this advanced technology for treating neck injuries.”



“The MCU has changed so many lives. These people had very similar stories to mine where they tried everything from chiropractic to injections to therapy and nothing worked. Once they tried the MCU, they were able to get back to living normal, productive lives, with no more pain.”

THE MULTI-CERVICAL UNIT

“My office acquired the MCU in November 2008. We were the first practice in the state of Florida to use one of these machines,” Dr. Weinberg shares. “Since then, other offices in Central Florida have seen the benefits and have acquired the MCU.”

Dr. Weinberg says he now has two of the MCU machines in his office.

“The MCU has changed so many lives. These people had very similar stories to mine where they tried everything from chiropractic to injections to therapy and nothing worked. Once they tried the MCU, they were able to get back to living normal, productive lives, with no more pain.”

Dr. Weinberg notes that the MCU is not the sole treatment used, but part of a customized treatment plan.

“Many of our patients receive hands-on care with our physical therapist in conjunction with the MCU treatment, but the MCU is the missing piece of the neck pain puzzle.”

SHARING HIS OWN EXPERIENCE

“I have learned, and research has proven, that neck weakness will lead to neck pain, and you have to address the neck weakness in order to treat the pain,” explains Dr. Weinberg. “That is exactly what this machine does. It strengthens specific neck muscles.”

Until the MCU came along, Dr. Weinberg notes, there was no technology to objectively measure and treat neck weakness. “Research confirms the MCU to be the absolute best way to strengthen the neck,” he states. “I am living proof of that.”

Because of his own unique experience and the positive results he achieved with the MCU,

Dr. Weinberg says he is often invited to participate in public speaking engagements to talk about neck strengthening with the MCU.

“I want to share my story because I think it is important for other chiropractors who may be thinking about purchasing this machine to hear it. I want them to listen to what I have learned about neck strengthening and how this machine helped me and how I use it to help others.”

Dr. Weinberg says he is thankful he was not forced into closing his practice and adds that he is back to enjoying tennis, golf and all the other activities he once had to stop participating in.

“I feel like myself again, and I owe it all to the MCU machine,” he confirms. “And best of all, I am thrilled to be able to share the amazing capabilities of the MCU with my patients.”

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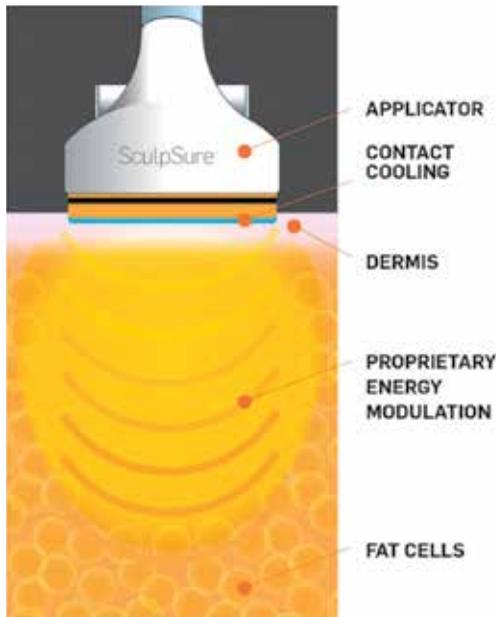
Are There Any New Technologies For Fat Reduction?

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.



- TARGET**
Selective wavelength to target fat cells below the dermis.
- DISPURT**
Highly efficient wavelength for controlled energy delivery.
- ELIMINATE**
Overtime, the body naturally eliminates the fat cells.



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.



BEFORE SculpSure™



AFTER SculpSure™

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!

FOR MORE INFORMATION
or to schedule a complimentary consultation call
561-655-6325 or visit www.drdadurian.com



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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WHAT IS AGE-RELATED MACULAR DEGENERATION?

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

Age-related macular degeneration (AMD) is a deterioration or breakdown of the eye's macula. The macula is a small area in the retina — the light-sensitive tissue lining the back of the eye. The macula is the part of the retina that is responsible for your central vision, allowing you to see fine details clearly.

The macula makes up only a small part of the retina, yet it is much more sensitive to detail than the rest of the retina (called the peripheral retina). The macula is what allows you to thread a needle, read small print, and read street signs. The peripheral retina gives you side (or peripheral) vision. If someone is standing off to one side of your vision, your peripheral retina helps you know that person is there by allowing you to see their general shape.

Many older people develop macular degeneration as part of the body's natural aging process. There are different kinds of macular problems, but the most common is age-related macular degeneration.

With macular degeneration, you may have symptoms such as blurriness, dark areas or distortion in your central vision, and perhaps permanent loss of your central vision. It usually does not affect your side, or peripheral vision. For example, with advanced macular degeneration, you could see the outline of a clock, yet may not be able to see the hands of the clock to tell what time it is.

Causes of macular degeneration include the formation of deposits called drusen under the retina, and in some cases, the growth of abnormal blood vessels under the retina. With or without treatment, macular degeneration alone almost never causes total blindness. People with more advanced cases of macular degeneration continue to have useful vision using their side, or peripheral vision. In many cases, macular degeneration's impact on your vision can be minimal.

When macular degeneration does lead to loss of vision, it usually begins in just one eye, though it may affect the other eye later.

TYPES OF MACULAR DEGENERATION: DRY MACULAR DEGENERATION AND WET MACULAR DEGENERATION

There are two types of macular degeneration:

Dry, or **atrophic**, macular degeneration (also called **non-neovascular macular degeneration**) with drusen.

Most people who have macular degeneration have the dry form. This condition is caused by aging and thinning of the tissues of the macula. Macular degeneration usually begins when tiny yellow or white pieces of fatty protein called drusen form under the

retina. Eventually, the macula may become thinner and stop working properly.

With dry macular degeneration, vision loss is usually gradual. People who develop dry macular degeneration must carefully and constantly monitor their central vision. If you notice any changes in your vision, you should tell your ophthalmologist (Eye M.D.) right away, as the dry form can change into the more damaging form of macular degeneration called wet (exudative) macular degeneration. While there is no medication or treatment for dry macular degeneration, some people may benefit from a vitamin therapy regimen for dry macular degeneration.

USING AN AMSLER GRID TO TEST FOR MACULAR DEGENERATION

If you have been diagnosed with dry macular degeneration, you should use a chart called an Amsler grid every day to monitor your vision, as dry macular degeneration can change into the more damaging wet form.

To use the Amsler grid, wear your reading glasses and hold the grid 12 to 15 inches away from your face in good light.

- Cover one eye.
- Look directly at the center dot with the uncovered eye and keep your eye focused on it.
- While looking directly at the center dot, note whether all lines of the grid are straight or if any areas are distorted, blurry or dark.
- Repeat this procedure with the other eye.
- If any area of the grid looks wavy, blurred or dark, contact your ophthalmologist.
- If you detect any changes when looking at the grid, you should notify your ophthalmologist immediately.

Wet, or exudative, macular degeneration (also called neovascular macular degeneration)

About 10 percent of people who have macular degeneration have the wet form, but it can cause more damage to your central or detail vision than the dry form.

Wet macular degeneration occurs when abnormal blood vessels begin to grow underneath the retina. This blood vessel growth is called choroidal neovascularization (CNV) because these vessels grow from the layer under the retina called the choroid. These new blood vessels may leak fluid or blood, blurring or distorting



central vision. Vision loss from this form of macular degeneration may be faster and more noticeable than that from dry macular degeneration.

The longer these abnormal vessels leak or grow, the more risk you have of losing more of your detailed vision. Also, if abnormal blood vessel growth happens in one eye, there is a risk that it will occur in the other eye. The earlier that wet macular degeneration is diagnosed and treated, the better chance you have of preserving some or much of your central vision. That is why it is so important that you and your ophthalmologist monitor your vision in each eye carefully.

MACULAR DEGENERATION SYMPTOMS

In its earliest stages, people may not be aware they have macular degeneration until they notice slight changes in their vision or until it is detected during an eye exam. People who are at risk for macular degeneration should have regular eye exams to test for macular degeneration and, if diagnosed, be

DRY MACULAR DEGENERATION SIGNS AND SYMPTOMS

- Blurry distance and/or reading vision
- Need for increasingly bright light to see up close
- Colors appear less vivid or bright
- Hazy vision
- Difficulty seeing when going from bright light to low light (such as entering a dimly lit room from the bright outdoors)
- Trouble or inability to recognize people's faces
- Blank or blurry spot in your central vision

Dry macular degeneration can affect one or both eyes. You may not notice vision changes if only one eye is affected, as your unaffected eye will compensate for vision loss in the other eye.

WET MACULAR DEGENERATION SIGNS AND SYMPTOMS

- Distorted vision — straight lines will appear bent, crooked or irregular
- Dark gray spots or blank spots in your vision
- Loss of central vision
- Size of objects may appear different for each eye
- Colors lose their brightness; colors do not look the same for each eye

Wet macular degeneration symptoms usually appear and get worse fairly quickly.

WHO IS AT RISK FOR MACULAR DEGENERATION?

Recently much new information on macular degeneration has been discovered. Genetic changes appear to be responsible for approximately half the reason for individuals getting macular degeneration. Additionally, there are other risk factors for developing the disease. Many older people develop macular degeneration as part of the body's natural aging process. One large study found that the risk of getting macular degeneration jumps from about 2 percent of middle-aged people in their 50s to nearly 30 percent in people over age 75.

Oxidative stress and macular degeneration

Our bodies constantly react with the oxygen in our environment. Over our lifetimes, as a result of this activity, our bodies produce tiny molecules called free radicals. These free radicals affect our cells, sometimes damaging them. This is called oxidative stress and is thought to play a major role in how macular degeneration develops. Approximately 1 in 3 Caucasians have genetic changes that make them more prone to damage from oxidative stress, which can lead to macular degeneration.

Macular degeneration in families

Heredity is another risk factor for macular degeneration. People who have a close family member with the disease have a greater chance of developing macular degeneration themselves.

Inflammation and macular degeneration

Some studies have shown that inflammation (swelling of the body's tissues) may play a role in macular degeneration development. Inflammation is the way the body's immune system fights off infection or other things it considers "invaders." But an overactive immune system with its associated inflammation may be a risk factor for macular degeneration.

Smoking, high blood pressure and abnormal cholesterol and macular degeneration

Smoking and high blood pressure are associated with the wet form of macular degeneration. Research also suggests there may be a link between being obese and having early or intermediate-stage macular degeneration develop into the advanced (wet) form.

Another risk factor for developing macular degeneration may include having abnormal cholesterol levels or having high blood pressure (called hypertension).

MACULAR DEGENERATION TREATMENT

The Age-Related Eye Disease Study 2 (AREDS2) showed that among people at high risk for developing late-stage, or wet, macular degeneration (such as those who have large amounts of drusen or who have significant vision loss in at least one eye), taking a dietary supplement of vitamin C, vitamin E, lutein and zeaxanthin, along with zinc, lowered the risk of macular degeneration progressing to advanced stages by at least 25 percent. The supplements did not appear to provide a benefit for people with minimal macular degeneration

or people without evidence of the disease during the course of the study.

Following is the nutrient supplementation shown to be beneficial in lowering the risk of macular degeneration progressing to advanced stages:

Vitamin C – 500 mg; Vitamin E – 400 IU; Lutein – 10 mg; Zeaxanthin – 2 mg; Zinc oxide – 80 mg; Copper (as cupric oxide) – 2 mg (to prevent copper deficiency, which may be associated with taking high amounts of zinc)

Another large study in women showed a benefit from taking folic acid and vitamins B6 and B12. Other studies have shown that eating dark leafy greens, and yellow, orange and other colorful fruits and vegetables, rich in lutein and zeaxanthin, may reduce your risk for developing macular degeneration.

These vitamins and minerals are recommended in specific daily amounts in addition to a healthy, balanced diet. Some people may not wish to take large doses of antioxidants or zinc because of medical reasons.

It is very important to remember that vitamin supplements are not a cure for macular degeneration, nor will they give you back vision that you may have already lost from the disease. However, specific amounts of these supplements do play a key role in helping some people at high risk for developing advanced (wet) AMD to maintain their vision, or slow down the progression of the disease.

Talk with your ophthalmologist to find out if you are at risk for developing advanced macular degeneration, and to learn if supplements are recommended for you.

WET MACULAR DEGENERATION TREATMENT

Treating the wet form of macular degeneration may involve the use of anti-VEGF treatment, Micro-Pulse Laser Treatment of wet macular degeneration generally reduces—but does not eliminate—the risk of severe vision loss.

Anti-VEGF medication injection treatments for wet macular degeneration

A common way to treat wet macular degeneration targets a specific chemical in your body that causes abnormal blood vessels to grow under the retina. That chemical is called vascular endothelial growth factor, or VEGF. Several new drug treatments (called anti-VEGF drugs) have been developed for wet AMD that can block the trouble-causing VEGF. Blocking VEGF reduces the growth of abnormal blood vessels, slows their leakage, helps to slow vision loss, and in some cases improves vision.

Your ophthalmologist administers the anti-VEGF drug (such as Avastin, Lucentis, and Eylea) directly to your eye in an outpatient procedure. Before the procedure, your ophthalmologist will clean your eye to prevent infection and will use an anesthetic drop or injection

of anesthetic with a very fine needle to numb your eye. You may receive multiple anti-VEGF injections over the course of many months. Repeat anti-VEGF treatments are often needed for continued benefit.

In some cases, your ophthalmologist may recommend combining anti-VEGF treatment with other therapies. The treatment that's right for you will depend on the specific condition of your macular degeneration.

Micro-Pulse Laser treatment for wet macular degeneration

Although most cases of wet AMD are treated with medication, in some instances thermal laser therapy may be used. Laser treatment is usually done as an outpatient procedure in the doctor's office or at the hospital.

The laser beam in this procedure is a high-energy, focused beam of light that produces a small burn when it hits the area of the retina to be treated. This destroys the abnormal blood vessels, preventing further leakage, bleeding and growth.

Following laser treatment, vision may be more blurred than before treatment, but often it will stabilize within a few weeks. A scar forms where the treatment occurred, creating a permanent blind spot that might be noticeable in your field of vision.

Usually the abnormal blood vessels are destroyed by laser treatment. However, it is likely that 50 percent of patients with wet macular degeneration who receive this laser procedure will need a re-treatment within three to five years. You may be instructed to use the Amsler grid daily to monitor your vision for signs of change.



The Retina Institute of Florida

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Begin the New Year by Detoxing Your Body

Looking for a Detox to begin the New Year? Did you know that your body has a natural detoxifying system? Your lymphatic system functions to remove toxins including cancer cells from your body daily.



WHAT IS THE LYMPHATIC SYSTEM?

If you've ever woken up with puffy eyes, sinus congestion and a feeling of overall malaise, it is possible that your lymph system is congested and not working optimally. Lymphatic fluid is intracellular fluid that carries waste components from blood to lymph nodes where the waste material is neutralized. The lymphatic system is crucial in your body's ability to ward off disease and heal from injury. Your body contains double the amount of lymphatic fluid compared to your total blood volume. However, the lymph system unlike the cardiovascular system lacks a pump to circulate the waste material through the body.

When toxins accumulate in the lymphatic system, due to poor nutrition, dehydration, pollution, constipation and lack of exercise, the body becomes sluggish, and poor health is inevitable.

Research has shown a strong relationship between sluggish lymphatic system and chronic illness, weight gain and premature aging. Symptoms of chronic lymphatic congestion are diverse but can include worsened allergies and food sensitivities, frequent cold and flu infections, joint pain, headaches and migraines, menstrual cramps, arthritis, fibrocystic breasts, breast tenderness, sinusitis, loss of appetite and GI issues, muscle cramping, tissue swelling, fatigue, mental fuzziness, mood irregularities, depression, parasites, skin breakouts, acne, and cellulite.

The reality is that you have twice as much lymph fluid in your body than you do blood. The lymph continuously bathes each cell and drains away the detritus in a circulatory system powered only by your breathing and movement. If the movement of the lymph stopped entirely you would die in a matter of

hours. Lymph fluid drains toxins, cancer cells, and viruses to lymph nodes to be removed as waste material from the body. The only natural mechanism to move lymph fluid in the body is muscle contraction. However, if the lymph fluid has become congested the fluid will not easily be moved through the lymphatic system resulting in a decreased immune system.

While our bodies are equipped with the system to rid of bodies of toxins, like many other systems in the body, the lymphatic system does not always work with optimal effectiveness. This ineffectiveness leads to the symptoms and conditions we have just described. However, there is a safe, gentle and non-invasive way to stimulate the lymphatic system to work more effectively and efficiently.



Lymphatic drainage has been used to assist in the detoxification of the body since 1935. Lymphatic drainage promotes the movement of the lymph fluid and the removal of toxic matter throughout the body. Medical professionals throughout Europe and Asia recognize the importance of this secondary circulatory system in immune, digestive, nervous system function and detoxification.

Electro-Sound Lymphatic Drainage has added the use of technology to increase drainage effectiveness. It is a gentle, relaxing, non-invasive, accelerated method of cleansing and detoxifying the lymphatic system. This therapy combines mild electrostatic sound waves with inert gas ionization to balance hormones, break up blockages and directly stimulate the neuromuscular system. The results include relief from chronic inflammation, increased circulation, released blockages, proper elimination, cell nourishment and an enhanced immune system.

Electro Lymphatic drainage is up to 12 times more effective than traditional manual lymphatic drainage/massage and heals at a deeper level without applying pressure to the skin. Electro Lymphatic drainage is one of the most effective ways of detoxification. Both blood work and thermography confirm one session alone can reduce the body's toxin load by as much at 50%

Electro Lymphatic drainage is one of the most effective ways of detoxification. Both blood work and thermography confirm one session alone **can reduce the body's toxin load by as much at 50%**

BENEFITS OF ELECTRO LYMPHATIC DRAINAGE THERAPY

- Faster recovery and less scarring from surgery and other types of trauma by making lymph flow faster and stimulating the formation of new connections between lymph vessels
- Clears congestive conditions such as chronic sinusitis, bronchitis, acne, and headaches
- Strengthens the immune system
- Relieves heaviness tightness and swelling in those suffering from lymphedema.
- Increases overall relaxation by decreasing stress
- Relieves retention of fluids during pregnancy and menstrual cycle
- Decreases local edemas and hematomas from orthopedic surgery, cosmetic surgery scars, and burn scars; leading to a decreased in healing time and increase in client mobility
- People who suffer from insomnia, stress, fibromyalgia, and autoimmune diseases such as multiple sclerosis, lupus, and rheumatism benefit greatly from Electro Lymphatic Drainage



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Healthy Hearing Can Change Your Life

By: Dana Luzon, Au.D., FAAA, Board-Certified Doctor of Audiology



Hearing and listening to conversations requires a lot of effort — not just for the ears, but for the brain as well. Focus and attention play a huge role in hearing, and when there is a hearing loss, the brain has to work overtime to understand conversations. The AGXO^{g500} is the solution to this problem! These revolutionary new devices use BrainHearing™ support delivered by a unique combination of technologies working together to reduce listening effort and provide the brain with better conditions to perform in.

Rick was seen at Audiology & Hearing Aids of the Palm Beaches after years of struggling with his hearing. Below is his story:

“My wife has been on me for years to have my hearing checked. She would get so frustrated because I did not hear her, and she would have to repeat what she said. Or because I’d have the TV so loud just so I could hear it. I would attend work meetings and never hear what the conversation was about. I mastered lip reading and body language. But I was missing life and work. All because I could not hear.

After years of my wife telling me to get my hearing checked, I finally did it. I made an appointment with Dr. Dana Luzon at Audiology and Hearing Aids of the Palm Beaches. I was impressed by the professionalism and technology in my first visit. I got tested and found out what my wife already knew — I had a hearing loss. You see, when you can't hear, you don't know what you are missing because you can't hear what the normal person is hearing.

I was very impressed with how far hearing aid technology has come. The testing alone was an amazing process. Dr. Luzon is professional and compassionate. She was patient with me throughout the whole process. I have two hearing aids. Imagine my wonderment the first time I wore them. I could hear things I haven't heard since I really don't know when. You don't realize what you're missing.

When I finally got my new AGXOG⁵⁰⁰ hearing aids, it changed my work life and home life. You don't know what you're not hearing because, well, you haven't been hearing things. Little things, like my cat meowing, the clock ticking, the blinker in my car, and my wife's voice. She is the one who is the happiest, and these hearing devices probably saved my marriage. If you think you should get tested, do it, not only for yourself and quality of life but for your loved ones. They have been the ones suffering the most. It has truly changed the quality of life in everything I do. I regret not getting checked sooner.

No one can even tell I'm wearing two hearing aids. They are so easy to put in and take out. People who I work with tell me they can see a difference in my whole demeanor. I am forever grateful. If my story sounds like yours, make an appointment and change your life like I did.”

If this story sounds familiar, contact Audiology and Hearing Aids of the Palm Beaches today to see how we can improve the hearing lifestyle of you or someone you love!



Dana Luzon,
Au. D. , FAA, Doctor of Audiology

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



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Reversing Gum Recession: Scalpel FREE, Suture FREE, Graft FREE

Gum recession is very common among patients for a variety of reasons. Recession can occur due to genetics, past orthodontics (braces), tooth shifting, infrequent dental hygiene appointments, inflammation and aggressive tooth brushing (among others).



Recession is the loss of the gum tissue that covers the root portion of the tooth. The gum tissue protects both the tooth itself, along with the supporting jaw bone. If the gum starts to recede, the underlying bone will start to resorb as well. This change can lead to significant issues such as tooth loosening, tooth loss, jaw bone loss, root cavities (that frequently lead to the need for root canals), longer looking teeth and tooth sensitivity.

TRADITIONAL GUM GRAFTING:

Traditional therapy for treating gum recession is called “gum grafting”. The technique typically involves surgically taking tissue from one part of the oral cavity (typically the roof of the mouth) and transplanting it to the area where gum tissue has receded. More specifically, the area that has recession is opened surgically. Tissue is then removed from the “donor” location in the mouth and sutured in place where the recession has occurred. If there is a large area of recession, multiple areas in the mouth may be needed as donor sites, in order to collect a sufficient amount of tissue to treat the recession. In some cases, tissue from a tissue bank can be used in place of surgically removing tissue from another location in the mouth.

PINHOLE GUM REJUVENATION:

A new procedure, similar to a laparoscopic technique, has been developed with over 10 years of research showing its effectiveness in treating gum recession. This procedure is performed by making a small pinhole in the gum tissue. Using specially designed instruments, the gum tissue is loosened and guided over the receded part of the tooth. There is no incision, suturing or tissue graft placement. Due to this fact, patients can expect minimal post-operative symptoms (pain, swelling and bleeding). Most patients also are pleasantly surprised by the instant cosmetic improvement. The technique is also known as the Pinhole Surgical Technique (PST) and the “Lunchtime Gum Lift”. The procedure has been featured on “The Doctors Show”, “Dr. Steve Show”, “ABC”, “NBC”, and over 240 stations across the United States and Canada.

This procedure has helped treat thousands of patients with gum recession. Our patients have been extremely satisfied with both the immediate cosmetic results and quick recovery because no scalpel or sutures were used. An evaluation by a Certified Pinhole Technique Clinician can help determine if your recession can effectively be treated by this amazing, non-invasive therapy.

For More Information and an animation
of the treatment please see:
www.PinholeSurgicalTechniquePalmBeach.com

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

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



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

The focus of his interests are conservative approaches to treating gum, bone and tooth loss. He utilizes advanced techniques including the use of the Periolase Dental Laser (LANAP procedure) to help save teeth, dental implants, regenerate supporting bone and treat periodontal disease without the use of traditional surgical procedures. Additionally, Dr. Cohen is certified in Pinhole Gum Rejuvenation, which is a scalpel and suture free procedure to treat gum recession with immediate results.

Dr. Cohen uses in-office, state of the art 3D CT imaging to develop the least invasive dental implant and bone regeneration treatment options. Dr. Cohen and his facility are state certified to perform both IV and Oral Sedation procedures. Botox® and Dermal Fillers are also utilized to enhance patients' cosmetic outcomes.

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



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Compression Devices: Effective Treatment for Limb Swelling

By Alyssa Parker

Many individuals attempt to manage their limb swelling through various treatments such as compression stockings, exercise, diuretics, and elevation with little or no results. Limb swelling, also known as edema, may be a symptom of an underlying medical condition. Some of the most common conditions where limb swelling is the first symptom include venous insufficiency, post operative trauma, infection, and lymphedema. Clinicians may overlook the cause of your swelling; Lymphedema or venous insufficiency is not always evident in their earliest stages. It's important to seek treatment early on to prevent further complications. These conditions can be easily misdiagnosed as acute and minor swelling followed with minimal treatment. Pneumatic compression devices are one of the most highly recommended treatments for these conditions and are recognized by Medicare.



Lymphedema and Chronic Venous Insufficiency

After having a surgical procedure cancer or non-cancer related (example hysterectomy or gallbladder removal) it may take months or years

for Lymphedema to manifest because of its slow progression. It is imperative that Lymphedema is treated quick and effectively, regardless of the severity. Complications dramatically decrease when treatment is started in the earliest stage of Lymphedema. When left untreated common complications include cellulitis or lymphangitis, skin changes such as skin thickening, restricted movement of a limb, or chronic wounds. Aside from surgical procedures and radiotherapy for cancer other known triggers include vein stripping, peripheral vascular surgery, trauma, inflammation, infection, and insect bites.

Chronic venous insufficiency is another condition that causes swelling in the legs along with open wounds. CVI occurs when the valves in the veins that normally channel the blood



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

Treatment

A widely recognized and highly effective treatment is using a compression pump. This is a safe and effective way to assist your body's circulatory system in moving the excess 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. This is a great treatment option for patients who have tried compression stocking, elevation, diuretics, or massage with little or no relief. This is a safe and effective way to assist your body's circulatory system in moving the excess fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility.

This is where choosing a physician experienced in recognizing and treating Lymphedema or CVI 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?

Remember ANY swelling is an indication of an overloaded Lymphatic system.

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



ACUTE WOUND CARE

For more information and articles on this topic, Google "Acute Wound Care" or visit www.AcuteWoundCare.com or call and speak with a specialist.

toll free **855-949-4325(HEAL)**

NEW YEAR – New You



Los ing weight is the #1 New Year’s resolution for good reason. According to the National Center for Health Statistics (NCHS) of the Centers for Disease Control and Prevention (CDC), the National Health and Nutrition Examination Survey (NHANES) revealed, when adjusting for age, an estimated 34.2% of American adults 20 years of age and older were overweight, while 33.8% were obese (Ogden & Carroll, 2010). The overall prevalence estimates for overweight and obesity when combined for adults 20 years of age and older (BMI 25) was a stunning 68.0% (Ogden & Carroll, 2010). Another way to think about the overweight and obesity epidemic is that less than a third of adults (i.e., 31.6%) in the United States are at a healthy weight.

There are many different diet programs and gimmicks out there that claim to have revolutionary effects for weight loss. However, nothing proves more effective than an individualized program that incorporates acupuncture.

ACUPUNCTURE:

While people seek out acupuncture for a variety of health problems and often come in with a long list of complex issues they want to address, many of them will ask if acupuncture can also help them lose weight. The answer is yes – along with healthy changes to diet and movement, acupuncture has been shown to dramatically impact weight in number of ways.

WHERE DOES ACUPUNCTURE FIT INTO A WEIGHT LOSS PLAN?

Acupuncture can address just about every one of these aspects and greatly improve the results of a multi-faceted weight

loss program. Let’s take a closer look at what acupuncture has to offer.

1. Acupuncture reduces food cravings and regulates appetite

Ear acupuncture is one of the most successful methods for addiction treatment, including food addiction and emotional eating where bingeing or constant nibbling serves to stuff down difficult emotions like sadness, anger, boredom and loneliness; or where sensations like pain, fatigue and thirst are mistaken for hunger.

Ear acupuncture stimulates the vagus nerve, the longest cranial nerve that is part of the involuntary nervous system and controls such automatic functions as regular heart rate and digestion.

In a randomized study by Sabina Lim and others (Graduate College of Basic Korean Medical Science at Kyung Hee University, Seoul, South

Korea), 91 obese persons were randomly assigned to a group receiving stimulation of a five-needle protocol on the outer ear, a group receiving a single ear acupuncture point, or sham (fake) acupuncture. The five-needle group achieved the largest drop in waist circumference, as well as drop in body fat, followed by the one-needle group, and no change in the control group. The study was published in *Acupuncture in Medicine* on Dec 16, 2013.

2. Acupuncture regulates hormones

Acupuncture’s balancing effect on overall body chemistry, including hormones, is well-established. Acupuncture lowers stress hormones. It regulates sexual and reproductive hormones and is widely used in addressing menstrual, fertility and menopausal concerns.

An area of particular interest is the effect of acupuncture on obesity hormones.

Hunger and satisfaction are regulated by two hormones: grehlin stimulates hunger and initiates eating, while leptin suppresses food intake. Surprisingly, in obese people leptin in the bloodstream is increased, while grehlin is decreased. Obese people are considered not only insulin-resistant, but also grehlin-resistant. (*Obesity Review*, Jan 2007)

In a Turkish study reported in *Acupuncture in Medicine*, September 2012, 40 obese women were randomly assigned to receive acupuncture on five common points twice weekly for five weeks for a total of 10 sessions. The results showed that acupuncture lowered insulin and leptin levels and increased plasma grehlin in the treatment group, compared with a control group receiving sham acupuncture. Acupuncture also reduced the BMI (basic metabolic index).

The conclusion is that acupuncture can help normalize obesity hormones and the hunger response and contribute to improving metabolism.

3. Acupuncture reduces inflammation and pain

Acupuncture is mostly known for – and researched for – its ability to relieve pain, reduce inflammation and heal injuries.

Acupuncture promotes blood flow, which brings oxygen, nutrients, immune substances, hormones, pain killers and anti-inflammatories to the compromised area. Acupuncture needles create



“micro traumas” that stimulate the body’s natural healing response. Acupuncture releases natural painkillers such as endorphins and enkephalins. Acupuncture relaxes tense muscles that put pressure on joints and impinge nerves.

About 3 million Americans visit acupuncturists each year, most of them for the relief of chronic pain. Now a new study shows the relief they get may be modest -- but real.

The study is a review of previous acupuncture studies that compared the ancient Chinese practice to standard pain care or to sham acupuncture. In the latter, patients are needled in a manner different from (or at spots on the body not tied to) traditional acupuncture.

The researchers found that people who got acupuncture ended up having less pain than those who didn't receive it. And the result was similar among different sources of pain, whether it was chronic back and neck pain, osteoarthritis, or headache.

In the end, their results translate to about 30% less pain compared to people taking pain medications and other standard treatments for pain.

4. Acupuncture improves digestion and metabolism

Acupuncture addresses many digestive problems, including GERD, reflux, stomach ulcers, IBS,

diverticulitis and colitis. Acupuncture can help regulate digestion and elimination of toxins.

Chinese medicine describes the digestive process as a function of the stomach, which breaks food down, and the “spleen,” which transforms the nutrients from food into usable energy. What is termed the “spleen” here includes functions of the pancreas, the small intestine and the metabolic process on a cellular level. The Western medical equivalent of this spleen function is the mitochondria or the “powerhouses” of the cell that break down glucose and fatty acid for ATP, an energy-carrying molecule. Remember High School biology and the Krebs cycle? People with insulin-resistance have compromised mitochondrial function.

Acupuncture can help restore the body’s homeostasis, bringing back its optimal functioning. In acupuncture lingo, we call it “Restoring the Qi” or the body’s vital energy.

5. Acupuncture reduces stress and increases relaxation

Stress-reduction and increased relaxation are probably the biggest all-encompassing effects of acupuncture. The effects of stress, especially chronic, long-term stress, on lowered immunity, increased depression and anxiety, lack of sleep, and overall compromised health have been well-established.

Increased stress and lack of sleep lead to increased release of the stress hormone cortisol from the adrenal glands. Cortisol makes us feel hungry even when we are full. Loss of sleep also decreases levels of growth hormone, which regulates the proportion of fat to muscle. And lack of sleep interferes with carbohydrate metabolism. Plus, tired people tend to eat more for the short-term energy boost they gain, especially from carbohydrate-rich foods.

As we’ve seen, there are many factors that interfere with successful weight loss. The causes leading to obesity and the difficulties with losing weight are complex. A successful weight maintenance plan must address all these aspects. At Meng’s Acupuncture Medical Center we offer our patients a comprehensive approach to weight loss and pain management. For more information or to schedule a consultation, contact us at **561-656-0717**.



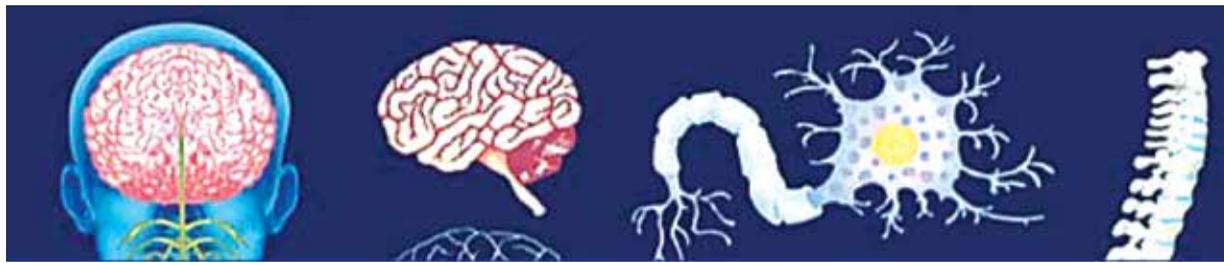
Dr. Meng, MD (China), AP, received her medical degree from the prestigious Shandong University in China and has also completed several advanced training courses in oriental medicine from well-respected TCM hospitals in China. She has over 18 years of experience as a doctor of Chinese medicine. She has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

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RESEARCH: **THE ATLAS AND MULTIPLE SCLEROSIS**



By Dr. Jonathan Chung

Article Citation:

Mandolesi S, Marecca G, Moser J, et al. Preliminary results after upper cervical chiropractic care in patients with chronic cerebro-spinal venous insufficiency and multiple sclerosis. *Ann. Ital. Chir.*, 2015 86: 192-200.

SUMMARY

Thanks to the hard work and funding of Upper Cervical Health Centers and Upper Cervical Evolutions, we have a this Italian study looking at the effects of upper cervical chiropractic on patients with multiple sclerosis and a clog in their veins called chronic cerebral spinal venous insufficiency (CCSVI).

The idea is that when the veins in the neck are clogged or blocked, then it can have damaging consequences to brain tissue. The idea was pioneered by an Italian physician who used surgery to remove blockages in the major veins in the neck. He's come under a lot of scrutiny and skepticism, but numerous studies numerous studies have shown that certain patients with MS can experience dramatic improvements. Read more about it here.

How does chiropractic come in to play? It may have to do with the top bone in the neck and it's relationship with these large neck veins.

THE STUDY

77 patients with MS were selected and screened for atlas displacement and CCSVI. Outcome measures included post x-ray for structural improvement, multiple sclerosis symptom questionnaire, and an expanded disability scale.

RESULTS

Patients showed statistically significant improvements in x-ray misalignment measurements. The authors also used a monitored each patient's subjective improvements.

37.5% of patients reported improvement in visual symptoms

49.3% reported acoustic improvement

43.5% reported urinary/rectal improvement

35.3% reported motor improvement

78% reported preceptive improvement

59.5% reported cognitive improvement

EDSS scores also appeared to improved for certain types of vein blockages.

LIMITATIONS

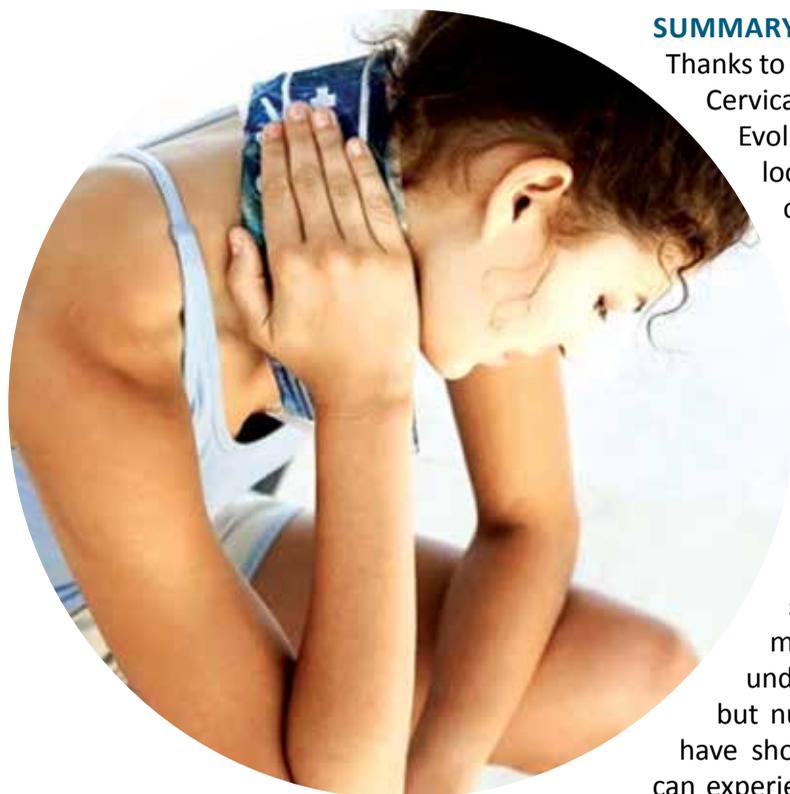
The results certainly look good at a glance, but there are quite a few problems with the paper. There's no control group or comparison data about how a typical MS patient stacks up with their measurements.

A vaguely described questionnaire was used for information about patient self-report.

This leaves a lot to be desired.... Though it seems like this is a study about 77 patients with MS related improvements there were 100 x-rays analyzed but only 27 MS related questionnaires described. This can create a larger effect size for the x-ray correction, and it leaves you wondering if the 27 MS questionnaires were cherry-picked to demonstrate improvement.

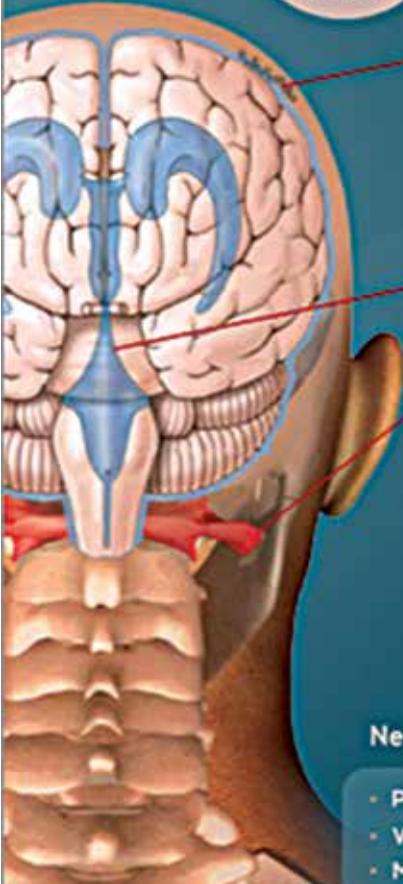
INTERESTING TIDBITS

This was a step in the right direction by having a Prospective study talking about chiropractic and multiple sclerosis. This study helped to reproduce some of the work of Dr. Erin Elster who studied 88 people with MS and



The Atlas and Your Brain

Like a Clogged Pipe
The veins in your neck are like the brain's plumbing. A clog causes a back up and overflow of the plumbing system.

- 1 Atlas Displacement**
Narrows openings in the skull.
- 2 Cerebral spinal fluid backs up and creates turbulence in the brain**
- 3 Metabolic waste accumulates and lingers in the brain causing neuroinflammation**
- 4 Slow venous drainage leads to fluid pressure on the brain and slows arterial circulation**
- 5 Inflammation and pressure leads to chronic neurodegeneration**

Internal Jugular Vein Compression
Obstruction of drainage and backflow

Neuroinflammation is Associated with:

- Post Concussion Syndrome
- Whiplash
- Migraine
- MS
- Parkinson's
- Chronic Fatigue

Parkinson's disease. While Elster's study showed great results, it was also a retrospective study. Retrospective studies allow the researcher to pick and choose what samples are included. In other words, you can publish your positive results, while ignoring all of the patients that didn't respond.

Dr Scott Rosa has been doing some pioneering research with upright MRI and the upper cervical spine. He has done some very interesting work showing the way that fluid movement in the brain changes before and after an adjustment.

Despite the flaws, there're a decent number of patients recruited and some promising outcomes.

It also reflects what I often see in my office when patients get their atlas corrected.

IMPORTANT NOTES

MS is an extremely challenging and disabling disorder. I've seen a lot of patients get better with chiropractic, but I've seen a lot of patients not have any improvement at all. Currently we don't have any great way to predict which patients with MS will improve and which won't, but it seems like the earlier in the disease process someone is in, the better off they will be.

MS also has large nutritional and autoimmune components that should be addressed. Controlling inflammation and dealing with any dormant infections seem to be important factors.

Lots of MS patients will tell you that the drugs they have been taken have been pretty disappointing. People with MS are searching for answers in many alternative avenues, so it's important to give them safe options that can potentially improve their lives.



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CONCERNED ABOUT MEMORY?

TROUBLE Making Decisions?

Not as Sharp?

By Mike Cohen, Director
Center for Brain

I wasn't quite 60 yet but had begun to have occasional word retrieval problems. I could be holding a pen and not be able to think of the word "pen." It wasn't every day, but there was no doubt something was off and might some day affect my productivity.

When two of my employees confronted me about changes they had observed, I decided to do something about it before a potential brain problem began impacting my daily life and career. I became my own client. I was, after all, treating others with memory loss. Why not apply what I knew to my own situation?

I devised a neurofeedback protocol that I used once per week. After a couple of months the word retrieval problem disappeared. As "insurance" I continued treatments every two to three weeks. Four years later my memory is better than it was 15 years ago. An added benefit is that I'm more organized and productive. If someone like me, who specializes in brain health and function, can find himself with a memory challenge, it can happen to anyone.

Memory Loss Isn't "Normal" at Any Age

Too often memory loss is considered "normal" in people who are aging. In fact, memory loss (and processing difficulties like decision-making) is not normal. Furthermore, it's treatable with neurofeedback.

Neurofeedback helps keep you sharper and functioning better over time. Even those with more serious memory issues such as dementia can optimize functioning or experience a slowing or reversal of mental deterioration.

It's easy to dismiss memory deterioration as "just getting old," but it can be more than that. Having even one of these symptoms could indicate that some *avoidable deterioration* may be taking place:

- You frequently lose things, like keys or your cell phone.
- You walk into a room and can't remember what you went there for.
- You have trouble retrieving words.
- You can't "put your finger on it," but you know you just aren't as sharp as you used to be.
- You can't do as many things "at once" as you used to be able to do
- People frequently say they told you something, but you don't remember it.
- You're told that you're repeating things or asking the same question.

**Why Wait Until the Problem
Is Even More Advanced?**

Alpha Waves

One cause of memory loss concerns alpha waves. In the aging brain alpha waves can slow down, compromising memory and processing speed. That's why it can take an older person longer to cook dinner, balance their checkbook or figure out what to wear that day. Neurofeedback is perfectly suited for speeding up alpha waves so that ordinary daily tasks seem easier. This is called "brain brightening."

Customizing With Screening Tools, Brain Mapping and Targeted Treatment

At Center for Brain we have memory screening tests and special functional brain mapping technology that provide insight into what is occurring.

Those tools (1) help us design a neurofeedback program that specifically targets areas in your brain that aren't functioning optimally and (2) gently encourage these areas to "wake up."

The Lifestyle Connection

Neurofeedback isn't all we do with clients concerned with memory. We deep dive into their lifestyles – what kind of nutrition are they getting and how can that be improved? How much do they exercise? What are their hobbies and possible exposure to low level neurotoxins? Have they had whiplash or any impact on their head such as a concussion or a fall?

In one startling case, a man who said he just felt “off” in his daily functioning revealed that he was a sport fisherman who had eaten a lot of game fish over the years. We had him tested for mercury, a known neurotoxin found in larger quantities in larger fish, and discovered he had high levels in his bloodstream. High mercury levels can impact memory!

In another notable case, a woman who had lost much of her speech and some memory told us she was a fine artist who spent many hours daily in a small, unventilated studio working with oils. Oil paint has a lot of volatile organic chemicals that can affect the brain.

In both cases, eliminating exposure to these chemicals, in combination with neurofeedback, resulted in noticeable improvements.

Too many people are being told there isn't much that can be done for memory loss. That's just not true.

What About People with Dementia and Alzheimer's Disease?

Neurofeedback is not just for people with slight memory deterioration. It potentially can help people with early signs of dementia and Alzheimer's disease – and even those with more advanced cases.

A recent neurofeedback study conducted by a neuropsychiatrist in Europe with Alzheimer's patients reported that subjects experienced a six-point increase in a key memory test, the MMSE (mini mental state examination). This is greater than what has been observed in patients using medications, where score improvement is generally around 1.5 or less.

We look at it this way: If we can help someone with dementia function slightly better or slow their slide, this is significant for them and the people who love them because it gives them more time to be themselves.

Help for Those Who Need to Train at Home

For those who cannot come to the office for treatment, Center for Brain now offers several simple instruments for home use that appear in initial research and clinical application to help people with memory loss.

If you or someone you love has early memory loss or memory loss concerns, visit our office for an evaluation. There are many things that can be done to break the cycle. We have options not likely to be available from your doctor because these are not widely known in the medical community.

It's critical to do what you can to stop it now.

Playing games like Lumosity and Sudoku aren't enough. You should do everything possible to address your memory concerns.

It takes time and effort, but people who come to us with memory issues frequently improve.



CALL US TODAY FOR A FREE CONSULTATION.

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About Center for Brain

Center for Brain is staffed by a team of compassionate professionals whose mission is to enhance the lives of people suffering from a variety of conditions that can be significantly improved with the help of neurofeedback and other brain technologies.



Michael Cohen, Director Center for Brain
Mike Cohen is a leading expert in brain biofeedback. For over 20 years, he's worked with clients, taught courses and provided consulting to MD's and mental health professionals around the world, helping them incorporate into their practices new biofeedback technologies for chronic pain, anxiety and mood disorders, ADHD and neurological problems.

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- Golfer's Elbow
- Headaches
- Hearing Issues
- Itchiness
- Low Back Pain
- Mid Back pain
- Migraine Headaches
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Are you **Chronically Anxious?**

Neurofeedback Helps Chronic Anxiety without Medication

By Mike Cohen, Director
Center for Brain

TAKE A MOMENT TO ANSWER THESE QUESTIONS:

- Do you feel fearful?
- Do feelings of fear “come out of nowhere”?
- Do you worry excessively about situations or events, out of proportion to their chances of happening?
- Do your worries result in physical symptoms such as sweating, nausea and diarrhea?
- Do you have trouble concentrating, even on important matters?
- Is your sleep disturbed? Do you have trouble going to sleep, falling asleep or both?
- Are you frequently irritable?
- Do you have panic attacks? These are sudden episodes of intense fear causing severe physical reactions when there is no real danger or apparent cause. You feel like you’re losing control, having a heart attack or even dying.
- Do your symptoms make it hard to carry out day-to-day activities and responsibilities, causing problems in relationships and work?



If you said “yes” to two or more of these questions you probably have anxiety – and you also probably already know it, especially if you’ve been plagued by these symptoms for six months or more.

Maybe you’ve tried medications and they didn’t help much, or you don’t want to take drugs.

For someone like you there is a solution called neurofeedback – and it doesn’t involve drugs.

Why Can’t I Talk Myself Out of My Anxiety?

People who don’t understand anxiety may tell you to calm down and not let things bother you. You may even tell yourself that, but if it were that easy you’d already be doing it!

Anxiety and fear are a normal state of mind when there’s a true threat or danger. For most people,

when the danger has passed, the mind goes back into a calm state.

People prone to anxiety have often suffered trauma either as a child or as an adult which wasn’t addressed and worked through with therapy, impacting their feelings of safety. The brains of people subject to chronic anxiety get “stuck on high alert,” making it difficult to go

about daily life. No amount of logic changes how you feel. How can you concentrate, trust people or have normal interactions when your brain is telling you that your life or well-being may be at risk?

What is Neurofeedback?

Neurofeedback is one of the most powerful technologies in the world for reducing anxiety

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and panic attacks. It helps the brain get “unstuck” from high gear and operate the way it should when going about day-to-day living.

Neurofeedback takes advantage of “neuroplasticity,” the brain’s ability to change itself. It teaches the brain another way to respond to stimuli like everyday triggers. A computer analyzes the brainwaves, then “talks back” to the brain using customized sounds and images. This feedback encourages positive brain activity such as relaxation, focus and attention and discourages the type of brain activity which causes anxiety. With repeated training the brain learns to slip more easily back into a state of calm.

Do I Have to Do Neurofeedback Indefinitely?

No. The number of sessions varies depending on the individual, but 25-30 sessions are sufficient for many people to have retrained their brain for long-term improvement.

Does Neurofeedback Do the Same Thing That Medication Does?

In some ways, yes, but in one important way, no.

Both neurofeedback and medication calm the brain. The difference is that medication doesn’t have any permanent impact on brain function. Once the medication wears off, you’re right back where you started.

Neurofeedback, on the other hand, teaches the brain a different way to handle the stimuli of life, reducing its tendency to overreact to the situations encountered in day-to-day life. Many of our clients have been able to reduce or eliminate anxiety medications.

CLIENT SUCCESS STORIES

Cecily, 52, had suffered from anxiety and depression since her late 20s following a serious car accident. Medications helped at first but eventually did not. Doctors ran out of ways to help her, and her anxiety surged.

Cecily became increasingly fearful. She stopped participating in normal activities and felt completely overwhelmed. An intensive and comprehensive intervention of neurofeedback and other therapies at Center for Brain, along with an adjustment of her hormones, and acupuncture, broke her cycle of anxiety and depression. Today she is sleeping without medication and living a calm and peaceful life.

Brett, 24, had become so paralyzed by panic attacks that he had been unable to work or drive for two years. He was on heavy-duty mood stabilizers, an antipsychotic medication and other drugs. The medications helped somewhat but not enough for him to function.

After one month of neurofeedback sessions 3-4 times per week his panic attacks and extreme anxiety diminished, and he was able to drive again. Now that he knows how to calm himself he reports feeling “completely normal.”

Melissa, 47, had anxiety so severe that she was unable to drive, couldn’t pay attention to anything and was afraid to leave her house. She took numerous medications for anxiety and sleep but did not improve. By the time Melissa came to Center for Brain, she had been suffering extreme anxiety for a solid year with very little relief.

After a month of neurofeedback, Melissa began feeling much calmer and was sleeping better. She started leaving the house and was even able to get and keep a job. Following three months of treatment Melissa appeared in our office bright, cheerful, and engaging, without any anxiety symptoms.

Have you been seriously considering getting help for your anxiety?
DON'T SUFFER ONE MORE DAY!
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About Center for Brain
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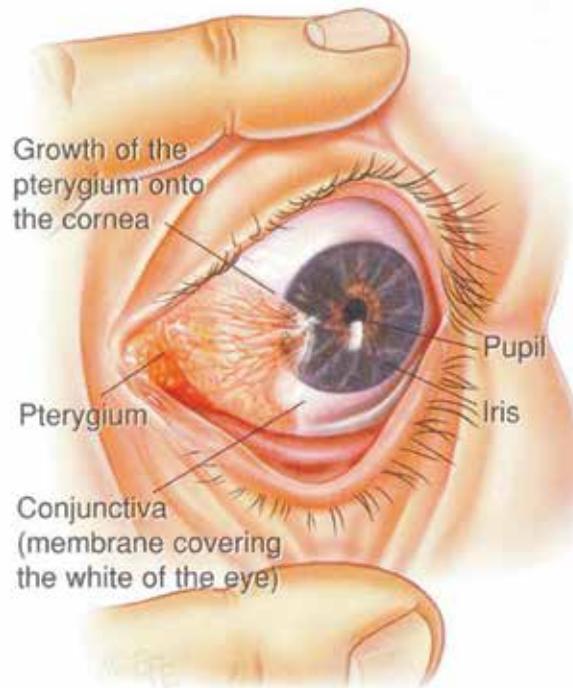
PTERYGIA AND SOUTH FLORIDA

By David A. Goldman MD

A pterygium is a fibrovascular growth that typically starts from the conjunctiva (skin of the eyeball) on the nasal side and grows onto the cornea. These are almost always the result of longtime sun exposure; thus, they are very common here in southern Florida. During my residency in Miami's Bascom Palmer Eye Institute, there was literally a book filled with names of people who desired pterygium surgery the demand was so great. In contrast, one of my colleagues related how during her training in Michigan, there was only one pterygium surgery a year and the OR was packed to see this "rare" case.

While a pterygium is non-cancerous, occasionally it can cause problems. In advanced cases, the pterygium may grow so far over the cornea as to induce astigmatism or even obstruct vision. Milder cases may only present with chronic foreign body sensation or redness. Still, some may cause significant cosmetic problems that the patient desires excision. Whichever the case, removal can be fairly simple.

Since the pterygium grows on the surface of the eye, it can be carefully dissected off. Just removing the pterygium alone, however, would leave a significant defect in the superficial eye which, besides being painful, would carry a high risk of recurrence. When pterygia grow back after surgery they tend to grow back very aggressively and repeat surgeries can be more challenging. To prevent recurrence, ophthalmologists will close the defect, either by using an allograft (transposing some of the patient's own conjunctiva over) or an amniotic membrane graft. While oftentimes these can be secured with sutures, more and more surgeons are securing the grafts with fibrin glue to allow more postoperative discomfort. While cosmetic outcomes can be wonderful, it is important to repeat that pterygia are in general benign lesions that do not require removal.



A pterygium may grow large enough to obstruct vision.

That said, there are several lesions that can mimic pterygia. These can include conjunctiva intraepithelial neoplasia and conjunctival amelanotic melanoma. Both of these lesions can appear as pterygia but can become malignant tumors and removal is highly recommended. Important distinguishing characteristics include pigmentation and rapid increase in lesion size. If you notice any of these changes, you should contact your ophthalmologist immediately



Before

After



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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SELFIES



- **A SELFIE** is a photograph of yourself taken with a mobile phone or other handheld device, and uploaded to social media – Facebook, Instagram, Twitter, etc.

Personally, I am fascinated with the whole selfie concept. I wonder: do people think so much of themselves that they want others to look at them? Or do they think so little of themselves that they portray an unrealistic image through photos? Or maybe they just do it for fun? Who knows? But what I do know is that the selfie tells others a lot about ourselves.

And probably more than you even realize.

I read this the other day: “We (people) are God’s selfie.” When I first read it, I thought to myself: what a disappointment. But then as I spent more time letting the statement soak in, I began to understand the truth behind it – and the impact it could have on our lives if we began to embrace the whole idea.

We are God’s selfie.

In the Bible we see in Genesis chapter one that God created the heavens and the earth. He created the seas, the animals, and all that we see everyday. “Then God said, “Let us make human beings *in our image, to be like us*. . . So **God created human beings in his own image**. In the image of God he created them; male and female he created them.” (Genesis 1:26-27)

That passage also tells us what God thinks of “His selfie”. When God created all of the other things, at the end of the day He said it was ‘good’. When God created humans in His image, He said it was *very* good.

So here’s the deal: we are God’s selfie.

But what does that mean for us? It means that when you look in the mirror at yourself you should see something different. When you think that you don’t have value as a person you should think again. Because God sees great value in you.

The Apostle Paul write this: “. . . we are God’s *masterpiece*. . .” (Ephesians 2:10) King David wrote a song in which he wrote these words: “For you formed my inward parts; you knitted me together in my mother’s womb. I praise you, for *I am fearfully and wonderfully made*.” (Psalm 139:13-14)

No matter how breath taking the sunset may be. No matter how majestic the scenery may look. No matter how beautiful the painting appears or how wonderful the symphony sounds. None of it compares to you. Because you are God’s masterpiece.

You are God’s selfie.

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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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