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October 2019

North Palm Beach Edition - Monthly



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YOU AREN'T ALONE**

**WHAT CAN YOU DO FOR  
CELLULITE AND STRETCH MARK  
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**RETINAL TEAR AND  
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# SCARED OF LOSING YOUR HAIR? YOU AREN'T ALONE

By Alan J. Bauman, MD, ABHRS



**H**air loss is commonly listed among the most feared symptoms of aging. Men and women are often so attached to their locks that they will go to great lengths to keep it for as long as possible. While you may find yourself one of the lucky ones who manage to keep a healthy head of hair, it is more likely that you'll join the more than 80 million men and women in the U.S. suffering from hair loss.

## 5 SCARY HAIR LOSS TRUTHS

1. The use of Minoxidil is FDA-approved for hair regrowth and has proven science behind it but the reality is it doesn't work for everyone. In fact, over-the-counter minoxidil may only work well in about 35 percent of patients, according to medical studies, meaning there is a 65 percent chance standard over-the-counter minoxidil, like Rogaine, may not help you. Some patients require a specially formulated, compounded prescription minoxidil solution (like Formula 82M) for optimal results.
2. By the time hair loss becomes noticeable to the naked eye, about 50 percent of the hair follicles may have already been lost. The earlier patients can get started on preventive or restorative therapies, the better their odds are for retaining a full and healthy hairline and head of hair.
3. According to the American Hair Loss Association, by the age of 35, approximately one-third of men will experience some degree of hair loss; and by the age of 50, 50% of men will have significantly thinning hair.

As a man ages, the risk of losing hair increases, and is proportional to age: 60% in 60s, 70% in 70s, and so on.

4. Roughly half of all women over the age of 40 suffer from some form of hair loss. That's right - half. While most people tend to think of hair loss as a man's problem, the reality is that women are almost just as likely as men to lose hair. It's just less noticeable from afar because it happens more diffusely.

5. Medications, laser therapy, PRP, nutritional, etc. can help make hair follicles grow thicker healthier hair, but once the follicle is dead and gone, the only option for restoring hair in that area is a hair transplant.

## IS "VAMPIRE PRP" THE ANSWER TO YOUR HAIR LOSS?

While it may sound like something out of a horror story, one of the most promising tools to treating hair is — your blood. While this may conjure up unsettling images of vampires, the treatment is actually simple, quick and highly effective.

How exactly does "vampire" therapy breathe new life into failing follicles, and is it right for you? Platelet-rich plasma (PRP) therapy, also commonly referred to as "Vampire PRP," is one of the most promising cell therapy treatments to become available for hair loss sufferers in recent years.

Following a simple blood-draw, the patient's blood is spun in a special centrifuge with specific kits designed to separate and concentrate blood platelets, producing the high-quality PRP — a powerful growth factor "cocktail." Once activated, platelets release powerful molecules, which have profound biologic regenerative effects on the hair follicles and skin. Under comfortable local anesthesia, this powerful cocktail of growth factors, cytokines and other proteins is injected into the area of the scalp where weak hair follicles exist. PRP may be enhanced through the use of placental extracellular matrix (ECM) called BioD or another ECM from dried porcine bladder called ACell.

PRP has become one of the most exciting recent breakthroughs in hair restoration, and is not only showing positive results as a stand-alone treatment, it has proven to be a valuable tool during hair transplantation as well. During the transplant



Before and 12 months after PRP+ECM by Dr. Alan Bauman



Before and 12 months after PRP+ECM by Dr. Alan Bauman

process, PRP has been shown to strengthen non-transplanted hair, minimize donor scarring and accelerate wound healing. In addition, PRP has been reported by some hair transplant surgeons to improve graft survival.

In addition to its effectiveness in treating certain types of hair loss, a growing number of patients are drawn to PRP because of its quick and non-invasive nature. Performed correctly, this virtually painless outpatient procedure takes about one hour and requires no downtime for patients, which means you could literally have it performed during lunchtime. Mild soreness or swelling, if any, resolves in less than a day and when administered correctly and improved hair growth may be measured in a matter of weeks.

#### EARLY INTERVENTION

The biggest takeaway should be that early intervention is the key to preventing and managing hair loss. Once you understand the cause of your hair loss, you need to determine the best way to stop losing more hair, enhance the hair you have and restore the hair you've lost. For most patients, this means using a combination, or 'multi-therapy' approach: non-invasive treatments to protect the hair you have and hair transplantation to restore the hair you've lost. Some patients might accomplish their goals using only non-invasive treatments.

For more information PRP, or other effective treatments for hair loss, please visit

[www.baumanmedical.com](http://www.baumanmedical.com) or call 561-220-3480

### MORE SCARY STATS ON HAIR LOSS

- It's estimated that approximately 30 million women and as many as 50 million men experience hair loss as a direct result of their genetic make-up.
- According to the American Hair Loss Association, two-thirds of men will begin to see their locks lose some of their luster by age 35.
- By 50, about 85 percent of men will have experienced a significant amount of thinning.
- The American Hair Loss Association estimates that about 25 percent of men who are affected by the condition begin to see the first signs of hair loss before age 21.
- Women make up nearly 40 percent of American hair loss sufferers.
- After menopause, women experience hair loss at almost the same rate as men.

### About Dr. Alan J. Bauman



#### Alan J. Bauman, MD, ABHRS, IAHRs Hair Loss Expert

Dr. Alan J. Bauman is the Founder and Medical Director of Bauman Medical Group in Boca Raton, Florida. Since 1997, he has treated over 20,000 hair loss patients and performed over 9000 hair transplant procedures. An international lecturer and frequent faculty member of major medical conferences, Dr. Bauman was recently named one of "10 CEOs Transforming Healthcare in America" in Forbes.

His 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.

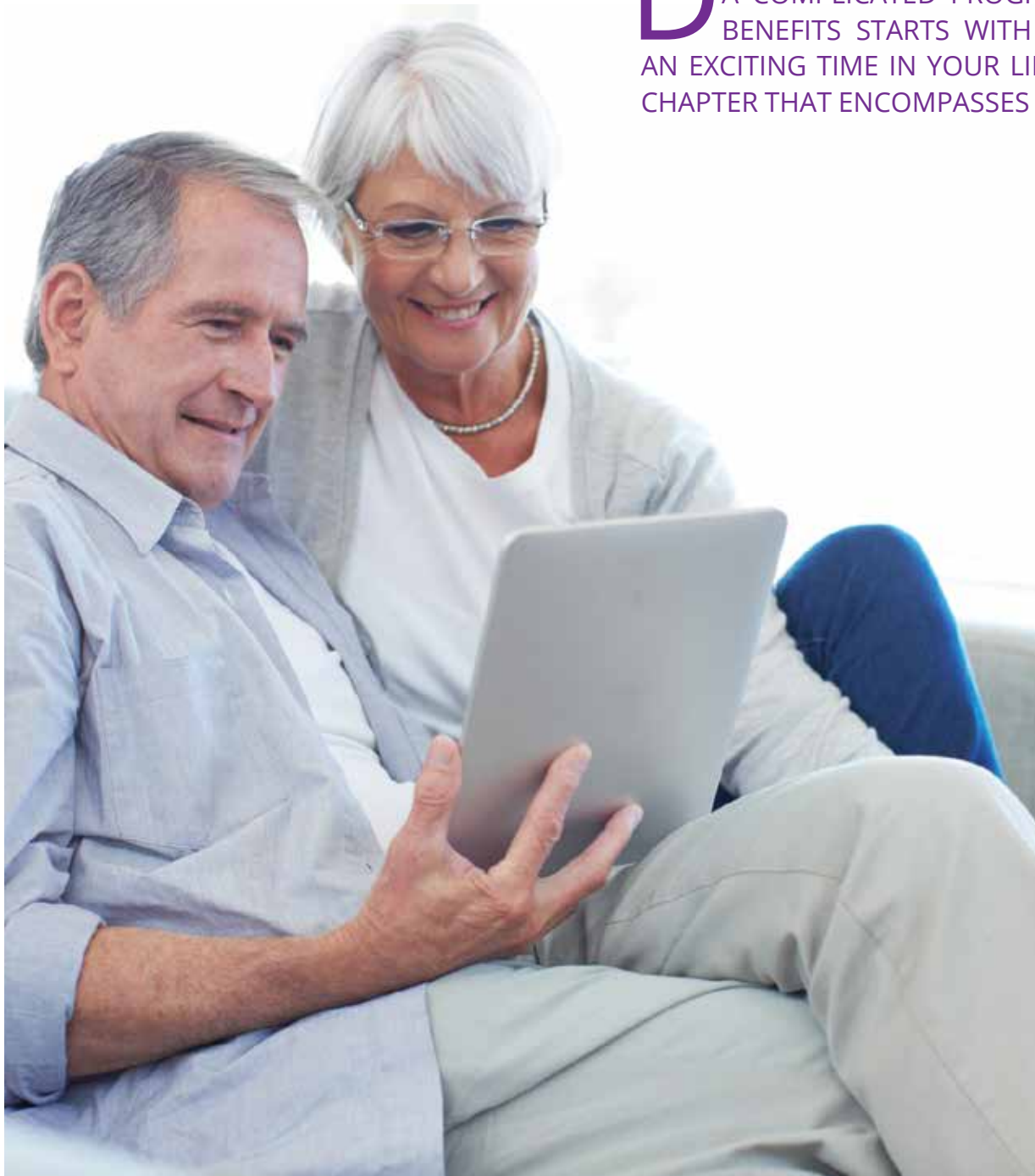


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# Navigating the Medicare Puzzle

**D**OES MEDICARE CONFUSE YOU? YOU ARE NOT ALONE. MEDICARE IS A COMPLICATED PROGRAM. WISELY MANAGING YOUR MEDICARE BENEFITS STARTS WITH UNDERSTANDING THE FACTS. AGE 65 IS AN EXCITING TIME IN YOUR LIFE. IT'S THE BEGINNING OF A WHOLE NEW CHAPTER THAT ENCOMPASSES THE WHOLE YOU (BODY, MIND AND SPIRIT).



Aetna Medicare is more than a typical insurer; we are a health company and we are devoted to helping you realize your health ambitions, big and small. We hope to join you in your health journey by turning your ambitions into achievements so you can age actively.

#### **HOW DO YOU KNOW YOU'RE GETTING THE BEST ADVICE?**

Guidance and support go a long way towards achieving your best health. That's why Aetna representatives help simplify Medicare and connect you to the right coverage, resources and care.

#### **WHAT DO I NEED TO KNOW ABOUT MEDICARE?**

Medicare is a sophisticated system, but maneuvering your way through the maze is the tricky part. You'll want to have the best coverage based on what your income will allow.

#### **MEDICARE HAS SEVERAL PARTS:**

- Part A (hospital)
- Part B (physician & out-patient services)
- Part C (Medicare Advantage Plan)
- Part D (prescription drug coverage)

Because (Original) Medicare only covers approximately 80% of Part B expenses, most individuals will need to enroll in supplemental coverage to cover the cost associated with outpatient services. We understand that a total





approach to health and wellness may be different for each of our members. That's why we offer a choice of Medicare Advantage, Medicare Supplement and Prescription Drug Plans (PDP) for supporting your unique health ambitions.

Having the right amount of coverage is key to taking care of the whole you. That's why we offer Medicare Advantage plans that cover your doctors (Part B), hospitalization (Part A) and prescription drugs (Part D) in one simple plan – some with added benefits for dental, vision care and fitness. Medicare Advantage includes PPO & HMO plans, which have co-pays or deductibles instead of the 20% balance that Medicare does not cover. The benefits depend upon the plan you select.

A Medicare Supplement plan (sometimes called, MediGap) may help protect your savings and peace of mind. Aetna Medicare Supplement plans are designed to fill the coverage gaps left by Original Medicare and place a firm limit on how much you pay each year. One of the benefits of pairing a Medicare supplement insurance plan with Medicare is the flexibility. You can use any doctor or hospital that accepts Medicare, and a network does not limit you. We have over

10 plans to choose from – to ensure you get the coverage you need, while minimizing out-of-pocket costs.

If you do choose a Medicare Supplement, it is important to add an additional PDP to cover your Prescriptions. Medicare Supplement plans do not include prescription drug coverage.

Sometimes feeling your best requires the right combination of prescription drugs. Since Medicare has no coverage for Part D, Aetna Medicare has a range of PDPs to support your health ambitions. They include a 60,000-strong pharmacy network. And, with a broad list of covered drugs – changes are good yours are on it.

#### HOW DO I FIND OUT MORE?

At Aetna Medicare, we understand the more you learn the more you know. In fact, Aetna has a legacy of caring for the whole person, providing care, trust and access to Medicare coverage since 1966. And, Aetna representatives advocate for our members' best health by helping them get the most from their benefits, building trust and always providing a clear path to care.



**Lisa Sachs**

Lisa Sachs is a licensed Field Sales Representative in Palm Beach County and has been a proud Aetna employee for ten years. She loves working with the senior community and is passionately dedicated to her clients. Lisa assists people with Medicare parts A and B, with enrollment in the HMO, PPO, POS and SNP (special needs plans for those with Medicaid) offered by Aetna. Her duties don't stop there though as she also specializes and assists members to see if they possibly qualify for additional government programs offered by the state of Florida such as Medicaid and the Extra Help program through Social Security. She believes in always being as available as possible and insists upon the highest level of customer service. "Sometimes just picking up your phone and sincerely showing that you care, is all someone might need at the moment", she says. "She makes a point to do just that by keeping her phone close to her at all times and even taking calls on weekends and holidays. "I feel the need to treat my clients the way I would want someone to treat my Mother or Father. Medicare can be a bit confusing and she prides herself on taking as much time as needed to fully explain the benefits of each plan and the enrollment process. For a phone or in house appointment Lisa can be reached at your convenience seven days a week at **(561) 267-1186**

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When I combine carboxytherapy with a series of “Morpheus8”, a radiofrequency/microneedling device, results are remarkable. The science behind “Morpheus8” is that the small needles create small injuries in the layer of the skin that is responsible for repair. This means it stimulates new collagen production. Additionally, radiofrequency energy is delivered to tighten skin and also stimulate collagen. So here you have 3 technologies carboxytherapy, radiofrequency and microneedling that stimulate collagen production, break up scar tissue and fibrous bands, therefore improving pesky cellulite, stretch-marks and scars significantly.

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**Medical Director, Daniela Dadurian M.D.**  
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Daniela Dadurian, M.D. received her medical degree from the University of Miami School of Medicine. She is certified by the Board of Anti-Aging & Regenerative Medicine and the Board of Laser Surgery. Dr. Dadurian has also completed a fellowship in Stem Cell Therapy by the American Board of Anti-Aging Medicine. She is a member of the International Peptide Society, the American Academy of Anti-Aging Medicine and the Age Management Medicine Group. Dr. Dadurian is the medical director of several medical spa and wellness centers in palm beach county with locations in West Palm Beach and on the island of Palm Beach. She is a leading expert in anti-aging & aesthetic medicine. Her state of the art facilities offer an array of anti-aging, functional medicine, cosmetic and laser therapies.

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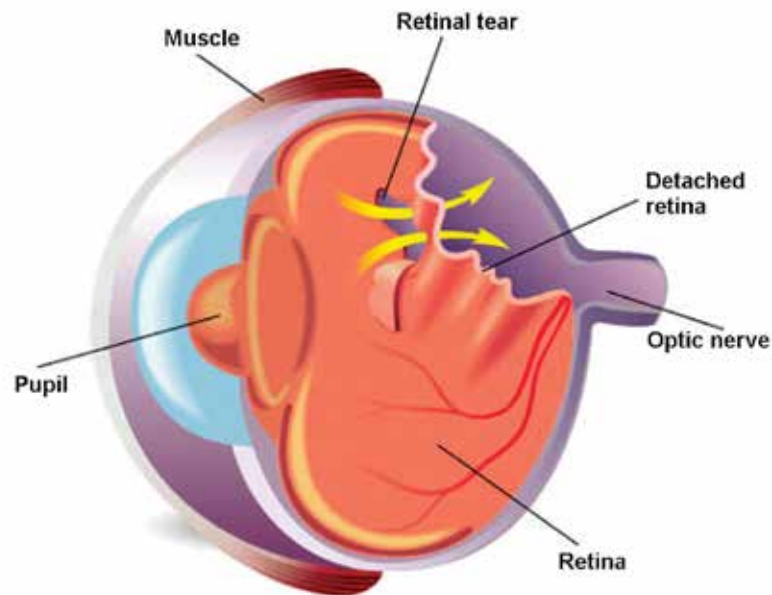
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# RETINAL TEAR AND RETINAL DETACHMENT

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

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



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

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

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

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

## TORN OR DETACHED RETINA SYMPTOMS

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

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

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

## WHO IS AT RISK FOR A TORN OR DETACHED RETINA?

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

- Nearsightedness;
- Previous cataract surgery;
- Glaucoma;

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

## TORN OR DETACHED RETINA DIAGNOSIS

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

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

## TORN OR DETACHED RETINA TREATMENT

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

**TORN RETINA SURGERY**

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

**Laser surgery (photocoagulation)**

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

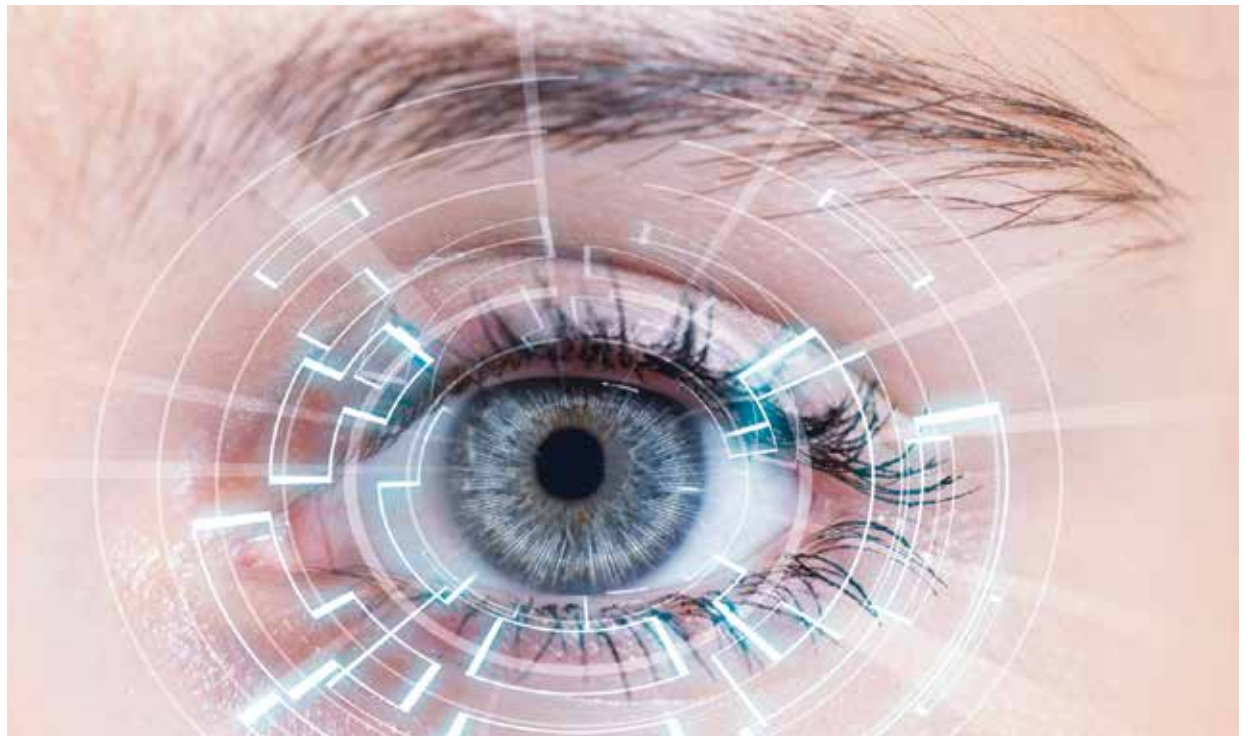
**Detached retina surgery**

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

**Vitrectomy**

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

Sometimes an oil bubble is used (instead of a gas bubble) to keep the retina in place. Your body’s own fluids will gradually replace a gas bubble.



An oil bubble will need to be removed from the eye at a later date with another surgical procedure. Sometimes vitrectomy is combined with a scleral buckle.

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

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

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

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



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**Lauren R. Rosecan**

M.D., Ph.D., F.A.C.S.

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# MORE OPTIONS FOR TREATING BREAST CANCER

Regardless of age, race, or family history, all women – and about 1% of men – have some level of risk for breast cancer. Primary risk factors include age and gender, along with a number of other factors, such as obesity and alcohol use, which can be moderated through healthy lifestyle choices. Today, there are many types of effective treatments for breast cancer, including surgery, chemotherapy, radiation, and hormone therapy. Research is ongoing to bring even more promising treatment options to patients.

## Can Breast Cancer Be Inherited?

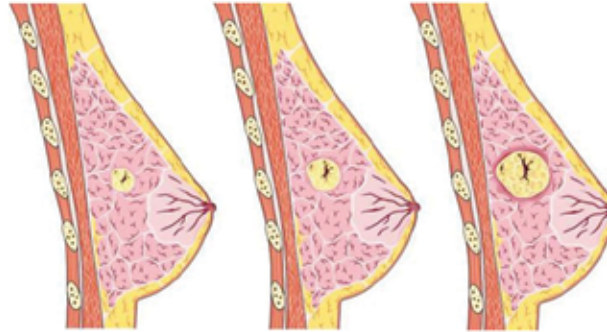
Certain types of breast cancer do seem to run in some families; however, it is important to understand that what is inherited is the abnormal (mutated) gene that could lead to breast cancer, not the cancer itself. The most common genetic risk factors for breast cancer are in women who have changes to the BRCA1 and BRCA2 genes. Women with this inherited gene mutation have up to an 80% chance of developing breast cancer during their lifetimes. If you have a close relative (mother, sister, daughter, etc.) with breast cancer, you should speak with your doctor about genetic testing.

## Early Detection

Identifying any type of cancer at an early stage before it has spread extensively (metastasis) provides a much better outcome for patients. Florida Cancer Specialists' physicians concur with the American Cancer Society's recommendation that women over 40 with no family history of breast cancer should get a mammogram once a year; for women under 40, a clinical breast exam is recommended at least once every three years. In addition, monthly breast self-examinations can be an effective way of discovering any changes in the normal look and feel of the breasts.

## New Findings Offer Guidelines for Chemotherapy

Results of a study released in June 2018 confirmed with better accuracy which patients will benefit from chemotherapy and which will not. It is estimated that, due to this new understanding, about 70,000 breast cancer patients can now safely skip chemotherapy. The study



was published in the *New England Journal of Medicine* (NEJM), and, according to its findings, almost 70 percent of women with early stage breast cancer and an intermediate risk of recurrence can now safely skip chemotherapy after their tumors have been surgically removed.

Over 10,000 patients in the clinical study received a genomic test that estimates the individual risk that cancer will recur. Known as gene expression testing, this assessment helps determine which breast cancer patients are most likely to benefit from chemotherapy following breast surgery.

Those with a high-risk score (above 25) were advised to have chemotherapy along with hormone therapy, which is standard treatment; those with a low-risk score (0 to 10) would still need hormone therapy, but could forgo chemo and avoid its sometimes harsh side effects.

Prior to this study, the group of patients with test results in the intermediate risk range (between 11 to 25) did not have a clear course of action with regard to chemotherapy; however, the study found that within the intermediate-risk group, all women over 50 whose tumors responded to hormone therapy and tested negative for the HER2 gene had no significant benefit by adding chemotherapy and could safely skip it. Chemo did offer some benefit for those 50 and younger who had a recurrence score between 16 and 25.

Florida Cancer Specialists is proud to have participated in this study. Its findings provide more certainty about which patients in the intermediate-risk group need chemotherapy and which do not. This is just one example of the incredible benefit clinical research brings to both current and future cancer patients.

Florida Cancer Specialists treats patients with all types of cancer, and offers a number of services, such as an in-house specialty pharmacy, an in-house pathology lab, and financial counselors at every location, that deliver the most advanced and personalized care in your local community.



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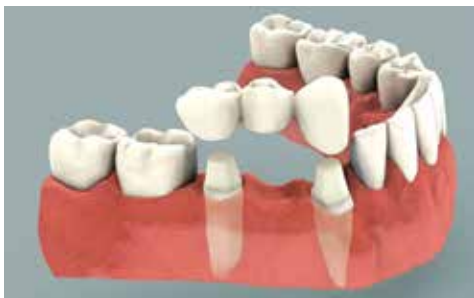
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For more information, visit [FLCancer.com](http://FLCancer.com)

# Replacing Missing Teeth – More Options than You May Think

It is astounding how many individuals live their lives with one or more missing teeth. When asked why they have not replaced their teeth, common answers include fear, cost, embarrassment and pain. What they may not realize is that living without a proper compliment of teeth often leads to malnutrition, excess chewing on the remaining teeth (often causing them to break down even faster), tooth shifting and for many, insecurity related to their smile.



The good news is that there are numerous options to replacing missing teeth, many of which are relatively pain free and often are not astronomically expensive. Actually, costs increase as we attempt to function on the remaining teeth, asking them to carry the load of not only themselves, but of the teeth that have been lost. Overloading the teeth you still have frequently leads to their more rapid demise and the need for more extractions, dental work or tooth replacement.

## OPTIONS:

The first question you must ask yourself is simple, “what do I want?” It does not matter what your friends, significant other or even your mother wants. Some will decide they want a full mouth makeover, while others simply want to have a healthy mouth with proper function. Once you decide the answer to this question, the options ahead of you will fall into place. Although there are numerous treatments available, I will focus on a few commonly chosen ones along with some of their advantages and disadvantages.

## REMOVABLE APPLIANCES (DENTURES OR PARTIAL DENTURES)

One of the oldest treatments that exist to help replace teeth (whether it is one or all of your teeth) is the fabrication of dentures. This treatment is often the least costly, but is also the one with the least patient satisfaction. A mold is made of your mouth and an appliance is provided to you that typically consists of a plastic like material which rests on the remaining teeth and gums. This material supports fake teeth that fill in the spaces where your original teeth are missing. Dentures are a simple and affordable way for you to regain function and chewing ability, but they do not come without problems. Often times they are not stable and will move while you chew and talk. Bulky material in the mouth, change in taste of food and irritation to the gum tissue are also frequent complaints.

## CROWNS AND BRIDGES

Another common treatment is to replace missing teeth with crowns/bridges. Typically, patient satisfaction is very high with this treatment modality as it provides you with “glued in” teeth. Teeth adjacent (on both sides) to the missing ones are prepared to be fitted with dental crowns (also known as a cap). Consecutive crowns or caps can be joined together as one piece (known as a bridge). As the bridge is glued into place on the supporting teeth on either side of the missing ones, this empty space is filled by crowns that appear to be naturally coming out of the gum tissue but in actuality are being supported as part of the bridge connection itself. A great real life comparison is an actual bridge. Typically there is a pillar on either side supporting the bridge and the center part which has no support from beneath only from the sides.

## DENTAL IMPLANTS

To some this sounds very scary when in actuality it can frequently be less invasive than other options. A tooth is comprised of 2 parts, a crown (the part you see and chew with) and the root (the supporting part under the gum). A dental implant is simply a root replacement. This new root can be placed where your old root used to be. After a number of months of healing, a crown can be placed on this new root just like a crown can be placed on a tooth root. This treatment works very well in a situation when a tooth is lost between other teeth. An implant root can be placed with its own crown (a few months later) as opposed to cutting down adjacent teeth to fit a dental bridge.

All of the above treatments (and numerous others) have many variables and need to be determined on a case by case basis. A complete examination is required to help you understand the complexity of your individual situation and the options available to you. Knowing ahead of time what your overall desire is (such as a Hollywood makeover or a simple tooth replacement) will help you narrow down the options best suited to your “want.”

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

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



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

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

*Dr. Cohen uses in-office, state of the art 3D Green 2 CT imaging which offers Hi Resolution 5 Second Low Dose Scans to develop the least invasive dental implant and bone regeneration treatment options. Dr. Cohen and his facility are state certified to perform both IV and Oral Sedation procedures. Botox® and Dermal Fillers are also utilized to enhance patients' cosmetic outcomes.*

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



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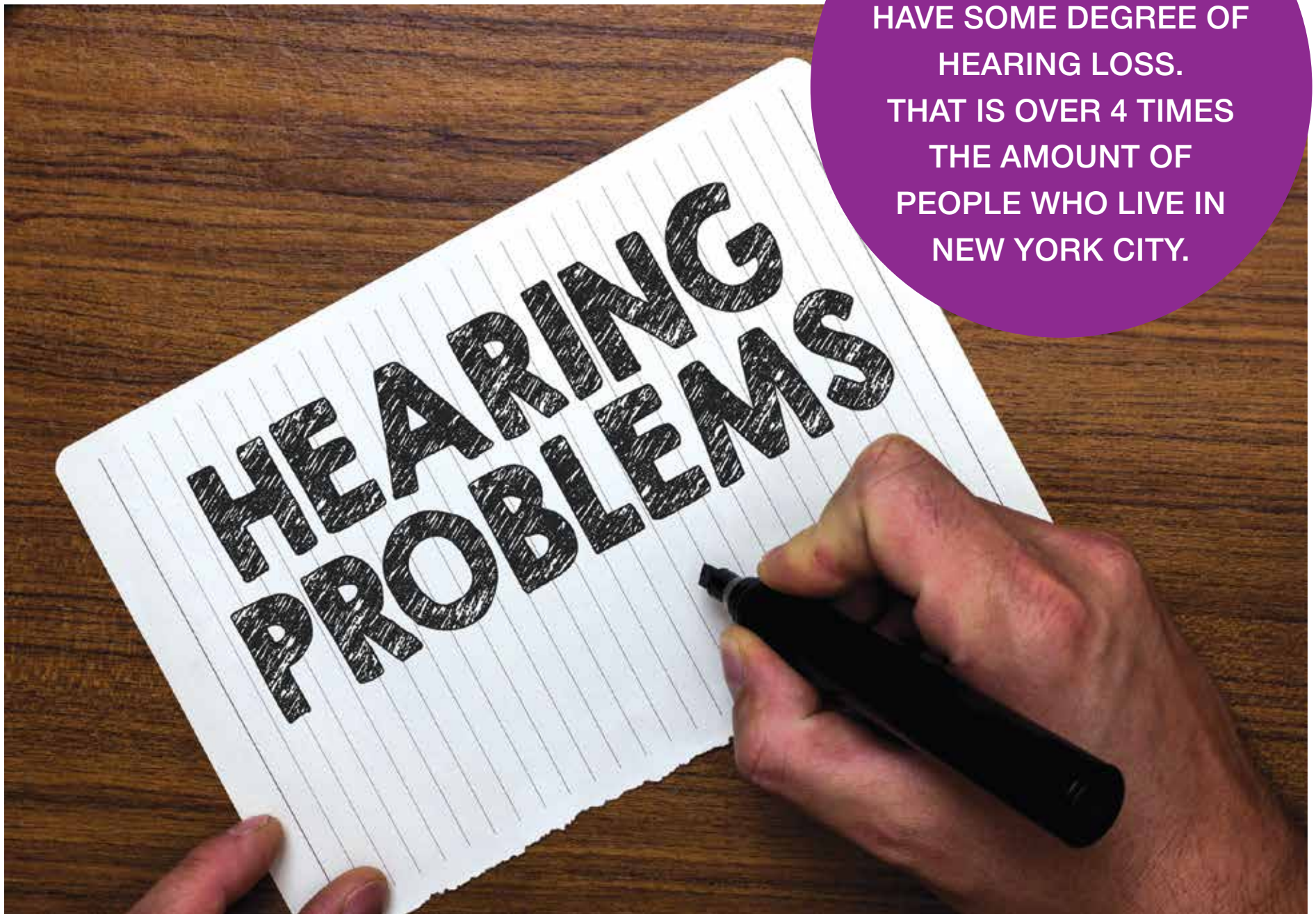
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# OCTOBER IS NATIONAL AUDIOLOGY AWARENESS MONTH

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

OVER 36 MILLION  
AMERICAN ADULTS  
HAVE SOME DEGREE OF  
HEARING LOSS.  
THAT IS OVER 4 TIMES  
THE AMOUNT OF  
PEOPLE WHO LIVE IN  
NEW YORK CITY.







The statistics are shocking and even more so knowing that over half of those 36 million Americans are **under the age of 65**. Hearing loss is an increasing health concern in the USA. Make an appointment with an audiologist this October during **National Audiology Awareness Month**.

“Hearing loss can be caused by exposure to loud noises, family history of hearing loss, trauma, or ear disease; harm to the inner ear, illness and deterioration due to the normal aging process,” explains Dr. Luzon Coveney. The amount of noise Americans are exposed to today plays an important role in the recent increase of hearing loss across the nation. It is no longer just a health concern for seniors.

**Some tell signs of hearing problems are:**

- Trouble hearing conversation in a noisy environment such as restaurants
- Difficulty following along in group conversations
- Asking friends or family members to repeat their words
- Increasing the volume on the television and the sound still not being clear
- Difficulty or inability to hear people talking to you without looking at them
- Withdrawal/isolation from social gatherings
- Difficulty hearing in the workplace

If you think you may have a hearing loss, you need to see a Doctor of Audiology. A hearing evaluation will determine the degree of hearing loss you have and what can be done. Although most hearing loss is permanent, an audiologist can determine the best treatment plan for each patient’s listening needs and lifestyle. It is recommended to bring a companion or loved one to the appointment so they can address any issues they may have with your hearing difficulties.

In celebration of Audiology Awareness Month, Audiology & Hearing Aids of the Palm Beaches is offering complimentary hearing screenings during the month of October!

We at Audiology & Hearing Aids of the Palm Beaches offer at **No Extra Charge**:

- 75 day retraining periods
- 3 year repair warranties
- 3 year loss and damage protection
- 3 years of office visits and service
- Free batteries for the life of their devices
- A home for your hearing healthcare



**Dana Luzon Coveney,  
Au. D., FAAA,  
Doctor of Audiology**

Dr. Dana Luzon Coveney has a Doctorate in Audiology and over 10 years of clinical experience in the field. She has been the clinical director of Audiology & Hearing Aids of the Palm Beaches since 2010. Dr. Luzon Coveney is skilled in diagnosing and treating hearing loss and tinnitus through her expertise which results in better living through better hearing. She is dedicated to providing the finest quality, most advanced diagnostic and treatment services and products in an honest, fair, and patient-focused environment. Dr. Luzon Coveney is heavily involved in community outreach locally and abroad.

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# FACIAL REJUVENATION THROUGH ACUPUNCTURE

**A**cupuncture has been around for centuries, providing the Yin and Yang properties to release the flow of Qi (energy) to pathways and vital organs for peak health and wellness. When the tiny flexible needles are placed strategically in the dermal layer of the face or neck area (depending on your concerns), the stimulation brings notable contour along with brightness and a youthful glow.

You will first have an advanced evaluation to see which channels are blocked in your body that may be exacerbating facial wrinkles, age spots, acne, laxity, dark circles, or other areas of concern. Many times the symptoms that show signs of aging on the face are brought on by blocked energy and inflammatory responses in our internal organs. The acupuncture needles will be placed strategically in specific areas on your face and neck in need of rejuvenation.

**COSMETIC ACUPUNCTURE IS  
AN EFFECTIVE, SAFE, NON SURGICAL TREATMENT  
TO REDUCE THE SIGNS OF AGING.**



The ideal solution to other toxic methods of facial rejuvenation is to utilize the micro-circulation technique through increasing the qi and xue (energy and blood), which creates the youthful luminosity that most people want to achieve. As the flow of energy improves, a greater amount of vitality and blood are circulated into the face, oxygenating, firming and toning the skin to diminish fine lines and improve overall skin and muscle tone.

Cosmetic Acupuncture is an effective, safe, non surgical treatment to reduce the signs of aging. Celebrities and the elite have been getting acupuncture facials for the past 20 plus years now, but even more notable is that the treatment has been growing in popularity by the general population that realizes the toxic free effectiveness of the method. That is why cosmetic acupuncture is on the rise.

**BENEFITS OF  
FACIAL REJUVENATION PROGRAM:**

*Tightens pore, minimizes fine lines, improves muscle tone, and evens facial color and tone by:*

- increasing circulation and oxygenation of the skin
- reducing acne outbreaks
- nourishing the skin for a healthy, natural, more radiant glow
- brightening the skin to reduce dull complexions
- increasing collagen and elastin production
- increasing lymph circulation
- leaving skin feeling refreshed and rejuvenated

In 6000 BC acupuncture originated in China. Instead of needles, at the time they utilized tiny hair thin bones. Cosmetic acupuncture for skin rejuvenating purposes has been the treatment of choice for thousands of years in China. As early as the Sung Dynasty (960AD- 1270AD), acupuncture was performed on the Empress and Emperor's concubines. For centuries, the Chinese have known that beauty radiates from the inside out. If the internal body is nourished and the energy and blood are flowing smoothly, the external body will reveal this radiance.

Several years ago, a study was conducted in the International Journal of Clinical Acupuncture, which reported that among 300 cases treated with Skin Rejuvenating Acupuncture, 90% reported marked effects with one course of treatment. The results included: the skin becoming more delicate and fair, improvement of elasticity of facial muscles and leveling of wrinkles, a bright complexion, and overall rejuvenation.

Trusting your delicate face in the hands of a practitioner can be intimidating, that's why when you choose to have cosmetic acupuncture, its imperative to see an experienced licensed Acupuncture Physician and Doctor of Oriental Medicine like Dr. Meng.

CALL  
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MEDICAL CENTER**  
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For over 20 years, Dr. Yanhong Meng has been practicing acupuncture. She is a licensed Acupuncture Physician and Doctor of Oriental Medicine. Dr. Meng graduated from Shan Dong Traditional Chinese Medicine University in 1996. In 1996, Dr. Meng began practicing at the Shan Dong Lai Wu Traditional Chinese Medicine Hospital, and for three years worked under the direct guidance of Dr. Gu Dao Xia, the inventor of Acupuncture Point Nutritional Injection Therapy.

Dr. Meng attended Shen Yang Western University from 1999-2001, where she deepened her knowledge of Traditional Chinese Medicine (TCM) Theory and Practical application in conjunction with Western Medicine. In 2002, Dr. Meng completed a rigorous clinical rotation at the Beijing Traditional Chinese Medicine University.

Also, from 2002-2004, Dr. Meng operated a TCM Clinic in Dublin, Ireland. After moving to the United States, Dr. Meng graduated with honors from The Atlantic Institute of Oriental Medicine in 2007, where she received her Masters in Oriental Medicine. Since 2007 she has owned and operated Meng's Acupuncture Medical Center in Palm Beach Gardens, Florida.

**If you want to look younger, please call  
Meng's Acupuncture Medical Center today at  
(561) 656-0717**

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

**LOSE WEIGHT,  
REDUCE STRESS,  
ACHIEVE OPTIMUM HEALTH**

Call Today for Details and Schedule Your **FREE  
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# Does Your Child Have an ANXIETY DISORDER?

## Neurofeedback Helps Anxiety in Children without Medication

By Michael Cohen  
Director and Chief of Neurotechnology  
Center for Brain Training



**It's a startling fact:**  
**One in every 10 children has an anxiety disorder, and many of those children are being given powerful drugs to try to treat it.**

### **Anxious children are different from kids with normal fears**

Anxiety and fear are a normal state of mind when there's a true threat or danger. For most people, when the danger has passed, the mind goes back into a calm state.

An anxious child's brain, however gets stuck on "high alert," preventing them from concentrating, trusting people or feeling safe.

Normal kids might get anxious after seeing a scary movie or being in a thunderstorm, but they get over it quickly and resume normal activities. Anxious children (and adults, for that matter) feel very unsafe in the world – even when in a safe environment. They're often socially withdrawn, scared of new experiences and perceive negative situations as catastrophic. Comforting doesn't work because anxiety is a problem in their brain.

Younger children suffering from anxiety frequently have stomachaches and sleep problems. They struggle in school. Older children may also do poorly in school and be more likely to have serious behavioral and sleep issues.

### **Misdiagnosis and powerful drugs**

Many children with anxiety disorders are misdiagnosed with ADHD and given medications that aren't appropriate. Others are properly diagnosed and given drugs like anti-depressants or even more serious drugs that don't address the root of the problem: inability to turn off the fear or anxiety circuits in their head.

Medications can artificially force a child's brain to be calmer, but when the medication wears off, nothing has changed. Furthermore, they have side effects, and no one knows for sure what certain prescription medications do to a child's developing brain.

### **The neurofeedback solution**

With medications not the answer, more and more parents are opting out of drug therapy in favor of neurofeedback. This proven non-drug therapy reduces anxiety by training the part of the brain

that impacts a person's ability to be calm (usually the temporal lobe). It gently encourages the brain to change itself and to operate – naturally – in a calmer, more functional way.

**Success stories**

We've treated hundreds of kids at the Center for Brain Training using neurofeedback, and we've seen many of them experience significant improvements in their lives. Here are stories of three of them:

**An eight-year-old boy had struggled with going to sleep and staying asleep for years. He woke his mother up several times during the night and wanted her to sit up with him until he fell asleep. They were both exhausted. After just one neurofeedback session he slept through the night for six months. A thunderstorm at that point caused a recurrence of the sleep issues, which were significantly reduced with a second session.**

**A 13-year-old girl was so anxious and nervous at school that her mother was called almost daily to come get her. This interfered with the mother's work and was stressful to the entire family. After six neurofeedback sessions the number of calls from school was significantly reduced, and the girl herself noticed she was less nervous. By 13 sessions, the problems had almost completely subsided. When the girl did call from school, she was able to be comforted over the phone and resume her classes. After several more sessions, the calls stopped. The little girl learned she was "OK" on her own and was no longer easily upset. She began doing better in school and the family was able to function more normally.**

**A 10-year-old girl needed to be in complete control at all times around other children. She became agitated when she wasn't. It was a big turnoff to her peers. After 20 neurofeedback sessions she stopped needing to be in control. She became more relaxed and flexible and made friends for the first time.**

Did you know that many children with an anxiety disorder come by it "naturally?" A child who has a parent with an anxiety disorder has a greater chance of developing one. It could have to do with a genetic disposition or the fact that anxious parents accidentally "teach" anxious feelings and behaviors through example. It's common for us at the Center for Brain Training to work with parents and their children at the same time to help reduce anxiety in both.



**Learn more about neurofeedback at our free informational seminar**  
**Wednesday, October 16, 6-7:30 p.m.**  
 Call **561-377-0124** for details or visit **www.CenterForBrain.com**

**What is neurofeedback?**

Neurofeedback is one of the most powerful technologies in the world for reducing anxiety. It helps the brain get "unstuck" from high gear and operate the way it should when going about day-to-day living.

Neurofeedback takes advantage of "neuroplasticity," the brain's ability to change itself. It teaches the brain another way to respond to stimuli like everyday triggers.

Most children enjoy neurofeedback training because it involves playing simple video games that entertain them while helping their brains change.

A computer analyzes the brainwaves, then "talks back" to the brain using customized sounds and images. This feedback encourages positive brain activity such as relaxation, focus and attention and discourages the type of brain activity that causes anxiety. With repeated training, the brain learns to slip more easily back into a state of calm.

**Have you been seriously considering getting help for your anxious child? DON'T WAIT ONE MORE DAY!**  
**Call NOW for your free consultation 561-744-7616**



**Michael Cohen**  
 Director and Chief of Neurotechnology

Mike is one of the leading experts in brain biofeedback. For more than 20 years he has helped children and adults feel better who suffer with a wide range of problems including ADHD, anxiety, insomnia, and learning and processing issues. He has taught neurofeedback to over 2,500 healthcare professionals, including medical doctors, all over the U.S. and the world.



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# KNEE PAIN

Doesn't Mean You  
Need Surgery—  
**Alternative Therapy  
Approved by the FDA  
for Knee Arthritis Relief**

**D**O YOU HAVE KNEE PAIN? Does it keep you from certain activities? Do you take medication for knee pain? Do you have knee pain after exercise? Do you have difficulty going up and downstairs? Are you considering knee replacement surgery? Have you tried everything to get rid of knee pain without success? If you have answered yes to any of these questions you need to know your options.



Currently, an estimated 27 million people suffer from knee osteoarthritis, making it one of the most common causes of disability in the U.S. It is estimated by the year 2030, 72 million Americans will be at high risk for osteoarthritis. Patients with chronic joint pain often think their only option is surgery. Knee replacement surgery is indeed necessary for some people; however, there is a less invasive approach to relieving knee pain and potentially avoid surgery.

### Causes of knee osteoarthritis

- Joint misalignment
- Postural imbalance
- Trauma
- Repetitive strain or overuse
- Abnormal gait pattern
- Age
- Previous knee injury
- Overweight
- Improper joint alignment

If you've been suffering from constant or intermittent knee pain that just won't go away no matter how much ibuprofen you take—there is another option. With knee arthritis, the cartilage breaks down and wears away leaving the bones to rub together causing pain, swelling, and stiffness, and limited range of motion in affected joints.

The American Academy of Rheumatology recommends the use of Supartz for one potential treatment option for osteoarthritis of the knee. Supartz has been shown to be effective for thousands of individuals relieving their knee pain without surgery.

At the Advanced Spine & Joint Institute, their goal is to give you the best chance of preventing knee replacement surgery, which is what arthritis frequently involves if left unprotected or untreated.

With knee replacement surgery, once done, there is no turning back to a more conservative approach. A total knee replacement is a very extreme measure to take without considering all of your options for a condition as common as knee arthritis.

Supartz is a gel like substance similar to the synovial fluid in your knees, which reduces inflammation and increases cushioning and lubrication of your knees immediately. Supartz is a purified compound, which is found naturally. This treatment protocol is used to treat the symptoms associated with arthritis.

Countless numbers of patients have experienced successful results with the Supartz treatment and are now experiencing life once again without knee pain.



*"I was told I was bone on bone and needed replacement surgery. Knees are very important to me, as I am a dancer. I decided to address the problems and began injections. What a difference this is made in my life. Words cannot express how grateful I am for all that has been given back to me. Icing on the cake is I'm getting triple twirls (I'm 82 years young), which I have not done in years I highly recommend this treatment." – Patricia M.*

### Why do knee injections often fail? What is different about the Supartz procedure?

- They perform blind injections without image guidance
- They use antiquated equipment from as far back as 2001, even in some of the largest hospitals.
- They use Cortisone, which can have side effects

Most blind injections result in needle misplacement. With this much inaccuracy, it's no wonder most people never find relief. When properly injected into the knees, supartz helps to cushion and lubricate the knee joint, nurturing the cartilage for natural pain management. This solution helps to restore normal function to the knee, including its natural lubrication. Patients experience less pain and are able to enjoy a more active lifestyle.

The Advanced Spine & Joint Institute offers the latest therapies and technology to relieve joint pain more effectively without drugs or painful surgery. Their protocol system offers many

people a safe and straightforward technique to relieve chronic joint pain. They offer a no-cost, no-obligation consultation where you can get all of your questions answered in a warm and friendly environment. Once complete, you will know exactly what your treatment options will be for your specific knee pain issues.

### Benefits

- No surgery
- Little to no recovery time
- Immediate reduction in pain
- Return to normal activities shortly after treatment
- Accepted by most major insurances and Medicare

With so many people suffering from knee arthritis, the demand for this procedure has been overwhelming. Therefore, the Advanced Spine & Joint Institute had to limit the number of no-cost, no-obligation consultations. Please call **(561) 721-0492** now to confirm your appointment. To learn more, please visit their website at [www.advancedspineandjoint.com](http://www.advancedspineandjoint.com).

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&  
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**ReGAIN Your Sexual Vitality with  
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**the Gold Standard in WAVE Therapy for ED**

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Simply Men's Health REJUVAnation Medical Center is a leader and pioneer in the field of men's sexual health. They use exclusive, patented, state-of-the-art equipment RejuvaWAVE® (acoustic-pressure wave) combined with RejuvaEnhancement (umbilical stem-cell procedure) to reverse and cure the underlying cause of erectile dysfunction. No pills. No needles. No surgery.



## RejuvaWAVE®

only available at Simply Men's Health

- 100% SAFE
- Non-invasive
- No Down Time
- No Side Effects
- 10-15 minutes per session
- Over 80% Patient Satisfaction

## RejuvaEnhancement® Amniotic Stem Cells



- REPAIR
- REGENERATE
- RESTORE

These procedures naturally improve blood flow to the penis by stimulating the growth of new blood vessels and opening up blood vessels by removing micro-plaque. They optimize sexual performance, enhance size and fullness of erections, increase sensation, and reverse ED and Peyronie's Disease. Patients have seen incredible results in a very short amount of time.

*"I'm in my '70s and have diabetes, bypass surgery and prostate cancer," says one patient. "I had tried everything and thought my sex life was over until I came to Simply Men's Health. The results have been amazing. They have restored my ability to enjoy a spontaneous sex life again. I feel like Superman!"*

Owner of Simply Men's Health REJUVAnation Medical Center, Joan Katz, M.D., a Harvard-trained



physician in preventive and anti-aging medicine adds, "Simply Men's Health was designed to be a haven for men to confidentially restore men's sexual vitality. With our exclusive RejuvaWAVE®, we reverse the underlying cause and restore spontaneity."

All exams and procedures are done by male physicians and medical providers. Men of all ages can benefit from the treatments exclusively found at Simply Men's Health, including younger men who want to enhance size, optimize their sexual performance and improve their sexual health.

The medical center, specializing in regenerative medicine, also treats and cures other common issues, including hair loss and low testosterone, and uses stem cell therapies for anti-aging, sports injuries, knee pain, arthritis and chronic conditions.

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with TubcuT®”*

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is the only tub to shower conversion that can be reversed! If you save the cutout section of the tub, they can easily restore your bathtub to its original condition if needed.

The TubcuT® changes lives, but many dismiss it as something only for the elderly. However, there is another class of customer that it suits just as well, those with health and mobility issues. People with multiple sclerosis, Parkinson’s disease, arthritis, fibromyalgia, muscular dystrophy, cerebral palsy to name a few, will benefit significantly from The TubcuT®.

For accident victims, anyone in chronic pain, people with knee or hip replacements or any neuro-muscular disease, the TubcuT® can be a life-changing product. To find out more, contact them today!



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# POT CROCK?

## Marijuana has inspired many myths. Here's the lowdown on what's fact and what's fiction.

By Craig Tomashoff

**S**it too close to the TV and you'll ruin your eyesight. Go swimming less than an hour after eating and you'll cramp up. Make a weird face and it'll stick like that. Whether they were meant to terrify us or soothe us, these urban legends and many more have long been a part of our lives. So it should come as no surprise that a mythology has also sprung up around cannabis. So many questionable myths have hung around for so long, it's hard to know what's true and what are remnants from the Reefer Madness era. To clear things up, we asked two experts in the field—Emma Chasen, veteran cannabis educator and industry consultant; and Dr. Adie Rae, co-founder of Habu Health, one of the country's leading cannabis research groups—to help separate weed fact from fiction.



### MARIJUANA REDUCES SEX DRIVE

**FALSE** In fact, while too high a dose of cannabis could lead to conditions that aren't exactly turn-ons, like drowsiness, anxiety, and/or paranoia, the appropriate dose might actually improve your sex life. "For females with low libido, cannabis appears to be a viable therapy to enhance it," says Rae. Chasen agrees that it can up your sex drive because marijuana "increases blood flow and there are endocannabinoid receptors densely populated in our reproductive systems, increasing sensation and often diminishing pain."

### MARIJUANA STAYS IN YOUR SYSTEM FOR 30 DAYS

**TRUE** Cannabinoids are lipids, which are the same thing that your fat tissue is made of. This means that when you ingest cannabis, its molecules get stored in your body's fat tissue. Rae says that those who use cannabis more than twice a week can expect to have detectable levels of it in their urine for up to 30 days, although there is a lot of variability, depending on a person's body metabolism and physiology.

### MARIJUANA IS HIGHLY ADDICTIVE

**MOSTLY FALSE** If you want to talk about substances that encourage addiction, Rae suggests discussing nicotine or alcohol instead, since they are the real offenders. Chasen does point out that to be technically addictive, a substance must produce a measurable withdrawal and tolerance—which cannabis does. "Withdrawal symptoms may leave you grumpy, in some pain and not able to sleep, but they definitely won't kill you. And while tolerance can be developed to the psychoactivity of THC, tolerance to the benefits of THC cannot. Therefore, THC can be considered addictive but it's not addiction that will likely ruin your life."

### MARIJUANA CAUSES SHORT-TERM MEMORY LOSS

**SOMEWHAT TRUE** According to Rae, "THC impairs some kinds of cognitive function but not others." However, she adds that THC's impact on memory formation is "largely dose-dependent." The effects of low doses of THC have not been measured. Chasen adds that while excessive THC "may lead to short-term memory loss," especially in young adults, there are compounds in cannabis (particularly one called pinene) that can offset this potential problem.

**ALL CBD OILS ARE THE SAME**

**FALSE** With hemp-derived CBD products flooding the market, buyers need to be wary of what they're getting. "Craft hemp," as it's often called (a la "craft beer"), may be everywhere but according to Rae, it also has less than .3 percent THC. There's still a wide range of therapeutically valuable molecules in there even with virtually no THC. However, the highest-quality CBD oils feature what she says is a "full spectrum" of ingredients that come from organically grown cannabis and not "the fibers industrial hemp that contains minimal beneficial ingredients."

**YOU CAN OVERDOSE ON MEDICAL CANNABIS**

**TRUE** and False Technically, says Chasen, this is possible – if you define overdose as simply taking too much of a substance. "Operating with this definition, a lot of people overdose on cannabis and have anxious, paranoid experiences," she explains, adding that "you cannot lethally overdose on cannabis. There are CB1 receptors in brainstem cardiorespiratory centers, which means cannabis cannot shut down essential functions such as breathing and heartbeat. To date, there have been no reported deaths due to an overdose of cannabis."

**MAJOR MEDICAL ORGANIZATIONS DON'T SUPPORT MEDICAL MARIJUANA USE**

**TRUE** There is a qualification to this, however. The reluctance of organizations like the American Medical Association to get onboard with cannabis has more to do with the fact that it is still federally prohibited and there's next to no endocannabinology education in medical schools, than because of any inherent mistrust of the plant. "This is slowly evolving," explains Rae. "The AMA and other large medical societies have too much to lose in terms of federal credibility to amend their policies."

**MARIJUANA CAUSES GYNECOMASTIA**

**FALSE** It's highly unlikely pot causes male breast development, but Rae admits there is "very sparse evidence" for this belief dating back at least to the 1960s. She cites a case report from the '70s and another from 2007 that found THC had effects on both male and female gonadal hormones. But she adds, "these are very complex interactions. Some individuals may be more at risk than others. It may also be dose-dependent, but no studies have been done." Chasen says that cannabis shouldn't be a direct cause of gynecomastia, which is a disorder caused by hormonal imbalance.

**CBD CAN CURE ANYTHING**

**FALSE** Even cannabis' most passionate supporters admit CBD has its limits. "It's a compound with large therapeutic potential," says Chasen. "However, to improve efficacy, it must be taken in a holistic context. CBD won't cure you of anything and it may not even help you if you continue to sacrifice health and care in other areas of your life." Still, Rae adds, CBD does have a "very powerful placebo effect," which can be a "psychological tool for managing chronic disease. Allowing your brain to think that a substance is going to work is often more powerful than the substance itself."

**MARIJUANA LEADS TO HARDER DRUGS**

**FALSE** Marijuana opponents have long called it a "gateway" drug, but Chasen sees that more as a social trait of cannabis rather than a physical one. "From a social behavior examination, people who consume cannabis may have traditionally been more likely to consume other illicit substances," he says. "But from a physiological perspective, cannabis doesn't lead to harder drugs. It does not cause a change in the boy that would make it more likely for people to seek out other, more dangerous substances." Likewise, Rae admits that while cannabis use is "correlated with the use of harder drugs, so are alcohol use and nicotine use. 'Correlation' and 'causation' are not the same."



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# UNDERSTANDING DRY EYE AND BLEPHARITIS

**D**ry 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  $\geq 50$  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.

  
[www.goldmaneye.com](http://www.goldmaneye.com) 561-630-7120

# selfie



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

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

And probably more than you even realize.

I read this the other day: “We (people) are God’s selfie.” When I first read it, I thought to myself: what a disappointment. But then as I spent more time letting the statement soak in, I began to

understand the truth behind it – and the impact it could have on our lives if we began to embrace the whole idea.

We are God’s selfie.

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

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

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

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

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

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

You are God’s selfie.

Brent Myers

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*"By getting treated locally at Florida Cancer Specialists, I was able to spend more time with the people who matter most — my family."*

*Marissa*

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