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Health & Wellness[®] MAGAZINE

November 2015

South Palm Beach Edition - Monthly



FREE



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"STRESSED TRESSES"
Will Holiday Stress
Lead to Hair Loss?

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Poses Extra Challenges

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Thanksgiving is a time of joy, when we take a break from our hectic daily lives to enjoy food and one another's company. Family members gather from all over and catch each other up on our lives around the dinner table. However, if one of our family members has untreated hearing loss he/she may be left out of the conversation, leading to feelings of isolation and depression.



Hearing in noise

poses
extra challenges

Picture a big, extended family crowded around a long table — passing dishes, clanking silverware, getting up and down from the table to serve, and carrying on multiple conversations at the same time. This arrangement poses a challenge even for those with normal hearing.

Now imagine Grandma having diminished hearing in this situation. Little Sally's high-pitched voice is difficult for her to understand already, let alone over all this noise and activity. After asking Sally to repeat herself numerous times, Sally gets frustrated and turns her attention to her other family members. Grandma then tries to join a conversation between Uncle Pete and Aunt Ellen. She thinks she hears Pete say something about a "chocolate chip trophy" and asks when he entered a cookie eating contest. But Pete actually said, "Championship trophy", and he laughs off Grandma's faux pas. Embarrassed, she goes back to eating her dinner in silence while her family enjoys themselves around her.



There are far better solutions than ignoring someone with hearing loss. Here are just a few suggestions:

- Reduce extraneous background noise as much as possible by turning off the television and not playing music
- Make an extra effort to enunciate and speak at an even pace
- Don't shout at someone with hearing loss. You're going for clarity, not screaming. Shouting will only irritate you and Grandma
- Position yourself so that you and Grandma are facing one another when you talk, if possible. If you know Grandma hears better out of the right ear, try to talk to her from that side

- If Grandma misunderstands or doesn't hear something you said and asks you to repeat yourself, do it. Don't ridicule her error or tell her "never mind". Both are hurtful and will make her feel devalued
- Encourage the rest of the family not to speak over one another and to keep their conversations reasonably pitched. There's no need for everyone to yell to each other throughout dinner, especially if most can hear just fine
- Keep any frustration you have with Grandma to yourself. Don't scold her for not doing anything about her hearing loss yet in front of everyone. Shaming someone is a cruel and ineffective way to get anyone to seek help

Thanksgiving should be an opportunity for inclusion and bonding. Don't leave family members with hearing loss feeling lonely in your midst. Once the holiday is over, that may be time to have an encouraging discussion with Grandma *privately* about her hearing loss, during which you offer to help her find a hearing care professional who can test her hearing, and offer to go with her to find a good pair of hearing aids. There are new hearing aid options available that are especially effective in difficult listening situations, such as parties or large gatherings like Thanksgiving meals.



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“STRESSED TRESSES”

Will Holiday Stress Lead to Hair Loss?



By Alan J. Bauman, M.D.

It's not entirely clear yet why a higher level of stress impacts the hair follicles, but some studies have suggested it could be due to above average cortisol levels. When a person is “stressed out” their body tends to experience elevated levels of cortisol, which is a type of steroid hormone produced by the adrenal gland. It has been documented in a number of medical studies that cortisol has a number of adverse effects on the body, including suppression of the immune system, decreased bone density, weight gain, increase in blood pressure and cholesterol, heart disease and lower rates of learning and memory. Recent studies on mice have also indicated that stress hormone levels have a direct impact on impairing hair follicle function, shutting down the hair follicle and causing hair loss. This effect was confirmed by adding a stress hormone blocking molecule in one group of mice, prompting hair regrowth in that cohort.

The normal cycle of the hair is to grow, rest, shed and regrow. However, spiking cortisol levels appear to interrupt this cycle by forcing the hair follicles to go into a resting state prematurely and remain in it longer – most often until the cortisol levels decline. This is what leads to shedding without regrowth. (But keep in mind – some shedding is normal. The average person sheds 100 to 200 strands per day. It is only when the shedding exceeds that level that it is considered problematic.)

For consumers, it is important to realize that the health of your hair is directly linked to the body's overall health; any changes to the latter will impact your follicles in one way or another.

No one will ever be able to eliminate every bit of stress from their lives, and certainly not during the holidays, but it's important for patients to pay close attention to their overall health and the health of their hair. If you notice excessive shedding during periods of stress, it may be time to meet with a board-certified hair restoration physician or a qualified trichologist. These hair science professionals can examine your hair line, scalp and medical background to determine the exact cause of the hair loss and whether or not it will worsen over time. At Bauman Medical Group's state-of-the-art salonB Trichology Center, aside from measuring your hair density over time with HairCheck trichometry and

For most of us, the many joys of the holidays are usually accompanied by extra stress, and in some cases, lots of it. From long lines and shopping trips, family dinners and busy travel schedules, it is easy to forget to take care of yourself. We all know that stress can take its toll on our physical health, but did you know it can also affect your hair?

Believe it or not, hair can be a very sensitive barometer of someone's health. Even small changes in different lifestyle factors, including nutrition, hormone levels, sleep cycles, medications, and of course stress, can wreak havoc on your hair. The old saying has always been that stress will “make you go gray,” but can stress also make your hair fall out? The short answer is “yes,” but thankfully, there is more to it than that, or else—let's face it— no one would have any hair!

Stress alone doesn't cause permanent hair loss, but it can lead to a temporary hair loss situation called telogen effluvium or excessive shedding,

leading to thinning in both men and women. People who are most susceptible to this type of stress-induced fallout likely have other contributing factors as well, such as a genetic predisposition to male- or female-pattern baldness, or certain health factors that are already influencing the hair follicles (e.g., illness, hormonal imbalance, lack of sleep, medications, poor nutrition, smoking, etc.). Additionally, when stress does play a key role in hair loss, it's usually a more extreme circumstance or severe chronic stress—for instance, a serious illness, death of a loved one, or divorce. In the latter case, recent studies have found a correlation between divorce cases and a loss of hair volume.

HairCam photography, we can also test the scalp for key factors influencing hair growth and performance, such as blood cortisol levels as well as scalp sebum, pH and hydration. For some patients, reversing problematic hair may simply come down to adding a hair-specific nutritional supplement like Viviscal Pro or mega-dose Biotin to your diet; or it may include a “scalp makeover” by our salonB trichologists, which utilizes scalp massage, scalp steaming and highly advanced topical products to boost the health of the scalp and follicles. For other patients, this occasional shedding may be a sign of a more serious problem that requires more advanced therapies, such as low-level laser therapy,

platelet-rich plasma (PRP) therapy, Formula 82M minoxidil and FinPlus finasteride.

If you notice sudden, unusual, or excessive shedding, don't ignore it. Hair loss caused by stress, whether emotional or physical, is particularly difficult to self-diagnose because it doesn't happen immediately following the stressful period or triggering event - it often happens weeks, or even months afterwards. To properly diagnose the cause of your hair loss, it is important to be evaluated by a board-certified hair restoration physician, who can help determine if your hair loss is in fact due to stress, or if it is a symptom of a more serious underlying health condition.



1



2



3

STRESS AND HAIR LOSS

Stress is often cited as a key factor influencing the health and quality of the hair, with recent medical studies finding direct causal links between the two. Here are three ways stress may induce or support hair loss in both men and women:

- 1) **TELOGEN EFFLUVIUM:** This type of sudden, excessive hair fallout or shedding is not permanent, and often resolves on its own after a few weeks or months. Repeated cases of TE, however, could result in lasting damage to the follicles and hair strands, as the hair may regrow thinner or weaker each time. TE occurs when the hair follicles' normal growth cycle is disrupted, forcing more follicles into a longer resting phase when no new hairs are produced. TE may be caused by stress (which raises the cortisol level in the blood), changes in estrogen/progesterone levels, serious illness, blood-flow restriction, medications and other health factors.
- 2) **TRICHOTILLOMANIA:** A hair-pulling disorder due to stress, anxiety or obsessive-compulsive disorder, this condition can result in permanent hair loss in the affected areas due to physical damage of the follicles.
- 3) **ALOPECIA AREATA:** A rare auto-immune disease that attacks the hair follicles, resulting in bald “patches” within the scalp. Recent medical research suggests that extreme stress may also play a contributing role in this condition.

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

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



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By Aaron Rosenblatt, MD

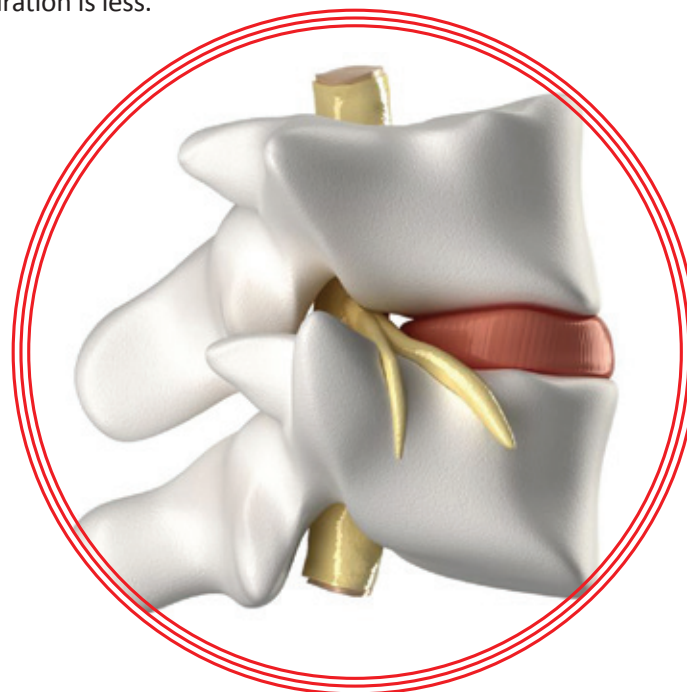
Pain Management for Facet Joint Pain: Radiofrequency (RF) Ablation/Rhizotomy



The purpose of radiofrequency (RF) rhizotomy, also known as RF neurotomy or ablation, is to reduce or eliminate facet joint pain (arthritis) and related symptoms in the neck, mid back or low back. The goal of the procedure is to interrupt communication of pain between a specific medial nerve root and the brain. The medial nerve roots innervate the spine's facet joints. This is how we feel this pain.

Before a RF rhizotomy is performed, the pain generating facet joint nerves have been identified by means of a diagnostic injection, such as a facet joint or medial branch nerve block. Other tests may include MRI. Since the medial branch nerves do not control neck or low back muscles, it is not harmful to disrupt or turn off their ability to send signals to the brain conceived as pain.

RF ablation is a precisely targeted injection that works by creating energy to destroy a facet joint's medial branch nerve. Relief from pain and related symptoms may last a year or longer. However, the medial branch nerve root regenerates (grows back) and facet joint pain may come back in years time. Results vary from patient to patient. For example, if there is instability at the segment where the RF neurotomy is performed, pain relief and its duration is less.



BASIC FACET JOINT ANATOMY

Each vertebra in the cervical (neck), thoracic (chest), and lumbar (low back) has two sets of facet joints at the back of the spine. One pair faces upward and one downward with a joint on the left and right sides of the vertebra. Facet joints are hinge-like and link vertebrae together. Each facet joint is innervated by a medial branch nerve. The medial branch nerves control sensation to the facet joint. These nerves DO NOT control sensations or muscles in your arms or legs and therefore are safe to treat.

What to Expect During and After the Procedure
The procedure is performed in a sterile setting similar to an outpatient procedure suite.

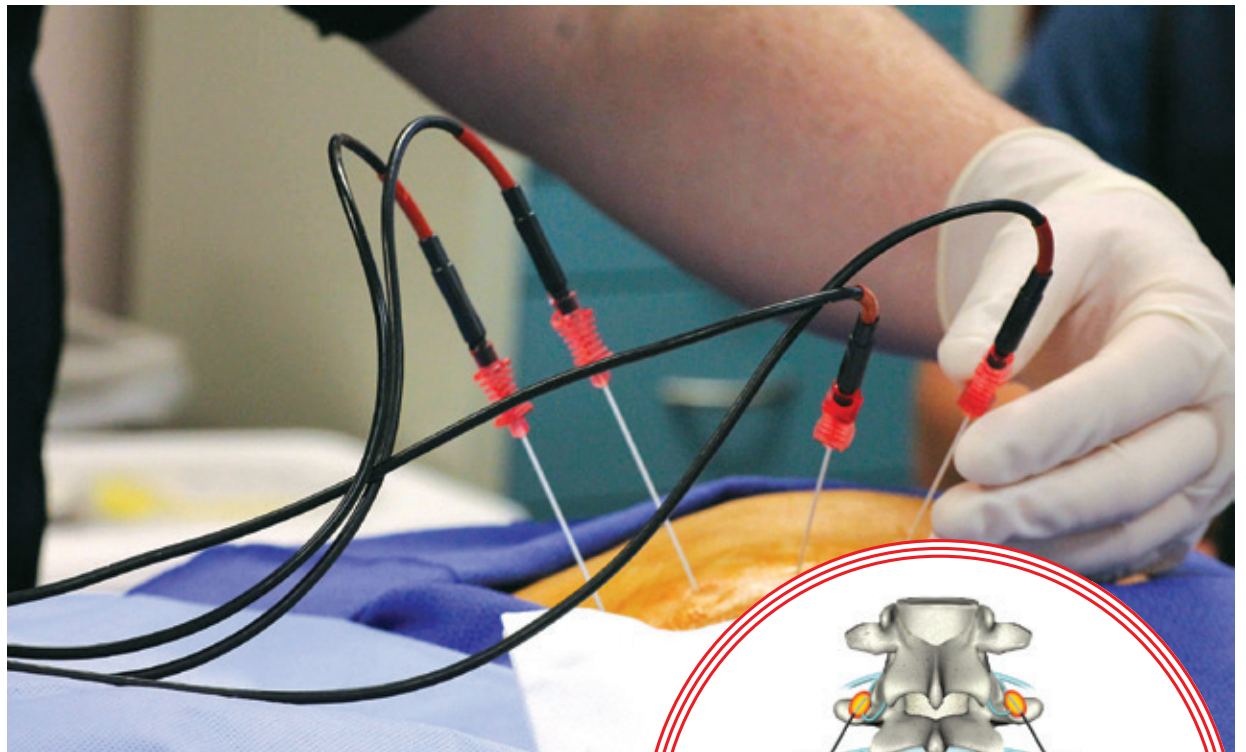
Your injection site is cleaned and draped. Skin numbing medication is injected and given time to take effect.

Dr. Rosenblatt uses fluoroscopic guidance (real time x-ray) to guide the needle electrode beside the medial branch nerve. Through the electrode, mild electrical current (radiofrequency) stimulates the medial branch nerve. As the electrode is energized, the nerve is changed so the patient’s arthritic spine pain will improve.

After the procedure, the patient is moved to the recovery area where our medical staff continues to monitor you if needed. You may be discharged home following your RF ablation. Our medical staff provides you with written aftercare and home instructions.

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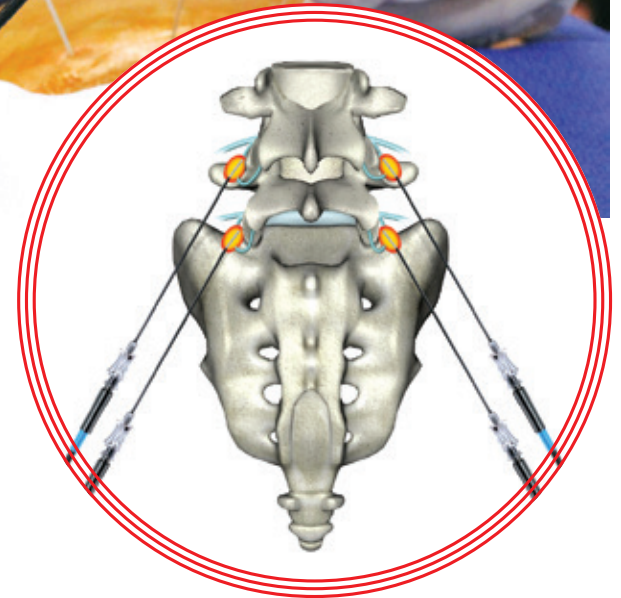
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Dr. Rosenblatt explains, “This procedure is so valuable to help people of all ages virtually eliminate their arthritic spine pain. It is great for neck and lumbar spine. It has saved people from requiring spine surgery. It is simple to perform and provides life changing relief.”

In Dr. Rosenblatt’s beautiful freestanding interventional pain management building in Delray Beach, FL, thousands of individuals have been able to benefit from this technique. Dr. Rosenblatt



has been performing this procedure for more than 15 years with great success. Please look forward to more articles about Dr. Aaron Rosenblatt and the vast number of procedures he performs to help people with all types of pain. His main focus is to help individuals avoid surgery, eliminate pain medications and to ultimately feel much better on a daily basis and enjoy life!

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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.

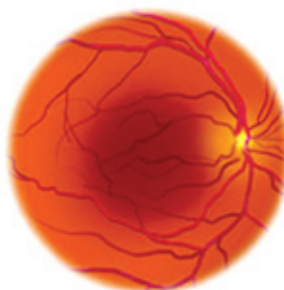
When macular degeneration does lead to loss of vision, it usually begins in just one eye, though it may affect the other eye later.

Types of macular degeneration: dry macular degeneration and wet macular degeneration

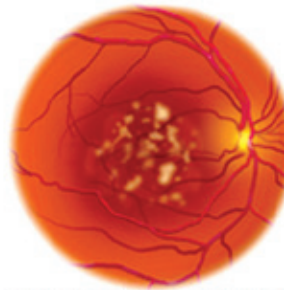
There are two types of macular degeneration: *Dry, or atrophic, macular degeneration (also called non-neovascular macular degeneration) with drusen*

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.

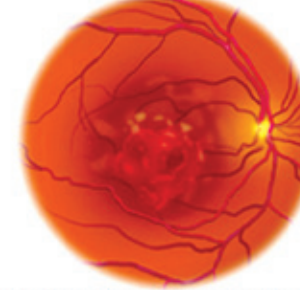
With dry macular degeneration, vision loss is usually gradual. People who develop dry macular



NORMAL MACULA



DRY MACULAR DEGENERATION



WET MACULAR DEGENERATION

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, begin treatment.

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.

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.



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ARE YOU HEADED FOR A FALL?

Maybe You Need A Little More Balance

Everything we do relies heavily on our ability to balance, yet maintaining physical balance skills is one of the most underrated aspects of well-being. As we age, we gradually start to lose our muscle strength, vision and sensory perception – all things that contribute to our ability to balance. As a result, our mobility can be compromised and lack of mobility can lead to falling, which can lead to a whole new set of health issues.

The good news is that physical balance is a learned skill that can be maintained and improved by practice. Balance exercises can strengthen our self-perception which can help the body to better position our muscles and allow us to sense where our body needs to be without looking. In addition, practicing balance builds muscle and increases range of motion in the joints, which helps in distributing weight evenly, creating overall stability.

Who couldn't use a little more balance in life? The purpose of this article is to focus on training and improving your balance skills. Whether you are an athlete-in-training or just getting a little older, the benefits of these balance tips will carry over into your workouts and many areas of your life. For older adults in particular, poor balance can lead to falls. Every year one in three adults 65 and older falls at least once and for many these can be serious. More than 90% of hip fractures are a result of a fall, but they can also result in a fracture of the spine, forearm, leg, ankle, pelvis, upper arm and hand.

Our daily balancing act requires multiple different body systems to be constantly working together. These include the central nervous system (brain and spinal cord), the vestibular system (brain and inner ear), the visual system (brain and eye) and a vast web of position-sensing nerves. Balance is like muscle strength: The more you use it, the less likely you are to lose it. Worse, it can become a vicious circle. You feel a little unsteady, so you curtail certain activities. If you're inactive, you're not challenging your balance systems or using your muscles. As a result, both balance and strength suffer. Simple acts, such as strolling through a grocery store or rising from a chair, become trickier. That shakes your confidence, so you become less active ... and so the vicious circle continues.



Good balance, by contrast, helps prevent potentially disabling falls. It builds confidence and fosters independence.

A couple of simple exercises to improve balance: first, stand up straight behind a chair, holding the back of it with both hands. Put your feet together and evenly distribute your weight on both feet. Slowly lift your right leg straight out to the side about 6 inches off the floor. Hold. Return to starting position. Repeat 10 times, then repeat with the left leg. This completes one set; do 1-3 sets.

Another is after choosing a path free of obstacles, place a soup can on the floor about 10 feet from a chair. Sit in the chair with your hands on your thighs. Stand up and walk forward to the soup can. Walk around the can and return to the chair. Slowly sit down in the chair. Repeat 10 times.

TIPS AND TECHNIQUES:

•
After rising from the chair, steady yourself if necessary before walking toward the soup can.

•
Go at your own pace.

•
Breathe comfortably.

Even if you are conscientious about doing regular aerobic and muscle-strengthening exercises, if you feel that your balance isn't what it used to be, talk to your doctor or to a physical or occupational therapist about learning balance exercises. They could help protect you against falling.



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ALZHEIMER'S PREVENTION

HOW CLOSE ARE WE?

Alzheimer's disease is an irreversible, progressive brain disease that slowly destroys the memory, causes a decline in the ability to perform routine tasks, disorientation, difficulty in learning, loss of language skills, impairment in judgment, and personality changes. We can all agree that this is a very accurate description of what occurs. In our society at present we typically just refer to it as Dementia or Old Age Forgetfulness, and though it is tied into the aging process it is not normal.

Alzheimer's disease has two hallmark characteristics that occur in the brain. One being an accumulation of a protein called Beta Amyloid, which form into something we refer to as senile plaques. The other is an accumulation of a protein called Tau, which forms into something we refer to as neurofibrillary tangles. These two proteins which form the plaques and tangles in a person's brain who has Alzheimer's disease are the two destructive forces that ultimately are killing the neurons and causing the damage.

Historically we would only be able to confirm the diagnosis of Alzheimer's disease upon autopsy. However recent scientific advancements now enable us to diagnose the disease before a person actually has any symptoms of the disease through the use of specialized tests to measure for Biomarkers within a person's body, PET CT's utilizing a new tracer and specialized CSF analysis are two such biomarkers. This is of significance because it allows us to accurately tell if the process has already started even though one is not noticing the effects of the disease!

If we in fact can diagnose the disease before one suffers any losses it enables us to try to treat the disease proactively and hopefully prevent one from having full blown Alzheimer's disease all together. This is precisely what several pharmaceutical companies are researching at the present time. The hope is that it is diagnosed while one is fully functioning; treat it with a new medication to prevent the two plaques from forming in the brain or removing them, thus halting the progress of this disease ahead of time. That sounds like a treatment and prevention strategy!



These same companies are also currently testing these disease modifying medications on individuals who currently have Alzheimer's Type Dementia with hopes of halting the progress of the disease. For any questions regarding these advancements or to see if you would qualify for possible participation in one of these ground breaking trials please call our office and schedule a free screening, (561) 209-2400.



NO MORE DENTAL DREAD

Going to the dentist doesn't have to be scary anymore. In fact, it can be (dare I say?) fun!

By Dr. Richard J. Staller, D.D.S., F.A.G.D., F.I.C.O.I., F.A.S.D.



Let's face it: Going to the dentist is never going to be a walk in the park or a day at the beach. But that doesn't mean it needs to be an altogether unpleasant experience. In fact, in the right setting, it can be nearly as enjoyable as taking in a movie or socializing with trusted friends at your favorite coffee shop.

One of our main goals at Advanced Dentistry South Florida is to lessen the anxiety and negativity normally associated with dental care. A caring, hospitable staff educated by Ritz Carlton trainers, soothing colors, natural lighting, a coffee bar, movies shown on plasma screens these are a few of the ways we strive to make it that much less stressful to walk through the front door. It is also a good feeling to know that there is a staff of highly trained doctors including general dentists and dental specialists.

Perhaps massaging chairs, warm blankets, and scent machines aren't enough to entice you to stop avoiding the dentist like so many tend to do. If that is the case, you might want to chew on the fact that many systemic disorders, including those of the heart and lungs, are linked to the health of your teeth and gums. Nowadays, even a hip or joint replacement can't be performed without a dentist's declaration of a healthy mouth.

Not convinced yet? Consider this: An investment in your smile is one of the soundest you can make. It not only changes how you look, but boosts your self-confidence, opens professional doors, and betters how you are perceived by society. In our practice, we strive to maximize the treatment and minimize the cost. You can't put a price on that, nor an age limit. We've seen patients 99 years of age wondering why they ever waited so long!

For many people, anxiety about going to the dentist stems from more than just fearing painful procedures. It can also be worrying about choosing the right provider. Here are some tips on navigating this all-important decision:

1. Don't assume that the one who recommends the least treatment is giving the best treatment. It can be tempting to choose the easier path, but just because a practitioner tells you there's no issue doesn't mean there isn't one. We try to be honest and always tell the truth, not just what you want to hear. Sometimes we might lose patients that way, but it's the only way we will do business.

2. Trust your instincts. See how you're treated from the time you make your first phone call. Is it with respect, patience, understanding and compassion? If not, keep looking. You want a dental office that makes you feel safe, secure, and in the best possible hands.

3. Conduct an interview. Review credentials and ask questions. How long have they been in business? How many patients do they see in a day? Are they using the latest technology? How do they clean their instruments? For example, in our "beyond state-of-the-art" facility, we have 18 treatment rooms, take all images in digital format, use LED for optimal lighting conditions, and utilize the latest in heat sterilization technology for our instruments, as well as having all of our equipment monitored by the manufactures via the Internet. In a small town like ours, word gets on the street. Don't be afraid to ask around.

4. Consider "one-stop shopping."

A team approach gives you successful and predictable dentistry, and happy healthy patients. There are lots of good practitioners around, but there's nothing like having everyone in one place at one time. We have two general dentists, an endodontist, two oral surgeons, a periodontist and four dental hygienists plus a dedicate private surgical suite. Much like a hospital setting such as Johns Hopkins or Cleveland Clinic, we get together and review each case so we can come up with a definitive diagnosis and treat the patient to the best of our ability.

Prioritizing, rather than procrastinating about dental care, is easier than ever, thanks to technological advancements and the wealth of information at your disposal. Once you research and select the right practitioner, it actually is possible to relax and even enjoy, going to the dentist. Espresso anyone?



Dr. Richard J. Staller is on staff at Delray Medical Center, Boca Raton Regional Hospital and West Boca Medical Center where he performed the hospital's first operating room general dentistry case. Dr. Staller is also on the faculty for Florida Atlantic University's School of

Medicine and is the FAU Team Dentist. He maintains a busy lecture schedule, speaking extensively all over the United States on topics such as implants, cosmetic and restorative dentistry.

Dr. Staller has appeared on network television and radio numerous times. He also has done research and presentations on dental lasers and has authored articles that have appeared in notable dental publications. Dr. Staller is a member of such prestigious societies as: The American Academy of Cosmetic Dentistry, A Fellow in the Academy of General Dentistry, The American Academy of Implant Dentistry, The International Academy for Sports Dentistry, A Fellow in the International Congress of Oral Implantologists.

Advanced Dentistry South Florida is dedicated to giving back to the community by participating in Habitat for Humanity, Boca Helping Hands, Alzheimer Walks, and giving 10% of profits to charity. They are honored to have been named Best Place to Work by South Florida Business Journal in 2015, and Best Dentist in Delray Beach by the Sun Sentinel in 2013 and 2014.

Hand Veins



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

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

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

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

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



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What is CBD

AND THE MEDICAL TREATMENT IT PROVIDES

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



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

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

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

1. *CBD is a key ingredient in cannabis*

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

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

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

2. *CBD is non-psychoactive*

Unlike THC, CBD does NOT cause a high. While this makes CBD a poor choice for recreational users, it gives the chemical a significant advantage as a medicine, since health professionals prefer treatments with minimal side effects.

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

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

3. *CBD has a wide range of medical benefits*

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

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

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

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

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

4. *CBD reduces the negative effects of THC*

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

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

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

If you live in the US, you can legally purchase and consume Cannabidiol in any state. Cannabidiol from industrial hemp also has the added benefit of having virtually no THC. This is why it’s not possible to get “high” from CBD. In fact various government agencies are taking notice to the clinical research supporting the medical benefits of CBD. The U.S. Food and Drug Administration recently approved a request to trial a pharmaceutical version of CBD in children with rare forms of epilepsy. The drug is made by GW Pharmaceuticals and is called Epidiolex. According to the company, the drug consists of “more than 98 percent CBD, trace quantities of some other cannabinoids, and zero THC.” GW Pharmaceuticals makes another cannabis-based drug called Sativex, which has been approved in over 24 countries for treating multiple sclerosis. We at Vapor Rocket are not medical doctors, we do pride ourselves on working closely with treating medical physicians, scientists, and leading researchers in the CBD field to ensure we provide our patients with the highest quality CBD to treat identified medical conditions. Owner Jeff Mandell has 20 years experience in medical underwriting and is an advisor to the board of directors for the Miami Beach Community Health Centers. If you are interested in using CBD for treatment of ailment we recommend you consult your doctor to make sure it’s right for you. If you have further questions about CBD or request that we work with your medical professional please contact our knowledgeable staff at **561-200-0122**.



DO I HAVE ANXIETY? OR AM I JUST STRESSED?

By Renee Chillcott, LMHC

It's a typical Monday morning... Trying to get kids off to school – on time, trying to help my husband get off to work – on time, trying to clean up, stay organized, take care of everyone including the animals, and oh, by the way, trying to get myself off to work – on time. I feel stressed to say the least; but also feel an incredible uneasiness, sometimes panic feeling, I clench my jaw, my heart is racing, my head is pounding, I am often irritable and definitely not patient at this time. I arrive at work like the flash, in a whirlwind of energy, and then plop myself in a chair and try to focus on my day. Although I am no longer at home dealing with that stress, the feelings continue. Next up? My boss is unreasonable, I don't enjoy my job or am having trouble with my co-workers... more stress. Fast forward to eight hours later and I'm behind on projects and not making deadlines, oh and don't forget the meeting I had today where I completely spaced out and felt like a failure when I used to be so on top of my game. I am now sitting in traffic, frustrated and aggravated by South Florida drivers and rushing to pick up kids and get to soccer practice on time. After practice comes dinner and the bombardment of things I have to get accomplished before I can even attempt to lay my head on a pillow for the night and then the insomnia hits and I'm wide awake! My heart is pounding, I can't get comfortable, my mind is racing, and my thoughts bounce from excessive worrying to all of things I need to do that I didn't get done. I try to sleep to no avail and as the night progresses, my insomnia just gets worse. Nothing works to settle me down and if I get 2 hours of sleep tonight it's a miracle. The alarm goes off and it begins again...

IF I WAS ON VACATION, I WOULD FEEL BETTER...

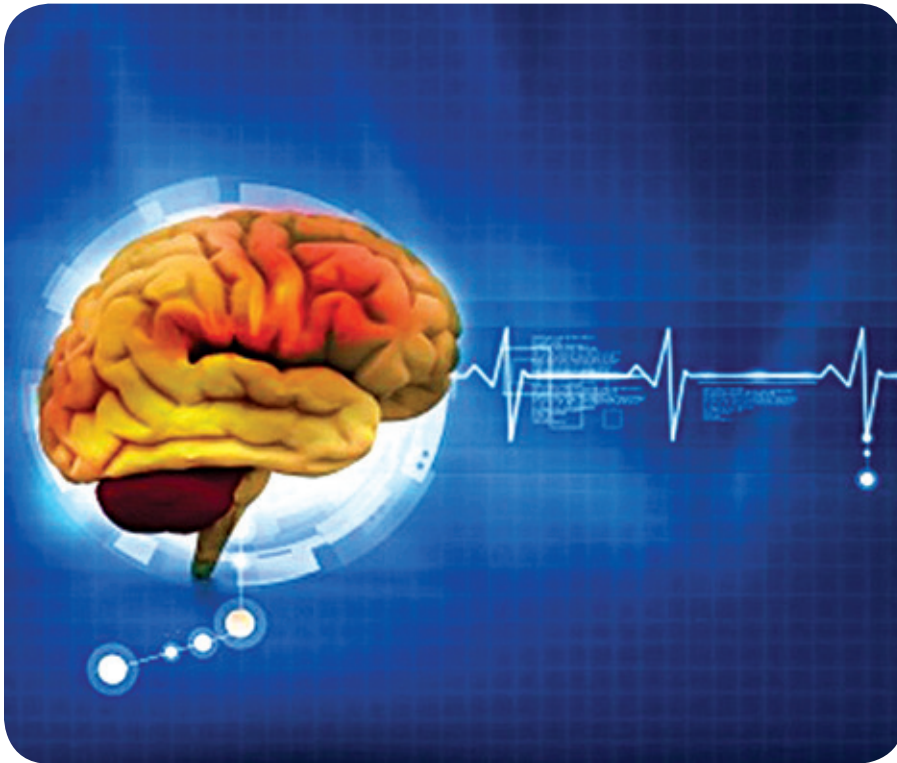
I wish this was true... but even when on vacation, these unpleasant feelings, thoughts and conditions persist.

IF I DIDN'T HAVE TO WORK, I WOULD FEEL BETTER...

Again, even if this was a possibility, new stresses will replace the work stresses.

Why can't I remove enough stress to reduce my anxiety? And why can't I handle stress like other people do?

The answer is simple.



Anxiety is a pattern in the brain and stress (physical or emotional) is a condition caused by an external force. Strong research evidence indicates that there are functional brain abnormalities associated with anxiety and panic disorder and posttraumatic stress disorder (PTSD). And Neurofeedback training corrects functional brain abnormalities. Simply put, Neurofeedback corrects the anxiety patterns in your brain, thus allowing you to handle stress with ease.

HOW DOES NEUROFEEDBACK WORK?

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

WHAT DO I HAVE TO DO?

While the client sits comfortably watching a movie or pictures appear on the screen (a calm and focused state), the EEG equipment measures the frequency or speed at which electrical activity moves in the areas where electrodes have been placed. This information is sent to the therapist’s computer. The therapist is then able to determine what frequencies are out of balance. For example, when the EEG shows that you are making too many “slow” or “sleepy” waves (delta/theta) in the center of the frontal lobe (Anterior Cingulate) you will experience worrying, obsessing, not being able to let things go; or if too many “fast” waves (high beta) are firing in the left temporal or parietal lobe, you will experience trouble sleeping, racing thoughts, panic attacks, physically unsettled. The therapist adjusts a reward band to encourage more balanced activity and this encouragement or “reward” happens through an auditory reinforcement of “beeps” and sometimes through visual reinforcement of changes on the screen.

WHAT SHOULD I EXPECT?

Mental clarity improves when you operate a calmer, more efficient brain. As you learn to slow down “inner chatter” or activate a “sleepy” brain, you become more effective at responding to stress and adapt more readily to different situations, both psychologically and physically. Parenting becomes less exhausting, appointments are more easily kept, decision-making improves, sleep improves, frustration reduces and mood swings and overwhelmed/depression lifts.

HOW DO I GET STARTED?

Getting started with Neurofeedback is fairly simple. Call, text, or email our office to set up an intake session. At the intake session, you will receive a clinical interview, treatment plan recommendations, and a Neurofeedback session (if warranted in your treatment plan).

Call to make an appointment today!



Renee Chillcott, LMHC

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

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DIAGNOSING DIABETES and Learning About Prediabetes

There are several ways to diagnose diabetes. Each way usually needs to be repeated on a second day to diagnose diabetes.

Testing should be carried out in a health care setting (such as your doctor’s office or a lab). If your doctor determines that your blood glucose level is very high, or if you have classic symptoms of high blood glucose in addition to one positive test, your doctor may not require a second test to diagnose diabetes.

A1C

The A1C test measures your average blood glucose for the past 2 to 3 months. The advantages of being diagnosed this way are that you don’t have to fast or drink anything.

- Diabetes is diagnosed at an A1C of greater than or equal to 6.5%

Result	A1C
Normal	less than 5.7%
Prediabetes	5.7% to 6.4%
Diabetes	6.5% or higher

FASTING PLASMA GLUCOSE (FPG)

This test checks your fasting blood glucose levels. Fasting means after not having anything to eat or drink (except water) for at least 8 hours before the test. This test is usually done first thing in the morning, before breakfast.

- Diabetes is diagnosed at fasting blood glucose of greater than or equal to 126 mg/dl

Result	Fasting Plasma Glucose (FPG)
Normal	less than 100 mg/dl
Prediabetes	100 mg/dl to 125 mg/dl
Diabetes	126 mg/dl or higher

ORAL GLUCOSE TOLERANCE TEST (ALSO CALLED THE OGTT)

The OGTT is a two-hour test that checks your blood glucose levels before and 2 hours after you drink a special sweet drink. It tells the doctor how your body processes glucose.

- Diabetes is diagnosed at 2 hour blood glucose of greater than or equal to 200 mg/dl

Result	Oral Glucose Tolerance Test (OGTT)
Normal	less than 140 mg/dl
Prediabetes	140 mg/dl to 199 mg/dl
Diabetes	200 mg/dl or higher

RANDOM (ALSO CALLED CASUAL) PLASMA GLUCOSE TEST

This test is a blood check at any time of the day when you have severe diabetes symptoms.

- Diabetes is diagnosed at blood glucose of greater than or equal to 200 mg/dl

WHAT IS PREDIABETES?

Before people develop type 2 diabetes, they almost always have “prediabetes” — blood glucose levels that are higher than normal but not yet high enough to be diagnosed as diabetes.

Doctors sometimes refer to prediabetes as impaired glucose tolerance (IGT) or impaired fasting glucose (IFG), depending on what test was used when it was detected. This condition puts you at a higher risk for developing type 2 diabetes and cardiovascular disease.

If you have prediabetes, you should be checked for type 2 diabetes every one to two years.

Results indicating prediabetes are:

- An A1C of 5.7% – 6.4%
- Fasting blood glucose of 100 – 125 mg/dl
- An OGTT 2 hour blood glucose of 140 mg/dl – 199 mg/dl

PREVENTING TYPE 2 DIABETES

You will not develop type 2 diabetes automatically if you have prediabetes. For some people with prediabetes, early treatment can actually return blood glucose levels to the normal range.

Research shows that you can lower your risk for type 2 diabetes by 58% by:

- Losing 7% of your body weight (or 15 pounds if you weigh 200 pounds)
- Exercising moderately (such as brisk walking) 30 minutes a day, five days a week

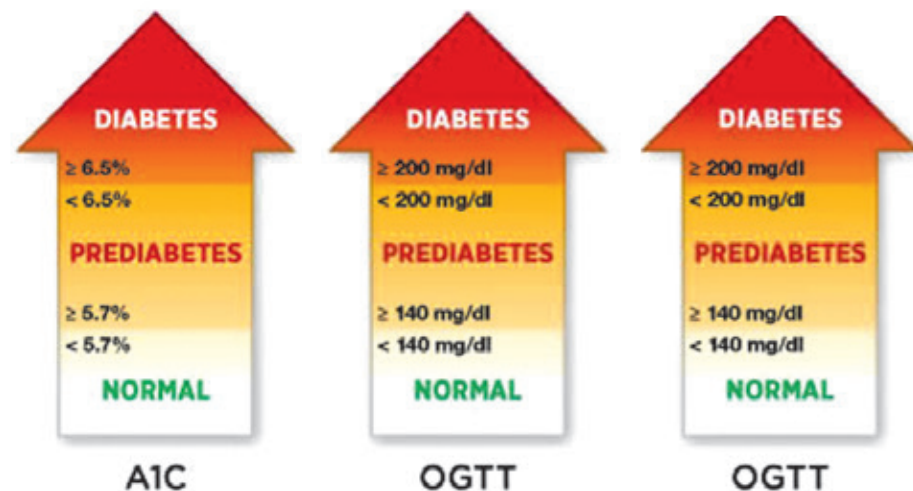
Don’t worry if you can’t get to your ideal body weight. Losing even 10 to 15 pounds can make a huge difference.

Provided by the American Diabetic Association – www.Diabetes.org

COMPLICATIONS LINKED TO BADLY CONTROLLED DIABETES:

Below is a list of possible complications that can be caused by badly controlled diabetes:

- **Eye complications**- glaucoma, cataracts, diabetic retinopathy, and some others.
- **Foot complications** - neuropathy, ulcers, and sometimes gangrene which may require that the foot be amputated
- **Skin complications** - people with diabetes are more susceptible to skin infections and skin disorders
- **Heart problems**- such as ischemic heart disease, when the blood supply to the heart muscle is diminished



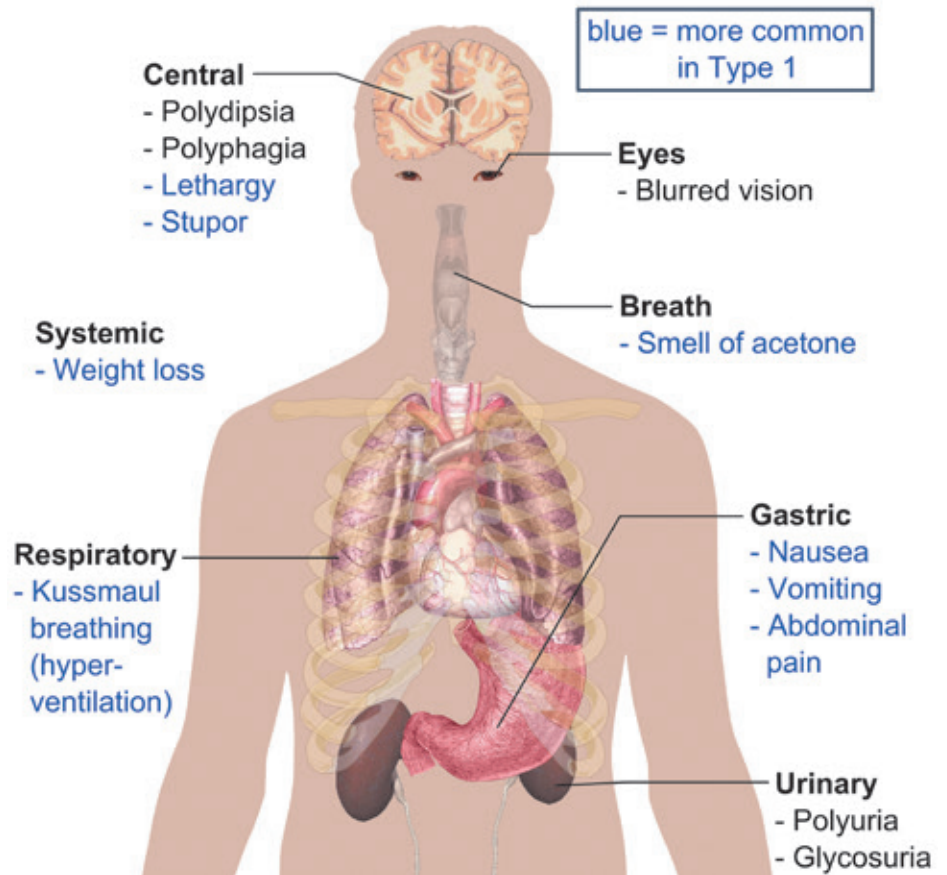
NO CLEAR SYMPTOMS

There are no clear symptoms of prediabetes, so, you may have it and not know it.

Some people with prediabetes may have some of the symptoms of diabetes or even problems from diabetes already. You usually find out that you have prediabetes when being tested for diabetes.

DIABETES SYMPTOMS

- **Hypertension** – common in people with diabetes, which can raise the risk of kidney disease, eye problems, heart attack and stroke
- **Mental health** – uncontrolled diabetes raises the risk of suffering from depression, anxiety and some other mental disorders
- **Hearing loss** – diabetes patients have a higher risk of developing hearing problems
- **Gum disease** – there is a much higher prevalence of gum disease among diabetes patients
- **Gastroparesis** – the muscles of the stomach stop working properly
- **Ketoacidosis** – a combination of ketosis and acidosis; accumulation of ketone bodies and acidity in the blood.
- **Neuropathy** – diabetic neuropathy is a type of nerve damage which can lead to several different problems.
- **HHNS (Hyperosmolar Hyperglycemic Nonketotic Syndrome)** – blood glucose levels shoot up too high, and there are no ketones present in the blood or urine. It is an emergency condition.
- **Nephropathy** – uncontrolled blood pressure can lead to kidney disease
- **PAD (peripheral arterial disease)** – symptoms may include pain in the leg, tingling and sometimes problems walking properly
- **Stroke** – if blood pressure, cholesterol levels, and blood glucose levels are not controlled, the risk of stroke increases significantly
- **Erectile dysfunction** – male impotence.
- **Infections** – people with badly controlled diabetes are much more susceptible to infections
- **Healing of wounds** – cuts and lesions take much longer to heal



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Is your hair color poisoning your body?

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



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

The major benefits of using ammonia free hair color are:

1. NO FUMES

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

2. PROTECTS YOUR SKELTAL SKIN

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

3. AMMONIA CAUSES SINUSITIS PROBLEMS

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

4. AMMONIA-FREE COLORS WORK AT A LOWER PH

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

HEALTHY LIFE SALON

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

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



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

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.



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.



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.

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HOLIDAY WEIGHT GAIN:

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It was not surprising to learn that holiday weight gain ranked second in what people dread most about the holidays. Gaining weight is on the minds of many Americans and 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 a number of claims made in the literature about how much weight people gain during the holidays. Depending on whom you read or listen to about it, the amount of weight gain from Thanksgiving to New Year's Day could range from 1-10 pounds. There are ways to avoid this trap. Try these simple strategies and you can still eat, drink, and be merry without ending up looking as plump as Santa Claus:

HYDRATE:

While rushing around shopping and preparing for guests it's easy to forget to drink plenty of water. Try to get in at least eight glasses a day. Your body easily confuses being hungry and being thirsty, so drinking water regularly will keep you from eating when what you really need is to hydrate.

LIMIT ALCOHOL INTAKE:

Alcohol calories add up fast. A 12-ounce beer has 140 calories and a 5-ounce glass of wine has 100. Plus having too many drinks lowers your inhibitions, so when you imbibe you're likely to eat more. Decide how many drinks you will have at holiday parties beforehand and stick to your decision. Or plan to be the designated driver, and avoid alcohol all together.

EAT SLOWLY:

Research shows that slow eaters tend to eat less food. Try this: Swallow each mouthful before taking the next bite and chat with a table mate in between forkfuls.

BE SELECTIVE, NOT RIGID:

Don't declare all party food off-limits. It's a strategy that's bound to backfire: if you decide to deprive yourself of all treats, you may end up overindulging out of frustration and rebellion. Instead, be

honest with yourself about what foods you're really looking forward to and enjoy those in moderate amounts; at the same time cut back on high-fat and calorie-bomb snacks and fillers you really can live without.

STAY ACTIVE:

Exercise is probably the first thing to fall off your to-do list during the holidays, but it's your best ally in the battle against holiday bulge—as well as holiday stress and depression. Don't worry if you can't maintain your regular workout routine due to travel or other commitments. Simply challenge yourself to add some physical activity to your day.

INCORPORATE 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**.

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UNDERSTANDING DRY EYE AND BLEPHARITIS

Dry eye is believed to be one of the most common ocular conditions in the United States. More common in women, one study estimated the prevalence of dry eye in women ≥ 50 years old was 7.8% or 3.23 million women in the US. Called keratoconjunctivitis-sicca, the underlying pathology is a decreased production of tears by the lacrimal gland. If insufficient tears are produced, the ocular surface begins to dry out. When mild, a simple occasional irritation may be all that is noted by the patient. Moderate dry eye sufferers can develop superficial abrasions of the cornea and conjunctiva. Severe dry eye sufferers can have corneal ulcerations that can cause permanent loss of vision. The treatment of dry eye consists of rebuilding the tear film. Artificial tears provide an immediate increase in the wetness of the cornea, but are time-limited. Medications such as Restasis work by increasing the amount of tears being produced, but they can take several months to achieve therapeutic success. Other treatments involve punctal plugs – these are microscopic tops that are used to effectively cap off the punctum (hole in the lid closer to the nose where your tears naturally drain). Much like putting a plug in a sink, these allow the tears created to remain on the ocular surface longer.

Of course, if tear production is minimal, the effect of plugs will be small. Unfortunately, not all dry eye diagnosis and treatment are that simple. Blepharitis, a distinct entity from dry eye, can have similar symptoms and signs. Blepharitis refers to an inflammation of the eyelid margin. Sometimes, it can mimic dandruff on the eyelashes. In these cases, eyelid scrubs with baby shampoo or tea tree oil shampoos may be helpful. However the most common type of blepharitis affects small glands in the eyelid called meibomian glands. These meibomian glands are responsible for secreting the oil component of the tear film. Though our tears are mostly water-like, there is an oil component to them. Much like oil creates a separate



layer in a pot of water, so too does the oil from the meibomian glands form a layer of the natural tear. In severe forms of blepharitis, these glands can become dysfunctional, leading to an absence of oil. In cases such as these, the patient's tears evaporate rapidly and, despite producing enough tears and not having "dry eye", experience the exact same symptoms. In these cases, treatment is targeting more at improving function of the meibomian glands.

While there is no complete cure for all forms of dry eye, proper identification of the underlying cause is critical to resolving symptoms. While dry eye and blepharitis contribute significantly to ocular discomfort, there are many other causes. Evaluation with an eye professional is always recommended to uncover these causes. In most cases, early treatment of these findings is much simpler than treating later on.

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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Developing Discipline



Here’s a question for you: What is one thing in your life that you are not doing, that if you started doing on a regular basis would make a tremendous positive difference in your life?

Here’s a follow-up question: **WHY ARE YOU NOT DOING IT?**

Answer: most of us are not doing it because we lack discipline.

In ancient times there was once a king named Solomon. The Bible says that he was the wisest man who ever lived. People would come from miles to hear his wisdom and we are fortunate because many of his wisdom is collected in the book of Proverbs in the Old Testament.

In Proverbs 28:25 Solomon says, “A person without self-control is like a house with its doors and windows knocked out.” Discipline is pretty important, huh?

You see this virtue of discipline touches every fiber of our lives. Discipline is the indispensable tool to making your life work: our life, our health, our happiness, our wealth, our family life, our success is all rooted in our discipline. Discipline helps us to get to where we want to go.

You ask any great athlete and they will tell you about the importance of discipline. You ask any successful business man or woman and they will tell you about the importance of discipline. You ask any accomplished musician, actor, writer, salesperson or leader and they will tell you about the importance of discipline.

Spiritually speaking, the same is true: our relationship with God is largely determined by our discipline. You ask any godly man or godly woman and

they will tell you about the importance of discipline. Spiritual discipline is the habit of making wise decisions and then living in alignment with them. Our behavior needs to be in alignment with our thinking and that takes discipline.

Prov. 10:17 says, “*People who accept discipline are on the pathway to life, but those who ignore correction will go astray.*” NLT

Here are three “Disciplines of Being Disciplined”.

1. Persistence - “Never Give Up”

Prov. 12:24 “Work hard and become a leader; be lazy and become a slave.” Discipline always starts from within; we grow and develop our self-discipline by growing and changing our attitude towards it.

2. Advance Decision Making - “Say No Now”

Prov. 13:16 says, “A wise man thinks ahead, a fool doesn’t and even brags about it.” Be prepared in advance to make the right choices. Don’t wait until it’s too late.

3. Delayed Gratification – “Putting Pain before Pleasure”

You do the difficult now in order to enjoy the benefits later. The Apostle Paul reminds us that, “No discipline is enjoyable while it is happening--it is painful! But afterward there will be a quiet harvest of right living for those who are trained in this way.” Heb. 12:11 NLT

So... let me ask you: What is one thing in your life that you are not doing, that if you started doing on a regular basis would make a tremendous positive difference in your life? And why are you not doing it?

Dr. Ray Underwood

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