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August 2020

Palm Beach Edition - Monthly

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

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# Hair Loss Awareness Month: “BIOHACKING BALDNESS”

By Alan J. Bauman, MD, ABHRS

**A**ugust is National Hair Loss Awareness Month, which means it is a great time to become aware of, and educated about, the many tools and treatments available to help the 80 million Americans suffering from unwanted hair loss.

“Biohacking,” or DIY biology as it is often referred to, is the use of science and biology to quantitatively evaluate, take control of, and upgrade your body, your mind, and your life. Biohacking is being used in countless areas of medicine and is providing some game-changing results, including hair restoration.

Successful hair restoration begins with data-driven biohacking methodology that is used to diagnose and track hair loss in its earliest stages, before it is even noticeable to the naked eye, when you have the best chance of slowing, stopping, or even reversing the progression of hair loss.

## “Biohacking” Tools

With the help of an advanced and highly sensitive scientific measurement tool known as HairCheck®, hair restoration physicians can now accurately help you determine the amount and quality of hair growing in a given area of the scalp. This is an effective way to gauge the severity of your hair loss early on, and how well you are responding to restorative treatments in the critical time before the results are noticeable to the naked eye. Another breakthrough tool that is helping assess and diagnose hair loss are hand-held HairCam™ scalp microscopes with special dual-polarized LED lighting that can detect miniaturized hairs vs. areas of depleted density as well as help diagnose rare hair loss conditions and other scalp problems.

These advanced tools provide unique data that allows you and your hair restoration physician the opportunity to customize a personalized treatment

plan that not only avoids unwanted side effects but maximizes effectiveness and provide you with optimal results, based on what your follicles need to grow and be healthy. As with any health condition, each patient has different needs and will respond differently to treatment, so having the ability to gain this insight and data is invaluable when deciding upon or modifying a treatment regimen. Your hair growth will be evaluated and tracked just as if you were in a research study.



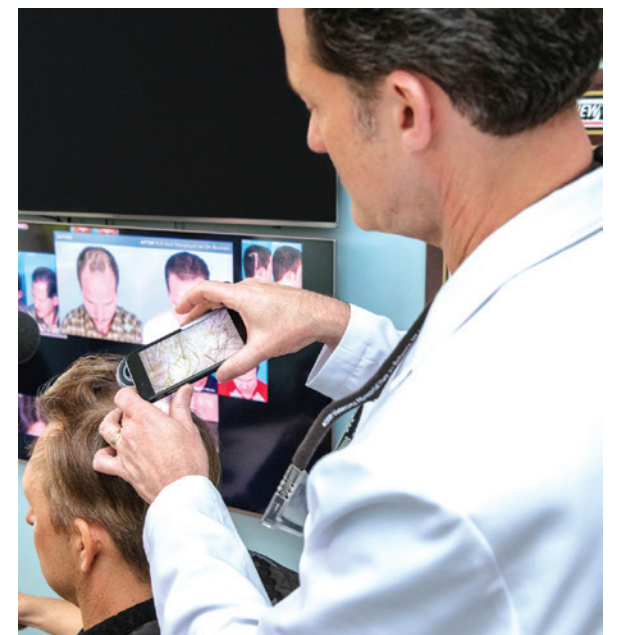
*The HairCheck® tool can accurately determine the amount and quality of hair growing in a given area of the scalp to gauge the severity of hair loss and measure results during treatment.*

## A Multi-Therapy Approach

While hair loss is a treatable condition, and there are a variety of effective treatment options available, it's important for patients to understand that there isn't a quick fix. Often, as it is in many areas of medicine, “multi-therapy” or a combination of several different treatments, may have the best chance for achieving long-term success depending on the patient's risk factors, the severity of their condition, and their unique hair restoration goals.

This approach not only focuses on restoring hair that has been lost but also sets up a plan to protect the hair that you have against suffering the same fate. Again, each patient may require a slightly varied treatment regimen, but our experience shows that 90% of patients benefit from this approach. The multi-therapy treatment plan also avoids the patient putting all their eggs in one basket, so to speak, and wasting time and money on treatments that aren't giving them the results they desire.

When executed properly, hair restoration can be a fantastic, rewarding and life-changing decision that most patients regret not doing sooner.



*The HairCam™ scalp microscope can detect miniaturized hairs vs. areas of depleted density as well as help diagnose rare hair loss conditions and other scalp problems.*





Before and one day after  
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Depending on the severity and stage of one's hair loss, the treatment regimen may be simple or more complex. Medical treatments that will synergistically help mitigate hair loss may include a specially-compounded prescription minoxidil solution, Platelet-Rich Plasma (PRP), prostaglandin analogs, low-level laser therapy, and nutritional supplements. In advanced cases, hair transplantation may be the patient's best strategy for treating hair loss. For transplant patients, a multi-therapy approach may still be recommended to protect the non-transplanted hair follicles from loss.

Here are a few of the exciting cutting-edge treatment options to consider and ask your ABHRS (American Board of Hair Restoration Surgery)-certified Hair Restoration Physician about include:

- Minimally-Invasive, Permanent, No-Linear-Scar Follicular Unit Excision/Extraction (FUE) Hair Transplant using VIP|FUE™, SmartGraft®, NeoGraft®, ARTAS Robotic-Assisted, or other devices.
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- Scientific "Scalp Makeover®" – evaluation, diagnosis and treatment regimens for itchy, dry, flaking or oily conditions and other scalp imbalances that can impair healthy hair growth.
- Hair Loss Risk Management – the identification and reduction of medical and lifestyle risk factors that detrimentally impact hair growth.

On a closing note, we also understand that some patients still may not be ready to visit us in person during these uncertain times. This is why we will continue offering Virtual Consults, Virtual Follow-ups, as well as an expanded menu of at-home treatment options – to allow our patients to begin, or continue, their hair restoration journey from the comfort of their own home.

For more information on the causes and treatments for hair loss, or to learn more about "biohacking" baldness, please visit [www.baumanmedical.com](http://www.baumanmedical.com) or call **561-220-3480**.

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- We are limiting the number of patients in our facility, especially in waiting areas, to maintain social distancing.
- All visits will be by appointment only, no walk-in appointments will be accepted at this time.
- All patients will be required to wear a mask and all of our staff will be fully equipped with the appropriate protective gear.
- As we have done since the beginning of this situation, we will continue to meticulously sanitize our facility frequently throughout the day, including disinfecting all surfaces, equipment, and seating areas before and after each patient, and performing our extensive Deep Cleaning Protocol on a nightly basis.

### 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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# Lumbar Spine Pain: Symptoms, Causes & Treatments

By: Regenexx at Gold Coast Orthopedics and Regenerative Medicine

**T**he body is an interconnected machine with each part working together in harmony. The lumbar spine is a crucial element of this machine. The hip, knee, and foot are all controlled by spinal nerves within the low back. A problem in the lumbar spine could create problems at any point in the lower body. Common lumbar issues include arthritis, foraminal and spinal stenosis, pinched nerves, disc problems, muscle atrophy, loose ligaments, and spondylolysis. In this article, we will give you a brief overview of these common lumbar spine problems along with their potential symptoms, causes, and treatments.

First, let's take a look at the spinal column and its parts.

## The Spinal Column

The spinal column is made up of vertebrae that are stacked one on top of the other with an intervertebral disc between each level to provide cushion and absorb shock. The cervical spine consists of the neck area and is made up of seven vertebrae (C1-C7). Following the cervical spine is the thoracic spine (T1-T12), the lumbar spine (L1-L5), the sacrum (S1-S5), and the coccyx. The posterior (back) portion of these vertebrae is known as the spinous process and on either side of these, connecting one vertebra to the next, are finger-joint-sized articulations called facet joints.

Another extremely important part of the spinal column is the spinal canal. This tunnel runs down the middle of the column and houses the spinal cord, which has many nerves that transmit muscle commands and sensory information throughout the body and to the brain. There are small holes in the spinal column where the nerves exit and branch off to other parts of the body. There is one at each level of the spinal column. One of these holes is called a foramen. Any of these structures can become damaged or diseased in some way and lead to pain, discomfort, or even disability.

## Foraminal Stenosis

When the spine is healthy, spinal nerves easily traverse through the tunnels transmitting sensory information from each body part to the brain and provide impulses to the muscles so they can contract and move the body part. However, when the spine is unhealthy, the flow of information can be disrupted.

The disc or cushion in between the spine bones can bulge and/or the spine joints can get arthritis causing the foramen to narrow. This narrowing of the tunnel is called foraminal stenosis and can cause the nerves to get pinched. The pressure from a pinched nerve can cause muscle tightness, weakness, numbness, tingling,



burning, or electrical pain in the specific distribution of that nerve. For example, if there is a lower lumbar foraminal stenosis, you could experience numbness in your big toe. Sometimes the symptoms slowly manifest over time from a more subtle pinching of the nerve. If the nerve is irritated, it may release inflammatory substances into the tissue to which the nerve travels causing that tissue to degenerate more rapidly than other areas leading to painful problems such as tendinopathy.

You could have laser spine surgery to open up the hole, but this surgery can have major side effects and serious implications. Another way to surgically treat stenosis is with a spinal fusion, but the mention of a fusion should be a huge red flag to seek out other opinions. Why? Adjacent segment disease (ASD). After a fusion, the motion of the fused segments is limited and the biomechanical loads are transferred to the segments above and below the level of the fusion. These adjacent segments could get damaged and become painful over time resulting in additional surgeries.

Surgery is often performed after an MRI diagnosis of the problem. An MRI indicating stenosis is not enough to appropriately diagnose that stenosis is the cause of pain. If you do have foraminal stenosis, you should not put all your trust in MRI results. Patients may or may not have pain with foraminal stenosis. The MRI is a description of the appearance of the spine. Many people have stenosis and no noticeable problems. An experienced physician knows that it's critical to treat the person, not the MRI. This can be determined by a thorough history and physical examination. Research also shows that skilled physical therapy is as effective as surgery in relieving stenosis symptoms.

Our approach to foraminal stenosis utilizes nonsurgical solutions to treat it before it progresses. Precise image-guided injections of the patient's own platelets into the foramen and around the nerve can help manage the problem.

## Facet Joint Osteoarthritis and Instability

The facet joints that we spoke of earlier can become injured from trauma or develop arthritis from cartilage breakdown due to wear and tear. Facet joints allow for and limit movement in the spine. When bending backward, these joints become compressed and when you bend forward, they open up. When damage or arthritis occurs, facet joints can become chronically painful, especially with movement. Facet arthritis is often referred to as Degenerative Joint Disease (DJD).

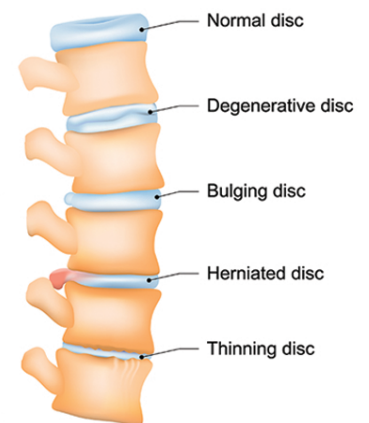
For facet arthritis or injuries, doctors may recommend a radiofrequency ablation (RFA) also referred to as a rhizotomy of the small nerve that senses pain from that specific facet joint. This is a destructive process that damages the nerve. Although this can be effective in some cases, it may leave the surrounding muscles weaker which can actually be a cause of back pain.

A surgical option is a lumbar fusion to bolt two or more vertebrae of the spine together to eliminate movement and therefore, pain. The nature of this surgery can also damage the muscles that stabilize the area. This is an irreversible procedure that can cause adjacent segment disease in the vertebrae above and below. This surgery should only be considered in the most extreme cases.

Our approach for DJD often includes high-dose PRP, platelet lysate, or stem cell injections precisely targeting the facet joints, surrounding ligaments, atrophied muscles, and around the nerves. This is a tissue preservation strategy that involves no cutting, surgery, hardware, or tissue destruction helping patients avoid pain medications and damaging cortisone injections.

## Disc Problems

Within the lumbar spine, there are four types of disc problems that can occur. A herniated disc occurs when the outer covering of the structure breaks open allowing the inner gel to herniate out. A bulging disc is when the outer covering doesn't completely break open, but the fibers are stretched and weak leading the gel to bulge. A torn disc means that the outer cover has a tear that causes or it may allow the leaking of chemicals on the associated spinal nerve. Lastly, a degenerated disc is one that has collapsed or narrowed due to insufficient living cells inside the disc not producing enough of the substances that keep the disc plump. A severely degenerated disc is usually not a source of pain unless it's





bulging or leaking onto a spinal nerve. Earlier in the degeneration process, while the disc still has plumpness to it, tears in the back of the disc can be a source of low back pain that results in severe episodes of pain with sitting, coughing, sneezing, or lifting. When a disc is severely degenerated, it usually is no longer painful itself. However, the mechanical load of the compressive forces in the spine at that level are no longer being taken up by the disc and therefore get transferred to the facet joints leading to wear and tear and DJD as described above.

Generally, disc surgeries include either back fusions or disc replacement. Regarding fusion, the vertebrae are bolted together with hardware to keep them immobile. With disc replacement, the goal is to have fewer side effects than a fusion, however, research has shown that abnormal motion with an artificial disc can also lead to ASD. The other side effects of having a device implanted include wear-and-tear ions in the blood from the breakdown of the metal or plastic device, ongoing pain, and potential revision surgeries.

With our approach, herniated and bulging discs are treated based on the problem they are causing. For pinched nerves, instilling isolated growth factors or platelet lysate around the irritated nerve can help the nerve recover and become more tolerant of its narrow space. Injection of the surrounding ligaments and muscles provides for stability with better-controlled movements taking pressures off the disc and nerves. In some cases, bulging discs may be treated with a same-day stem cell treatment to reduce the size of the bulge or heal a tear. In other cases, cultured (grown) stem cells injected in a specific way may be required. Torn discs can be treated with either stem cell or PRP injections very effectively. Symptoms respond well to a treatment protocol focused on platelet and/or stem cell technology deployed to treat undesirable disc and lumbar segment movements due to lax ligaments and arthritic facet joints.

#### Pinched Lumbar Nerve

Pinched nerves can be caused by foraminal stenosis from bulging or herniated discs and facet joint arthritis as discussed. A pinched lumbar nerve can cause pain, numbness, tingling, or weakness anywhere along the route that particular nerve branch supplies. Pain may or may not be present in the low back.

Chronic knee pain could actually be due to a pinched nerve in the lumbar spine. A doctor may mistakenly conclude that the knee is the source of the pain. This is exactly why we find it so important to consider the entire musculoskeletal system as a whole rather than in parts and to take an extensive history and physical.

The surgical approach to a pinched nerve depends on the root cause. For example, if a disc bulge is to blame, it could be a discectomy and graft and/or lumbar fusion. If it is a foraminal stenosis, laser surgery may enlarge the foraminal opening where the nerve is being pinched. Problems with invasive lumbar surgery are many, including long recovery times and often continuing pain. Ultimately, the structure never fully functions as it originally did.



Our approach includes examining the full musculoskeletal system to determine the source of pain and the pinched nerve and then developing an appropriate treatment plan. Treatment may consist of precise image-guided injections of healing growth factors isolated from a patient's own blood platelets, PRP, or stem cells.

#### Steroids, NSAIDs, & Other Drugs - Not Recommended

You may be presented with other treatments within the traditional orthopedics model for lumbar problems, including steroid shots or medications. Nonsteroidal anti-inflammatory drugs (NSAIDs) come with a long and growing list of dangerous side effects, such as sudden-death heart attacks, stroke, gastrointestinal bleeding, addiction, and overdose.

Narcotics can provide pain relief but are not addressing the issue directly and of course, can be addictive. Overdose has become an increasing public health issue.

Steroid shots have been shown to destroy local cartilage in the joint which can progress arthritis and provide no significant long term pain improvement. In fact, pain relief usually diminishes with repeated steroid injections. The list of problems with these injections is also lengthy.

There are supplements that can be a good alternative for pain and inflammation. Chondroitin and glucosamine have been shown to be effective pain relievers and can preserve cartilage. Curcumin derived from turmeric can also decrease inflammation and relieve pain from arthritis and other issues.

Our spines are tuned to precision and attempting to rearrange the spine's biomechanics with fusions and surgeries is often a bad idea. It is essential to understand that where it hurts may or may not be where the primary damage is located.

Acting on a lumbar spine problem while it's still a small problem or when the issue first appears, will be less of an issue than trying to take care of it when it becomes a larger problem that spirals out of control. Conservative options may help in some cases, but if these options have failed, we urge you to seek out interventional orthopedic solutions!



**Evan Musman, DO** is a non-surgical orthopedic physician who completed his anesthesiology residency at the Albert Einstein College of Medicine in 1994. After training, he stayed at AECOM and served as an Attending in Anesthesiology instructing residents and focused on Pain Medicine. He then joined a private practice

in Connecticut where he served as the Medical Director of the Johnson Ambulatory Surgical Center and treated complex pain patients. He continued his northward migration and opened Vermont Pain Management, the first, free-standing interventional pain management practice in the state. He was the President of the Vermont Society of Interventional Pain Physicians for over 10 years. After over 25 years of practice, Dr. Musman became increasingly dissatisfied with destructive/ablative modalities including the overuse of corticosteroids and became active with regenerative modalities. He joined the Regenexx network of physicians. Dr. Musman's clinical practice focuses on Interventional Regenerative Orthopedics – Offering Regenexx procedures – the Nation's Most Advanced Non-Surgical Stem Cell and Platelet Treatments for Injuries and Arthritis under image guidance using ultrasound and fluoroscopy (live X-ray). He is a distinguished clinician and physician leader dedicated to the treatment of patients with special emphasis on sports-related injuries, orthopedic and spinal regenerative therapies. Dr. Musman treats sports-related and other common orthopedic conditions and is uniquely qualified to treat arthritis, complex degenerative disc disease, sciatica and other nerve disorders without surgery. His clinical skills, empathy and compassion for his patients have resulted in an impeccable reputation among patients and referring Physicians.



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# Senior Information Centers

## Helps Seniors **PRESERVE AND PROTECT ASSETS**

**D**eveloping a comprehensive plan for financial preservation is essential to help seniors avoid costly mistakes and prevent financial devastation.

Senior Information Centers, an umbrella network of licensed Florida professionals, provides comprehensive estate planning services that help seniors preserve and protect their assets. The company, with offices in Boca Raton, Sarasota and Ocala, serves seniors and their families throughout Florida.

“It’s never too late or too early for seniors to plan for protecting their assets,” said

Stephen D. Wolfe, Elder Planning Specialist and Certified Senior Advisor, who founded Senior Information Centers in 2001 along with his business partner Bryan Plonsky. “They should educate themselves so they can understand their options. Many seniors may mistakenly believe that planning is very expensive, but Senior Information Centers provides an affordable way for them to preserve their valuable assets.”

The company brings together a team of experts including elder care attorneys, Medicaid and Veteran’s Administration (VA) specialists, paralegals, certified financial planners and accountants who provide a wealth of information and help

seniors and their families develop comprehensive plans for asset preservation. They provide services in four major areas of concern to seniors: legal, illness, taxes and investments.

Legal services include the development of tools such as a Living Will, Durable Power of Attorney, Healthcare Surrogate Designation or HealthCare Power of Attorney (which are only \$33 each) and Deeds and Trusts.

Services related to illness help seniors reposition their estates properly to preserve assets and help them qualify for government benefits, whether for home care, assisted living facilities or nursing homes.






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Tax advisors review portfolios to eliminate unnecessary taxes on investments and IRAs. While Senior Information Centers professionals are not stockbrokers with securities licenses, they deal with no-risk, tax-deferred secure investments that keep seniors' assets fixed, guaranteed and insured.

The firm's target clients are primarily seniors in their 70s, spouses, adult children and other family members. Senior Information Centers markets its services throughout the community to assisted living facilities, nursing homes, caseworkers and hospital discharge managers.

"Sometimes after a medical crisis involving a hospital stay, seniors end up in rehabilitation centers with no plan of attack," said Wolfe. "Senior Information Centers can show them all their options, rough out a plan and give them hope that assets can be preserved and benefits attained."

Wolfe noted that the company's professional's turn over every rock from "today until death" to make sure an action taken today will not negatively impact their financial future.

"For example, achieving Medicaid qualifications can be a daunting task," he said. "Giving away assets to children may trigger the five-year look back, which means the senior will not qualify for Medicaid benefits. Veterans also make mistakes with improper planning that makes them ineligible for Medicaid."

Veterans, their spouses and their widows may be entitled to VA benefits to help offset their out of pocket medical expense. Senior Information Centers helps clients regardless of their level assets or income. The attorney offers reasonable fees for development of legal documents or planning services. There is no cost or obligation for consultations. Telephone consultations are available for clients' families who live out of state.

Currently, Senior Information Centers serves 8,000 clients in Florida. Frequently, business comes from word-of-mouth referrals.

"Your involvement with us through the various challenges we faced, which extended even beyond our father's ultimate passing, was most exemplary and supportive," wrote a client's adult children. "We are truly thankful that someone who has a caring attitude, knowledge and resources to help manage elder-care issues is available for families struggling with these emotionally charged issues."

Stephen and Bryan stress the importance for seniors to have a full, comprehensive plan to preserve and protect their assets – not just piecemeal documents here or there. "In every area, there's a way seniors can be robbed of their dollars." "We show them how to protect their assets in every aspect of their life."

**For additional information about  
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# SKIN REJUVENATION AT MULTIPLE LEVELS

## HAVE YOU HEARD OF **HALO AND FOREVER YOUNG BBL TREATMENTS?**

These are two new technologies that are game changers for skin resurfacing and pigmentation. Having been in the non-surgical aesthetic space for 19 years, I am very pleased to have finally discovered 2 technologies that deliver results for very common skin problems we have tried to correct for years; fine lines, pore size, skin texture, broken capillaries and even melasma. The fraxel laser was revolutionary when it first became available years ago. For the first time, skin texture was addressed with minimal downtime. However, the Halo laser is the next generation technology for skin resurfacing. Technology keeps evolving and the Halo laser is truly unique. It is a “hybrid fractional laser” that delivers an ablative and non-ablative wavelength to the same area. What does that mean?



**1**

### NON-ABLATIVE 1470 MM WAVELENGTH

This wavelength can be adjusted from 200-700 micron depth, the level in the epidermis and papillary dermis that needs to be targeted for hyperpigmentation such as sun spots and melasma, as well as texture and pore size.

**2**

### ABLATIVE 2940 MM WAVELENGTH

2940 mm ER: Yag laser penetrates from 20-100 microns under the skin. It targets lines and wrinkles with significantly decreased downtime as opposed to other ablative lasers. Combining these 2 wavelengths results in ablative results, mainly improvement of wrinkles and lines with non-ablative downtime. I myself have tried it for melasma and was very impressed with the results.



In addition, combining Halo with Forever Young BBL further combats the signs of aging by correcting sun damage and broken capillaries. BBL stands for broad band light and is basically a much more advanced version of IPL that most people are familiar with. It targets the epidermis and dermis, stimulating changes in skin texture, acne scarring, skin tone, broken capillaries, as well as pigmentation. BBL reduces melasma and diminishes fine vessels that cause redness. It is a very effective treatment for rosacea. Both of these technologies, especially combined, gently treat the upper layers of the skin and take years off the neck, face, chest, hands and anywhere else where aging is visible.

**In summary areas of improvement include:**

1. Sun damage
2. Broken blood vessels
3. Fine Lines and Wrinkles
4. Scars including acne scarring
5. Large pores
6. Crepey Skin

To maintain radiant, glowing skin, a series of 3 BBL treatments 2 weeks apart combined with 1 Halo treatment at the time of the first BBL treatment yields the best results, but treatments are custom tailored according to the individual patient's needs.



**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 and 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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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!

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# CANCER RESEARCH CONTINUES TO PROVIDE HOPE EVEN IN THE MIDST OF THE COVID-19 CRISIS

The American Society of Clinical Oncology (ASCO) recently held its annual scientific meeting in a three-day virtual event. One of the major topics addressed at the meeting was the impact the COVID-19 pandemic has had on cancer patients. As one might expect, ASCO reported, “In patients with cancer and COVID-19, cancer that is progressing was independently associated with an increased risk of death, according to an analysis of 928 patients.”

According to data from the COVID-19 and Cancer Consortium (CCC19) registry, which included a variety of cancer types, the 30-day mortality and severe illness rates in this group of patients studied were significantly higher than previously reported for the general population. The report concluded that longer follow-up is needed ... “to better understand the impact of COVID-19 on outcomes in patients with cancer, including the ability to continue specific cancer treatments.”

As a result of this crisis, Florida Cancer Specialists & Research Institute (FCS) has instituted many new protocols to help protect the safety and well-being of our patients and clinical staff. These include offering telehealth video appointments to patients when appropriate, visitor restrictions at our clinics, daily health screenings for patients and staff, as well as the use of masks, social distancing and other safety measures.

Despite the concerns COVID-19 is causing, FCS is continuing to pursue cancer research through its strategic partnership with Sarah Cannon Research Institute, one of the leading clinical trial organizations in the world. The clinical research program at FCS encompasses Phase I, Phase II and Phase III trials for a wide range of cancer types; the majority of new cancer treatments approved for use in the U.S. were first studied in clinical trials with FCS participation, prior to approval.



## Advances Continue in Immunotherapy Research

One of the major areas of research continues to be immunotherapy. More than a dozen types of cancer are now receiving FDA-approved immunotherapies, and there are a variety of clinical trials for even more types of cancer. There are several different types of immunotherapy treatment; however, all of these therapies use the body’s own immune system to attack cancer cells. Specifically, at the ASCO scientific meeting, presentations were made on novel immunotherapies for glioma (a type of brain cancer), kidney and bladder cancers, as well as melanoma skin cancer, among others.

## Advances in Diagnosing Cancer

An increasing understanding of the molecular basis of cancer has enabled advances in detecting and diagnosing cancer, as well as determining which patients are likely to benefit from certain types of targeted therapies. The term “molecular diagnostics” describes a group of tests that can identify certain biomarkers from blood, urine, tumor or other samples that could help identify cancer cells earlier. New tests continue to be developed that offer much promise for detecting disease at a very early stage and for implementing personalized patient care.

## WORLD-CLASS CANCER TREATMENT, CLOSE TO HOME

Florida Cancer Specialists & Research Institute (FCS) has a statewide network of expert, board-certified physicians who bring world-class cancer treatments to local communities, both large and small, in locations throughout Florida. FCS is also a strategic partner of the Sarah Cannon Research Institute, one of the leading clinical trial organizations in the world. This alliance provides FCS patients access to the newest, most innovative and most promising new treatments.

Florida Cancer Specialists treats patients with all types of cancer and offers a number of services, including an in-house specialty pharmacy, an in-house pathology lab, financial counselors at every location and 24/7 access to care managers, who help deliver the most advanced and personalized care in your local community.



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# ISCHEMIC OPTIC NEUROPATHY

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



**I**SCHEMIC OPTIC NEUROPATHY (ION) is when blood does not flow properly to your eye's optic nerve, eventually causing lasting damage to this nerve. With ION, you suddenly lose your vision in one or both of your eyes.

The optic nerve carries signals from your eyes to the brain. Your brain then turns these signals into the images you see. When blood flow to the optic nerve is reduced or blocked, the nerve does not get enough oxygen or nutrition. The optic nerve stops working properly, and eventually dies.

ION can affect your central (detail) vision or side (peripheral) vision – or both. Because a damaged optic nerve cannot be fixed, any vision loss from ION is usually permanent. Usually, people with severe ION still have some peripheral vision.

## WHAT ARE SYMPTOMS OF ION?

If blood flow to your optic nerve is reduced, your vision will darken for a few seconds or minutes then return to normal. This is called a transient ischemic attack (TIA). This kind of attack can happen before ION begins. If you have TIA symptoms, call your ophthalmologist or primary care doctor right away. Finding and treating the problem as soon as possible can help prevent further vision loss from ION.

## WHO IS AT RISK FOR GETTING ION?

**While anyone can get ION, you are more likely to develop it if you:**

- are over 50 years old
- have high blood pressure
- have diabetes
- smoke cigarettes
- have clogged arteries
- have glaucoma
- have migraine headaches
- have swelling of arteries in the head (called temporal arteritis)





**Healthy Eye**



**Ischemic Optic Neuropathy**

## **ISCHEMIC OPTIC NEUROPATHY (ION) DIAGNOSIS**

Your ophthalmologist will do an eye exam to look for warning signs of ION. He or she will dilate (widen) your pupils with eye drops and then check for swelling of the optic nerve and blood vessels in the back of your eye.

Your ophthalmologist may also test your side (peripheral) vision and measure the fluid pressure within your eye.

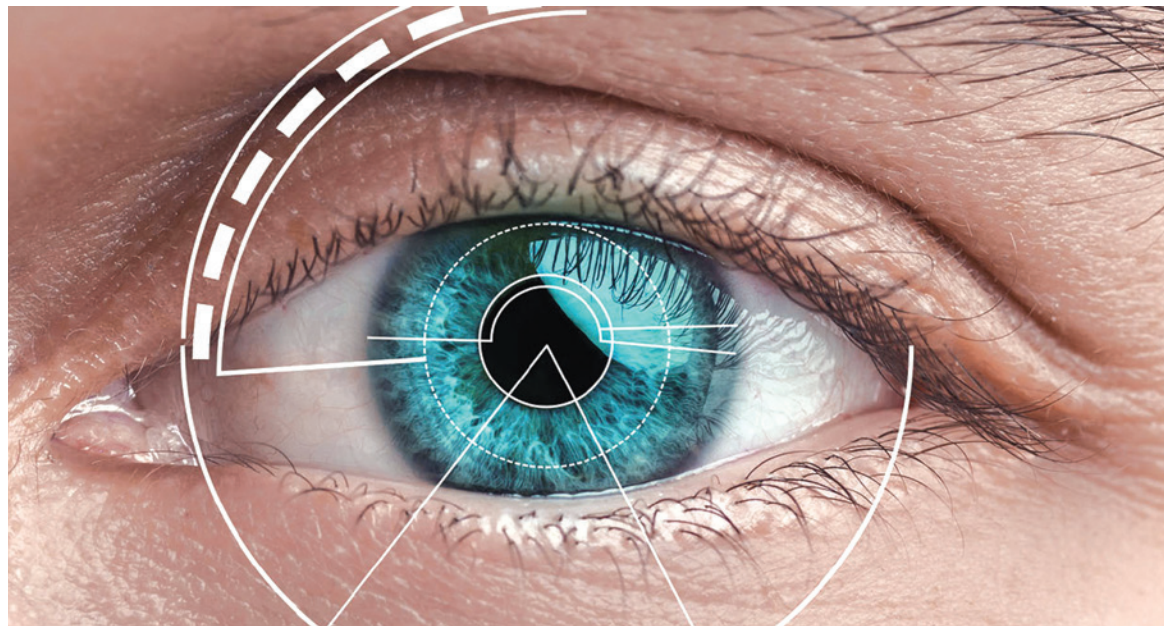
## **ISCHEMIC OPTIC NEUROPATHY (ION) TREATMENT**

If your ION is caused by swelling of arteries in your head (temporal arteritis), your ophthalmologist

may have you take steroid (prednisone) pills. This medicine may prevent ION from developing in your other eye.

Your doctor may want to treat any other health problems you have that put you at risk for ION. He or she may prescribe medicine for high blood pressure, diabetes, clogged arteries, migraine headaches, or other health problems.

There is no treatment to improve vision loss from ION. However, your ophthalmologist may suggest useful materials and ways to help you see with low vision.



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## **Lauren R. Rosecan**

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

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# Saving Teeth:

## Determining If Teeth Should Be Treated or Replaced

**P**atients every day face the decision of whether or not to have teeth treated or removed. The choice can be difficult from an emotional viewpoint as well as a functional one. In many cases, the tooth or teeth in question are not causing any pain. What may not be understood is the potential long term damage that can be caused by keeping a hopeless tooth in the mouth. A number of research articles have demonstrated the considerable impact maintaining a hopeless tooth can have on adjacent teeth and bone. It has been shown that this situation can lead to a 10x greater chance of losing a neighboring tooth and possibly increasing the cost of treatment. Understanding some basic criteria may help determine if you should consider treating or replacing a tooth in question.



In many cases, a patient is made aware of a tooth issue when a cavity develops. In some instances the issue can be corrected with a small filling. In other cases, more extensive dental work may be involved. It may be advisable to have a periodontal evaluation of the teeth being considered for treatment to be sure the surrounding bone and tissue are strong enough to maintain your investment for a good period of time. This would be similar to determining if the foundation was solid prior to building a new home. A common sense approach can be used to help make these decisions. For example, no one would want to invest in new furniture or carpets in a home that was burning down. A periodontal evaluation helps determine if the surrounding bone and gum are sufficient to support the teeth being examined.



### Periodontal Evaluation:

A periodontal evaluation includes determining how much gum and bone support remains around the teeth. The painless examination typically includes reviewing a current set of dental x-rays, measuring the “gum pockets” and “gum loss” around the teeth, checking for tooth mobility and considering the amount of healthy root that remains in the bone. These parameters can help predict the prognosis of the teeth in question. There is no hard and fast rule that will give a black and white answer, but these indicators can help reveal the health of the tooth’s foundation. This information, along with the extent of the cavity present in the tooth, can be weighed together in the decision as to treat or replace the tooth.

A simple example might be a tooth requiring significant dental work that has a short root, significant bone loss, deep “gum pockets” and is loose. Clearly, this may not be the best candidate for extensive dental work as the prognosis for keeping the tooth a long time is poor. In addition, the mobility of the tooth will likely help destroy the bone in the area more rapidly, potentially condemning the adjacent tooth as well. In this situation, removing the tooth and replacing it may be a better and more cost effective option.

Compare this to a tooth with a small cavity, no bone loss, no mobility and slight gum inflammation. In this case, the tooth seemingly could be treated in a fairly conservative manner and be retained with a good prognosis.

**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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# DRY EYE AFFECTS MILLIONS OF INDIVIDUALS IN THE U.S.: WHAT YOU SHOULD KNOW

By Monique Barbour, M.D.

If you wake up and your eyes are barely lubricated, find it hard to blink enough tears, have a gritty sensation in your eyes throughout the day, or are feeling that your eyes are simply irritated, you might be suffering from “dry eye”. It occurs when the quantity or quality of tears diminishes and can no longer lubricate the eye adequately. Clear Vue Eye Center wants to educate the community on the importance of getting a proper diagnosis and understanding the issues that coincide with Dry Eye by sharing the following publication from the AAO (American Academy of Ophthalmology) concerning dry eye.

## American Academy of Ophthalmology: Understanding Dry Eye

**DRY EYE SYNDROME** is one of the most common problems affecting the general population and can cause problems that range in severity from mildly irritating to debilitating. Dry eye syndrome is a general term that describes the state of the front of the eye in response to a breakdown in the natural layer of tears that coats the front of the eye, called the tear film. Normally, this layer of tears is a stable, homogenous layer that not only provides the cornea and conjunctiva a healthy buffer from damage were it constantly exposed to the air, but this interface between the tear film and the air is also responsible for a significant amount of the focusing power of the eye. When the tear film becomes unhealthy, it breaks down in different places on the cornea and conjunctiva, leading not only to symptoms of irritation, but also to unstable and intermittently changing vision.

While there are numerous different symptoms one can experience, prominent amongst these symptoms is tearing; naturally, a patient may wonder why their eye can be “dry” despite producing plenty of tears. This is because the unhealthy tear film and the irritation that comes from it stimulates the brain to produce a wave or reflex of tears to help counteract the irritation. However, this reflex tearing is simply insufficient to correct the overall problem. For this reason, dry eye syndrome could more appropriately be termed “Tear Film Dysfunction.”

## Other symptoms of dry eye syndrome or tear film dysfunction include:

- Burning • Stinging • Itching • Tearing
- Sandy or gritty feeling
- Scratchy or foreign-body sensation
- Discharge • Frequent blinking
- Mattering or caking of the eyelashes (usually worse upon waking)
- Redness
- Blurry or fluctuating vision (made worse when reading, computer, watching television, driving, or playing video games)
- Light-sensitivity • Eye pain and/or headache
- Heavey eye lids • Eye fatigue

## Epidemiology

Dry eye is a common ocular condition and a major reason for visits to ophthalmologists. Its prevalence varies widely among epidemiological studies depending on how the disease is defined and diagnosed, and which population is surveyed. It is estimated to be 7.4%–33.7%.

Moreover, the definition of dry eye is still under continual revision, and the lack of a single diagnostic tool challenges ophthalmologists worldwide. The 2007 Report of International Dry Eye Workshop recommended to combine subjective symptoms with objective clinical tests to confirm dry eye diagnosis.

## Causes

- Allergies
- Decreased hormones associated with aging pregnancy
- Thyroid eye conditions
- Eyelid inflammation (blepharitis)
- Medication/supplement use, including psychiatric medicines, OTC cold medicines, anti-histamines, beta-blockers, pain relievers, sleeping pills, diuretics, Hormones replacement, and oral contraceptives
- Sjogren's syndrome (dry mucus membranes throughout body)
- Other autoimmune disorders including Lupus and/or Rheumatoid Arthritis
- Chemical splashes / injuries to the eyes
- Eye surgery
- Infrequent blinking, associated with staring at computer or video screens, and Parkinson's
- Environmental (dusty, windy, hot/dry)
- Contact lens use
- Neurologic conditions, including stroke, Bell's palsy, Parkinson's, trigeminal nerve problem,
- Exposure keratitis, in which the eyelids do not close completely during sleep
- Post refractive surgery (LASIK or PRK), it may generally last three to six months, or longer
- Inflammatory eye conditions, including Herpes virus infections and uveitis / iritis
- Diabetes
- Vitamin A deficiency (rare in US)



## Management

Depending on the causes, there are numerous treatments for dry eye syndrome / tear film dysfunction, but the more common treatment modalities include:

- Intense pulse therapy
- Artificial tears (preferably ones without a redness-reliever component in them)
- Longer acting agents such as artificial tear gel and ointments and lacrisert
- Tear conserving interventions such as punctal plugs
- Warm compresses
- Eyelash scrubs
- Prescription medicines such as Restasis (increase tear-production) or Xiidra (mechanism unclear)
- Topical ophthalmic steroids are helpful in controlling the inflammatory aspect of the disease.
- Oral flaxseed oil or fish oil supplements 2000mg/day has also been found to be useful in alleviating symptoms and decreasing the frequency of topical agents.

## CLEAR VUE EYE CENTER

Our comprehensive eye examination uses the latest state-of-the-art instrumentation to diagnose and treat:

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- **Pterygium and Eye Whitening**
- **Laser Vision Correction Surgery**
- **Community and Non-Profit Services**
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# CALLA GENICS OFFERS REAL SOLUTIONS FOR SEXUAL HEALTH ISSUES



**T**he standard treatments for erectile dysfunction are prescription medications or injections that offer temporary results. However, there is a better way than the standard of care by actually getting to the root cause of erectile dysfunction (ED). Many times, ED is caused by vascular issues that can narrow arteries with plaque buildup. If you have atherosclerosis, you might also have plaque that is causing ED. Over 80% of Erectile Dysfunction (ED) issues are caused by reduced blood flow.

**GAINSWave** is a revolutionary, non-invasive treatment that addresses the underlying causes of ED. GAINSWave uses scientifically proven technology through sound waves to stimulate blood circulation, tissue regeneration, and removes plaque buildup.

GAINSWave utilizes high frequency, low-intensity soundwaves to improve blood flow to the penis, remove micro-plaque, and stimulates the growth of new blood vessels. GAINSWave uses a specific protocol designed to optimize efficacy, safety, and results. GAINSWave has developed a protocol to treat ED and Peyronie's disease (scar tissue) as well as enhance sexual performance.

There have been multiple peer-reviewed studies that indicate that GAINSWave treatment can potentially cure ED in some patients. The sooner you intervene with treatment, the better your outcome will be.

Almost everyone will experience a decline in sexual functioning. But with the advent of Regenerative medicine, ED is no longer an inevitable part of aging. GAINSWave is based on a series of over 30 clinical studies showing a greater than 75% success rate in ED.

## GAINSWAVE FAQ

**Q: How long does it last?**

**A:** Treatment has been medically proven to provide patients with results for 2-3 years.

**Q: Is the treatment only for men with ED?**

**A:** No, treatment is available for any man looking to enhance sexual health and performance. A medical condition like ED or Peyronie's disease does not have to be present for men to benefit. In fact, many healthy men without an issue opt for treatment to "biohack" or optimize their performance and/or as a prevention method.

**Q: What is the difference between GAINSWave and ED medications like Viagra or Cialis?**

**A:** This non-invasive treatment uses shockwaves to address the root cause which is poor blood flow. There is an increased opportunity for spontaneity with your partner by not having to pop pills and plan for intimacy. Those with pre-existing health conditions like diabetes, high blood pressure or heart disease are safe to opt for treatment because there are little to no known side effects.

**Q: Is this procedure new?**

**A:** Although relatively new to the United States, shockwave therapy has been used as successful treatment in Europe for more than 15 years.

**Q: How many treatments are required?**

**A:** The number of required treatments depends on the severity of your symptoms and goals, but typically 6-12 is standard. Maintenance sessions after treatment are also available as needed.

**Q: What are the advantages of GAINSWave over other "Male Enhancement" procedures?**

**A:** Treatment differs from other procedures for many reasons including, it is completely non-invasive, drug and surgery free. The sessions treat the root cause improving blood flow, providing long-lasting patient results.

The improvement in erectile function and overall sexual performance after treatment for men has been incredible. Thousands of men have reported:

- Enhanced Erections
- More Spontaneous Intimacy
- Increased Sensation
- Long-lasting Results
- Better Orgasms
- Overall Improved Sexual Performance

## WOMEN CAN BENEFIT FROM WAVE THERAPY

Wave therapy is a safe, non-surgical, non-invasive, drug-free solution for women to enhance sexual performance and function as well. Pulse waves repair blood vessels, which improves blood flow to the vagina. Women can expect to experience increased sensitivity and lubrication, as well as improved physical appearance.

**Calla Genics** specializes in medical aesthetics, non-surgical treatments and hydration therapy that rejuvenate a healthier and happier YOU. Their new and innovative approach uses your body's own regenerative active agents – in the form of own-blood therapies resulting in longer lasting, naturally impressive outcomes.

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# Removing the Stigma on Marijuana



**T**he Marihuana Tax Act of 1937 and Richard Nixon's "War on Drugs" placed a stigma on the Cannabis Plant that should be negated. For more than 80 years Americans were made to believe that Cannabis, both Hemp and Marijuana, were negative products for our use and consumption. Those 80 years were the years that humanity advanced technologically faster than any time in our existence and we have learned more than anyone could have imagined. Prior to the demonizing cannabis, we learned that hemp was one of the world's largest industries. Textiles, Clothing, & Bioplastics were among its markets. Our first three American Presidents were Hemp farmers. The Declaration of Independence is written on paper made from hemp. It was a global industry halted overnight by the signing of The Marihuana Tax Act of 1937. There are conspiracy theories as to why it was created but, we all also know how the plants remained available to Americans from there. Cannabis suffered a second devastating hit when Richard Nixon declared his War on Drugs. Too many theories exist about that one.

Fast forward to present day. We now live with our eyes open and we are accepting to ancient but now modern medicines. Science tells us Cannabis plants are either Hemp or Marijuana. Both have Males and Females and there are two strains, Indica and Sativa. The microbial breakdown of each species shows they have the same components, (Cannabinoids, Flavonoids, & Terpenes) just different concentrations of each.

THC, CBD, CBC, CBN, and CBG having the higher levels. The major difference between Hemp and Marijuana is the amount of THC and CBD they produce.

**THC (tetrahydrocannabinol)** THC has analgesic, anti-spasmodic, anti-tremor, anti-inflammatory, appetite stimulant and anti-emetic properties, but also mind-altering effects (euphoria). THC and its active metabolite, 11-Hydroxy-THC, are responsible for the "high" associated with use of marijuana. Marijuana's THC level can reach 30.0% and higher while Hemp's THC level is extremely less around 0.3%.

**CBD (cannabidiol)** CBD has anti-inflammatory, anti-convulsant, anti-psychotic, antioxidant, neuroprotective and immunomodulatory effects but does not produce mind-altering effects like euphoria. CBD is also thought to support sleep and reduce nausea, particularly related to chemotherapy. CBD, in combination with THC, modulates some of the side effects of THC, including reducing THC-induced anxiety. The CBD concentration level differs almost as much in the Cannabis plants, but opposite of the THC levels. Hemp has a higher level of CBD and Marijuana has a lower level of CBD.

Most of us now know, or at least we have heard something about CBD and Medical Marijuana. The patients receiving treatments are reaping the benefits, such as chronic pain reduction from fibromyalgia and neuropathy, relief of anxiety from PTSD, relieving migraines, and helping with arthritis. The list goes on. There are thousands of Palm Beach County testimonies recorded of reduction of pharmaceutical consumption, some by ½ and more, leading them to living a much better, healthier, happier life. The science behind the medicine has long since been proven that medical marijuana is more than just smoking pot. We are here to show you.



## Dr. Nicola Masse

Was born in England and moved to the United States with her parents and sister when she was 10 years old. They settled in Wellington, Florida where Dr. Masse

flourished in school. She remained in the top 5% in academics throughout her entire scholastic career. She is alumni to one of the first graduating classes from Wellington High School.

Staying close to home, Nicola went on to receive her Medical Degree from the University of Miami School of Medicine. She completed her residency in Pediatrics at Jackson Memorial Hospital in Miami, Florida.

Nicola Masse M.D. is a Board-Certified Pediatrician practicing Pediatrics in Palm Beach County. She has treated and served two generations of our youth. She is an enthusiastic and professional physician with an unparalleled reputation for compassion and knowledge.

Three years ago, Dr. Masse switched her medical field from Pediatrics to Medicinal Marijuana. Her interest in medicinal marijuana was piqued in 2015 while doing research on CBD for an epileptic patient. Amazed by the results her focus turned to understanding more.

As I sat in Dr. Masse's office for this interview, it was difficult not to notice her collection of files, books, and research papers which seemed to be in the thousands. I humorously questioned, "All this for smoking pot?" She replied, "There's a lot more to medicinal marijuana than just smoking pot."

Dr. Masse has completed extensive training and education. She is a credited member of AMMPA, American Medical Marijuana Physicians Association. Dr. Masse has Evaluated, Consulted, and Treated over 5000 Florida patients since 2017 and in May of this year, 2020, Nicola Masse M.D. opened a private practice solely in CBD & Medicinal Marijuana care.

Contact Wellington CBD & Medicinal Marijuana Care Today!

**10160 Forest Hill Blvd.  
Suite 120 Wellington,  
FL 33414  
561-798-7420**



# Do You Need a Little Something to Brighten Your Day?

## Many People are Requesting Aesthetic Treatments, But are They Safe During this Unique Time?

It's been about five months now that we've been safely confined to the comforts of our homes. Many people are now starting to go back into the workforce and other activities, while others will be continuing their face-to-face meetings with co-workers via video chat platforms for a while longer.

Of course, we're not going to back to our "normal" sense of lives as they once were for some time, but we are starting to see a change and an overall acceptance of our new life as it is. In saying this, many people are calling Aesthetic treatment Centers in Naples office asking about their protocols for patient safety because they want to maintain their aesthetic needs or add treatments to their repertoire to look better, feel better and boost their confidence.

If you haven't had Botox or Fillers for a while, you might just now be saying to yourself, "It's time, but is it safe?"

### Aesthetic Treatment Centers (ATC) is the Leading Medical Spa in Naples

#### ATC's Safety Protocols

Aesthetic Treatment Centers in Naples is always on the cutting edge of the latest procedures, and their modern, clean-lined locations are representative of their high standards, and you can trust that they are going above and beyond to accommodate their patients. From the waiting area to the treatment rooms, rigorous disinfection and sanitizing are continued throughout the day, and thorough attention to cleaning after each patient visit is impeccably implored by the entire staff.

Each patient is required to wear a face-covering in and out of the office, and there is no patient to patient contact, directly or indirectly. The appointments are spaced out so that each patient has privacy and 100% attention during their procedure or consultation. The staff is tested regularly and they are testing patients as well.

Upon arrival, each patient's temperature is checked, and they are asked to fill out a questionnaire. The staff also has their temperature checked daily and wear masks and PPE to make your visit worry-free.

#### IV Therapy

Many patients ask for ATC's IV therapy as an additional treatment during their visit. IV therapy is known to boost immunity, improve energy levels, increase hydration, illuminate the skin, and help fight off airborne illnesses.

From vampire facials, vaginal rejuvenation to threading, body sculpting, laser resurfacing, skin tightening, and injectables, Aesthetic Treatment Centers has got you covered. No matter what your areas of concern are, or what treatment you're in need of, ATC is known as the creme de la creme of aesthetics. In fact, Mindy DiPietro, the CEO, and Dr. Kathleen Marc are often referred to as the dynamic duo. Your visit will be personalized, and you will receive not only top-quality-care but also extra add-ons to make your day a little brighter.

#### ATC is Gaining Attention

Mindy and Dr. Marc were recently featured on Kathy Ireland's show, Worldwide Business with Kathy Ireland to discuss the connection between science and beauty. You can view the full video here, ATC. [WorldwideBusinessYoutube.com](https://www.youtube.com/watch?v=...).



#### Main Office:

720 Goodiette-Frank Road, Suite 300, Naples FL 34102

#### Fifth Avenue Location

800 Fifth Avenue South, in Salons by JC, Suite 5 Naples FL 34102

#### Hours

Monday - Friday 9-5 Saturday: By appointment

(239) 322-3790 | [atcnaples.com](http://atcnaples.com)

Whether you're wanting a little boost or a transformation, the tranquil, relaxing environment of the Aesthetic Treatment Centers will take your mind off of the day-to-day issues and give you time to enjoy doing something for yourself.

There is a lot to be said about feeling better, being more confident and looking your best that radiates into the rest of our lives. When we feel good, we give more, do more and are generally content and happier in all circumstances.

Aesthetic Treatment Centers is the newest aesthetic concept in Southwest Florida. They specialize in minimally and non-invasive cosmetic services including fat reduction, body sculpting, wrinkle reduction, hair removal, IV hydration, and feminine rejuvenation.


Their mission is to provide the best quality of service, with cutting edge technology, a multi-modality approach and individualized attention for their clients, which help patients fall in love with themselves all over again. In ATC's commitment to providing the best treatment for our patients, they are always searching for the latest, proven trends within the cosmetic and beauty industry.

At ATC you will find only the most effective, safe and desirable minimally and non-invasive technologies on the market providing their patients with beautiful results.

Mindy DiPietro  
CEO

Kathleen M. Marc, MD  
Medical Director







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# HOW IS YOUR BRAIN HANDLING

## 2020?



**T**hrough quarantines, shelter in place, social distancing, wearing face masks, economic strains, school closures and lots and lots of stress, your brain has been handling the pressure from the pandemic without issue. However, in the past month, without a specific cause, your brain may have been struggling. Why does it seem like it's happening all of sudden? We are past month 4 of our new "normal", so why is July so tough? Why is anxiety and depression and maybe even headaches, happening with more frequency when stress levels are not peaking?

The answer is simple....**INFLAMMATION**. The summer months, heat and humidity create an enormous amount of blood flow in our bodies and most import, our brains. But what exactly is inflammation?

The term for opening of capillaries and increased flow of blood is called vasodilation. Capillaries open and an increase in blood flow occurs in the area. An area of injury may visibly swells up and we describe the area as "swollen" or "inflamed". In the case of body temperature, "when we are too hot, blood vessels supplying blood to the skin can swell or dilate (vasodilation). This allows more warm blood to flow near the surface of the skin, where the heat can be lost to the air." After healing or a reduction in body temperature, the capillaries return to normal through a process called vasoconstriction. This process is happening on an almost consistent basis during the summer months when temperatures can reach into the 90's to 100's, even in the evenings and early mornings.

If the capillaries do not close or do not close fast enough, we help them along. We apply ice (constricting the capillaries) or take a medication that reduces inflammation (such as ibuprofen) or promotes vasoconstriction (such as caffeine).

But, what happens to our heads if our body temperature rises, we experience vasodilation, but

then do not experience vasoconstriction? A headache occurs. This is the result of increased blood flow we can feel through pain receptors covering the brain or scalp.

What if there is increased blood flow in our actual brain? This part of our body does not have pain receptors. Our brain doesn't technically "feel" pain. The result of increased blood flow in the brain that does not constrict is what we call Brain Inflammation.

### What are some causes of vasodilation or increased blood flow in the brain?

- Heat or increased body temperature
- Inflammatory foods such as Gluten or Dairy
- Traumatic Brain/Head injuries
- Concussions
- Viruses such as Lyme
- Medications such as Antibiotics or Anesthesia
- Illness, Sinus irritation or colds/flu

### What happens if there is increased blood flow (inflammation) in a part of the body that we cannot see?

After vasodilation or increases in blood flow, the brain, just as with other parts of the body should enter a period of vasoconstriction where blood flow decreases. If this does not happen, the blood flow or swelling remains. Unlike swelling in a wrist or ankle, the swelling that remains in your brain is not easily observed. Our first indication that we have increased blood flow that is not constricting is from symptoms.

### Some of the symptoms that result from Brain Inflammation are:

- Depression
- Anxiety or related disorders
- Brain Fog
- Fatigue
- Trouble with memory
- Trouble with concentration
- Trouble with learning

- New allergies or sensitivities to food
- Headaches
- Irritability
- Increased pain
- Insomnia or sleep problems

### HOW DO I FIX BRAIN INFLAMMATION?

Because we cannot see increased blood flow in the brain without special equipment, it can be difficult to know it is happening. As mentioned earlier, there are not pain receptors in the brain so we don't have pain to indicate swelling or inflammation. Typically, we notice symptoms that do not seem to resolve as an indication that there's a problem that needs to be fixed. There are medications that can provide some relief. However, when we are prescribing medication based solely off of symptoms, you can easily end up on the wrong medication track and not receive relief. Natural anti-inflammatory supplements can also provide relief as well as an adjustment to diet or change in lifestyle. However we recommend an evaluation and EEG study to confirm the inflammation and then suggest the appropriate treatment options for your situation.

### WHAT IS AN EEG STUDY?

An EEG study or QEEG (Quantitative EEG) is also called a brain map and does just that...it gives us a map of what is going on with the entire brain at one time. We attach electrodes to the whole head, 19 spots, and then record the brain waves with eyes open for 5 minutes and with eyes closed for 10 minutes. This recording is then sent to be read and analyzed. We provide a summary of significant findings and the report shows the result of analyzing the data several different ways. The brain activity is not only compared spot by spot over the entire head, but we can also look at connections, symmetry, how different parts are communicating and all of this data is compared to a



database of peers (same sex, handedness and age). It can help us see what areas of the brain have increased blood flow by indicating what areas of the brain have excessive amounts of slower neuron activity (slow neurons promote more blood flow). Another study that can be helpful is the SPECT scan.

### HOW CAN NEUROFEEDBACK HELP?

Once the areas of inflammation or dysregulation are identified, we use Neurofeedback or EEG Biofeedback to balance the neural patterns and reduce excessive slow activity. Teaching the brain to reduce these waves will help the brain to slow down increases in blood flow and return the brain to a more balanced and flexible state, thus relieving symptoms.

### WHAT IS NEUROFEEDBACK?

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

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".

It is important to understand that the neurofeedback approach does not "cure" or "fix" anything. We teach and guide your brain to produce frequencies which help it relax and/or focus. We provide the brain with

gentle "challenges" and encouragement in a user-friendly, stress-free format so it learns to regulate or shift to healthier states more smoothly on its own at the appropriate time.

### HOW DOES A "BEEP" OR SOUND TRAIN MY BRAIN TO WORK BETTER?

The auditory or sound reward that corresponds to an increase or decrease in desired brainwave activity is able to affect the brain on a neurological level. Auditory reward stimulates auditory pathways, impacts the vestibular system, and has many connections to the reticular activating system, which modulates wakefulness and attention. These systems operate in our brains without conscious effort. Therefore, neurofeedback teaches your brain through automated learning with little or no behavioral effort. Another way to say this is that neurofeedback involves operant conditioning or learning. This type of learning teaches us through a reinforced reward system. The auditory reward (beep) is delivered on a schedule of reinforcement that promotes optimal learning; not too hard and not too easy. This schedule of reinforcement or reward provides just the right amount of resistance to evoke a positive learning pattern.

### WHY TRAIN YOUR BRAIN?

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

Neurofeedback has also been shown to be of remarkable value with school-age children who experience focus and learning problems. Through brain training, children can learn to better concentrate on schoolwork, increase their frustration tolerance level, and are less prone to be overwhelmed with sensory overload while seated in a noisy classroom. With their thoughts more organized, they can focus more clearly on what others say to them and can begin to develop friendships and learn effectively.

### WHAT TYPES OF CONDITIONS DOES NEUROFEEDBACK HELP?

**Symptoms of these conditions, among others, can improve through neurofeedback training:**

- Anxiety • Sleep disorders • Depression
- ADD/ADHD • Sensory processing disorder
- Bipolar disorder • Seizure disorders
- Auditory/visual processing
- Chronic pain/Fibromyalgia • Migraines/headaches
- Traumatic brain injuries • Stroke
- Cognitive decline • Peak performance
- Oppositional defiant disorder • Rages/mood swings
- Attention/focus/concentration
- Reactive attachment disorder
- Autism/Asperger's
- Learning disabilities
- Obsessive compulsive disorder

### 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**, or text us at **(561) 206-2706** or visit our website at **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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**Health & Wellness** MAGAZINE



# Protecting Your Eyes

By David A. Goldman MD

Protecting your eyes from injury is one of the most basic things you can do to keep your vision healthy throughout your life.

You may be somewhat aware of the possible risks of eye injuries, but are you taking the easiest step of all to prevent 90 percent of those injuries: wearing the proper protective eyewear?

If you are not taking this step, you are not alone. According to a national survey by the American Academy of Ophthalmology, only 35 percent of respondents said they always wear protective eyewear when performing home repairs or maintenance; even fewer do so while playing sports.

## Eye Injury Facts and Myths

- Men are more likely to sustain an eye injury than women.
- Most people believe that eye injuries are most common on the job — especially in the course of work at factories and construction sites. But, in fact, nearly half (44.7 percent) of all eye injuries occurred in the home, as reported during the fifth-annual Eye Injury Snapshot (conducted by the American Academy of Ophthalmology and the American Society of Ocular Trauma).
- More than 40 percent of eye injuries reported in the Eye Injury Snapshot were caused by projects and activities such as home repairs, yard work, cleaning and cooking. More than a third (34.2 percent) of injuries in the home occurred in living areas such as the kitchen, bedroom, bathroom, living or family room.
- More than 40 percent of eye injuries every year are related to sports or recreational activities.
- Eyes can be damaged by sun exposure, not just chemicals, dust or objects.
- Among all eye injuries reported in the Eye Injury Snapshot, more than 78 percent of people were not wearing eyewear at the time of injury. Of those reported to be wearing eyewear of some sort at the time of injury (including glasses or contact lenses), only 5.3 percent were wearing safety or sports glasses.

If you have suffered an eye injury, review these care and treatment recommendations. But most importantly, have an ophthalmologist or other medical doctor examine the eye as soon as possible, even if the injury seems minor.

### For all eye injuries:

- DO NOT touch, rub or apply pressure to the eye.
- DO NOT try to remove the object stuck in the eye.
- Do not apply ointment or medication to the eye.
- See a doctor as soon as possible, preferably an ophthalmologist.

### If your eye has been cut or punctured:

- Gently place a shield over the eye. The bottom of a paper cup taped to the bones surrounding the eye can serve as a shield until you get medical attention.
- DO NOT rinse with water.
- DO NOT remove the object stuck in eye.
- DO NOT rub or apply pressure to eye.
- Avoid giving aspirin, ibuprofen or other non-steroidal, anti-inflammatory drugs. These drugs thin the blood and may increase bleeding.
- After you have finished protecting the eye, see a physician immediately.

### If you get a particle or foreign material in your eye:

- DO NOT rub the eye.
- Lift the upper eyelid over the lashes of your lower lid.
- Blink several times and allow tears to flush out the particle.
- If the particle remains, keep your eye closed and seek medical attention.

### In case of a chemical burn to the eye:

- Immediately flush the eye with plenty of clean water
- Seek emergency medical treatment right away.

### To treat a blow to the eye:

- Gently apply a small cold compress to reduce pain and swelling.
- DO NOT apply any pressure.
- If a black eye, pain or visual disturbance occurs even after a light blow, immediately contact your Eye M.D. or emergency room.
- Remember that even a light blow can cause a significant eye injury.

### To treat sand or small debris in the eye:

- Use eyewash to flush the eye out.
- DO NOT rub the eye.
- If the debris doesn't come out, lightly bandage the eye and see an Eye M.D. or visit the nearest emergency room.

## DAVID A. GOLDMAN



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

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

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

Dr. Goldman speaks English and Spanish.

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**F**our years ago this very month I found myself in what was seemingly a perpetual series of events that turned our world upside down. It was one of the most difficult times of my life. In a very short span of a couple of weeks I found myself having been betrayed by people I love very much, criticized, and even cast out. My family experienced the loss of a loved one. And I was without a ministry home – in between jobs.

I needed a breakthrough. I needed the clouds to separate just for a moment so I could make it through the rainstorm of life. I was on the edge of chaos in my life and I needed to keep moving forward. I was faced with a choice: would I give up and stop pursuing God? Or would I press on? Truthfully... I wasn't so sure.

But I knew I had a choice.

Looking back I've learned that there are four things we can do when needing a breakthrough.

## 1. DON'T HAVE ALL THE ANSWERS.

It's OK to not know why... to not know how... to not know when... God desires for our hearts to be open and honest – to realize that we may never have all the answers. Jesus said, "blessed are the poor in spirit, for theirs is the kingdom of heaven." (Matthew 5:3) God can much better fill an empty vessel.

**2. LISTEN.** Once we get to a place where we admit we don't know it all, then we go looking and listening to the One Who does. "For the word of God is living and active, sharper than any two-edged sword, piercing to the division of soul and of spirit, of joints and of marrow, and discerning the thoughts and intentions of the heart." (Hebrews 4:12). The Bible is God's resource for daily living. It can cut through all the garbage and give us the direction we need.

**3. WRITE IT DOWN.** When we listen and take heed to what God is saying, I recommend writing it down because I can almost guarantee that at some point, you're going to question whether or not that really happened. Keep a journal of the times you choose to break through. If the Creator of the universe is willing to speak, I should be willing to take notes.

**4. DO IT.** Now the hard part: move on. Whatever you choose to break through, then now get to it. Sitting around waiting for circumstances to be perfect will result in never doing anything because they'll never be perfect. Get to it!

# BREAKING THROUGH



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These are the steps that worked for me to experience the breakthrough I longed for during that unbelievable tough time two years ago. I'm grateful today because I can now see the good and the "better" that God had for us on the other side of the tough times.

No matter what you're going through remember this: "And we know that for those who love God all things work together for good, for those who are called according to his purpose... For I am sure that neither death nor life, nor angels nor rulers, nor things present nor things to come, nor powers, nor height nor depth, nor anything else in all creation, will be able to separate us from the love of God in Christ Jesus our Lord." (Romans 8:28, 38-39)

Brent Myers

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