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September 2020

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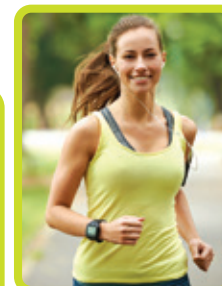


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UPDATE: PROSTATE CANCER AND COVID-19

Prostate Screening Has Been Impacted by COVID-19 According to a July 2020 article* published in the journal *Nature*, the National Comprehensive Cancer Network (NCCN) is advising against routine prostate cancer (PC) screening, including prostate specific antigen (PSA) testing and digital rectal examination (DRE), for all asymptomatic individuals until the pandemic subsides. While the decrease in screening may be concerning for some, the NCCN points out that “the recommendation is based on the fact that the risks of a delay in diagnosis of up to 6–12 months would be marginal for most PC.”

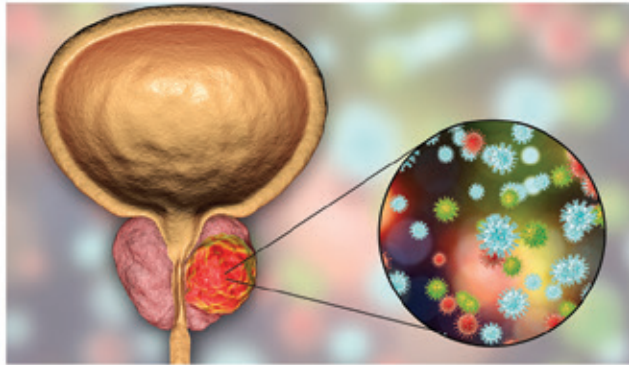
Men who are experiencing any of the symptoms of prostate cancer should contact their primary care physician for a recommendation. Common symptoms of prostate cancer, as defined by the American Cancer Society (ACS), can include:

- Problems urinating, including a slow or weak urinary stream
- Need to urinate more often, especially at night
- Blood in the urine or semen
- Trouble getting an erection (erectile dysfunction or ED)
- Pain in the hips, back (spine), chest (ribs), or other areas from cancer that has spread to bones
- Weakness or numbness in the legs or feet
- Loss of bladder or bowel control from cancer pressing on the spinal cord

*Reference: <https://www.nature.com/articles/s41391-020-0258-7>

Know Your Risk Factors

Although some younger men do get prostate cancer, the risk increases with age. More than 70 percent of all prostate cancer patients are over the age of 65, and about 75 percent of all men over the age of 80 will have some form of prostate cancer, according to the National Cancer Institute. In addition to age, other risk factors include ethnicity, genetic factors and diet. No one knows why, but African American and Latino men have a greater risk of developing prostate cancer than Caucasian men; Asian and Native American men have the lowest risk. There is also some evidence that diet plays a role in prostate cancer. Studies have found a higher incidence of prostate



Other than skin cancer, prostate cancer is the most common form of cancer in American men. About 1 in every 7 men in the U.S. will be diagnosed with prostate cancer during their lifetimes.

cancer in men whose diets are high in fats, particularly animal fats, and low in vegetables. A family history of prostate cancer also increases the chances of developing the disease.

Protecting the Safety and Well-being of Cancer Patients

Prostate cancer patients and their families may experience heightened vulnerability and psychological stress during the coronavirus outbreak. However, many safety precautions have been instituted at Florida Cancer Specialists (FCS) that allow our physicians and clinical staff to continue administering needed treatments for our patients. Our team of cancer experts have enacted stringent procedures and safeguards, including, but not limited to, restricting visitors in the clinics, screening all patients and staff members before they can enter the clinic, requiring mandatory masks for all patients and staff members, practicing social distancing, instituting infection control procedures aligned with CDC guidelines and continuously sanitizing the clinics throughout the day, with rigorous cleaning after hours.

Telehealth services are also available at all FCS locations. In fact, we were among the first in Florida to deliver virtual access to cancer care treatment as the health care crisis began. Whenever possible, patients are connecting with their physician, advanced practice provider, nurses, social workers and oncology dietitians securely and conveniently from home. Patients are receiving laboratory results, reviewing treatment plans and accessing vital care management support while mitigating the impact and spread of COVID-19. To date, FCS has had more than 36,000 virtual visits and we anticipate that number will continue to increase.

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PANDEMIC FALLOUT: THE COVID-HAIR LOSS CONNECTION

By Alan J. Bauman, MD, ABHRS

We can all agree that 2020 has been a stressful year – and unfortunately isn't showing signs of letting up anytime soon. There's plenty of "stress" to go around: concerns for our health and the health of our loved-ones, our financial health, changes in work or school from home, impacts to our lifestyle including our nutritional habits, exercise regimens, sleep, social isolation and distancing, as well as disruption in our self-care routines, all have significant implications for us, our communities and nearly everyone around the globe.



But did you know that this stress could affect your hair? That's right, it's no myth that increased levels of stress can severely impact our follicles. This effect is due in part to our body's survival mechanisms, especially elevated cortisol, and our body's response to them. Prolonged or severe psychological or physiological stress can lead to hair problems such as sudden excessive shedding and accelerated hair thinning, as well as trigger or exacerbate inflammatory problems like dryness, flaking, and types of dermatitis of the scalp – especially if there are underlying scalp and hair loss conditions.

In addition, many recovering COVID-19 patients are reporting "shock hair loss," a "dread shed," with hair literally falling out "in clumps" as a lingering symptom. In fact, according to one recent survey of the members of the "Survivor Corps" Facebook Group, 26% of patients experiencing long-term symptoms, often called #longhauers, report suffering from some degree of hair loss.

COVID-19 & Hair Loss

What we know is that if you have any prolonged fever-related illness, the normal cycling of your hair follicles can be disrupted and shedding can occur. This synchronized shed after a fever called post-



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febrile telogen effluvium was first described in the medical literature around the time of the end of World War I with the outbreak of the Spanish Flu. In 1919, Hazen called the condition post-influenza alopecia in a report in JAMA. Shedding starts about two to six weeks after the onset of fever, peaks about six to eight weeks later, and lasts typically another eight weeks. He also noted that patients never seem to go "completely bald" and generally hair growth returns.

We've all heard about the COVID-19 "cytokine storm" that does damage to many organs. Prominent hair follicle biology researcher at The University of Miami Miller School of Medicine, Dr. Ralf Paus, believes that these same elevated levels of circulating cytokines are the ones that interrupt hair follicle function.

Just like an infection with fever can trigger shedding or telogen effluvium, similar shedding can occur during other stressors like the loss of a job, divorce, or death in the family. The good news is that stress or infection alone doesn't cause permanent hair loss. What we do see however, is that underlying conditions can sometimes be revealed, triggered, or accelerated when there is a "shock" to the hair follicle cycling.

Contributing factors to more permanent hair loss range from genetic predispositions to baldness, to certain health and lifestyle risk factors that may already be stressing on the hair follicles (e.g., illness, hormonal sensitivity like male or female pattern hair loss, hormonal imbalance, lack of sleep, certain medications, poor nutrition, smoking, etc.).

Hair loss or shedding resulting from the physical or emotional stress of COVID-19, assuming the follicle is still functioning, should resolve on its own. Many patients should see the shedding stop and improvements beginning around 8 weeks, but in some cases, it could take anywhere from 6 to 10 months for the hair volume to return.

Taking Care of 'Stressed Tresses'

No one will ever be able to eliminate every bit of stress from their lives, and certainly not during these stressful times, but it's important for patients to pay close attention to their overall health and the health of their hair. If you notice excessive shedding, it may be time to meet with a board-

certified Hair Restoration Physician, certified HairCoach®, or a qualified Trichologist. Beyond what a standard dermatologist can offer, these professionals can evaluate your hair loss situation and risks, scientifically evaluate your scalp, offer advanced supportive or hair regrowth treatments, as well as quantitatively measure and track not just the baseline of your hair loss status at the moment but also monitor your hair regrowth over time – so there’s no guessing whether a treatment is working and your situation is improving.

For some patients, reversing problematic hair may simply come down to treating the hair shedding symptoms for a period of time using an over the counter product like INTACT which contains an organic ingredient that increases the amount of force required for hair fall-out. Rectifying nutritional intake by sticking to a healthier diet, and adding a hair-specific supplement like Nutrafol which contains anti-inflammatory and stress-adaptogen components; or it may include a “Scalp Makeover” by our salonB trichologist, which utilizes a scientific evaluation of the scalp and then a custom therapeutic regimen that might include a stress-reducing and circulation-stimulating scalp massage, scalp steaming and application of highly advanced topical therapeutic products to boost the health of the scalp and follicles. For other patients with underlying hair loss conditions, more advanced therapies such as at-home low-level laser therapy, in-office platelet-rich plasma (PRP) or at-home “VirtualPRP” using growth factors and cytokines, or prescriptions for compounded Formula 82M minoxidil and Fin.481 finasteride may be appropriate.

It is important to know that hair loss or other hair problems caused by stress, whether emotional or physical, can be particularly difficult to self-diagnose. A temporary hair loss episode doesn’t usually happen immediately following the stressful period or triggering event – it often happens weeks,



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or even months afterwards. This means that you may not see the impact that COVID-19 has on your hair until one or maybe even two months later.

To properly diagnose the cause of your hair loss or thinning, or other serious hair or scalp problems, it is important to be evaluated by a board-certified hair restoration physician, who can accurately measure and evaluate your situation—helping determine if your hair loss is in fact due to stress, or if it is a symptom of a more serious underlying health condition.

For more information on COVID-19 related hair loss, or to learn more about the newest hair restoration treatments available, please visit www.baumanmedical.com or call 561-220-3480.

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- We conduct COVID testing for patients and staff when necessary.
- We are limiting the number of patients in our facility, especially in waiting areas, to maintain social distancing.
- All visits are by appointment only; no walk-in appointments will be accepted at this time.
- All patients are 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 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 UV-light Sanitization and Deep Cleaning Protocols 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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Over the years I pursued the quest to find the most effective non-surgical body-contouring technology.

So first, I had Zerona then CoolSculpting and then finally SculpSure, but none of these technologies impressed me like truSculpt® iD. This is the latest Body Sculpting technology that utilizes radio frequency wavelength to non-invasively melt fat under the skin and results in a 24% fat thickness reduction with one treatment alone. The treatment takes 15 minutes per area and multiple areas can be treated at the same time. This radio frequency technology penetrates deep to heat the entire fat layer from skin to muscle. The treatment is very comfortable, it feels like a "warm" massage and the melted fat is eliminated through the lymphatic system, through urine within 8-12 weeks. There is absolutely no down time and all areas of the body can be treated effectively. Since radio frequency energy is being used we obtain excellent skin tightening results unlike any of the previous non-invasive body sculpting devices. In addition, there are no side effects unlike any of the other technologies.



With so many of the body contouring technologies out there, I think it would be helpful if I compare the most popular technologies available:

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Coolsculpt uses freezing to eliminate fat, it can be uncomfortable and can result in skin laxity.

TRUSCULPT® ID VS EMSCULPT

Emsculpt is a muscle toning device, not body contouring. There is not much, if any fat reduction.

SCULPSURE VS TRUSCULPT® ID

Sculpsure can require more than one treatment for 24% reduction and is uncomfortable. Multiple areas cannot be treated at the same time and some areas cannot be treated at all with SculpSure.

Overall advantages of truSculpt® iD over other body contouring devices:

- multiple areas can be treated at the same time
- no side effects
- good skin tightening as well as fat-melting
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Daniela Dadurian, M.D. received her medical degree from the University of Miami School of Medicine. She is certified by the Board of Anti-Aging & Regenerative Medicine and the Board of Laser Surgery. Dr. Dadurian has also completed a fellowship in Stem Cell Therapy by the American Board of Anti-Aging Medicine. She is a member of the International Peptide Society, the American Academy of Anti-Aging Medicine and the Age Management Medicine Group. Dr. Dadurian is the medical director of several medical spa and wellness centers in palm beach county with locations in West Palm Beach and on the island of Palm Beach. She is a leading expert in anti-aging & aesthetic medicine. Her state of the art facilities offer and array of anti-aging, functional medicine, cosmetic and laser therapies.

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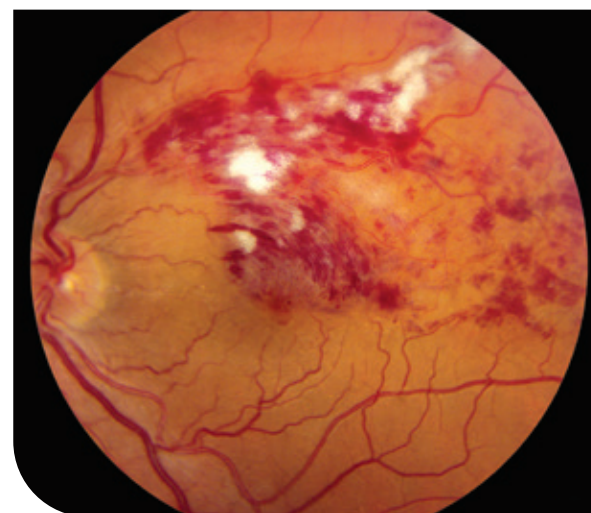
What Is **BRANCH RETINAL VEIN OCCLUSION (BRVO)?**

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



Arteries and veins carry blood throughout your body, including your eyes. The eye's retina has one main artery and one main vein. When branches of the retinal vein become blocked, it is called branch retinal vein occlusion (BRVO).

When the vein is blocked, blood and fluid spills out into the retina. The macula can swell from this fluid, affecting your central vision. Eventually, without blood circulation, nerve cells in the eye can die and you can lose more vision.



BRVO SYMPTOMS

The most common symptom of branch retinal vein occlusion (BRVO) is vision loss or blurry vision in part or all of one eye. It can happen suddenly or become worse over several hours or days. Sometimes, you can lose all vision suddenly.

You may notice floaters. These are dark spots, lines or squiggles in your vision. These are shadows from tiny clumps of blood leaking into the vitreous from retinal vessels.

WHO IS AT RISK FOR BRANCH RETINAL VEIN OCCLUSION (BRVO)?

BRVO usually happens in people who are aged 50 and older.

People who have the following health problems have a greater risk of BRVO:

- High blood pressure
- Diabetes;
- glaucoma and hardening of the arteries (called arteriosclerosis)

To lower your risk for BRVO, you should do the following:

eat a low-fat diet, get regular exercise, maintain an ideal weight and don't smoke.

Your ophthalmologist will widen (dilate) your pupils with eye drops and check your retina.

They may do a test called fluorescein angiography. Yellow dye (called fluorescein) is injected into a vein, usually in your arm. The dye travels through your blood vessels. A special camera takes photos of your retina as the dye travels throughout the vessels. This test shows if any retinal blood vessels are blocked.



Also, your blood sugar and cholesterol levels may be tested.

People under the age of 40 with branch retinal vein occlusion (BRVO) may be tested to look for a problem with their blood clotting or thickening.

BRVO TREATMENT

Branch retinal vein occlusion (BRVO) cannot be cured. The main goal of treatment is to keep your vision stable. This is usually done by sealing off any leaking blood vessels in the retina. This helps prevent further swelling of the macula.

Your ophthalmologist may do a form of laser surgery called MicroPulse focal laser treatment. A laser is used to make tiny burns to areas around the macula but it leaves no scar. This helps stop fluid from leaking from the vessels.

Your ophthalmologist may also choose to treat your BRVO with medication injections in the eye. The medicine can help reduce the swelling of the macula. These injections are a type of medicine called “anti-VEGF.” They can improve vision in about 1 of 2 patients who take them. Injections need to be given regularly for one to two years for the benefit to last.

It usually takes a few months before you notice your vision improving after treatment. While most people see some improvement in their vision, some people won't have any improvement.

For those who don't show improvement with anti-VEGF, steroid injections or steroid implants may be an option. The steroid implant can improve vision in close to a third of people with BRVO.



The Retina Institute of Florida

Lauren R. Rosecan

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

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HOW DIABETES AFFECTS YOUR EYES: AVOIDING EYE EXAMS COULD COST YOU YOUR SIGHT

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All of us should be getting our regular eye examinations to make sure our eyes are healthy, but the importance of people with diabetes getting their recommended exams is critical. In both type 1 and type 2 diabetics, high blood sugar damages the delicate blood vessels in the retina. This damage is called diabetic retinopathy. In diabetic retinopathy, serious complications can cause significant vision loss if left untreated. Sudden vision loss from these complications, such as, a vitreous hemorrhage, or tractional retinal detachment is extremely threatening issues that can cause blindness.



The retina is a layer of neural tissue in the back of the eye, and it's responsible for brain communication, projecting photoreceptors, circadian rhythm regulation, light detection and neural plasticity.

The retina is the only part of the central nervous system that can be visualized and studied directly. This is done via an ophthalmoscope. The information collected during the examination of the retinal pathway is important for helping to identify irregularities and brain function.

According to the American Academy of Ophthalmology, in the article cited below, an alarming number of diabetics do not get their eye exams on a regular basis. The importance of dilated exams is critical due to the damaging effects associated with diabetic retinopathy.

SIXTY PERCENT OF AMERICANS WITH DIABETES SKIP ANNUAL SIGHT-SAVING EXAMS

People with diabetes are at increased risk of developing serious eye diseases, yet most do not have sight-saving, annual eye exams, according to a large study presented at AAO 2016, the 120th annual meeting of the American Academy of Ophthalmology.

Researchers at Wills Eye Hospital in Philadelphia have found that more than half of patients with the disease skip these exams. They also discovered that patients who smoke – and those with less severe diabetes and no eye problems – were most likely to neglect having these checks.

The researchers collaborated with the Centers for Disease Control and Prevention to review the charts of close to 2,000 patients age 40 or older with type 1 and type 2 diabetes to see how many had regular eye exams. Their findings over a four-year period revealed that:

- Fifty-eight percent of patients did not have regular follow-up eye exams
- Smokers were 20 percent less likely to have exams
- Those with less-severe disease and no eye problems were least likely to follow recommendations
- Those who had diabetic retinopathy were 30 percent more likely to have follow-up exams

One in 10 Americans have diabetes, putting them at heightened risk for visual impairment due to the eye disease diabetic retinopathy. The disease also can lead to other blinding ocular complications if not treated in time. Fortunately, having a dilated eye exam yearly or more often can prevent 95 percent of diabetes-related vision loss.

Eye exams are critical as they can reveal hidden signs of disease, enabling timely treatment. This is why the Academy recommends people with diabetes have them annually or more often as recommended by their ophthalmologist, which is a physician who specializes in medical and surgical eye care.



Monique M. Barbour, M.D.

Dr. Barbour A Board Certified Ophthalmologist. She attended Saint Augustine's College in Raleigh, North Carolina where she received my bachelor's degree in Pre-Medicine. Dr. Barbour graduated with honors from Howard University College of Medicine in Washington, D.C. and completed a residency in Ophthalmology at the Albert Einstein College of Medicine in Bronx, N.Y.

After residency, she completed a Glaucoma fellowship at Georgetown University in Washington, DC and a Refractive Surgery fellowship at the world renowned Institute de Clinica Barraquer in Bogota, Columbia. Dr. Barbour has been the medical director of Clear Vue Laser Eye Center, a state-of-the-art vision care center for the past 15 years. As a diplomat of the American Board of Ophthalmology and a member of the American Academy of Ophthalmology, she is dedicated to providing the highest quality of ophthalmic care. Dr. Barbour speaks multiple languages including Española.

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COVID-19 and the Dentist

Most people have significant anxiety regarding returning to their dentist's office due to the pandemic. The American Dental Association (ADA), along with the Center for Disease Control (CDC) have developed information based on research to help relieve this anxiety.



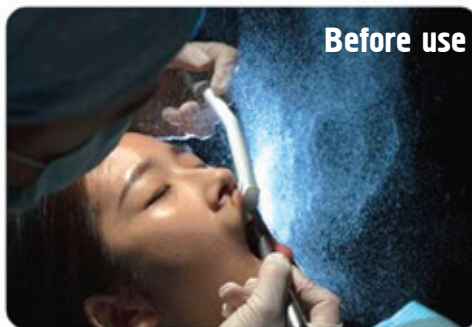
The top priority of any dental office is to protect both the patients and dental team. In general, almost all offices have made significant changes to their safety protocols due to COVID. Dental practices are already held to a very high standard, but these infection control protocols have been enhanced to help manage patient safety in today's world.

What Is Being Done Differently:

Although specifics can vary from practice to practice, there are a number of things that you may notice upon visiting the dentist that have changed. Your dentist and staff will be wearing an increased level of personal protective equipment (PPE) which include masks, face shields, goggles and long-sleeved coats or gowns.

Cleaning protocols have also changed to include disinfectants known to kill the virus that causes COVID-19. You may also notice that frequently touched items such as magazines and refreshments have been removed from the office to help reduce spreading of the disease via contact. In addition, items such as doorknobs, countertops, writing utensils and clipboards are cleaned before and after each patient use.

Arriving and leaving your appointment may also be different than what you have experienced in the past. To help reduce exposure between patients, many practices are asking patients to wait in their cars until being called in for the appointment. This allows



previous patient to leave and for proper office disinfection before you enter. Patients are also being asked to wear masks to the appointment and limiting additional people to joining them (many practices are not allowing any additional people to attend the visit). A screening may be performed prior to entering the office which may include having your temperature taken.

Many practices have taken additional actions to help thwart the spread of COVID-19. We have added dedicated entrance and exit only doors to help eliminate crossing paths with other patients. Air Scrubbers have been added and are a

key purifier in our practice. These scrubbers have a UV filtering system in the AC lines which helps purify the air and attacks contaminants on all surfaces. UV lamps are also placed in strategic points in the office to help with disinfection. During procedures we utilize high power HEPA suction to grab aerosols from the mouth before they can get into the office air.



Continuing to visit with your dentist for regular evaluations and treatment is critical to maintaining a healthy mouth. Protocols are in place to help make the dental office a safe place to visit. It is important to remember to stay home if you have been feeling sick 24 hours prior to your visit, have a fever or have a

sick family member at home. Working together we can help stop the spread of the virus and continue to maintain our oral health.

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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SEXUAL HEALTH FOR MEN AND WOMEN



We've all heard the statistics that heart disease and cancers of the breast, lung and prostate are some of most common diseases in the United States. If not treated, they can lead to untimely death. Surprisingly, we hear very little about the way sexual function can contribute to or foreshadow other health conditions. Sexual dysfunction affects both men and women. Women often succumb to vulvovaginal atrophy (VVA), which causes pain, and men often have issues with ED.

Unaddressed issues and sexual health dysfunction can lead to depression, anger, anxiety, low self-esteem, sexual self-doubt, and poor body image. This can interfere with sexual health and intimacy; ultimately damaging relationships.

WAVE THERAPY FOR MEN

Wave Therapy is a treatment that is all-natural and clinically proven using high-frequency shockwaves to enhance both male and female sexual function, performance, and overall health. It is the only non-invasive procedure that treats the root cause without taking prescription medication.

Over 50% of men experience some degree of erectile dysfunction in their lifetime. There are several factors that influence a man's erection; however, the majority of the cases are caused by decreased blood flow.

Some may turn to oral medications to combat erectile dysfunction and increase blood flow. Unfortunately, these medications only relieve symptoms temporarily without addressing the root cause. Wave Therapy focuses on increasing blood flow to the penis to optimize erections, sensitivity, and sexual performance.

WAVE THERAPY FOR WOMEN

Wave therapy is a safe, non-surgical, non-invasive, drug-free solution for women to enhance sexual performance and function. It's a procedure that uses pulse waves to repair blood vessels, which improves blood flow to the vagina. Women can expect to experience increased sensitivity and lubrication. Although this may help with physical appearance, we often use other modalities to treat vaginal appearance.

O-SHOT FOR WOMEN

The O-Shot is a non-surgical, minimally invasive treatment that uses PRP to stimulate tissue growth and reduce frustrating changes experienced by many women. PRP, or platelet-rich plasma, is a substance obtained from blood that is packed with powerful growth factors.

The O-Shot process begins with harvesting PRP. A traditional blood draw is performed to collect a sample. The sample is then spun at a rapid rate in a specialized centrifuge. This isolates the golden plasma substance from the rest of the blood, and the PRP is prepared for an injection.



O-Shot injections are performed in the comfort in the office. There is little to no pain associated with the injection process. An anesthetic may be available for your additional comfort. Treatment sessions are relatively short, and you should be able to return to your normal daily activities.

Results achieved with the O-Shot will vary for each person. While you may begin to notice some initial results, it is important to be patient as the PRP stimulates your natural growth processes. Additional follow-up treatments may be recommended to achieve and maintain the best results.

P-SHOT FOR MEN

Issues with getting an erection, keeping an erection and maintaining sexual desire can be a result of many factors. Some of the causes are physical – obesity, diabetes, high blood pressure – and psychological – stress, anxiety or depression.

The P-Shot® is a specific way of using blood-derived growth factors to rejuvenate the penis. It is a breakthrough, clinically proven, safe and

effective procedure to help you enhance sexual performance and overall sexual wellness, without the use of any drugs or surgery.

About 60% of men improve after the first P-Shot® and approximately 85% are thrilled after their second P-Shot®. It typically takes about 6 weeks to begin to see the effects, and some men may require a series of two or three P-Shots®, spaced 8 to 12 weeks in between, to reach their desired potential.

**Don't ignore or simply mask
your symptoms, discover
real solutions with Calla Genics.**

Calla Genics specializes in sexual wellness, 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.

CELEBRATE WORLD SEXUAL HEALTH DAY.

Sexual Health Month also encompasses World Sexual Health Day on September 4. This holiday's theme is "Love, Bonding and Intimacy."

SPREAD THE NEWS

Let friends and family members know—via social media, which is the easiest way to spread information far and wide these day — that Sexual Health Month is here. As we often say, knowledge is power, and we want issues of sexual health to be discussed everywhere!

MAKE SURE YOU UNDERSTAND SEXUAL HEALTH

Sexual health encompasses mind, body, and spirit! Everyone should be knowledgeable about sexual health, and it's important to advocate for education. Of course, that starts with ourselves, so make sure you're armed with the latest information.

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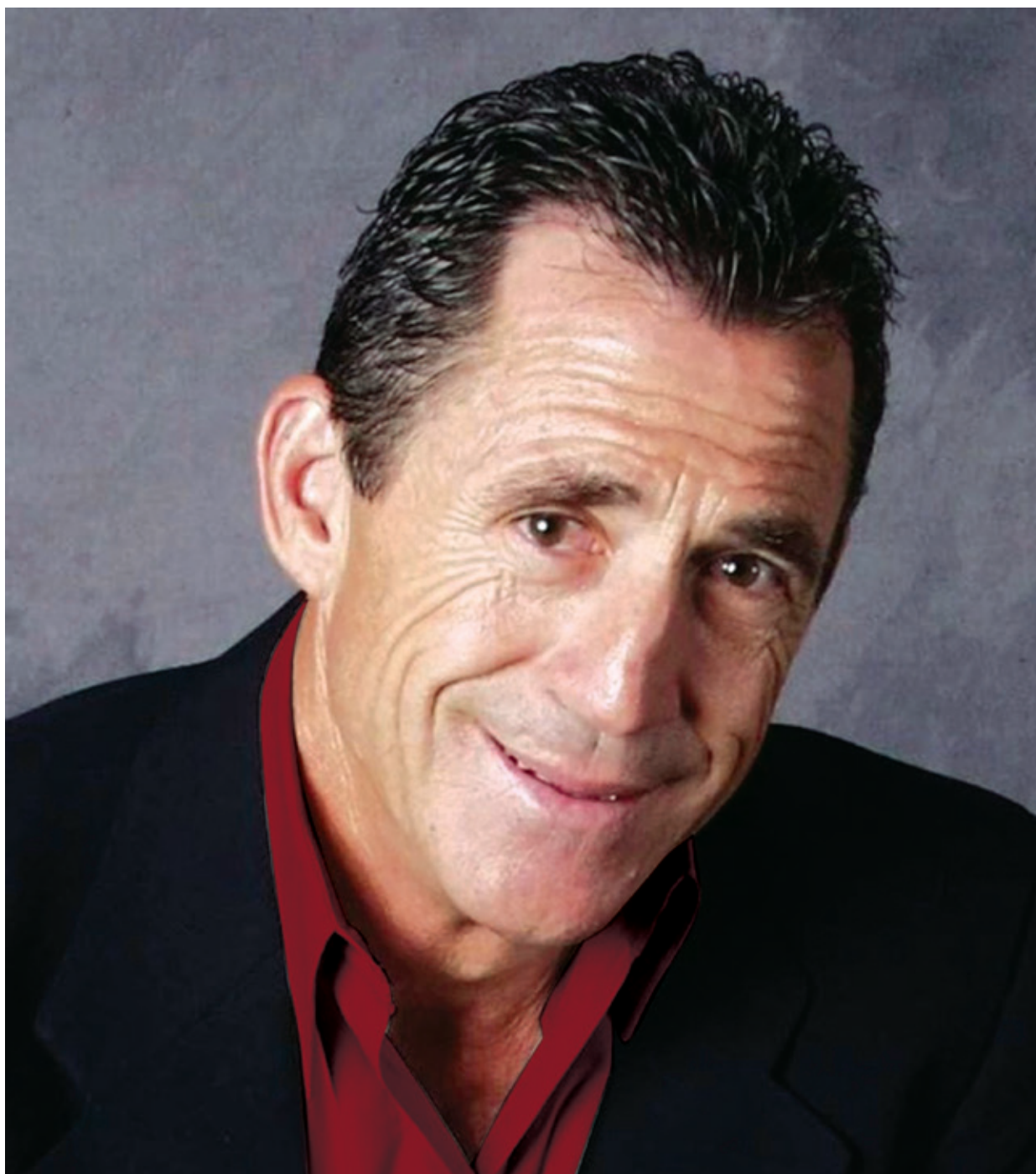
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Gentlemen's Approach Inc.

MEN'S HAIR REPLACEMENT AND HAIRSTYLING

Non-Surgical Hair Replacement

Might be Right For You



WHAT IS GENTLEMEN'S APPROACH INC. ABOUT?

**WE are a "TOTALLY PRIVATE" —
MEN'S Hair Replacement AND
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We provide our services throughout ALL of the Palm Beach County areas and more and proud of our 5 star rating with the **BETTER BUSINESS BUREAU!**

Karen Constantine is the Owner and Stylist of this unique studio, and personally provides ALL clients with her "Hands on" approach and many years of fearned skills, combined with her keen eye for detail and more...Including her real passion and dedication within ALL areas of the Industry!

In addition to being experienced in ALL areas in the Hair Replacement industry, We are just as experienced in ALL of [MEN'S up to date and latest cutting and styling on growing hair as well...**SPECIALIZING IN CORRECTIONAL CUTTING AND ALSO THE SKILLS NEEDED IN CUTTING AND STYLING THINNING AND BALDING HAIR!**

We excel in ALL Elective procedures as well as many medical conditions, such as really making a difference for those with Cancer, Burn victims as well as those with Alopecia! **LADIES AND CHILDREN SEEKING HELP WITH ANY OF THESE OR OTHER CONDITIONS ARE ALWAYS WELCOME!**



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ALL OF OUR ATTENTION IS ALL ON YOU}

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WHO CAN BENEFIT FROM HAIR REPLACEMENT?

- Anyone wanting thicker, fuller hair
- Anyone wanting a more defined hairline
or to fill in thinning areas
- Cancer patients
- Burn victims
- Alopecia

**Karen Constantine, owner and stylists is skilled
in all areas within the hair replacement industry.
She has won multiple awards throughout the
country and Canada for her work and expertise.**

“I’ve been involved in the men’s Hairstyling and hair replacement industry since 1979. I love to help those with challenging hair to work with and have honed my skills through the years and specialize in all areas of men’s hair cutting, especially working with thinning and balding hair. I’m extremely detailed when designing a custom hair replacement. All must be exact, so the finished look and feel is also exact and undetectable. Some clients choose to wear hair replacements for cosmetic reasons, yet we are there all the way for cancer victims and those who have alopecia and other medical reasons. All services are performed in privacy and all clients are seen by appointment only to allow total focus on every client to be uninterrupted.



**Karen Constantine
Owner/Stylist of
Gentlemen’s Approach Inc.**

“I learned the basics from others at the beginning. Then I began to challenge myself every day on my own because I had such a thirst for knowledge and saw my individual skills developing very fast. I entered large contest competing throughout the United States and Canada and came in first place winner! Finally in 1992 I opened my own business and named it Gentlemen’s Approach Inc. We are a totally private studio and offer our many specialized services by appointment only, to ensure comfort and uninterrupted appointments for each client always.”

PLEASE CALL FOR YOUR FREE CONSULTATION OR TO BOOK AN APPOINTMENT.

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ALL SAFETY PRECAUTIONS FULLY ENFORCED!

Have the Best Time Playing Golf

Golf has one of the biggest challenges of all sports, the ball is not moving and you have lots of time to think, prepare to swing and then swing. What if the swing is impeded by pain or mental restlessness? This was happening to Jeff before he came to Balance Point Acupuncture Clinic.



Jeff had been suffering for 6 months of chronic pain in his right elbow which the orthopedic doctor had determined to be epicondylitis (golfer's elbow) due to playing tennis and golf at his local club for a few years. During our first examination and history taking he said he was having problems with his left knee and his back was very stiff after 18 holes so much that he had problems sleeping.

The first couple of treatments were focused on reducing the severe inflammation of the elbow and knee; we recommended herbal patches and cooling creams for daily use. In addition to the acupuncture Jeff received cupping treatments in each session for the stiffness off his back. We use cupping massage treatments for muscle stiffness and tension relief, leaving Jeff relaxed and without any back aches.





After three visits the pain on his elbow and knee was reduced from a 10 to a 5 and the redness and swelling had disappeared. He stopped using over the counter painkillers that were covering the symptom and not promoting healing to the elbow and knee. The acupuncture treatments continued to target the area of pain by increasing circulation and blood flow. He reported sleeping better and his senses in the course were keener, but he still had some pain and was feeling very tired in the afternoons.

The following visit he brought us his recent blood work, it showed that his B12 levels were low and his primary doctor had recommended vitamin D. Vitamin B12 depletion can leave you with low energy and nerves myelin issues that can show

up in the form of tingling of the hands and feet. Vitamin D deficiency stops calcium absorption and was leaving Jeff with mood swings. He began to take vitamin daily and received B12 injections that are fast acting and made him feel energized.

Most people would have stopped playing golf but for Jeff this was not an option. He waited his entire life to retire and play golf leisure with his friends. Nothing is better than a cool sunny Florida winter morning on a luscious green golf course. After 2 months of treatments his elbow and knee are pain free, he maintains his acupuncture treatments every two weeks to relax his back with cupping and keep the pain from returning. Here at Balance Point Acupuncture clinic we enjoy hearing his stories of travel and golf. The pictures are truly stunning.



David Schnitzer D.O.M.

Since leaving the Military in 1992 David has been on a Journey to help people relieve their suffering and promote a healthy lifestyle. David has a B.S. in Psychology from the University of Central Florida. A graduate from the Southeast College of Oriental Medicine where he was awarded a Master's Degree in Oriental Medicine, and received the "Clinical Excellence" award given to the college's highest achieving student. He has trained under Dr. Gordon Xu a Master in Oriental Medicine and has been in private practice for 16 years. He is contracted to do acupuncture at the Hanley Center and a consultant at a local women's outpatient treatment center.



Adriana Goettlemann Dipl. O.M.

Adriana is originally from Cuba and has always had an innate willingness to help others around her. Her passion for acupuncture started when she discovered that it is a modality that allows treatment for multiple ailments. Here at Balance Point acupuncture she specializes in treating pain management and women's health. Her specialty is auriculotherapy for the treatment of mental issues and pain. She is a National Board Certified and licensed by the State of Florida in Acupuncture and Chinese Herbal Medicine and holds National credentials as a Diplomate in Oriental Medicine from The National Certification Commission for Acupuncture and Oriental Medicine. Her academic background is extensive, including a bachelor's degree in Psychology from Florida Atlantic University, a bachelor's degree in Health Science and Masters in Oriental Medicine with a certification for Acupuncture Injections therapy. She also has a Certification for Acupuncture Detoxification therapy.



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The Most Frequently Asked Questions About Amniotic, Placental, and Umbilical “Stem Cells”

By: Regenexx at Gold Coast Orthopedics and Regenerative Medicine



Utilizing birth tissues to harvest stem cells for orthopedic and other areas of medicine is an exciting topic. However, there are currently no FDA-approved uses for allogeneic (coming from someone else) stem cell products other than cord blood or bone marrow transplantations after certain kinds of cancer treatments. More disturbing is the fact that vials of amniotic, placental, and umbilical “stem cells” that sales reps are selling to many physicians DO NOT contain living stem cells. This has been independently tested and confirmed by major universities and Regenexx. We urge patients to arm themselves with knowledge against these deceptive claims.

What are amniotic, placental, and umbilical tissue-based products?

As you may know, babies, while still in the womb, are encased in a fluid-filled sac known as the amniotic membrane. Following the birth of a child, the amniotic membrane and/or fluid can be collected, sterilized, and processed into a variety of tissue-based products. Placental and umbilical tissue can also be obtained for the same purpose. Regrettably, these products are being pitched and sold to doctors as “stem cell” products. Some of these products do contain growth factors that can stimulate stem cells when injected into one’s tissues. However, it is NOT accurate to call

them stem cell products. Legally, representatives shouldn’t be making these claims to physicians and in-turn physicians should not be making these claims to patients.

Are there stem cells in these tissues?

There are in fact stem cells in these tissues at the time of birth. However, once the tissues are processed, the cells are sterilized (killed). If these products did contain stem cells, the product would be classified as a drug by the FDA, requiring approval before being used in human clinical trials. It would not be marketable until clinical trials for each indication were completed

and the drug was determined to provide benefits that outweigh its potential risks. This takes many years and can cost \$1 billion or more. No wonder some unscrupulous companies want to bypass this process. The FDA has issued enforcement letters to companies selling unapproved products stating that their products are regulated as drugs. However, until now, the FDA has only enforced these rules sporadically expecting that the industry would regulate itself. Unfortunately, companies knowing the FDA has stated that they won't get aggressive with enforcement until Nov. 2020, have flourished.

To clarify, either these companies are selling an illegal unapproved drug or more likely, as confirmed by testing, selling dead tissue products that they claim have living stem cells. Both of these scenarios are problematic.

What else does amniotic fluid contain?

Processed amniotic fluid does retain some growth factors and cytokines that can be injected to help promote healing. But, before spending thousands of dollars on a vial of these products, you may want to consider another alternative. At this time, there is no data supporting that the use of these tissue products is better than your own platelet-rich plasma (PRP). PRP contains your own healing growth factors, is not nearly as expensive, and is easier to obtain. PRP is an excellent option that likely accomplishes the same thing, if not better than, a vial of amniotic fluid for a fraction of the price.

Why are sales reps pushing amniotic, placental, and umbilical “stem cells”?

Expensive vials of these tissue-based products represent a scalable, one-size-fits-all product that aligns with the pharmaceutical industry's traditional mass marketing business plan. On the other hand, PRP requires a doctor's office to take blood from the patient and process it into a growth factor-rich therapeutic. Because the PRP comes from the patient's own blood, this eliminates any possibility of bodily rejection. If processed correctly, it can also be customized to the needs of the specific patient. So why are sales reps pushing ready-to-inject vials? For many providers, PRP is inconvenient and time-consuming. Also, most providers probably believe they are using live “stem cells” because they believe what they are being told. Unless a physician has access to state-of-the-art labs to fully investigate a product, they must rely upon sales pitches that are potentially full of deceptive claims.



How do you know these vials contain no stem cells?

If these products 'did contain living stem cells and were approved by the FDA, Regenexx would have signed on to become one of the biggest customers. The reality is that we have conducted lab research, determined the validity of these claims, and uncovered deception. Research scientists at Regenexx and the Interventional Orthopedics Foundation (IOF) were the first to begin testing these claims. Other academic research labs have since validated the initial findings -that is the results concluded that there were no living cells in these products, the products didn't help older stem cell performance, and didn't contain more growth factors than a PRP injection.

Regenexx has published a large percent of all orthopedic stem cell research worldwide, has the world's largest database patient registry tracking outcomes and safety, and is the only protocol when delivered by certified Regenexx physicians, that is receiving insurance coverage by self-insured employers across the country (>7 million covered lives).

Knowledge is power. The marketing of amniotic, placental, and umbilical “stem cells” has been misleading at best. Even though we may be able to justify using them for their growth factors, the reality is that your own PRP or concentrated bone marrow (compliant with FDA regulations) is likely a better overall treatment option.



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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Common Myths About Your Eyes

By David A. Goldman MD

Just because something is a common belief doesn't make it true. A lot of things you have probably heard about your vision turn out to be false. Here are five common myths that have no basis in science.

Sitting too close to the TV will ruin your eyes

Your mom may have warned you that you would ruin your eyes forever if you sat too close to the television or if you watched too much of it. Unfortunately for mom, that's not true. Watching televisions, including LCDs and flat screens, can't cause your eyes any physical harm. The same is true for using the computer too much or watching 3-D movies. Your eyes may feel more tired if you sit too close to the TV or spend a lot of time working at the computer or watching 3-D movies, but you can fix that by giving your eyes a rest.

Your vision will get worse if you read in the dark

Reading in dim light may be harder, but it doesn't damage your eyes. Remember that for centuries people read and worked by candlelight or gas lamps that offered far less light than electric lighting. Having good light will prevent eye fatigue and make reading easier, though.

Wearing glasses makes your eyes dependent on them

Eyeglasses correct blurry vision. You may want to wear your glasses more often so that you can see



clearly, but your glasses aren't changing your eyes so that they become dependent on your eye-glasses. You're just getting used to seeing things more clearly. Similarly, wearing glasses with the wrong prescription won't ruin your eyes. You just won't see as clearly as you would with the proper prescription.

Only boys are color blind

Color blindness, also known as color deficiency, occurs when you are unable to see colors in a certain way. Most commonly, color blindness happens when a person cannot distinguish between certain colors, usually between greens and reds, and occasionally blues. While males are much more likely to develop color blindness, females can also have the problem.

Eating carrots will make your eyesight sharper

Carrots are a good food for healthy eyesight because they contain vitamin A, a nutrient important to your eyes. However, a balanced diet can contain lots of foods that offer similar benefits. In any case, eating a lot of carrots won't help you see better unless you suffer from vitamin A deficiency, which is rare in the U.S. Also, eating too many carrots can be its own problem, causing your skin to turn yellow.



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www.goldmaneye.com

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.



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

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

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

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

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

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

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

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

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