

SOUTH FLORIDA'S

# Health & Wellness<sup>®</sup> MAGAZINE

December 2019

South Palm Beach Edition - Monthly

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**FREE**



**GIVE YOURSELF  
THE GIFT OF HAIR**

**NAVIGATING  
THE MEDICDARE PUZZLE**

**ANTY-AGING THERAPY  
EXOSOMES**

**DON'T LET GOOD DIABETES  
SELF-MANAGEMENT  
GO ON VACATION TOO!**

**AVOID BACK AND  
SPINE SURGERIES!!!**

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**LAW OFFICE OF ANDREW CURTIS, ESQ**

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

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

## Revocable Living Trust

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## **DON'T LET GOOD DIABETES SELF-MANAGEMENT GO ON VACATION TOO!**

**V**acationing to new places gets you out of your routine – that's the fun! Nonetheless late meals, unfamiliar food, being more active than usual, and different time zones can all interrupt diabetes self-management. Plan so you can count on more fun and less concern on the way and when you get to your destination.

**BEFORE YOU LEAVE**

Visit your doctor for a checkup to ensure you're fit for the journey.

- How your planned activities could affect your diabetes and what to do about it.
- How to adjust your insulin doses if you're traveling to a different time zone.
- To provide prescriptions for your medicines in case you lose them or run out.
- If you'll need any vaccines.
- To write a note stating why you need your medical supplies.
- Find pharmacies and clinics close to where you'll stay.
- Get a medical ID bracelet.
- Get travel insurance in case you miss your flight or need medical care.
- Order a special meal for the flight or pack your own.
- Set an alarm for taking your medicine especially during different time zones.

**PACKING:**

Put your diabetes supplies in a carry-on bag (insulin could get too cold in your checked luggage). Think about bringing a smaller bag to have at your seat for insulin, glucose tablets, and snacks. Pack twice as much medicine as you think you'll need. Carry medicines in the pharmacy bottles they came in or ask your pharmacist to print out extra labels you can attach to plastic bags.

# On-Call® Express Kit

**AIRPORT SECURITY:**

Get an optional TSA notification card to help the screening process go efficiently.

**GOOD NEWS: people with diabetes are exempt from the 3.4 oz. liquid rule for medicines, fast-acting carbs like juice, and gel packs to keep insulin cool.**

A continuous glucose monitor or insulin pump could be damaged going through the X-ray machine. You don't have to disconnect from the equipment; ask for a hand inspection as a substitute.

**ONCE YOU'RE THERE**

Your blood sugar may be out of your goal range at first, but your body will regulate in a few days. Check your blood sugar often and treat highs or lows as instructed by your doctor.

If you're going to be more active than usual, check your blood sugar before and after. This will make adjustments to food, activity, and insulin

as needed much easier. TrustedDiabetics.com will priority mail you extra diabetic supplies to your home or office with a carrying case and free glucose meter. That way you can have one at home and one for travel.

Don't overdo physical activity during the heat of the day. Use SPF to avoid getting sunburned and don't go barefoot, not even on the beach. You may not be able to find everything you need to manage your diabetes away from home, especially in another country. Learn some useful phrases, such as "I have diabetes" and "where is the nearest pharmacy?" If your vacation will include the outdoors, bring wet wipes or alcohol pads so you can clean your hands before you check your blood sugar.

Diabetes can make everyday life and vacation more challenging, but it doesn't have to keep you home. The more you plan, the more you'll be able to relax and enjoy all the excitement on your trip.

*David Steinberg, Pharm D.*

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# Give Yourself the GIFT OF HAIR

By Alan J. Bauman, MD, ABHRS



**H**airline receding? Seeing more scalp shining through? Lost your self-confidence when you look in the mirror? Looking for a way to feel and look more youthful and attractive? If you answered ‘yes’ then you are one of the nearly 80 million Americans having to deal with aging hair and hair loss. As a progressive condition, hair loss can make us look and feel older and less confident.

While hair loss can certainly be a negative and even a depressing aspect of the aging process, thanks to a range of tools and treatments available now, it’s no longer something we have to live with, hide or stress about. In most cases, hair loss is a treatable condition that you can control. Restoring and regrowing hair can help you feel more youthful and sexy, while also contributing to your overall happiness and self-confidence.

So don’t wait, give yourself the gift of hair.

## FIRST, GIFT YOURSELF A CONSULT

The first step is scheduling a consultation with a qualified Hair Restoration Physician. He or she will be able to run the proper diagnostic tests to determine the true cause of your hair loss, and what types of treatments might be needed to help you achieve your hair restoration goals.

### Tips on finding a Hair Restoration Physician:

- Due to the limited number of full-time, experienced ABHRS-certified hair restoration physicians worldwide, prospective patients should be prepared to travel and-or consult “virtually” via phone, Skype, Facetime, etc.
- Before choosing your doctor, visit the clinic, read reviews, ask for before-and-after pictures and most importantly, ask questions about how to achieve your desired results and what should be done to maintain them.



*The first step is scheduling a consultation with a qualified Hair Restoration Physician.*

- Ask for a referral from your primary care doctor or dermatologist to a full-time Hair Restoration Physician who is fully equipped and trained to diagnose, treat and track your hair loss process and achieve your hair restoration goals.

Once you understand the root cause of your hair loss, your doctor will help you 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.

## LOOKING FOR A GIFT IDEA?

Maybe it isn’t your head of hair that needs a little love this holiday season. Is there someone on your shopping list that is suffering from hair loss or thinning, or perhaps would just enjoy a little pampering? Here are some ideas to give them the gift of healthier hair.

- **Nutritionals & Nutraceuticals:** Hair care also comes in pill form. Hair vitamins and supplements, like Viviscal Pro, Nutrafol and “SuperBiotin” can help your hair become shinier, fuller and stronger. And they make the perfect stocking stuffer!





Before and 12 months after treatment with Low Level Laser by Dr. Alan Bauman



HairCheck is used to diagnose hair loss and track regrowth over time.

- **At-Home Lasers:** Looking for a gift that packs a big punch? Hair growth lasers are now available in laser-embedded ball caps, like *CapillusRX 315* or the award-winning *Turbo LaserCap* which offer a quick effective, discreet, hands-free, side effect-free treatment to the scalp.
- **Scalp Makeover:** Consider treating someone on your list to a little scalp pampering. New “Scalp Makeovers” are available to treat oily, dry, itching or flaking scalp as well as hair breakage, thinning and more. It’s sort of like a high-tech facial for the scalp.

The bottom line is, whether it’s a gift to yourself, or someone in your life, you won’t regret giving the gift of hair. While hair restoration will undoubtedly make you look and feel better on the outside, perhaps more importantly, it can also boost your confidence and self-esteem – making it the gift that truly keeps giving. For gift ideas or to give the gift of hair this holiday season, visit [shop.baumanmedical.com/](http://shop.baumanmedical.com/)

For more information about the causes and treatments for hair loss, and how hair restoration can help you become a “new you in the new year,” visit [www.baumanmedical.com](http://www.baumanmedical.com) or call **561-220-3480**.

## BEWARE OF HOLIDAY-RELATED “CRASH” DIETS

- Crash dieting may seem like the perfect way to shed some unwanted pounds we all inevitably pack on during the holidays, but these drastic changes in nutrition can have serious implications on our health – and our hair.
- Four to six weeks after starting a crash diet, major shedding may occur anywhere throughout the scalp.
- A steep drop in nutrients to the body forces some hair follicles to shed their hair strands and go into a prolonged resting phase during which time no new hairs are grown. This is usually temporary, but it could still take anywhere from 6 to 10 months for the hair to return.
- If you are concerned about sudden hair loss or are experiencing thinning hair following an extreme diet, seek advice and an evaluation from a hair restoration physician for measurements, treatments and tracking because untreated hereditary hair loss always gets worse with time.

## 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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By Aaron Rosenblatt, MD

# AVOID BACK AND SPINE SURGERIES!!!



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

There is no one best way to treat everyone. But the chance of finding relief for ongoing pain unquestionably lies in understanding what has gone wrong. This is not an easy task. Then seeing the most appropriate specialist for your problem and asking the right questions is quite important. With back problems, perhaps more than with any other medical condition, getting the best care at the utmost importance. The most important doctor you can see, at this point, is an Interventional Pain Management Specialists like Dr. Aaron Rosenblatt. A well qualified and certified doctor like him can evaluate a patient completely. He will order the appropriate scans and

or test needed in order to come up with a plan to properly diagnose and the treat the issues WITHOUT SURGERY.

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

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

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

Here's the real problem... Patients tend to think of back surgery as the BIG CURE or consider it the treatment that will work successfully. Sometimes, in our desperation to get our lives back, it may seem like a good idea to jump over



those less invasive procedures and go right to the big one. This is rarely true.

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

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

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

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

Avoiding surgery is our number one goal to help to treat a growing older and active community. At Dr. Rosenblatt’s beautiful freestanding interventional pain management building in Delray Beach, FL, he serves at the medical director and is board certified. Every patient is evaluated by Dr. Rosenblatt himself and a comprehensive

treatment plan is always tailor made for each individual. Patients are NOT seen by PA’s (physician assistants) or NP’s (nurse practitioners). You will see the doctor at each and every visit. Dr. Aaron Rosenblatt specializes in performing Interventional Pain Management procedures and also in the field of Physical Medicine and Rehabilitation. His knowledge encompasses each region of the body which can cause pain. He runs on time and does not make patients wait hours in his office to see him. He is not only a pleasure to talk to regarding pain issues, but also enjoys every day topics such as sports, movies, entertainment and current events. 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!

## Early Pain Treatment CAN PREVENT Prolonged Suffering!

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# ANTY-AGING THERAPY

## EXOSOMES



ARE YOU STRUGGLING WITH AN ILLNESS OR INJURY THAT IS NEGATIVELY IMPACTING YOUR OVERALL QUALITY OF LIFE?

HAVE YOU TRIED VARIOUS METHODS TO HEAL YOUR BODY WITHOUT SUCCESS? IF YOU ARE SEARCHING FOR A NATURAL, EFFECTIVE, AND NON-INVASIVE TREATMENT FOR RECLAIMING YOUR OVERALL HEALTH AND BODY FUNCTION, THE PROFESSIONALS HERE AT MD BEAUTY LABS CAN HELP. WE OFFER CUTTING-EDGE EXOSOMES TREATMENT TO PROMOTE HEALING AND RESTORATION WITHIN THE BODY.



### WHAT IS EXOSOME TREATMENT?

Exosome treatment is a form of regenerative medicine that utilizes a more specialized and enhanced form of stem cell therapy. Stem cells can be used to encourage healing processes as they adapt to surrounding cells. However, exosomes carry precise signals that work to instruct cells on what to do.

Exosomes are packed with proteins, RNA, and mRNA. mRNA is a powerful force for building proteins and stimulating reparative processes. These unique molecule bundles are obtained from the outside of stem cells.

### WHAT TO EXPECT

Exosomes that are used for treatment are collected from stem cells. Once collected from stem cells, the exosomes are prepared for injection with safety and precision in mind..



During exosome treatment, exosomes are delivered to the targeted treatment area through small injections. Once delivered, they work to deliver specific instructions to the cells. Signals are directly delivered that encourage optimal intercellular communication for healing and restoration. In response, the body is then naturally healed for optimal health and wellness.

There is no required downtime following sessions, and you are free to return to your daily activities following treatment.

Results may vary for each person and can depend on the specific concern being addressed. While you may experience some initial relief, it may take a period of time to experience the best results as your body continues the natural healing process. A series of regular treatments may help you achieve and maintain optimal healing and relief.

### WHO IS A CANDIDATE?

Exosomes treatment can be used to treat a range of health concerns. However, it is especially beneficial for those who are living with rheumatoid arthritis or other chronic joint pain. The best way to determine if you are a proper candidate is through a consultation with one of our experts.

### CONTACT US

Don't live in pain any longer, reach out to the professionals here at MD Beauty Labs located in West Palm Beach, FL, to learn more about the benefits of exosomes. Contact us today and schedule your consultation!



**Medical Director, Daniela Dadurian M.D.**

\* Board Certified Anti- Aging Medicine

\* Board Certified Laser Surgery

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.

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



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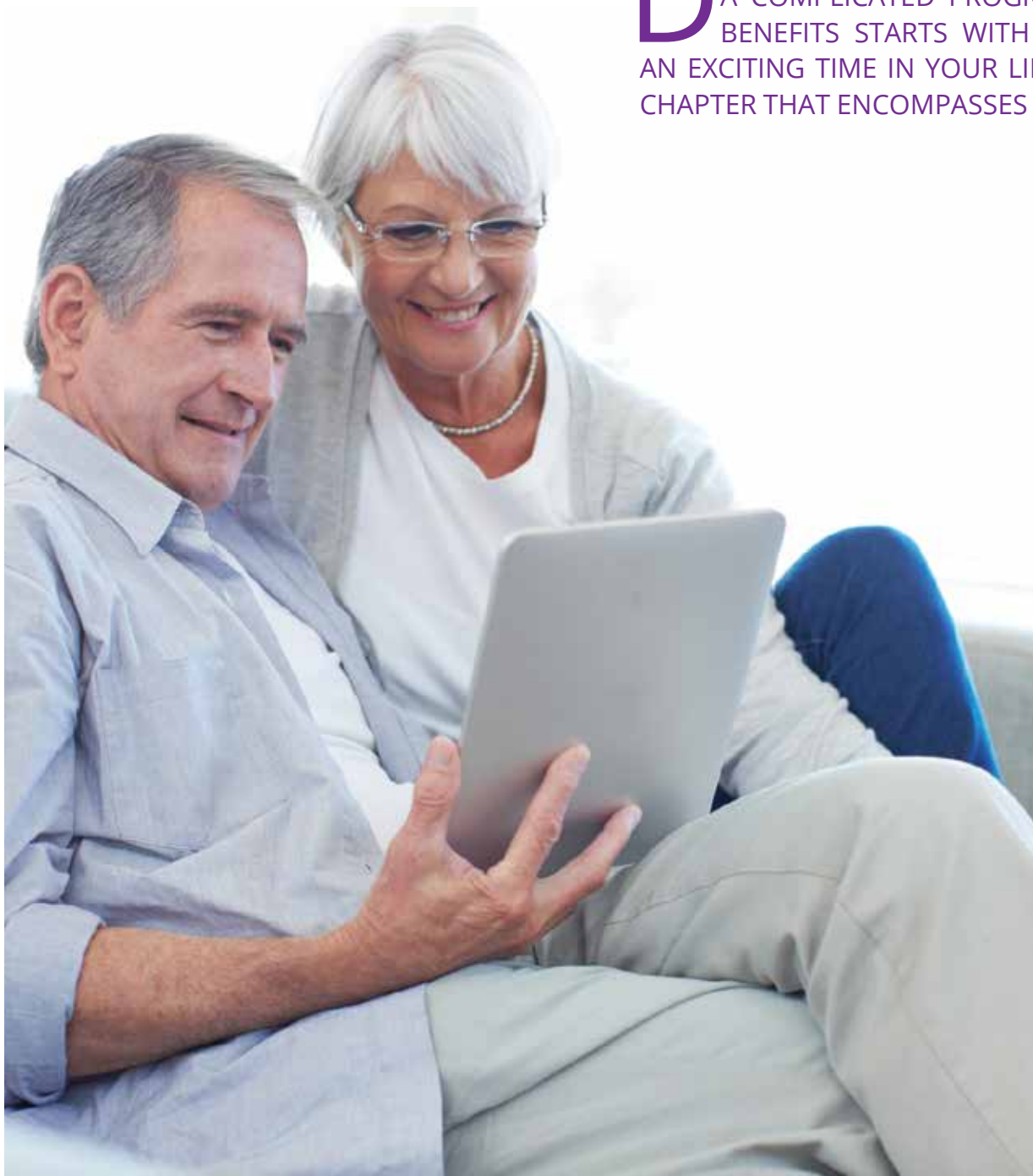
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# Navigating the Medicare Puzzle



**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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# WHAT IS MACULAR DEGENERATION?

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

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

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

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

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

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

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

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

**THERE ARE TWO TYPES OF MACULAR DEGENERATION:**

**Dry, or atrophic, macular degeneration (also called non-neovascular macular degeneration) with drusen** Most people who have macular degeneration have the dry form. This condition is caused by aging and thinning of

the tissues of the macula. Macular degeneration usually begins when tiny yellow or white pieces of fatty protein called drusen form under the retina. Eventually, the macula may become thinner and stop working properly.

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

**Using an Amsler grid to test for macular degeneration**

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

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

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

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

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

Wet macular degeneration occurs when abnormal blood vessels begin to grow underneath the retina. This blood vessel growth is called choroidal neovascularization (CNV) because these vessels grow from the layer under the retina called the choroid. These new blood vessels may leak fluid or blood, blurring or distorting central vision. Vision loss from this form of macular degeneration may be faster and more noticeable than that from dry macular degeneration.

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

**MACULAR DEGENERATION SYMPTOMS**

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

**Dry macular degeneration signs and symptoms**

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

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

**Wet macular degeneration signs and symptoms**

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



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

### WHO IS AT RISK FOR MACULAR DEGENERATION?

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

### Oxidative stress and macular degeneration

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

### Macular degeneration in families

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

### Inflammation and macular degeneration

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

### Smoking, high blood pressure and abnormal cholesterol and macular degeneration

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

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

### MACULAR DEGENERATION TREATMENT

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

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

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

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

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

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

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

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

### WET MACULAR DEGENERATION TREATMENT

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

### Anti-VEGF medication injection treatments for wet macular degeneration

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

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

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

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

### Micro-Pulse Laser treatment for wet macular degeneration

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

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

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

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



**The Retina Institute of Florida**

**Lauren R. Rosecan**

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

*The Retina Institute of Florida with four offices conveniently located in Palm Beach and Martin Counties.*

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# LIVING A QUALITY LIFE – EVEN WITH CANCER

*The evolution of cancer treatment over the last 40 years has resulted in better outcomes for patients; today more people are living with cancer than ever before.*

**C**ancer is an illness unlike any other. Many people mistakenly believe that cancer refers to one disease that occurs in various parts of the body, but, in reality, cancer is not just one disease. The term “cancer” is the general name for a group of over 100 diseases in which abnormal cells begin to grow uncontrollably. No matter what type it is, cancer is the result of a malfunction in the genetic mechanisms that control and regulate cell growth. Cancer can affect blood, bones and over 60 different organs of the human body.

Through research, we have learned that each person’s cancer is actually a unique disease because every tumor or malignancy has its own distinctive DNA. This discovery has resulted in many new and highly effective targeted treatments and immunotherapies based on a patient’s unique genetic profile. Genetic sequencing of a patient’s tumor can help identify which drugs or treatments will be most effective for that individual.

## DAMAGE TO DNA CAN RESULT IN CANCER

DNA is the genetic material that makes up every cell. When DNA becomes damaged or changed, it produces mutations in genes that affect normal cell growth and division. Gene mutations can be inherited from a parent, or, more commonly, acquired during a person’s lifetime due to environmental factors, such as ultraviolet radiation from the sun or cigarette smoking. Other mutations occur for still unknown reasons, resulting in various types of cancer.

In addition to unregulated cell growth, when a cancer occurs it means there is also a failure in the immune system’s ability to recognize these abnormal cells and destroy them. When normal cells become old or damaged, they die and are replaced with new cells. However, the growth of cancer cells is different from normal cell growth. Instead of dying, cancer cells continue to grow and form more abnormal cells. Cancer cells can also invade other tissues, something that normal cells cannot do.



## HOW EFFECTIVE IS CANCER TREATMENT TODAY?

There have been remarkable advances in cancer treatments, especially over the past two decades. Today, millions of people are surviving cancer and most oncologists feel that cancer is becoming more like a chronic disease, such as diabetes or hypertension. In other words, even though no cure has been found yet, the disease is something that can be managed and people can live with cancer for many years.

Early detection and diagnosis, as well as advances, such as immunotherapy and targeted treatments, most of which are available in pill form, are making it possible to live with cancer and continue to have a good quality of life. Some of these newer treatments have actually produced virtual cures for many types of cancer.

## WORLD-CLASS CANCER CARE CLOSE TO HOME

Florida Cancer Specialists & Research Institute (FCS) has put together a network of expert, board-certified physicians who bring world-class cancer treatments to local communities, both large and small, across the state. With nearly 100 locations, FCS is the largest independent oncology/hematology group in the United States. This status puts the practice on the leading edge of clinical trial research and gives FCS physicians access to the newest, most innovative treatments.

## CLINICAL TRIALS LEAD TO TOMORROW’S TREATMENTS AND CURES

Through a strategic partnership with Sarah Cannon Research Institute, one of the world’s leading clinical trial organizations, FCS offers more access to national clinical trials than any other oncology practice in Florida. In 2016, 84% of all new cancer drugs were studied in clinical trials with FCS participation, prior to approval.

In addition to a robust clinical research program, Florida Cancer Specialists offers a number of services, such as an in-house specialty pharmacy, an in-house hematopathology lab and financial counselors at every location. Patients can now receive the most advanced care, including immunotherapies, chemotherapy, targeted treatments and cutting-edge, precision technologies, at the same location where they see their oncologist and get their lab tests done. This not only increasing convenience for patients, but also improving their quality of life.



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

# WHAT IS ACUPUNCTURE and DOES IT REALLY WORK?

By Chaas Gantt and Maria Gantt

**W**e've all heard of people touting the benefits of acupuncture, stating it cured their TMJ, Arthritis or alleviated autoimmune symptoms. The stories are limitless, but are they true? Can acupuncture really reduce symptoms, regenerate tissue and nerves, give someone more energy and stave off illness?



The practice of acupuncture is just one of the integrated modalities of treatment in TCM and our practice at Palm Beach Acupuncture. This practice which has maintained popularity over thousands of years, establishes Meridians as pathways linking acupuncture points that roughly correspond to the dermatomes and myotomes in neurology, as well as the patterns of referred pain from organ pathology familiar to the medical community.

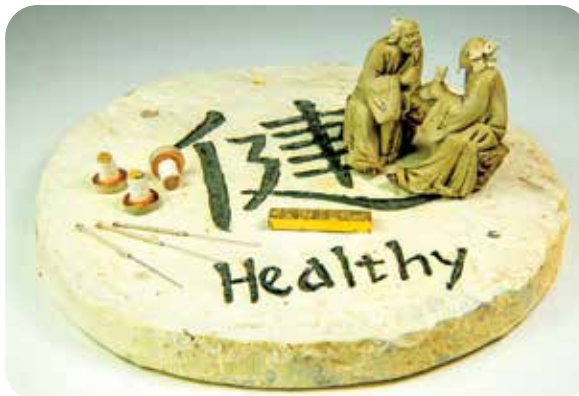
When these points are stimulated with needle insertion, a cascade effect is set in motion which influences various systems including but not limited to the nervous system, the endocrine system and the immune system to attain the desired regulation and restoration of optimal function.

Similar to a sprinkler system to a garden, the body is constantly working very efficiently to supply the right amount of water, blood, and different nutrients to cells across the body. It is in the obstruction of this supply from injury or dysfunction of any of the systems within our bodies that the origin of dis-ease, pain or illness originates from:


- **General Pain**  
(Low Back Pain/Neck Pain/Hip Pain/
- **Leg Pain/Joint Pain/Frozen Shoulder)**
- **Stress & Anxiety/Depression/Panic Attacks**
- **Migraines/Tension Headaches**
- **Arthritis/Joint Pain/ Rheumatoid Arthritis**
- **Allergies (Food, Seasonal, Pollen)**
- **Infertility**
- **Sciatica**
- **Bell's Palsy**
- **Allergic Rhinitis**
- **Car Accident Related Disorders**
- **Fibromyalgia**
- **Low Energy/Adrenal Fatigue/**

- **Chronic Fatigue Syndrome**
- **Common Cold & Flu**
- **Insomnia**
- **Digestive Related Issues**
- **Lyme Disease**
- **Immune Health/Auto-Immune Disease**
- **Post Traumatic Stress Disorder (PTSD)**
- **Addiction**
- **Women's Health**
- **Lyme Disease**
- **Immune Health/Auto-Immune Disease**
- **Post Traumatic Stress Disorder (PTSD)**
- **Addiction**
- **Women's Health**

## ACUPUNCTURE HAS BEEN AROUND FOR THOUSANDS OF YEARS!



In 6000 BC, acupuncture originated in China. Instead of needles, at that time they utilized tiny hair-thin bones. Cosmetic Acupuncture for rejuvenating and healing purposes has been the treatment of choice for thousands of years in China. As early as the Sung Dynasty (960 AD – 1270 AD), acupuncture was performed on the Empress and Emperors concubines.



**Chaas Gantt L. AP**  
Nationally accredited and State Licensed Acupuncture Physician and Functional Medicine Practitioner, Board Certified Herbalist and Injection Therapy Certified.

In his practice, he combines the latest research in functional medicine practices, Japanese style acupuncture, NSEV, homeopathy, cupping therapy, moxibustion, clinical nutrition, targeted supplementation, botanical medicine, injection therapy, among other interventions, to address the specific needs of each of his patients.

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# All the Rage with Celebrities, The Vampire Facelift and Facial Can Give You Your Youthful Appearance Back



**A**s we age skin can become dull, lose elasticity and droop. There are of course surgical options and hyaluronic acid fillers, but the procedures that are topping everyone's wish list are the Vampire facelift and the vampire facial.

Naturally found in your blood, platelets are a rich source of proteins called growth factors, which promote healing and regeneration. Platelet-rich plasma (PRP) contains a higher concentration of platelets than the amount normally found in your blood. To create PRP a sample of your blood is drawn and placed in a centrifuge, which separates out the platelets. These concentrated platelets are recombined with your blood plasma to make PRP. Platelet Rich Plasma (PRP) is then reinjected into the problem areas.

**PRP** injections are an alternative to Botox and fillers. Platelet Rich Plasma is taken from the patient's own blood, spun down and reintroduced into the face just like a filler to create and stimulate your body's own growth factors. PRP produces collagen, hyaluronic acid, elastin, and plumps the skin. PRP injections with the vampire facelift maintain the facial contours of the natural look of the patient.

With just four to six PRP treatments over a two to four-week period, patients are seeing results that last for up to 2 years, so over the long-term, it's very cost effective and 100% safe. You don't have to be concerned about toxins or chemicals with your own PRP.

### Vampire Facelift

For the "facelift", the PRP is injected into various areas of the face to create a plumping effect. The procedure is safe because it's utilizing the patient's own blood and it's free of toxins. The body begins to "repair" itself and regenerates collagen, elastin and healing properties, which create a youthful appearance.

### Vampire Facial

The facial works in much the same way as the "facelift", but with tiny perforations in the skin as opposed to injections. The tiny perforations allow the PRP to penetrate into the dermal layers, and the results continuously improve the glow of the skin within two to three months. Many patients report plumped skin, a brighter complexion and seeing less noticeable dark circles.

Bring out your inner beauty naturally. Your beauty will be revived with a natural face shape, increased collagen, smoother skin, increased blood flow, youthful glow, and a younger appearance.

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### P-Shot®

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# “Cut” your tub? Why this easy, inexpensive project can add serious home safety

## One Day Bath’s TubcuT® adds convenience and protection for all ages

By Shannon Sigafos of The Morning Call



For most homeowners, there’s usually an endless list of modifications and renovations that we need to make as both we and our homes age. And if you’re like most people, you put off projects that have more to do with your own safety or comfort. But chances are, you or someone you know has had to deal with everyday aches and pains, arthritis, bad knees, foot or ankle problems, a handicap or overall mobility problems, aging in place, acting as a caregiver, or general worries about slip and falls in the bathtub.

You’ve probably already heard that there are ways to make your bathtub more accessible, but pushed the thought to the back of your mind because you’re worried about how long your bathroom is going to be out of commission, the cost of the project, and even if having your bathtub modified is actually going to serve its intended purpose.

### WELCOME TO THE NOVEL IDEA OF THE TUBCUT®.

If a person has difficulty lifting his or her legs over a traditional tub wall, then a portion of that tub wall can actually be cut and removed, then refinished. The cutout reduces the lift required to step or swing one’s legs into the tub, and instead turns it into a walk-in shower. The modification can be done in less than one day. Even better? The cut portion of the tub can be saved, and the project can be reversed if you want to sell your home and not lose value.

“We can do this without disturbing the plumbing or making a big deal of construction. We’re in and out of there in half a day, and then the customer is using their shower and their bathroom again by

**W**hen was the last time you faced the need for a home project that you knew would absolutely solve your problem and also go easy on your wallet?

the next morning,” says Paul Echavarria, owner of One Day Bath for the past two decades. “We also have no problem with doing a complete reversal for this project, and once that’s complete, you would never know what that tub looked like before. It’s seamless and waterproof. The whole entire tub gets resurfaced so that when we’re done, the tub looks brand new again.”

Since the original TubcuT® was first offered on the market, there have been a number of national companies offering what looks like an identical product and service. One Day Bath, however, points out that with TubcuT®, the user chooses how wide the opening is and where it starts and ends. This allows the panels to structurally become part of the tub through a strong bonding process. The panels are also made of a durable material that is easy to clean, and your tub’s color can be matched perfectly to the panel’s edge for a seamless look and watertight construction. Competitors use plastic caps or one-piece inserts, and their products are typically attached to the tub with caulk only and don’t have any of the versatility of the TubcuT®.

One Day Bath has a full showroom available (at **889 Lower South Main St. in Bangor**) for customers to walk in and see the options for themselves.

“The showroom is open five days a week and by appointment only on Saturdays. We can show you examples of the traditional method of a tub to shower conversion, and show two different methods of getting a TubcuT® done – one with a shower door, and one without,” says Echavarria. “We also have some of the accessories that we offer that people want to utilize, such as wall liners. The showroom is very well displayed for exactly what customers want to see.”

If you plan to go out and visit the showroom (or if you speak to a One Day Bath representative by phone), the price quote for the project is based on the width of the opening, so it’s good to have the measurements of your existing tub available. There is also no required down payment prior to the TubcuT® install.

#### ANOTHER OPTION? A “TUB SURROUND” TUB-TO-SHOWER CONVERSION

On the flip side, there are those who have the need or want to convert an existing tub in their home into a full shower with new fixtures and wall panels. The floor of your shower (also known as the shower pan) has a lot to say about the style and cost of your tub-to-shower remodel. Typically, your shower floor will be one with a “curb” that



corrals water and you step over that slight curb as you enter and exit the shower. There is also an option for a barrier-free shower or a roll-in shower for some who may be restricted to a wheelchair, as the four-inch lip of a shower pan can be difficult for some.

One Day Bath can also handle a tub to shower conversion without the hassle and mess of a

full shower installation. This is possible with a specially designed acrylic shower system, which will give your new shower a modern update that you can also customize with specific tiling, color and accessories.

“Customers have the option of adding fold-down seats to their shower. They can also add linear shelves, and a grab bar,” says Echavarria. “These custom-fit acrylic liners can have a tile or granite look. It comes in a variety of colors. They’re all mildew and stain resistant, so the care and maintenance of these walls is simplified. There’s no grout to clean. There’s no caulk lines to scrub.”

Just like the process of converting to a walk-in shower, the process of going from a tub to a shower is one that can be handled in a day or two and without the hassle of conventional remodeling. Your bathroom isn’t put out of commission for days. Instead, a custom fitted acrylic shower pan is installed in the same footprint of your existing tub, minimizing construction. Then, in some cases a new wall liner is put over your wall tile. They are also sealed with Lux-Bond®, an adhesive system that is guaranteed not to dent, crack, or chip under normal use.

“As far as practicality is concerned, whether a client is asking for a walk-in shower or a tub-to-shower conversion, they’re looking to solve a problem,” Echavarria points out. “We can solve their problems for them, and we can do it with a lifetime guarantee and with saving homeowners up to 80 percent of the cost – making it practical for any budget.”

#### CONTACT ONE DAY BATH TODAY

One Day Bath serves Allentown, Bangor, Bethlehem, Nazareth, Stroudsburg, and areas surrounding the greater Lehigh Valley – including Philadelphia, the Poconos, and New Jersey. To get a free in-home estimate, call **877-656-7875** or visit [www.renewyourbath.com](http://www.renewyourbath.com).



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# IS NEUROFEEDBACK AN EFFECTIVE TREATMENT FOR ANXIETY and DEPRESSION?

By Renee Chillcott, LMHC

**W**e are approaching the winter holiday's and it's my absolute favorite time of year and everyone is healthy and happy, I have nothing to complain about and life is good.... right? Wrong! Why do I have this anxious, stressed out, overwhelmed, impending doom, depressed feeling? I blame it on the anticipation of family, the financial strain of gift giving, the time constraints, the kids being off school. But honestly, I know that there is no good reason for it, so I must be losing it? I'm wrong again. I have a depression and/or anxiety pattern in my brain.

Why do depression and anxiety go hand in hand? Why did my doctor recommend an anti-depressant for my anxiety? These are 2 different things, aren't they? So, why do I feel both of them at the same time? And will it all just go away if I have less stress in my life?

The Merriam-Webster Dictionary defines **anxiety**: (1): apprehensive uneasiness or nervousness usually over an impending or anticipated ill: a state of being anxious (2): an abnormal and overwhelming sense of apprehension and fear often marked by physical signs (such as tension, sweating, and increased pulse rate), by doubt concerning the reality and nature of the threat, and by self-doubt about one's capacity to cope with it: mentally distressing concern or interest.

So, in layman's terms, anxiety is stress that won't go away, it takes an ugly turn to "negative and fear town", and indicates that the "rest and relax" response from the parasympathetic nervous system isn't there.

What we see in the brain is similar but a little more simply stated. Stress is an event in our life that causes our brain to initiate a calming response and anxiety is a neuron pattern in the brain that impedes the calming response. An anxiety pattern in the brain is typically inherited, although still possible to change. This anxiety pattern can be triggered by major stresses, no stresses or by very minor stresses, thus making it an issue for all ages, even young children.

**Anxiety manifests in many different ways such as:**

- excessive worrying
- nagging sense of fear
- restlessness
- overly emotional
- negative thinking
- catastrophizing
- defensiveness
- poor sleep
- irritability
- Lack of concentration
- feeling overwhelmed
- fatigue/exhaustion

**Depression** as defined by the American Psychiatric Association is a common and serious illness that negatively affects how you feel, the way you think and how you act. Depression causes feelings of sadness and/or a loss of interest in activities once enjoyed. It can lead to a variety of emotional and physical problems and can decrease a person's ability to function at work and at home.

Often, we will describe depression as a "low" feeling where we just cannot "get happy". Other times we notice feeling irritable, angry, or overreacting to events, again not able to feel "happy".



**Depression symptoms can vary from mild to severe and can include:**

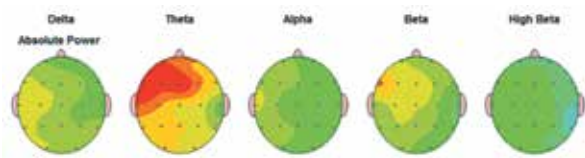
- Feeling sad or having a depressed mood
- Loss of interest or pleasure in activities once enjoyed
- Changes in appetite — weight loss or gain unrelated to dieting
- Trouble sleeping or sleeping too much
- Loss of energy or increased fatigue
- Increase in purposeless physical activity (e.g., hand-wringing or pacing) or slowed movements and speech (actions observable by others)
- Feeling worthless or guilty
- Difficulty thinking, concentrating or making decisions
- Thoughts of death or suicide

As you can see, there is an overlap in the diagnosis of Depression and Anxiety because there is an overlap in the symptoms of Anxiety and Depression as well as an overlap in how you feel.

In Neurofeedback we can see this in neuron firing patterns. For example, an excessive Theta (Slow firing neurons) firing pattern in the left frontal lobe can cause major depression:

Whereas a slow firing pattern in the center of the frontal lobe can cause an anxiety firing pattern:

**Here's a DEPRESSION example:**



It is suffice to say that this is why there's an overlap in medication treatment as well.

Regardless of the diagnosis, Neurofeedback helps change and balance these neuron patterns so that the symptoms improve and the brain and body function better.

**WHAT IS NEUROFEEDBACK?**

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



While the client sits comfortably watching a movie or pictures appear on the screen (a calm and focused state), the EEG equipment measures the frequency or speed at which electrical activity moves in the areas where electrodes have been placed. This information is sent to the therapist's computer. The therapist is then able to determine what frequencies are out of balance. For example, when the EEG shows that you are making too many "slow" or "sleepy" waves (delta/theta) or too many "fast" waves (high beta), the therapist adjusts a reward band to encourage more balanced activity. This encouragement or "reward" happens through visual recognition of the changes on the screen and the auditory reinforcement of "beeps".

**WHAT RESULTS SHOULD I EXPECT TO SEE AND HOW LONG BEFORE I SEE THEM?**

As every brain is different, every response is different as well. Typically adults will notice feeling symptom relief within 10 sessions and notice things like being calmer, happier, sleeping better, less panic, less worrying, more relaxed and able to enjoy life. Treatments are individualized and as no two brains are alike, no two treatment plans are alike. We will evaluate your symptoms and how your brain is functioning to customize training for you. All you have to do is call our office to make the appointment!

**HOW DO I GET STARTED?**

Getting started is easy, just give us a call. The Brain and Wellness Center staff will answer all of your questions, and help you get scheduled. If you are wondering what services are best for you? We can help determine that at the time of the intake, in a telephone consultation, or you can schedule a face to face consultation and see our facility. Call, email or

message us today! Brain and Wellness Center, 7301 W. Palmetto Park Rd., Suite 102A, Boca Raton, FL 33433. **(561) 206-2706**, e-mail us at [info@bocabraincenter.com](mailto:info@bocabraincenter.com), or text us at **(561) 206-2706** or visit our website at [www.BocaBrainCenter.com](http://www.BocaBrainCenter.com).



**Renee Chillcott, LMHC**

Renee Chillcott is a Licensed Mental Health Counselor that has been practicing Neurofeedback training since 2005. Renee holds a BA degree from The University of Central

Florida and a Master's Degree in Psychology from Nova Southeastern University. She is a Licensed Mental Health Counselor and is the owner/operator of The Brain and Wellness Center, located in Boca Raton. At The Brain and Wellness Center, adults, teens, children and families enjoy a variety of services from multiple providers. Neurofeedback, Brain Mapping, Acupuncture, Nutritional Counseling, Learning Programs, and counseling are among a few of the services offered.



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**D**espite their intense focus on CBD and THC, cannabis researchers may be overlooking something really important. And it's surprising that they're overlooking it, because it really stinks. We're talking terpenes: those volatile organic compounds that wafted through your dorm, way back when, and now make you feel a little woozy when the budtender pops the lid on a jar of cannabis flower.

## WHAT ARE TERPENES?

Because human beings have been cultivating cannabis for perhaps 10,000 years, there has been plenty of time for ingenious farmers to select and modify beneficial strains. Conveniently, each strain has a signature stink that says, "Yup, I'm the one that helps with [fill in the blank, from pain to stress to what to do with your friends while you stream Fantasia]." And that's why, after the white coats finish investigating marijuana's 120-plus cannabinoids in, say, 2097, they'll finally figure out what benefits terpenes add to the heady stew.

A study published in *Toxicological Research* gives a bit of an indication, detailing the benefits of forest terpenes (mmmmmm, pine trees!) in treating inflammation, nervous system disorders, even tumors. And those very same

beneficial forest terpenes occur naturally in cannabis and many other plants.

The options shown here are far from exhaustive. About 100 terpenes have been identified in cannabis. But the ones below are among the most prominent, in part because of reputed therapeutic effects. The health effects and benefits have been suggested by a smattering of studies, but they're mostly based on the experiences of people using them (for 10,000 years, as we mentioned).

Will they do the same for you? There's only one way to find out: Pick a promising terpene, ask the budtender for a strain where it predominates, and see if it stinks in just the right way for what ails you.

	SMELLS LIKE	REPUTED EFFECTS	MAY HELP WITH
Caryophyllene	Pepper, spice	Relaxation	Pain, anxiety, taking the edge off of too much THC
Limonene	Citrus	Mood booster, stress buster, digestion booster	Anxiety, pain depression
Linalool	Lavender	Mood booster, chill pill, anti-convulsant	Nerve damage, depression, anxiety
Myrcene	Cloves, musk	Sedation, relaxation	Insomnia, free-radical damage
Pinene	Pine needles	Helps with memory, focus, and alertness; anti-microbial	Asthma, pain, anxiety, and too much THC

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# WHAT IS A CLINICAL TRIAL AND WHY ARE THEY IMPORTANT?



**C**linical trials are the building blocks upon which all new medications owe their existence. Without a clinical trial performed using a new medication, it would be impossible to know if the medication worked, much less what, if any, side effects it had. Literally no new treatments for any existing condition could be developed unless subjected to the rigorous testing performed during a clinical trial.

So, what exactly is a clinical trial, how is it performed, and who regulates it?

A clinical trial is conceived by a person(s) or an organization (typically a pharmaceutical company), interested in PROVING that a particular medication (or device) works better than either placebo (sugar pill), or the currently accepted treatment for that condition (standard of care). In the most common type of a clinical trial, called a “double blind, randomized” trial, neither the patient, the physician charged with overseeing the trial (the Principal Investigator), or anyone else at the research site or in the patient’s family, knows if the patient is getting the study medication or the placebo (double blind). The choice is made arbitrarily, typically by a computer (randomized). Both the likelihood of receiving the actual study drug (instead of placebo) and the length of the trial may vary considerably depending on which drug and condition is being studied. When all the subjects required have been enrolled in the trial, often numbering in the thousands, and the trial duration has been reached, often lasting 2 or 3 years, the data can be analyzed to draw conclusions regarding the drug’s effectiveness and side effect profile. All of these activities are under great scrutiny from entities called institutional review boards, as well as by the FDA at the federal level.

Currently, billions of dollars are being directed towards finding a cure for arguably America’s greatest health care crisis, Alzheimer’s Disease. It has been estimated that there are 5-6 million Americans who

suffer from this progressive, fatal condition which steals the very essence of who the poor sufferer once was, leaving the physical shell, but stealing the underlying personality and other features which combine to make us who we are as individuals. The annual cost of this blight has been estimated at \$18.3 million/hour, or \$236 billion/year, and the number of afflicted increases each year.

It is no wonder that there are currently dozens of Alzheimer’s clinical trials being offered by many, if not most, of the world’s largest and most respected pharmaceutical companies devoted to finding a cure, or at least a treatment that will arrest or slow the inevitable progression of cognitive deterioration. Each of these companies has committed the hundreds of millions to billions of dollars it costs to run a single trial. Great strides in this quest have been made, but the lynch pin to this endeavor, the “sine qua non”, is the person and family who volunteer to participate in the trial, giving his or her body and time in an effort to potentially benefit themselves, but also millions of others. Without volunteers, it would be impossible to move the needle of science forward.

I urge anyone who is concerned about a memory disorder, or specifically Alzheimer’s Disease, to seek a discussion with a specialist, preferably one who is familiar with the research “landscape”, to better understand the options available for treating this terrible scourge. Not only might you benefit, but your children and their children as well.



**Mark A. Goldstein, MD, CPI**  
Board Certified Neurologist  
and Internist

## Enrolling Clinical Trials

- Memory Loss
- Dementia
- Mild Cognitive Impairment
- Alzheimer’s, all stages
- Parkinson’s disease
- Multiple Sclerosis

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

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



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

#### TRADITIONAL GUM GRAFTING:

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

#### PINHOLE GUM REJUVENATION:

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

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

For More Information and an animation  
of the treatment please see:  
[www.PinholeSurgicalTechniquePalmBeach.com](http://www.PinholeSurgicalTechniquePalmBeach.com)

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

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



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

*The focus of his interests are conservative approaches to treating gum, bone and tooth loss. He utilizes advanced techniques including the use of the Periolas 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.*



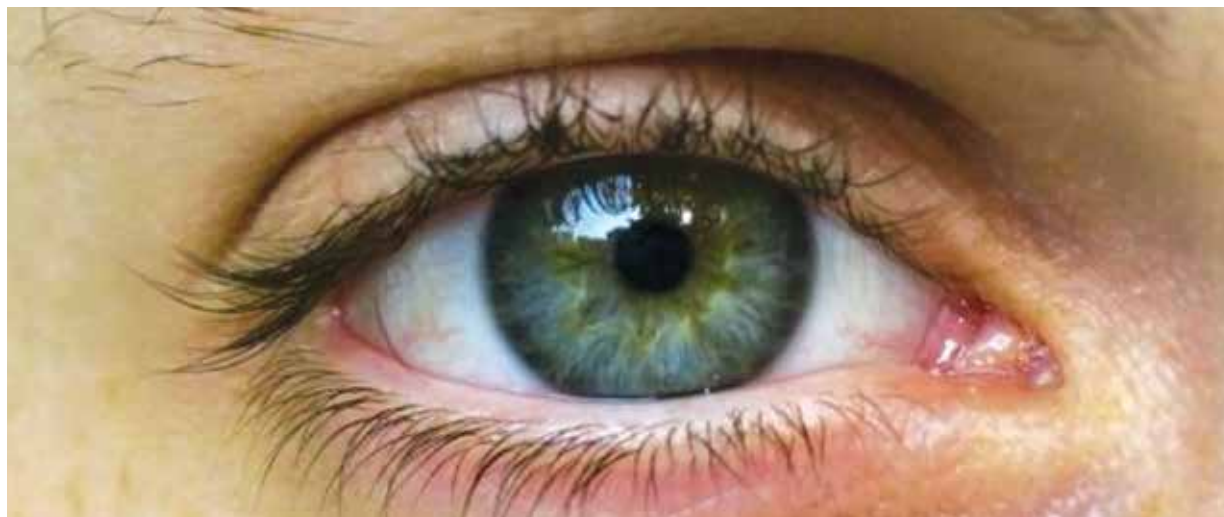
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# THE CORNEA

By David A. Goldman MD



**A**lthough people may have heard the word ‘cornea’ in reference to the eye, many are unaware of what it really refers to. While diseases such as glaucoma and macular degeneration affect the back of the eye, the cornea is in the front of the eye.

In fact, the cornea is the most anterior structure of the eye. It is the clear part responsible for much of the focusing of light waves which enter the eye. When patients place contact lenses on their eye, they are placing them on their corneas. When patients develop an abrasion (scratch) or infectious ulcer of the eye, it is typically in the cornea.

The cornea consists of several layers, but it is simplest to break it down into three: epithelium,

stroma, and endothelium. The epithelium is the superficial outer layer of cells. When a scratch occurs on the cornea, the epithelium acts quickly to fill in the scratch. In cases of severe dry eye, tiny dried out “holes” can also appear in the epithelium.

The stroma is the central portion of the cornea, and comprises the bulk of it. It provides the majority of structural support to the cornea. When patients undergo LASIK surgery, it is the stroma that is affected. In LASIK, a laser creates a flap within the stroma. That flap is then lifted and a laser then reshapes the cornea under the flap. For patients who are myopic (nearsighted), the laser flattens the center of the cornea. For patients who are hyperopic (farsighted), the laser removes tissue in a circular pattern to steepen the cornea. The endothelium is

the most posterior layer of the cornea. Consisting of a layer of cells, these endothelial cells work as microscopic pumps to pump fluid out of the cornea to keep it clear. As we age the number of endothelial cells decline. Typically this is asymptomatic. In conditions such as Fuchs Dystrophy, however, patients are born with a lower number of endothelial cells and at some point may require surgery. Fortunately, the surgical options have improved greatly – less than ten years ago a new procedure was developed called DSAEK. In the past, corneal swelling which did not respond to topical eye drops required a full thickness corneal transplant. With the DSAEK procedure, solely the posterior layer of cells is transplanted. With this newer technique, vision can be restored in weeks instead of months.

This is not to say that a full thickness corneal transplant does not have its place in eye care. Conditions such as keratoconus, where the cornea becomes irregularly cone shaped, and scars of the cornea can significantly limit visual acuity. In these cases, replacing all layers of the cornea can work well to restore vision. In many cases, laser vision correction can be performed over a corneal transplant so that the patient can see well without glasses.

While problems of the cornea, whether inherited or environmental, can significantly disturb vision, there are multiple procedures available to improve vision. As opposed to posterior eye pathology such as glaucoma and macular degeneration, the overwhelming majority of vision problems related to the cornea can be fixed.



DAVID A. GOLDMAN

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

Dr. Goldman received his Bachelor of Arts cum laude and with distinction in all subjects from Cornell University and Doctor of Medicine with distinction in research from the Tufts School of Medicine. This

was followed by a medical internship at Mt. Sinai – Cabrini Medical Center in New York City. He then completed his residency and cornea fellowship at the Bascom Palmer Eye Institute in Miami, Florida. Throughout his training, he received multiple awards including 2<sup>nd</sup> 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

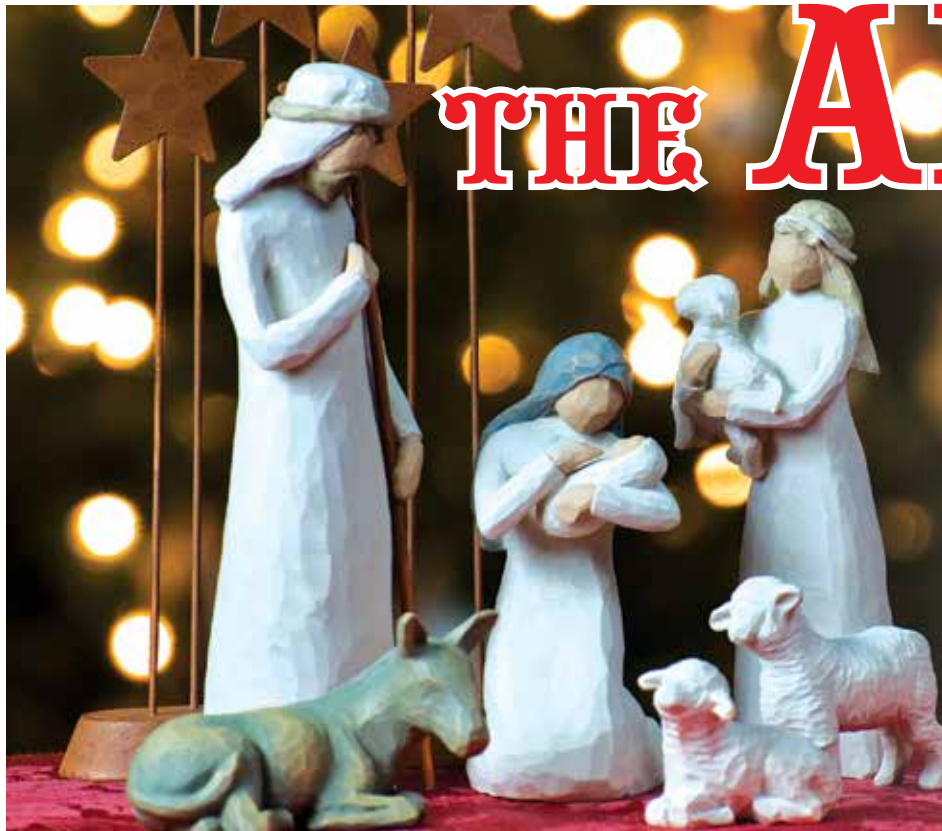
as an examiner for board certification, Dr. Goldman also serves on committees to revise maintenance of certification exams for current ophthalmologists.

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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# THE ARRIVAL

Matthew 1:21

We can know peace because of the life we can have in Him. The prophets of old wrote: “For to us a child is born, to us a son is given; and the government shall be upon his shoulder, and his name shall be called Wonderful Counselor, Mighty God, Everlasting Father, (the) Prince of Peace”. Isaiah 9:6 And on the night in which Jesus was born, the angels proclaimed: “Glory to God in highest heaven, and peace on earth to those with whom God is pleased.” Luke 2:14

We can have joy in an abundant life in Christ. The angels also said: “Fear not, for behold, I bring you good news of great joy that will be for all the people. For unto you is born this day in the city of David a Savior, who is Christ the Lord.” Luke 2:8-14

And we can experience an unconditional love that never runs out. “For God so loved the world, that he gave his only Son, that whoever believes in him should not perish but have eternal life. For God did not send his Son into the world to condemn the world, but in order that the world might be saved through him.” John 3:16-17

So during this Advent Season as we celebrate The Arrival, think about all that means for us in our daily lives. As the carols play on the radio, as you see the “The Reason for the Season” bumper stickers, as you drop coins in the red buckets on the way into the store, remember that it’s about Jesus and the hope, peace, joy, and love that comes in a relationship with Him.

*Brent Myers*

**D**o you ever find yourself in what seems like a hopeless situation? Is your life so hectic that you wish for just a moment of peace? Do you wish you laughed more, stopped to smell the roses, and enjoyed life more easily? Are relationships in your life broken – do you long for love?

If you answered “yes” to any of the above, then I have the answer for you. If you answered “no” then still read this article, commit it to memory, and bring it back to mind when need it.

Here is the answer: Christmas. Christmas is the season in which we can find all of the things we want (and need): hope, peace, joy, and love.

Many times Christmas is referred to as the Advent Season. In simplest terms, “advent” means “arrival”. But when speaking of Christmas, what exactly has arrived?. Sure, we celebrate the arrival of a baby born to a virgin in a small village in the Middle East. The baby’s name? Jesus.

But the arrival of Jesus means a lot more than just another birth. You see Christmas is the season when we celebrate the arrival of hope, peace, joy, and love because Jesus brings all those things in a relationship with Him.

We can have hope in a relationship with Jesus. No matter what may come, we anchor ourselves to the truth of Who Jesus is and what He’s done for us. The Scriptures remind us of the hope Jesus brings: “The people who walked in darkness have seen a great light; those who dwelt in a land of deep darkness, on them has light shone.” And we see it fulfilled: “She will bear a son, and you shall call his name Jesus, for he will save his people from their sins.”

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## Faith. A powerful element in fighting cancer.

Joyce Dean has more energy than most 70-year-olds. She’s full of stories about love, family and her days as the first African American professor at Edison Community College. 25 years ago, Joyce went for a routine annual physical. She was diagnosed with advanced multiple myeloma—a cancer with a grim prognosis at the time. She was referred to Florida Cancer Specialists, and she’s been a patient ever since.

Living with cancer hasn’t been easy, but with over two decades of compassionate, cutting-edge care, and a little faith, Florida Cancer Specialists has shown Joyce that when hope and science join forces, great outcomes can happen.

*“Without Florida Cancer Specialists, I wouldn’t be here.”*

*-Joyce Dean, Patient & Cancer Fighter*

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