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Health & Wellness[®] MAGAZINE

September 2014

South Palm Beach Edition - Monthly

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FREE



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TREATING HAIR LOSS DURING
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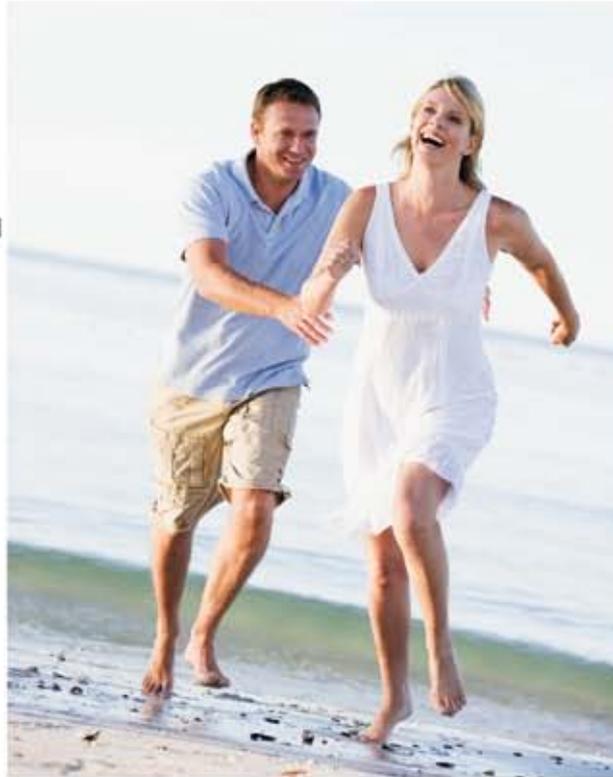
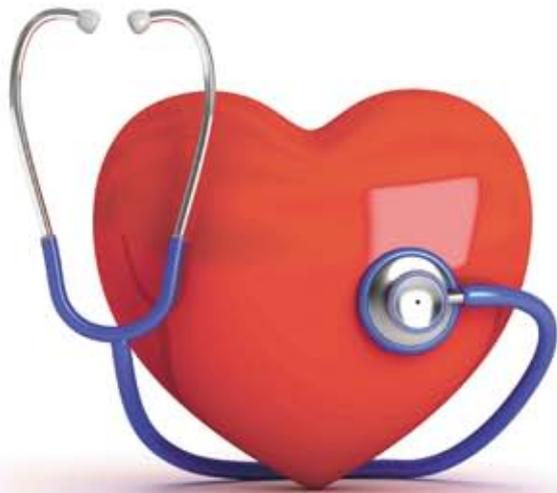
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WHAT YOU SHOULD KNOW ABOUT HEART HEALTHY EXERCISE

Heart disease and stroke are the #1 and #4 causes of death in America respectively. One can cut his/her risk of developing both of these conditions dramatically simply by exercising regularly. Your heart is a muscle, and the more you exercise it, the stronger it becomes, and the less likely you are to develop heart disease.



Becoming more active doesn't mean becoming a marathon runner overnight

The American Heart Association recommends that you exercise 30 minutes per day, five days a week. But they also understand that you shouldn't just dive into exercising too much, too soon. If you have not been exercising, start by seeing your doctor to determine what kind of shape you are in right now, and then setting a series of exercise goals that fit with your disposition. The most difficult step is next; beginning and continuing the exercise program that you develop. Thied under your doctor's guidance.

What type of exercise is best for my heart?

There are countless options available regarding exercise depending on your personal preferences. If you prefer the outdoors and exercising alone, running might be a good choice; if you prefer the gym and working out with others, cardio classes might be better for you. In general, however, heart doctors suggest that you follow an exercise program that includes three important types of exercise:

- **Aerobic exercise** can consist of briskly walking, jogging, running, biking, swimming, or any type of exercise that raises your heart rate and keeps it high. As a general guideline, while performing the exercise you should be breathing harder than normal, but still be able to talk to someone.
- Follow your aerobic exercise with a period of stretching to loosen up your muscles and increase overall flexibility.
- Finally, don't skimp on strength training, which you should perform 2-3 times per week, resting for a day between sessions. Several studies have shown a strong correlation between muscle strength and heart health – literally, the better you perform on standard strength tests, the healthier your heart is.

First, as we have suggested above, check in with your personal physician before starting any new exercise program, and with your cardiologist if you have been diagnosed with heart problems in the past. Whatever your chosen exercise routine, start out slowly and work up to goals that you set with your doctors. Always stop exercising if you feel faint, dizzy, light-headed, or have chest pains. Be aware of your limitations and respect them. If you want to become a runner, start with brisk walking and add 1-2 minutes of running to each five minutes of walking, and very soon you'll find that you can run the entire time. If running is too hard on your shins, consider swimming or water fitness classes, which provide a tremendous aerobic workout without the physical impact of running.

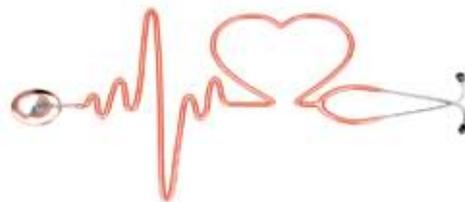
“The real value of your exercise program is... how healthy your heart is during your next visit to the cardiologist.”



Exercise tips and precautions

Once you are more in shape, interval training – alternating short bursts of high-intensity exercise with slightly longer periods of active recovery – has been shown to be unrivaled in improving heart health, providing three times the benefit of sustained cardio exercising. Diversity of exercise can be very helpful for compliance and balance. For example, low impact forms of exercise such as yoga, Pilates, or Tai Chi, may lower blood pressure, improve circulation, while adding to one's spiritual balance. The important thing is to start exercising, and then continue. Do not

try to evaluate your performance by anyone else's standards. It is most important to find your own pace and work to increase it each time you exercise. The real value of your exercise program is not measured in how long or how fast you can run, but in how healthy your heart is during your next visit to the cardiologist.



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Tame that Ringing in your Ears and Rock On, Boomers

Bob Dylan. The Rolling Stones. Led Zeppelin. Music helped define an entire generation of baby boomers. It expressed their fresh world view and energized them as they set the world in a new direction.

But if you're like many from this music-filled, life-embracing generation, then some of that old time rock and roll may still be ringing in your ears. Literally.

Tinnitus, commonly called "ringing in the ears," is the perception of a sound in a person's ears or head that has no external source. Many people with tinnitus experience ringing, humming, buzzing, or chirping in their ears or head. Others even perceive singing or music. Neural hyperactivity causes the perception of sound.

As it turns out, tinnitus is most often the result of noise exposure, although it can be caused by other things as well. And it's almost always accompanied by hearing loss. So it seems that all those years of rock concerts and loud stereos may have unwittingly set baby boomers up for the ringing in the ears that many are experiencing today.

Tinnitus is also more common than many people realize. In fact, it affects nearly 50 million Americans. And baby boomers are heavily hit by it, with roughly 21 percent of 55-to-64 year olds experiencing tinnitus.

The good news is there are things that boomers can do to help manage tinnitus and address the often-accompanying hearing loss so it doesn't have to slow them down.

Hearing aids can help significantly. Not only do they improve hearing and communication, but they help reduce the prominence of tinnitus by amplifying background sound. Just taking the focus off the tinnitus can provide relief for many people. Hearing aids also reduce the stress associated with intensive listening, which alone can help relieve tinnitus symptoms.





There are other potential treatments available to boomers as well. Biofeedback, cognitive behavioral and mindfulness based stress reduction, and sound therapy are just some examples, among others.

The very best thing someone with ringing in the ears can do is to visit a hearing health care professional. Find someone with experience in treating tinnitus. And make an appointment for a hearing examination and consultation on the most appropriate treatment options for your symptoms and lifestyle.

So take heart, boomers. You've been forging new paths for America to live by for decades now. It's time to lead the way in how you manage that ringing in your ears—and hearing loss—with that same characteristic energy, determination, and innovation that turned the world on its head.

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Do you know these five trending facts about today's hearing aids?

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- 2. They automatically adjust to all kinds of soundscapes.** Technological advances with directional microphones have made hearing aids more versatile than ever before in a broad range of sound environments.
- 3. You can enjoy water sports and sweat while wearing them.** Waterproof digital hearing aids have arrived. This feature is built into some new hearing aids for those concerned about water, humidity and dust. This feature suits the active lifestyles of swimmers, skiers, snowboarders, intensive sports enthusiasts and anyone working in dusty, demanding environments.
- 4. They work with smartphones, home entertainment systems and other electronics.** Wireless, digital hearing aids are now the norm. That means seamless connectivity—directly into your hearing aid(s) at volumes that are just right for you—from your smartphone, MP3 player, television and other high-tech gadgets.
- 5. They're always ready.** A new rechargeable feature on some newly designed hearing aids allows you to recharge your hearing aids every night, so they're ready in the morning. It's convenient—and there's no more fumbling with small batteries.

Treating Hair Loss During MENOPAUSE

By Dr. Alan J. Bauman

Hot flashes. Loss of libido. Weight gain. Mood swings. Hair Loss? There are many symptoms of menopause, but one of the most surprising, and most devastating for women, can be hair loss. But there is good news—while menopause itself is unavoidable, the hair loss that often accompanies it can be effectively treated and, in many cases, prevented.

Since September is Menopause Awareness Month, it is a good time to talk about menopausal hair loss, and educate women on the causes of thinning hair as well as the many treatment options available.

Despite the fact that female hair loss isn't frequently talked about, it is important to know that it is quite common. In fact, after menopause, about 40 percent of women experience hair thinning, which is almost the same rate as men. However unlike men, female hair loss tends to be a lot subtler, and the early warning signs are often missed, or ignored. Women tend to experience thinning over a wide area of scalp, and for many, the first signs and symptoms may come in the form of a smaller ponytail, a wider part-line, or excessive shedding during brushing and showering. Hairstyle changes in cut, curl and color as well as cosmetic thickening products can help compensate in the early stages of hair loss. The problem, however, is that if left untreated, gradual female hair loss can result in a significant loss of coverage at the frontal area, crown or temples.

Hair loss before, during or after menopause—as well as after childbirth—is commonly attributed to hormonal changes. Just as high levels of female hormones during pregnancy leave women with fuller, healthier hair, the declining levels during menopause may have the opposite impact. In addition, when the levels of female hormones fall, the effects of androgens (male hormones) can increase, causing certain hair follicles to fail. And while most physicians agree that replacing these hormones can alleviate many of the other troubling symptoms of menopause, unfortunately, hormone replacement alone does not seem to radically alter a woman's "follicular fate," and can even sometimes make matters worse.





So what can you do about hair loss during and following menopause?

Hair restoration physicians may recommend pharmaceutical/medical treatments along with lifestyle changes to women experiencing menopause-related hair loss problems.

- **Medical Treatments:** Medical treatments that will help mitigate hair loss include a specially compounded prescription minoxidil solution called Formula 82M, platelet-rich plasma injections (PRP, also called the Vampire hair growth treatment), low-level laser therapy with the LaserCap, off-label finasteride (for post-menopausal women only), Latisse (bimatoprost) or other prostaglandin analogs and nutritional supplements like Viviscal Professional and pharmaceutical grade biotin. The best strategy is to use a multi-therapy approach, as prescribed by a hair loss specialist, and routine follow-ups for tracking purposes to see what's working.

Another tool that has become useful in treating hair loss in menopausal patients is the Androgen-Sensitivity Genetic Hair Loss Test. By comparing a patient's DNA to other women who are androgen-sensitive, this test can help predict whether a post-menopausal patient is likely to respond to anti-androgen therapies like finasteride, dutasteride or spironolactone. Without it, the likelihood of response to the off-label prescription finasteride/Propecia for postmenopausal women with hair loss is about 50%, but by excluding those who are not likely to respond, success rates with treatment improves dramatically.

- **Lifestyle Changes:** While some contributing factors to hair loss are beyond our control, such as genetic predisposition or illness, many can be linked back to certain lifestyle choices that are putting our follicles at risk. One of the most common culprits

for female hair loss is poor diet and nutritional deficiency. Women who lack these key vitamins are more at risk of thinning and unhealthy hair: biotin, anti-oxidants, zinc, iron, Vitamin B and protein. Steep drops in these essential nutrients can force the hair follicles to shed their hair strands and go into a prolonged resting phase during which time no new hairs are grown. Hair "super foods" include: lean red meat, fish, berries, pomegranate juice, beans, artichokes and nuts. If you can stomach it, liver is one of the best foods for your hair.

In addition to diet, other lifestyle factors that may be contributing to your hair loss include smoking, stress, poor sleep patterns, caffeine intake, and alcohol consumption. Because there are so many factors to take into considerations when diagnosing the root causes of hair loss, a detailed medical history and diagnostic tests are obtained as an important part of a medical hair loss evaluation with a physician specialist to identify risk factors.

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

If you're worried about menopause-related hair loss, it is important to consult with a both your primary doctor *and* an experienced hair restoration physician—someone who specializes exclusively in the medical diagnosis, treatment and tracking of hair loss and hair regrowth. Patients should look for a doctor that specializes fulltime in the medical management of hair loss and is certified by the American Board of Hair Restoration Surgeons and recommended by the American Hair Loss Association.

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 pro-



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

cedures. A international lecturer and frequent faculty member of major medical conferences, Dr. Bauman's work has been featured in prestigious media outlets such as The Doctor's 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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What Is Histoplasmosis?

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

Histoplasmosis is a disease caused when airborne spores of the fungus *Histoplasma capsulatum* are inhaled into the lungs. This microscopic fungus, sometimes called histo for short, is released into the air when soil is disturbed by plowing fields, sweeping chicken coops, or digging holes.

Histoplasmosis initially is a lung infection. However, it is believed that the infection, even if mild, can later migrate to the eye through the blood stream and cause a serious eye disease called ocular histoplasmosis syndrome (OHS). OHS is a leading cause of vision loss in Americans ages 20 to 40.



Histoplasmosis Symptoms

Ocular histoplasmosis syndrome (OHS) often has no symptoms in its early stages. You may have been affected by OHS without knowing it. The evidence that the inflammation ever occurred are tiny scars called "histo spots," which remain at the infection sites. Histo spots do not generally affect vision, but for reasons that are still not well understood, they can result in complications years — sometimes even decades — after the original eye infection. Histo spots have been associated with the growth of the abnormal blood vessels underneath the retina.

In later stages, histoplasmosis symptoms may appear if the abnormal blood vessels cause changes in vision. The symptoms for OHS are the same as choroidal neovascular membrane symptoms.

These include:

- Blank spots in your vision, especially your central vision;
- Distorted vision, so that straight lines appear bent, crooked or irregular;
- Size of objects may appear different for each eye;
- Colors lose their brightness; colors do not look the same for each eye;
- Central light flashes or flickering.

How Is Histoplasmosis Diagnosed?

Your Eye M.D. will be looking for two things in particular:

- The presence of histo spots, which indicate previous exposure to *Histoplasma capsulatum* fungus spores;
- Swelling of the retina, which signals the growth of new, abnormal blood vessels.

The examination to diagnosis histoplasmosis is similar to that used for a wet macular degeneration diagnosis. Your doctor may have you use an Amsler grid to check for histoplasmosis symptoms such as wavy, blurry or dark areas in your vision.

As part of the examination, your Eye M.D. will dilate (widen) your pupils using dilating eyedrops and examine your eyes with an ophthalmoscope, a device that allows him or her to see the retina and other areas at the back of the eye. If fluid or abnormal blood vessels (choroidal neovascular membranes) are detected, your ophthalmologist will take special photographs of your eye with optical coherence tomography (OCT) and fluorescein angiography.

OCT scanning uses light waves to create detailed images of the underlying structure of the retina. OCT images show the thickness of the retina, and can help your Eye M.D. detect swelling and abnormal blood vessels.

During fluorescein angiography, a fluorescein dye is injected into a vein in your arm. The dye travels throughout the body, including your eyes. Photographs are taken of your eye as the dye passes through the retinal blood vessels. Abnormal areas will be highlighted by the dye.

How Is Histoplasmosis Treated?

Anti-VEGF treatment

One method for treating histoplasmosis 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 that can block the trouble-causing VEGF. Blocking VEGF reduces the growth of blood vessels, slows their leakage, helps to slow vision loss, and in some cases improves vision.

Your ophthalmologist (Eye M.D.) administers the anti-VEGF drug 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 to numb your eye with a very fine needle. You may receive multiple anti-VEGF injections over the course of many months. Repeat anti-VEGF treatments are often needed for continued benefit.

Laser treatment

Laser treatment for histoplasmosis 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.

Laser treatment does not cure histoplasmosis. However, it reduces the chance of abnormal blood vessels returning. If these blood vessels do return, additional laser surgery may be needed.

Steroid injection

Because histoplasmosis can cause inflammation in the eye, sometimes steroid injections are given in the eye to reduce the swelling.

Histoplasmosis remains a threat to your vision for your lifetime. Therefore, it is important to have regular checkups with your ophthalmologist to detect any problems as early as possible.

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Smarter Communities – Media Literacy – Peace – Human Rights – Civil Rights*



Freezing FAT

By Daniela Dadurian, M.D.

There are so many ways to lose weight and more so, so many diets out there to choose from. Yet so many people struggle with their shape and bulges that don't seem to go away despite all the diet and exercise. There are a lot of factors that contribute to a person not being able to rid a certain area of fat on the body despite weight-loss. Those types of people are still searching and fortunately there are many options to address this issue.

There are two types of fat, the first is visceral fat which is the fat that surrounds your organs and the other is the subcutaneous fat. Subcutaneous fat is the fat that is found just below the surface of the skin and is the type of fat that can be targeted. We commonly identify it as the fat that can be pinched or pulled

Through many clinical studies it has been found that fat cells are more susceptible to cooling and that is what the principal of cryolipolysis is based on. Lipolysis is the killing of fat cells and cryolipolysis is a non-invasive application of cooling to selectively remove fat cells without damaging the skin and surrounding tissue.

Cool sculpting is an FDA cleared device for noninvasively removing fat cells as the device hand piece is selectively placed over the area to be treated while keeping the skin intact. There is no damage to the surrounding tissue as the cool sculpting selectively freezes the fat. During the treatment the patient may experience some tingling stinging and or mild cramping as this will dissipate as the area becomes numb due to the cold sensation.

Immediately after the treatment the treated area will temporarily feel cold and firm. Some common side effects may include bruising tenderness cramping and a "pins and needles" sensation. These side effects should all resolve within 2 to 3 weeks. The final result may appear within three weeks to up to four months.

The best way to find out if a patient is a candidate is to schedule a complimentary consultation. During this time we can assess whether the patient is a good candidate and if the expectations are realistic. Science is changing the face of medicine and cosmetic treatments. We are excited to introduce this technology as it is changing lives one at a time. For more information call 561-655-6325 or visit www.mdbeautylabs.com.



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SORTING OUT THE STEM CELL CONFUSION

By Dr. Dipnarine Maharaj M.D., MB, ChB, FRCP (Glasgow), FRCP (Edinburgh), FRCPath., FACP

Open up a news site online and you are bound to see at least one story on stem cells. Just today I saw that stem cells from teeth can be used to treat dementia, breast milk stem cells could heal disease, and plant stem cells are the key to younger looking skin. With all of the information out there, it is difficult to dissect fact from fiction.

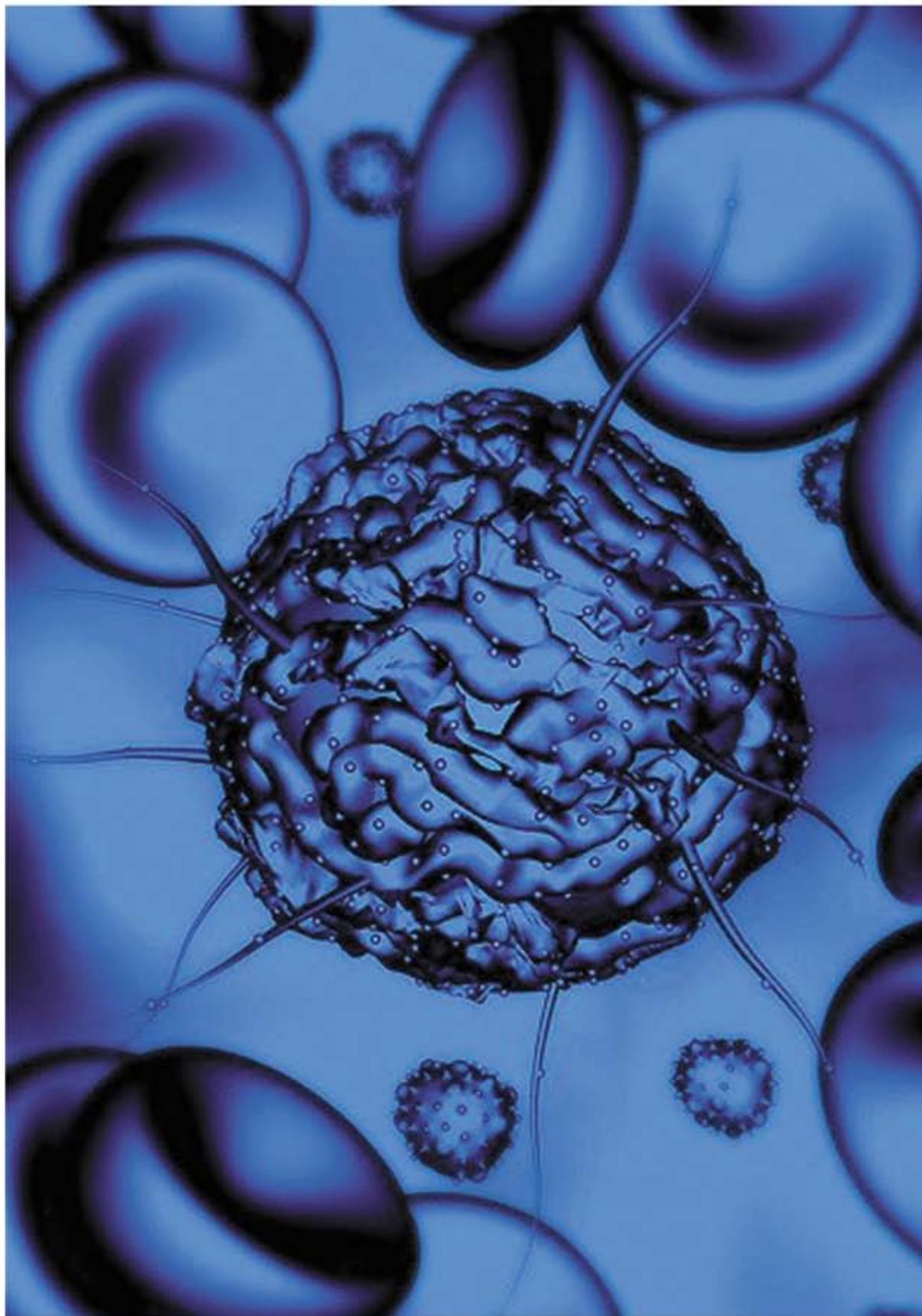
Who is a stem cell physician?

It seems that these days everyone is a stem cell expert. The primary reason for this is because there are no standardized criteria for who can perform stem cell treatments. That's why you have most likely seen everyone from your local physical therapist to your local psychologist start to offer stem cell therapy. While a stem cell specialty does not exist amongst physicians in the United States the way someone would specialize in neurology, there are major universities that offer fellowships in stem cell transplantation and other educational programs that are designed to educate physicians on stem cells. If you ask your physician or other expert if they have any specialized training from a major university or certification from an accrediting body specifically for stem cells, you'll find that about 90% of the so-called experts will be eliminated.

What are stem cells?

Once you've found someone reliable you can trust on stem cells, the first question most people ask is what stem cells are. Simply put, a stem cell is a cell that has the ability to replicate itself and turn into another type of cell. Most people think all stem cells are embryonic, or are derived from human embryos. Embryonic stem cells are a very small subset of what is going on in stem cell therapy. A little known fact is that embryonic stem cells have no current practical clinical applications.

However, there are adult stem cells, which we have in our bodies right now, regardless of our age. From all of the scientific data that is available, the safest form of stem cells to use for therapeutic purposes is our own adult stem cells, not from a donor. With our own adult stem cells, there is no risk of rejection and we have over 40 years of data showing its efficacy. Stem cells from other donors pose rejection risk, which ultimately carries a 20-45% mortality rate. Stem cells from xenogeneic sources such as sheep can be equally as dangerous creating complications such as graft versus host disease.



What stem cells can do for you now?

Stem cells may seem like a brand new area of medicine, but the reality is, stem cells have been used in patient treatment since the 1960's. Predominantly, stem cells are being used today to treat blood cancers like leukemia, lymphoma, and multiple myeloma, as well as metabolic disorders, bone marrow failure, and immunodeficiencies. An individual also has the ability to collect and store his or her own stem cells for future use. The process is similar to how platelets at a blood bank are collected. However, the key behind banking your own stem cells is making sure that there are enough of them there in case you needed a stem cell transplant. Normal levels of circulating stem cells in our blood will not yield enough cells to do a full stem cell transplant.

In terms of research and new treatment that's where the possibilities become limitless. We have already seen strong pilot data on adult stem cells being used for Parkinson's, Strokes, Diabetes, Alzheimer's, ALS, and so much more. Many of these treatments are still being developed and are considered experimental. In the future, we will most likely be able to generate certain tissues and organs from a patient's own stem cells. Currently, certain parts of the body can be regenerated with stem cells such as the trachea.



What to expect with stem cells?

The one thing that you should not expect is a miracle cure. If anyone promises you that, run, not walk, as fast as you can out of there. Even with blood cancers, stem cell transplants are not always 100% effective. Each patient responds differently and each case has its own unique circumstances. For blood cancers, scientific data shows that stem cell treatment has improved long term disease free survival. In Scotland, I was part of the group that pioneered the use of a patient's own stem cells for leukemia in the 1980's. This is now a standard of care. Stem cell uses and efficacy continue to expand and improve. Despite these advancements, it is vital to have realistic expectations not expect a quick fix for major problems.



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Dr. Dipnarine Maharaj MD iMD is a hematologist/oncologist with over 30 years of experience in stem cell transplantation, in both the United States and the United Kingdom, where he completed a three year fellowship in stem cell transplantation at the Royal Infirmary at the University of Glasgow, Scotland. Dr. Maharaj is currently the Medical Director for the South Florida Bone Marrow/Stem Cell Transplant Institute, a Joint-Commission Accredited facility that treats patients with cancer and chronic illnesses, and the Stem Cell Cryobank, an AABB Accredited facility where both adults and newborns can have their stem cells privately collected and stored. For more information contact: 561-752-5522, info@bmscti.org.

Prostate Cancer and PSA Screening

Prostate cancer is the second most common cancer (after skin) among men in the United States. The American Cancer Society estimates that one in six will be diagnosed with prostate cancer in his lifetime, which amounts to approximately 240,890 new cases every year. Fortunately, the disease is very treatable if found early: It has a nearly 100% five-year survival rate in the first two stages. Currently, some 2 million U.S. men in the country themselves as prostate cancer survivors — including more than a few household names like Robert De Niro, Arnold Palmer, Former Secretary of State Colin Powell, Sir Roger Moore, Charlton Heston, Dennis Hopper, former NY Mayor Rudy Giuliani, Former South African President Nelson Mandela, the Godfather of Soul James Brown.

What is PSA?

Prostate-specific antigen (PSA) is a protein produced by both cancerous (malignant) and noncancerous (benign) prostate tissue. PSA helps liquefy the semen. A small amount of PSA normally enters the bloodstream. Prostate cancer cells usually make more PSA than do benign cells, causing PSA levels in your blood to rise. But PSA levels can also be elevated in men with enlarged or inflamed prostate glands. Therefore, determining what a high PSA score means can be complicated.

Besides the PSA number itself, your doctor will consider a number of other factors to evaluate your PSA scores:

- Your age
- The size of your prostate gland
- How quickly your PSA levels are changing
- Whether you're taking medications that affect PSA measurements, such as finasteride (Propecia, Proscar), dutasteride (Avodart) and even some herbal supplements

Cancer screening tests — including the prostate-specific antigen (PSA) test to look for signs of prostate cancer — can be a good idea. Prostate cancer screening can help identify cancer early on, when treatment is most effective. And a normal PSA test, combined with a digital rectal exam, can help reassure you that it's unlikely you have prostate cancer. But getting a PSA test for prostate cancer may not be necessary for some men, especially men 75 and older.

Professional organizations vary in their recommendations about who should — and who shouldn't — get a PSA screening test. While some have definitive guidelines, others leave the decision up to men and their doctors. Organizations that do recommend PSA screening generally encourage the test in men between the ages of 40 and 75, and in men with an increased risk of prostate cancer.

Ultimately, whether you have a PSA test is something you should decide after discussing it with your doctor, considering your risk factors and weighing your personal preferences.



Maxim Men's Clinic 7100 West Camino Real, Suite 121
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At Maximum's Men's Clinic we specialize in all things relating to men's health. Dr Herbert Fishman, medical director at Maxim Men's Clinic has 30 years experience in family practice specializing in Men's Health and Sports Medicine. For your free consultation contact our team at 561-459-3000.

www.MaximMensClinic.com



Here's more information to help you prepare for a conversation with your doctor about PSA testing.

Simple test, not-so-simple decision

There are a number of pros and cons to the PSA test.

Pros of PSA screening

PSA screening may help you detect prostate cancer early.

Cancer is easier to treat and is more likely to be cured if it's diagnosed in the early stages of the disease.

PSA testing can be done with a simple, widely available blood test.

For some men, knowing is better than not knowing. Having the test can provide you with a certain amount of reassurance — either that you probably don't have prostate cancer or that you do have it and can now have it treated.

The number of deaths from prostate cancer has gone down since PSA testing became available.

Cons of PSA screening

Some prostate cancers are slow growing and never spread beyond the prostate gland.

Not all prostate cancers need treatment. Treatment for prostate cancer may have risks and side effects, including urinary incontinence, erectile dysfunction or bowel dysfunction.

PSA tests aren't foolproof. It's possible for your PSA levels to be elevated when cancer isn't present, and to not be elevated when cancer is present.

A diagnosis of prostate cancer can provoke anxiety and confusion. Concern that the cancer may not be life-threatening can make decision making complicated.

It's not yet clear whether the decrease in deaths from prostate cancer is due to early detection and treatment based on PSA testing or due to other factors.

The American Cancer Society recommends that men make an informed decision with their doctor about whether to be tested for prostate cancer. Research has not yet proven that the potential benefits of testing outweigh the harms of testing and treatment. The American Cancer Society believes that men should not be tested without learning about what we know and don't know about the risks and possible benefits of testing and treatment.

Starting at age 50, men should talk to a doctor about the pros and cons of testing so they can decide if testing is the right choice for them. If they are African American or have a father or brother who had prostate cancer before age 65, men should have this talk with a doctor starting at age 45. If men decide to be tested, they should have the PSA blood test with or without a rectal exam. How often they are tested will depend on their PSA level.

If you or someone you love has questions about PSA Screenings, contact Maxim Men's Clinic for a consultation with Dr. Fishman at 561-459-3000.

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Are You at Risk for Developing Stomach Ulcers?

By Daniel Lindenberg, MD, PA

If you think stress, spicy foods, or alcohol causes the majority of stomach ulcers you would be among the majority of Americans... you would also be wrong. A small spiral shaped bacterium commonly found in the stomach *H. pylori* is responsible of 80% of stomach ulcers and 90% of ulcers in the upper end of the small intestine. While you may not be familiar with *H. pylori* chances are that you or someone you love is infected with this bacterium and it could be wreaking havoc on your intestinal system. According to the National Institutes of Health approximately 20% of people under the age of 40 and 50% over the age of 60 in the US are infected with *H. pylori*.

H. pylori's spiral shape allows it to penetrate the stomach's protective mucous lining, where it produces substances that weaken the lining and make the stomach more susceptible to damage from gastric acids. The bacteria can also attach to cells of the stomach, causing stomach inflammation (gastritis), and can stimulate the production of excess stomach acid. Over time, infection with the bacteria can also increase the risk of stomach cancer.

Symptoms of H. Pylori

Having *H. pylori* infection doesn't necessarily mean you'll develop ulcers or stomach cancer. In fact, most people infected with the bacteria never have symptoms. Only a small number of people with the infection develop stomach cancer.

When *H. pylori* does cause symptoms, they are usually either symptoms of gastritis or peptic ulcer disease. The most common symptom of peptic ulcer disease is gnawing or burning abdominal pain, usually in the area just beneath the ribs. This pain typically gets worse when your stomach is empty and improves when you eat food, drink milk, or take an antacid.

Other symptoms may include:

- Weight loss
- Loss of appetite
- Bloating
- Burping
- Nausea
- Vomiting (vomit may be bloody or look like coffee grounds)
- Black, tarry stools

Complications associated with H. pylori infection include:

- Ulcers. *H. pylori* can damage the protective lining of your stomach and small intestine. This can allow stomach acid to create an open sore (ulcer). About 10 percent of people with *H. pylori* will develop an ulcer.

- Inflammation of the stomach lining. *H. pylori* infection can irritate your stomach, causing inflammation (gastritis).

- Stomach cancer. *H. pylori* infection is a strong risk factor for certain types of stomach cancer.



How H. pylori Is Diagnosed

Several types of tests are available to help diagnose *H. pylori* infection and/or ulcers. These include:

- **Upper GI(gastrointestinal) series.** An X-ray of the upper GI tract -- the esophagus, stomach, and duodenum. Prior to the X-ray you must swallow a chalky liquid called barium, which makes ulcers show up on the X-ray.

- **Endoscopy.** A procedure that involves snaking a thin, flexible tube with a camera down the esophagus, through the stomach, and into the small intestine to view the upper GI tract.

- **Blood test.** A test that looks for antibodies in the blood that indicate exposure to *H. pylori*.

- **Stool test.** A test that uses a small sample of stool to look for evidence of infection.

- **Urea breath test.** A test used to check for the presence of a gas produced by the bacteria.

Daniel Lindenberg, MD, PA

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Treatments for H. Pylori

There a number of treatments for H. pylori infection. They include:

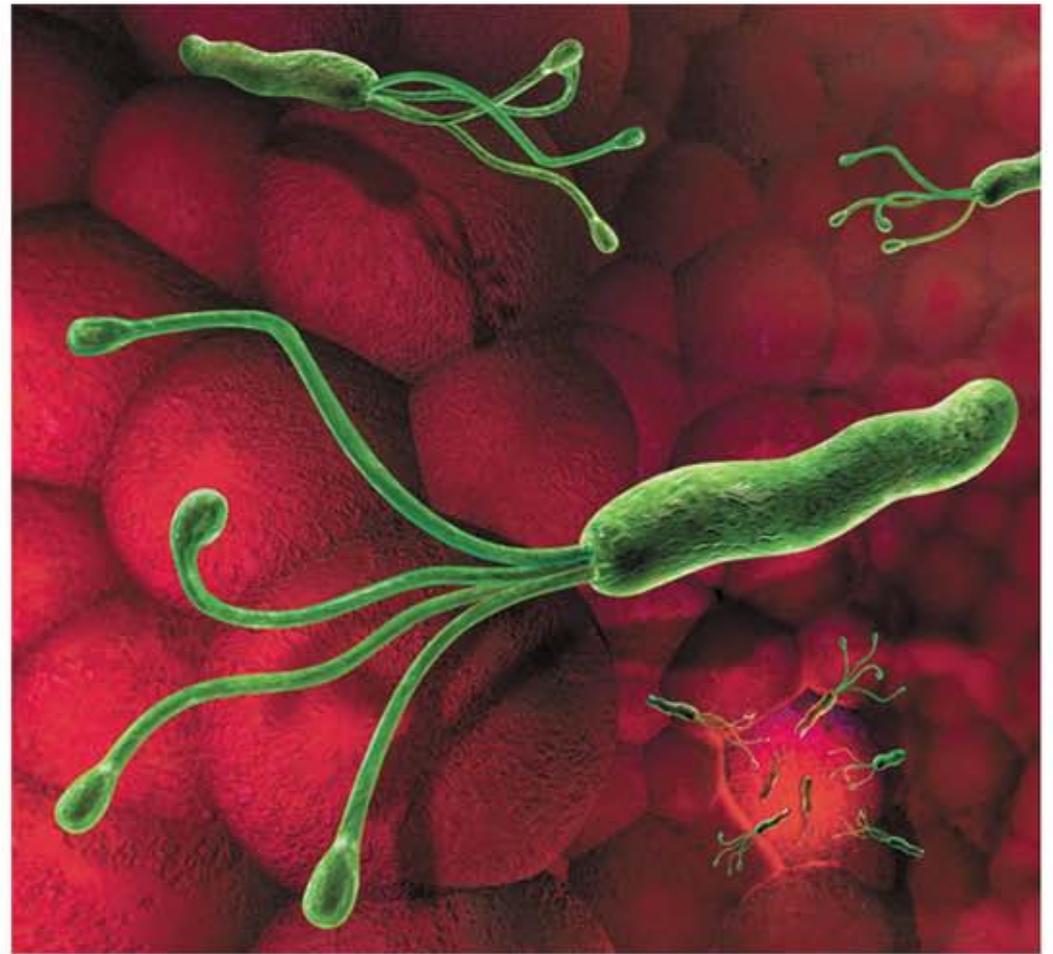
- Antibiotics to kill the bacteria
- Medications, including H2-blockers and proton pump inhibitors, to reduce the amount of stomach acid
- Surgery to treat ulcers

Doctors used to advise people with ulcers not to eat spicy, fatty, or acidic foods. However, it is now known that diet has little if any effect on ulcers for most people. Smoking, on the other hand, can interfere with the healing of ulcers and has been linked to their recurrence. If you smoke and have ulcers, that is another reason to stop.

The appropriate treatment for you will depend on a number of factors, including:

- Your age, health, and medical history
- The severity of infection or stomach damage
- Your ability to tolerate certain medications or treatments
- Your treatment preference

If you're concerned about H. pylori infection or think you may have a high risk of stomach cancer, talk to your gastroenterologist. Together you can decide whether you may benefit from H. pylori screening.



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"SMALL IS BEAUTIFUL"

A Wonderful book "Small is Beautiful" discussed the concept of Economics as if People Mattered. While the decade of the 1960's was known as a decade of massive civil unrest, war, human rights violation, the slaying of the Kennedy's, Martin Luther King, the era of Peace, Love and Perceived Understanding, Wood-



stock, Vietnam and Nixon, we can go back fifty years and wonder what's changed---if anything---and though we can agree that many things HAVE changed, more quality, better communication tools, better pay, what remains the same is the model of ecosystems hasn't really evolved much.

While record companies, music retailers and music magazines have pretty much gone the way of the Dinosaur, it wasn't the Internet that killed them. As they failed to see the Iceberg coming, playing the blame game became the business du jour, and while the motion picture refused to budge---their current business model of out-topping each motion picture of the week with the next Blockbuster that follows the following week is clearly unsustainable.

Studios and Media Outlets---clearly out-of-touch with the general public will continue to play the game of Irwin Allen by bringing up another \$200 Million Blockbuster each and every week until the Towering Inferno, Poseidon Adventures and Disaster Movies they create eat the system that does not serve anyone other than the people at the top of the economic pyramid and the shareholders they claim to be representing.

The issue at hand isn't that these business models are bad---yes, when one removes the curtain and sees the truth, we understand that the All Powerful Wizard of Oz played a game of sleight of hand through mass media manipulation---while the consciousness of the public was corrupted by the lies of the soothsayers.

What we do not need is another Smart Phone. We need a Smarter Conversation. Since we are all connected and interconnected, we can utilize the Internet to enable something more than disruption---we can create new projects and companies, solve problems and enable solutions by creating ecosystems that truly service the needs of the people. And really, when it comes down to basics, that's what this project is doing---The Worlds Stage is dedicated to showcasing the ideas and actions, business models, platforms and ecosystems dedicated to enabling an empowered public through evidence-based information (Truth) and action. The connecting poing exists through the central hub of activity we have embedded into this network.



When we look at all of the systems that have failed the public, we can understand that the Education System has created massive student debt---debt so high it will keep the graduates enslaved for decades.

The schools of Economics and Law, Business and Media have failed to clearly integrated the knowledge of other sectors built into a long-term quantic understanding where everything connects to everything, therefore one action has a reaction. One cannot operate on a brain without understanding how all actions connect to all other actions.

It is the failure of these Institutes of Higher learning for not educating individuals with the proper knowledge they need to thrive in this world---instead, the graduates of many of our schools are coming out into the world with repressed knowledge and real skills other than the ability to memorize the knowledge handed to them in books that were written and conceived of from Industrial Age thinking.

Instead of looking at all of our businesses as financial entities, we can ask ourselves, how do we create systems that enrich the lives of others without sacrificing the integrity and autonomy of the individual.

Each sector will be required to have an understanding of how the Ecosystem works, and based on the laws of Quantum Physics, that all of our actions are indeed connected. Now, what will the new systems of education, media, arts, media literacy, entertainment, and health/wellness look like?

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Thank you.
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Co-Founder,
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IF YOU THINK MEDICAL INSURANCE IS DESIGNED TO KEEP YOU HEALTHY, BETTER THINK AGAIN!

What It Really Does Is Provide for 'Sick Care'

It is comforting to know that we have medical insurance when we get sick. It does not work well unless you get sick. We are fortunate that medical insurance today covers many screening procedures that allow earlier detection and a better chance to control a disease or even achieve a cure. Oddly, not many take advantage of these due to various reasons ranging from the inconvenience, high deductibles or lack of concern. Whether we go through the screening exams, we are all concerned with preserving our health. Despite the deluge of sometimes conflicting information about healthy living, very few try to find out how to preserve and extend their health and assume falsely their medical insurance will somehow recover their health. Health insurance is not designed for this purpose. It's designed for what we refer to as "sick care." When you get sick, it kicks in and you get the medical care you need. However, it will not erase the disease that we have allowed to develop through years of poor choices in our diet, inactivity, harmful addictions and lack of proper upkeep. The adage of "an ounce of prevention is worth a pound of cure" is still true when it comes to your health.

We at Wellness and Hormone Centers of America believe that medical insurance should be left for "sick care" and that we should pursue good health from any other source available even if that means going outside of what our medical insurance can offer. Those who prefer to accumulate wealth without health can experience the joys of "sick care." Frankly, most who go through it would rather have skipped it.

Avoiding processed foods and including lots of fresh fruits and vegetables without pesticides in your diet is a step in the right direction. Getting on a regular exercise program will preserve your function so you can still take care of yourself as you get older and may help you lose weight. There is no shame in starting small and build up, as long as you do it. No one wants to be a burden on their family and loved ones but many simply don't plan for anything else. At that point it is too late. Quitting harmful addictions such as tobacco use in any form, excess alcohol intake or addiction to processed foods are steps that you can take on your own that will add much to preserve your health and don't cost anything. Getting your hormones tested and balanced with bio-identical ones will make you feel younger so you can do more in old age but this is frequently not covered by "sick care" insurance because you're not sick, at least not yet. Every measurable parameter of human function, including hormones declines as we age. Taking proactive steps to preserve your health will balance your life at the expense of your checkbook. Wealth without health is useless. Don't wait until you're dying to focus on health. Keep your health insurance to get care when you're sick but get your health by living well and by keeping your hormones balanced to promote good health.

We at Wellness and Hormone Centers of America can help you get started. Your health depends on it.



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George E. Sadowski, MD, presently the Medical Director of the Wellness & Hormone Centers of America, is a physician with a thriving surgical practice with the Surgical Associates of North Florida in St. Augustine. He received his undergraduate education from the University of Rochester and his medical degree from the prestigious St. George University. Dr. Sadowski has shared his expertise with various hospitals around the country including Greater Baltimore Medical Center and Flagler Hospital. In addition to a fellowship at the Greater Baltimore Medical Center, he has received certifications from both the ACLS and the American Heart Association for his outstanding work in many areas of the medical profession.



The Apple – The Power of Restoring Youth

By Ronna L. Clements, Natural Health & Wellness Innovator

One of the very first things we learn is the alphabet and almost always, "A is for Apple."

The apple has been around for so long that it can be called the first fruit. Hieroglyphic writings found in the pyramids and tombs of the ancient Egyptians indicate that they used the apple as both food and medicine. The apple has been at the center of legends, folklore, and even religion for thousands of years; from Adam and Eve to Johnny Appleseed.

The Turks gave the apple the power of restoring youth. Today, natural health practitioners use apple therapy for stubborn cases of digestive issues. The apple is an eliminative food due to its pectin which has the ability to take up excess water in the intestines acting as a nonirritating stimulant. Raw apple concentrate is good for a "lazy colon."

The juice of apples is good for everyone and can be used in a cleansing diet since it speeds up bowel action. Apples are wonderful for the lymphatic system helping to remove toxins and they work as powerful blood purifiers.

The apple helps the body absorb iron and also contains a generous amount of calcium. They contain 50% more Vitamin A and Vitamin C than oranges helping to ward off colds and other infections. They help to promote growth and aid in keeping the bones and teeth strong. Vitamin B, which is vitally important in maintaining nerve health, is also found in abundance in apples.

It is always best to eat apples raw, however, if you cook apples, be sure to do so over very low heat so that the delicate pectin, vitamins and minerals will be preserved as much as possible.

So, as the saying goes, "an apple a day helps to keep the doctor away." Enjoy!

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Imagine

By Pat Trutner
Wellness Advocate for dōTERRA Essential Oils

Imagine you have the power to reinvent the way you care for your family's health: safely, cheaply, without side effects. Would you do it? I would—in an instant! And I did!

A friend introduced me to dōTERRA Essential Oils. There I was: the biggest skeptic! How could a drop of essential oil help so many of my health and wellness concerns I wondered? My friend explained how they work. They can be used aromatically, topically, and some can be used internally. She explained which oils I would need for which specific health concerns. I learned there are essential oils for congestion, migraines, digestive issues, anxiety, energy, pain and the list goes on and on.

That sounded great so I wanted to know more. I researched dōTERRA Essential Oils and found that they are certified pure therapeutic grade. There are no chemicals or synthetics in them. Essential oils have properties such as: antispasmodic, antibacterial, anti-inflammatory, antidepressant, antiviral. The list of what essential oils could possibly do to help improve one's health is amazing.

After all the research, I decided I wanted to let others (actually everyone) know how dōTERRA Essential Oils could help their health and wellness concerns. I became a Wellness Advocate and now I educate people on the benefits of Essential Oils. I have introduced essential oils to many people including my elderly parents. I would love to explain more about these oils. I will be scheduling classes in your area or call me for a free phone consultation.

Let me help you reinvent the way you care for your family's health. Please contact me for more information.

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(Pat Trutner is an educator and Wellness Advocate for dōTERRA International Essential Oils.)



WEIGHT LOSS TRUTH

By Dean Sloan, MD

Weight loss. It has become something of a national obsession lately, and for good reason: two-thirds of American adults are overweight. It seems just about everybody is either on a weight loss diet or is looking for one. And that is where we are all making a big mistake. The overweight state is a permanent condition, and therefore it cannot be solved with a temporary fix, which is what every diet becomes. My patients tell me all the time about how much weight they or people they know have lost on this diet or that. My response is, "I don't care!" because this weight loss is temporary, and now all these folks are heavier than they've ever been.

To Gain Weight Is Human

The human body is built for weight gain, and throughout history this trait has been critical to our survival in a world often beset by famine. But in the last century, famine has been eliminated in much of the world, and in the last half-century, the food industry has dramatically changed our food environment. Back in "olden times," we ate when nature made food available to us, and we built some fat mass that we later utilized as fuel, such as when food was scarce. Now, we eat constantly, choosing from a wide array of highly addictive and fattening products of industry, and we become overweight and obese.

Food Addiction

Eating fattening foods could be looked upon as our nation's most prevalent addiction, but most people do not recognize it as such. We all know about drugs of addiction, like nicotine, alcohol, cocaine and prescription narcotics, and society offers many treatment options to help us overcome our abuse of these substances. Food is generally not regarded as a drug, because, of course, we must eat to survive.

But our food supply today is very different from that of generations past and is now dominated by concoctions of starches, sugars, salt and flavorings that are scientifically designed to be habit-forming. Shortly after passing our lips, these products break down into sugar, which negatively affects our blood sugar-insulin balance and contributes to weight gain. To make matters worse, these products are labeled with buzz words like "low fat," "no trans-fat" and "whole grain" to make us think they are actually good for us! The truth is they are nothing more than addictive, fattening drugs.

The Solution

To solve our weight problem we must identify our personal foods of addiction and manage them appropriately. They cannot be in our homes and workplaces, and we must avoid them in restaurants and other places where food is available. Then we need a comprehensive lifestyle plan consisting of healthful foods we enjoy and physical activity we are capable of doing. This plan is best developed by a healthcare professional who specializes in bariatrics (weight management) and who is available to provide counseling and support on a frequent and long term basis.

Food, Exercise and Beyond

Permanent weight management clearly requires more than a diet that is here today and gone tomorrow. Yes, it demands a healthful lifestyle that is sustainable for life. But it goes one step further. How do we establish the frame of mind to eat and exercise properly for the rest of our lives when it seems everyone around us doesn't and is encouraging us to abandon our healthful ways? We must create a new identity for ourselves, one that is based on our weight and wellness goals above all else.



We have to make our goals a religion, as in the religion of health and wellness, and we must adhere to our beliefs and behaviors just as we would as observant members of a "regular" religion. And how do we do this? We must have a burning desire for our goals, a desire that is stronger than all of the temptations in our minds and environment to revert back to the ways of the heavy and unwell person we used to be.

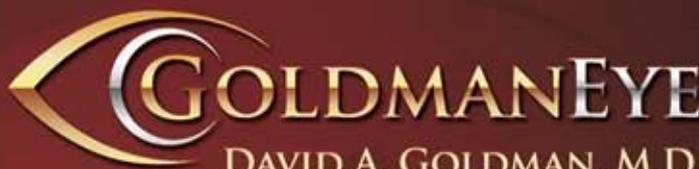
What Is Your Destiny?

If you are overweight, what do you plan to do about it? Will you go on a diet, lose some weight, and then go off the diet and gain back the weight? Will you continue to be the victim of food addiction in the interest of "enjoying" yourself for a few fleeting moments each day only to condemn yourself to a life of obesity, disease, discomfort and unhappiness? This is what most Americans are doing right now. This is typical, conventional, "normal" behavior. Is this what you want for yourself?

Or, do you want something different and better? Not just better, great... maybe the greatest achievement of your life. If so, start building your desire and call a qualified weight loss professional today. Your goals are your destiny!

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Trouble Falling Asleep? Up at Night? Sleep better without drugs.

New technology focused on brain health can help you fall asleep easier and get a good night's rest.

By Michael Cohen, Founder, Center for Brain Training

If you struggle to fall asleep, have trouble staying asleep, and can't remember the last good night's rest you've had, you are not alone. Studies show that between 50 and 70 million Americans don't get enough sleep.

Many resort to supplements or prescription drugs in order to slumber more easily. Perhaps the supplements you've tried aren't effective. What if you can't tolerate medications, or you're concerned about the effects of taking drugs long term?

Sleep and the brain

Sleep is important to overall health and wellness. Studies show that over 40 million Americans suffer from chronic sleep disorders every year, and another 20 million experience occasional sleep problems.

Getting enough sleep isn't a luxury. Chronic insufficient sleep doesn't just make you drowsy – it can contribute to a whole host of health problems, including increased stress, lowered immune functioning, decreased cognitive functioning, depression, anxiety, ADHD, and other emotional and behavioral challenges. Often times, sleep problems are brain issues.

Our brain regulates our sleep. When your brain is functioning optimally, it smoothly transitions from an alert and awake state, to a relaxed state, and then into a sleep state, allowing a healthy amount for rest for your entire body to recharge and repair itself. If the brain's timing is out-of-synch, the brain has difficulty switching to these states, if at all.

Sleep problems can become more pronounced and difficult to manage if the brain waves are too fast or too slow. If we're struggling with sleep issues, our brain may need a tune-up in order to help it function better and maintain healthier patterns.



"Tuning Up" The Brain

Neurofeedback is one option that consistently and effectively helps improve sleep. Neurofeedback helps your brain change itself and create healthier patterns – without medication. It's a powerful tool to help regulate sleep naturally.

Cheryl, a woman in her 60s, came to us because she had struggled since high school with falling asleep and staying asleep. She shared that she had averaged about four hours of sleep for most of her life, and rarely slept for more than five hours. She was always tired and concerned about cognitive decline.

She began brain training with neurofeedback and within three months her sleep gradually increased.

She's now able to fall asleep more quickly and reports sleeping up to seven hours most nights.

"I feel much more energy and optimistic as a result of the increase in sleep. It's made all the difference," shared Cheryl.

How Neurofeedback Works

Neurofeedback is a painless, non-invasive technique that helps change brain patterns naturally. It measures your brain's rhythms and rewards the brain when it makes healthy patterns. With sleep problems, for instance, certain patterns in the brain are often moving too fast. Neurofeedback helps your brain learn how to make healthier patterns by giving your brain a reward when it slows down.

With repeated training, the brain learns to maintain these healthier patterns. Correcting sleep issues with neurofeedback just takes practice and reinforcement.

Another client, Bill, came to us because he was unable to sleep before 1 or 2 in the morning. He needed to wake by 6:15 am in order to get to work, and this ongoing inability to sleep was starting to affect his work performance and his family life.

We were already working with one of Bill's kids for ADHD. When his wife mentioned his sleep problem during a brain training session with their son, we suggested Bill try neurofeedback as well.

In just over two months of neurofeedback, Bill was able to fall asleep between 10:30 pm and 11:00 pm almost every night.

Why Haven't I Heard of Neurofeedback for Sleep?

Many doctors aren't aware of neurofeedback, or its role in helping improve sleep. Often, improved sleep is the first significant change noticed by people when they start neurofeedback, even if they came to neurofeedback for something completely unrelated to their sleep struggles.

We know that sleep hygiene, the habits before sleep, can play a role in improving sleep, as can other behavioral modifications, yet many people resort to medication because medications are commonly known, and doctors are trained to provide prescriptions to help relieve their patients' problems.

Once doctors learn about the positive results in their patients, they are generally very receptive to neurofeedback and want to learn more.

Contributory factors, such as sleep apnea, need to be assessed in combination with neurofeedback training.

Does Neurofeedback Work for Kids and Adults?

People of all ages can have brain patterns that cause disruptions to their sleep. Neurofeedback is an excellent tool for kids and adults because it's similar to playing a video game, except the game is played with your brain.

Many parents report to us that their child's sleep is much improved, which can improve behavioral and emotional responses. People often see a noticeable improvement in sleep within the first four to six sessions.

Neurofeedback can also be beneficial for kids with difficulty falling asleep, kids who have nightmares or bedwetting problems, and kids who are difficult to wake in the morning.

About The Center for Brain Training

We offer a variety of other biofeedback and brain tools that can be helpful with sleep problems, and we encourage our clients to try different methods to see which works best.

Neurofeedback is a powerful tool to help regulate sleep. If you are interested in additional information about how neurofeedback can help your sleep issues, call our office at 561-744-7616.

The Center for Brain Training is 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. We have offices in Jupiter and Boca Raton. Learn more at www.CenterForBrain.com

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Michael Cohen, President and Founder of the Center for Brain Training is one of the leading experts in brain biofeedback. For 16 years, he's taught courses and provided consulting to MD's and mental health professionals around the world, helping them incorporate new biofeedback technologies for chronic pain, anxiety and mood disorders, ADHD and neurological problems.



Renee Chillcott is a Licensed Mental Health Counselor and is the clinical director of the Boca Office of CenterforBrain.com. She has been practicing neurofeedback for almost nine years. She has worked for years using neurofeedback with anxiety, panic attacks and depression. She reports that neurofeedback has helped her clients achieve far more success than with just psychotherapy or medications. The Boca office works with children, adults and families. Renee obtained her Master's degree from Nova Southeastern University in counseling. She has also received continuing education in the diagnosis and counseling of attachment disorders, teaching positive parenting skills, and peak performance neurofeedback.



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How Doctors Choose Surgeons

By David A. Goldman MD

When it's time to have an elective surgical procedure how would you choose a surgeon? Most people will ask friends and family, others may do their own internet research. When I needed a hernia repair, I did what all other doctors do – I asked another doctor. Not just any doctor, but in this case the residents who worked with all the doctors in the department of surgery. When a family member needed surgery, I called and spoke to one of the scrub nurses at the local surgery center. While top degrees and awards certainly contain value, there is not always a direct correlation with surgical skill. Scrub nurses, OR technicians, and residents are in unique positions to compare surgeons not on a one-time basis, but on an annual day-in day-out experience. Surgical representatives are often the best because they survey hundreds of doctors within a large geography (and yes, I have relied on the advice of surgical reps many times for my family members).

This is not to downplay the value of resumes, accolades, internet research, and word of mouth. If a personal associate of yours had an excellent experience with a surgeon, you should absolutely trust their opinion. In southern Florida, the population is continually changing, with new patients relocating here every day. In some cases you may not know whom to see for care. Remember that there are multiple sources available for you to check.

So what occurred in my situation? I selected a surgeon based on the advice of residents and fellows who worked with all general surgeons. I had minimal postoperative discomfort and was extremely satisfied with the end result. Of note, a colleague sought out a "renowned" surgeon for the same procedure and had significant pain. When he developed a hernia on the opposite side he saw my surgeon. He couldn't believe how much better the experience was.

In summary, there are many ways to select a surgeon. But, if in doubt, do what the doctors do.



DAVID A. GOLDMAN

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

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

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

Dr. Goldman speaks English and Spanish.

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ONE ANOTHER

By Brent Myers, Pastor of Community Life

It doesn't take much effort to hear of all the turmoil going on in our nation and around the world. It's quite frightening at times to think about where this all might end up. But if we're honest with one another, we really shouldn't be surprised. Conflict between people has existed since Cain and Abel – and it's not getting any better.

That is probably why God gave us so many instructions in how to get along with one another in the Bible.

Did you know that the phrase "one another" is used 100 times in the New Testament alone? Did you know that nearly half of those are given to those who call themselves Christ followers and over half are written by the apostle Paul? About one third of them deal with unity; another one third deal with love; and a good balance of the rest deal with humility.

So what are some of these great reminders of how to treat one another?

- Love one another (John 13:34, others)
- Accept one another (Romans 15:7)
- Forgive one another (Colossians 3:13)
- Don't complain against one another (James 4:11)
- Be at peace with one another (Mark 9:50)
- Serve one another (Galatians 5:13)
- Regard one another as more important than yourself (Philippians 2:3)
- Don't judge one another (Romans 14:13)
- Encourage one another (1 Thessalonians 5:11)
- Pray for one another (James 5:16)

Can you imagine – just for a moment – what the world would be like if we could just do these simple ten things... TEN... that's just ten percent of the total number of "one anothers" in the New Testament. If we just did ten percent of what we're asked... think about how different the world would be – think about how the headlines might read differently.

But words alone cannot change people; action is required. James, the half-brother of Jesus, says this: *"be doers of the word, and not hearers only, deceiving yourselves. For if anyone is a hearer of the word and not a doer, he is like a man who looks intently at his natural face in a mirror... and at once forgets what he was like. But the one who acts, he will be blessed in his doing."* James 1:22-25, ESV

So if you want to change the world... if you want to see more good and less bad in the world... if you want to make a difference... then start with the person in the mirror and do the "one anothers".



Brent Myers @brentdrewmyers

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