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

November 2014

Marion Edition - Monthly

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Before

After

**Tom Tran, PA-C, MPAs**  
American College of Phlebology

**Mike Richards, PA-C, MPAs**  
American College of Phlebology

**Anthony Alatraste MD, Medical Director**  
Board Certified- ABFM

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Less than 10% of existing spine surgeons actually perform surgery using minimally invasive techniques.

We all know how debilitating back pain can be. It can adversely affect our quality of life and sideline us from participating in our favorite activities.

Gulfcoast Spine boasts two physicians who are nationally renowned for their success in performing minimally invasive spine surgery. Those physicians are Dr. Frank Bono and Dr. James Ronzo. They offer the most advanced diagnostics and treatments for relief of back and spine problems.

The central focus of Gulfcoast Spine is an unrelenting commitment to explore every

possibility of improving patients' lives and helping them return to their prior level of functioning. Providing total patient-centered care in a compassionate, competent manner has and always will be of utmost importance to the entire GSI team.

When you visit Gulfcoast Spine, their medical providers make sure to listen to your questions and concerns, making a thorough list of symptoms before proceeding with a detailed physical exam. These nationally recognized leaders in spine surgery work with you to develop a plan of individualized treatment

to meet your needs.

With their state-of-the-art technology and personable staff, Drs. Bono and Ronzo are dedicated to building a sincere relationship with each patient they treat and doing whatever it takes to ensure your overall health and well-being.

Life doesn't have to stop when pain strikes. We understand how important it is to return to normal, fun-filled activities like hitting the golf course with friends or swimming with the grandchildren on the weekend. Everyone deserves to live a happy, healthy, and pain-free life!

**Consumer Reports**  
September 2013 issue

**Newsweek** 2012  
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1%

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100%

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92%

92% OF OUR BUSINESS IS REFERRED BY A PHYSICIAN OR WORD-OF-MOUTH.

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MORE THAN 12,432 SURGERIES & PROCEDURES PERFORMED.

30,000

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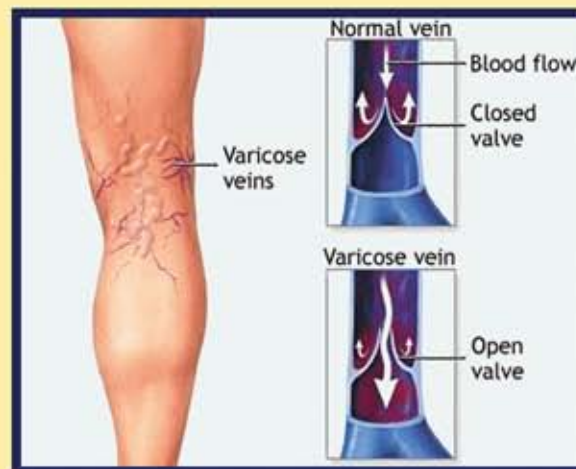
# No Vein, No Pain

**V**aricose veins. Not only are they unappealing, they can also be painful, causing aching, restlessness and heaviness of the affected legs. Due to insufficient blood flow to the affected area and surrounding areas, they may cause swelling and changes to the skin including itching, eczema and skin ulcers. Long thought to be simply a cosmetic issue, varicose veins can pose genuine health risks, so treating them is more than an act of looking better, it's about feeling better too. It is a way to preserve your quality of life and protect your health.

The thought of surgery, however, is enough to persuade many people to just grin and bear them. What most people don't know is that there are simple, safe, and effective ways to treat varicose veins that are minimally-invasive, cause little to no scarring, and offer speedy recovery times.

#### **Treatments and diagnosis tools for varicose veins and venous insufficiency include:**

- **Duplex Ultrasound**, a painless, non-invasive diagnosis tool for varicose veins. Done while the patient remains in a standing position, Duplex Ultrasound is highly successful at showing the structure of the blood vessels and movement of blood through the vessels to determine the best treatment method.
- **Ambulatory Phlebectomy**, a simple treatment used to remove superficial varicose veins that allows immediate standing and walking with no loss of work in most cases.
- **Endovascular Laser Venous System (ELVS)**, a superior and safer outpatient alternative to traditional surgery that uses laser wavelengths to close off the incompetent vein, involving minimal discomfort, high success rates and fast recovery times.



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#### **The RAO Difference**

As Interventional Radiologists specially trained to care for patients with vascular disease, the doctors at RAO's Center for Vascular Health understand not only the impact on self-esteem that varicose veins can pose, but also the health risks of leaving them untreated. Unlike practitioners concerned only with the cosmetic aspects of therapy, the experienced doctors at RAO know which treatments work effectively and safely and produce the highest levels of success over the long term.

We are also here to treat more serious diseases affecting arteries and veins, including peripheral vascular diseases caused by build up of arterial plaque. Our comprehensive approach to caring for patients both physically and emotionally is what has made us a leader in medical imaging in the Marion County area for more than 40 years.

Contact The Center for Vascular Health today at 352-671-4252 and make an appointment to safeguard your health and discover the difference good vascular health can make.

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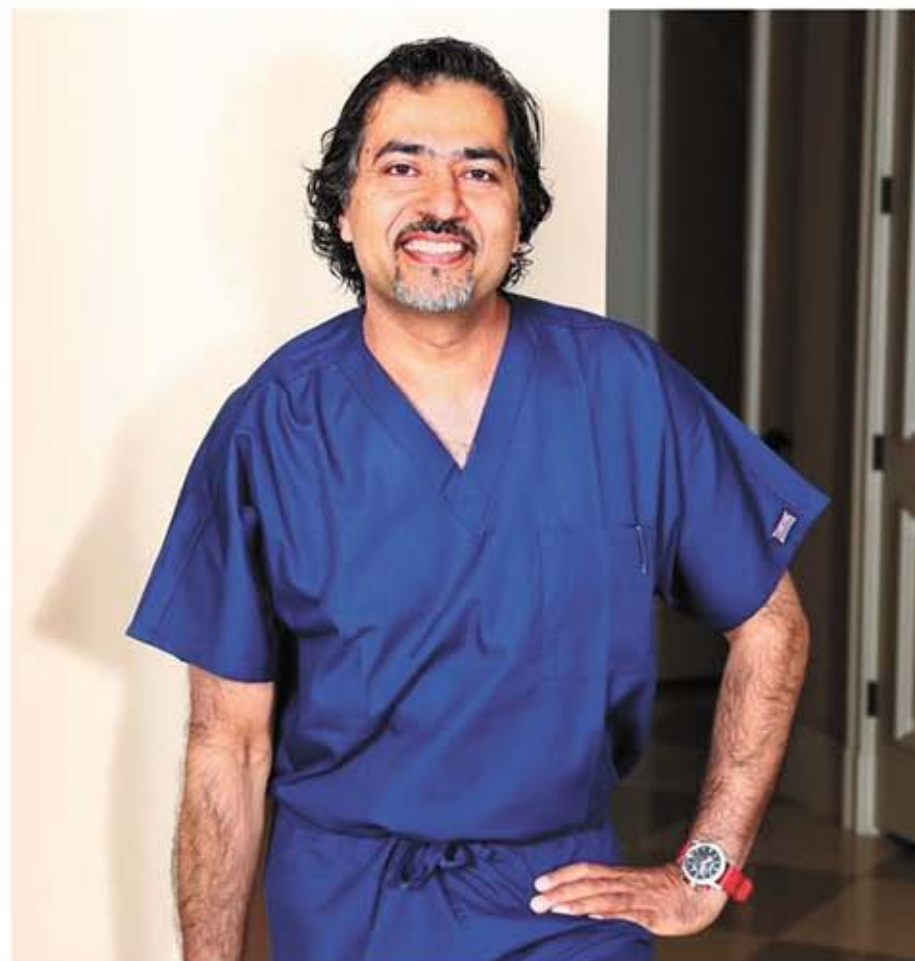
# THE GREAT AMERICAN SMOKEOUT AND GOOD NEWS ABOUT QUITTING

It's that time of year again — mid-November — when the American Cancer Society celebrates The Great American Smokeout. Always on the third Thursday of November, this year the date is Nov. 20. It's a day the media will make some mention of and smokers and their families may take some notice, especially if someone in the family has been trying to quit. And physicians and other cardiologists like myself will make a special point to tell their patients who still smoke how damaging the habit is to their bodies.

The thing is we've all heard this before. I am sure smokers know the habit is not healthy. We doctors, more than any other, are certainly aware of the bad news. I sometimes wonder if we've heard all the "bad news" so often it gets tuned out. Therefore, maybe it is time for some good news instead.

The Great American Smokeout is one day. Some may wonder, "What good is quitting for a single day?" The Cancer Society has some answers — and that's the good news.

- Quit and in just twenty minutes, your heart rate and blood pressure begin to decrease.
- Quit for twelve hours and the carbon monoxide — a poison that displaces oxygen — in your blood goes back to normal.
- Quit for two to three months and your circulation and lung function will improve.
- Quit for one to nine months and that annoying cough and shortness of breath decreases; the cilia in your lungs get working again to keep your lungs clean and safer from infection.
- Quit for one year and your coronary heart disease risk — compared to a smoker's — is sliced in half.
- In two to five years, your stroke risk is the same as a non-smoker's risk. In five years, risk of mouth, throat, esophagus and bladder cancer is cut in half. Cervical cancer risk is identical to that of a non-smoker's.
- In 10 years, dying from lung cancer is 50 percent less likely than for someone who still smokes. The risk of pancreatic cancer and cancer of the larynx decreases.
- In 15 years, the risk of coronary heart disease becomes the same as for a non-smoker.



**Dr. Asad Qamar**  
Chief cardiologist and founder of the Institute of Cardiovascular Excellence.

And perhaps the best news of all: *It all began with a single day.* Make this the year you decide to quit. Start planning now and discuss how to quit with your physician. There are all sorts of plans, medications and therapies to help you. Then look ahead to a time when you are smoke-free. When it's all good news, the bad news simply won't apply to you anymore.



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I'd like to  
dance at my  
daughter's wedding.  
-Samantha Q.

**We're on it.** Swelling, discoloration, and pain in the lower extremity, all symptoms of Venous Insufficiency, are serious indicators of a potentially limb-threatening, even life threatening condition. Samantha had all three of them and missing a dance at her daughter's wedding was the least of her worries. **Limbstitute** was there to help. Our team located the four damaged veins that were causing her problems. We treated them and six months later, **Samantha got rave reviews for her fox trot at her baby's wedding.**



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# CHRONIC LEG SWELLING

By Tom Tran PA-C, MPAs, NCCPA Surgery Board Certified

In the US, over 13% of the population is affected by leg swelling. It costs over 200 million dollars a year to treat and manage this debilitating condition. It can affect your lifestyle, cause pain, infections, skin color changes, blisters, cramping and tired, achy legs.



### Common Causes of Leg Swelling

There are many causes of leg swelling. Some of the more common ones include:

- Congestive Heart Failure
- Venous Insufficiency or Varicose Veins
- Medications
- Obesity
- Trauma
- Blood Clots
- Electrolyte Imbalance
- Kidney Problems
- Infections
- Skin Diseases

### Tests to Determine Cause

In order to treat and manage your leg swelling, the causative factor needs to be determined. It starts with going to your primary care provider or a leg

swelling specialist to first identify what initially caused your leg swelling. From then, the appropriate tests need to be done to rule out certain causes. One example is a specific test of your veins called a reflux study done at a dedicated vein center. This test is highly specific because it gives information about how much blood is pooling in your veins, if you ever had a blood clot, and what your deep and superficial veins look like. Ultrasounds done at hospitals or a non-dedicated vein center will only show if you have a blood clot or not. There are many other tests, including: labs, xrays, CT scans, MRI, and other invasive dye studies. However, ultrasound is non-invasive and cost effective to rule out an easily correctable underlying vein disease. To avoid costly expenses to the patient, these tests need to be properly ordered by your provider or specialist in leg swelling.



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The treatment for varicose veins is a covered procedure if medical necessity is met.

### Treatment Options

Once a cause is identified, treating your swelling has many factors. One common practice from many practitioners is to prescribe a diuretic for leg swelling. For some conditions such as Congestive Heart Failure, diuretics work well. For others, it will not work at all and will be more problematic than helpful. The usual leg elevation, swimming pool exercises, compression stockings, and appropriate skin care helps and prevents complications. Whatever the treatment options are, the appropriate diagnosis needs to first be made.

### Vein Disease May Cause Leg Swelling

One of the most missed evaluations of leg swelling is being able to recognize that an underlying vein disease is causing the problem. Veins bring blood back to the heart. If your veins are damaged from genetics, obesity, pregnancy, standing or sitting a lot for work, wearing high heels, and blood clots, then you will have blood pooling in your legs.

Start with contacting your Primary Care Provider or visiting Comprehensive Vein Center at the Villages where they treat vein disease and consult on many patients with leg swelling to rule out an underlying vein cause. They offer a detailed ultrasound examination of your veins in the legs, educate you about your anatomy and go over the specific results to corroborate care for your condition. If you do not have an underlying vein disease that is causing your leg swelling, they are able to refer you to their vast specialist network that they work closely with to help treat and manage your condition.

Contact Comprehensive Vein Center at the Villages at 352-259-5960, or visit us online at [www.thecvc.net](http://www.thecvc.net).

### Bio

Tom Tran PA-C, MPAs is one of the few Physician Assistants in the US that is NCCPA Surgery Boarded. He has extensive training, which includes 10 years experience in Trauma, General, and Vascular Surgery. He invented the Transcatheter Extractor®. He was awarded Florida PA of the year in 2007, and is the current Treasurer of the National PA Foundation. He is the Clinical Director at Comprehensive Vein Center in The Villages, which has been a state of the art Vein Center designated to vein treatment for over four years. He has performed over 2,500 Laser and VNUS Closure procedures, and over 10,000 combined Ultrasound Guided foam and Visual Cosmetic Sclerotherapy procedures.



To learn more, call Comprehensive Vein Center in The Villages at 352-259-5960, or visit our website at [www.thecvc.net](http://www.thecvc.net).



# Nutri Maqui

*Superfruits blend offers numerous health benefits packed into one fluid ounce serving.*

**F**resh on the heels of its successful debut product launch, Bergamonte, Nutri Lifescience launched Nutri Maqui, a delicious superfruits blend, featuring the benefits of maqui berry blended with several other key high-antioxidant fruits. The supplement, available in an eye-catching bottle, is formulated to support healthy immune response, healthy cholesterol management and healthy blood sugar management.

"American health-conscious consumers really love to drink their nutraceuticals," says Jessica Eng, Nutri Lifescience founder and president. "When formulating this product, we wanted to provide consumers with solutions to their most common health goals—to address healthy immunity, and to support healthy management of blood sugar and cholesterol in tandem with a nutritious diet and healthy lifestyle. Consumers also are very aware that antioxidants help maintain vitality, well-being and health, and they are known to favor any product that enhances their overall daily antioxidant intake. Thus, we formulated Nutri Maqui to help fulfill those goals."

#### The ingredients in this tasty blend are:

**Maqui berry:** Maqui berry is the key botanical ingredient in Nutri Maqui for cellular rejuvenation, healthy immune response and healthy aging. Maqui berry is an excellent source of vitamins A and C, and minerals calcium, iron and potassium. Maqui contains very high levels of bioflavonoid antioxidants such as anthocyanins and polyphenols—the anthocyanins and polyphenols in maqui is among the highest of all fruits and vegetables. Anthocyanins can protect cells from free radical damage, which benefits heart health.

**Acai:** This antioxidant-rich berry is extremely high in anthocyanins, which research has shown to have a healthy protective effect on cardiovascular health. Acai berries are excellent amounts of iron, calcium, fiber and vitamin A.



**Elderberry:** For centuries Europeans have relied on the immune-strengthening properties of elderberry, and research has found that elderberries to have more potent effect than echinacea.

Elderberry is an excellent source of vitamins A, B and C, as well as bioflavonoids and anthocyanins, which positively influence cell function. Research has shown that anthocyanins in black elderberry boost the production of cytokines, the proteins that act as messengers within the immune system, promoting healthy immune response. Elderberries contains nearly five times the level of anthocyanins than blueberry.

**Blackberry:** Blackberry is known to contain anthocyanins and polyphenol antioxidants, which have been shown to up-regulate certain beneficial metabolic processes in mammals. Blackberries are high in vitamins C, gallic and ellagic acids and rutin. Blackberries have one of the highest antioxidant levels of fruits regularly tested.

**Raspberry:** Raspberries are jam-packed with polyphenols and anthocyanins, and are a rich source of vitamin C, dietary fiber, B vitamins, folic acid, magnesium, copper and iron. Raspberries rank near the top of all fruits for antioxidant strength, particularly due to their dense contents of ellagic acid, quercetin, gallic acid, anthocyanins, cyanidins, pelargonidins, catechins, kaempferol and salicylic acid. All these are polyphenolic antioxidants are contributing to the antioxidant capacity.

**Pomegranate:** Pomegranate contains a variety of antioxidants, vitamins and minerals that help to support healthy immunity and cardiovascular function. It also contains high amounts of vitamin K that helps to support bone health and vitamin B5 that helps the body metabolize protein, carbohydrates and fats. Pomegranate also contains a significant amount of calcium, vitamin C, niacin, thiamin and riboflavin. A compound found only in pomegranates—punicalagin—is shown to benefit the heart and blood vessels. Punicalagin is the major component responsible for pomegranate's antioxidant and health benefits.

Each bottle of Nutri Maqui provides 32 one-ounce servings; consumers may take one to two doses daily. Eng adds that Nutri Lifescience welcomes retailers, wellness centers and health care practitioners to carry Nutri Maqui. For more information and to order, visit [nutrilifescience.com](http://nutrilifescience.com) or email [orders@nutrilifescience.com](mailto:orders@nutrilifescience.com).



For enquiries or order, email to [orders@nutrilifescience.com](mailto:orders@nutrilifescience.com) or fax to (941)240-2138. [nutrilifescience.com](http://nutrilifescience.com)

#### Testimonials

*Here are some unsolicited testimonials we've gotten from our consumers of Nutri Maqui and/or Bergamonte:*

*Previously, my immune system is always low until my friend recommended me "Nutri Maqui"*

*~ Liz, USA*

*When I read the study I remember thinking "Wow, it would be great if I could lower my cholesterol like that, but does it really work?". After using this product for three months, on and off, my cholesterol readings was down by 16.4%, and more important, my triglycerides and LDL levels dropped 20%. All this with no other lifestyle or diet change. Just taking the capsules each day produced these results.*

*~ Joe, USA*

# WHY ALL BABY BOOMERS SHOULD BE TESTED FOR HEPATITIS C

By Rick L. Pesano, M.D., Ph.D., Medical Director, Infectious Diseases, Quest Diagnostics

**H**epatitis is an inflammation of the liver, caused by the hepatitis virus. Of the five different types of hepatitis virus (A, B, C, D and E), hepatitis C is the most common in the United States, affecting more than three million people. Hepatitis C is a serious condition that requires treatment, but because infected individuals often show no symptoms until serious liver damage has already occurred, many people are unaware that they are infected.

Recently, the Centers for Disease Control and Prevention added all “baby boomers” to the list of people who should be tested for hepatitis C. Individuals born between the years 1945 through 1965 should ask their physicians for the one-time test for hepatitis C at their next medical visit.

Chronic hepatitis C infections can last a lifetime, and can lead to liver damage, cirrhosis, liver failure, and liver cancer. In fact, liver damage occurs in an estimated 60-70% of people with chronic hepatitis C infection, and hepatitis C is the leading cause of liver cancer, liver transplants, and death from liver disease. Unlike hepatitis A and B, there is no vaccine for hepatitis C, which is spread by contact with infected body fluids such as blood or semen.

However, if asymptomatic individuals were aware that they were infected, they could be treated and possibly avoid liver damage. The Centers for Disease Control and Prevention’s recommendation that all baby boomers be tested for hepatitis C was made because over 75% of adult Americans with hepatitis C are baby boomers, and about 73% of people who die from HCV complications are baby boomers. Hepatitis C-caused deaths are on the rise, with 7,000 to 15,000 deaths per year from HCV.



Rick L. Pesano, M.D., Ph.D.

In making their recommendation, the CDC noted that testing is cost-effective and saves lives, and new hepatitis C treatments can cure up to 75% of those infected. Only the blood tests can determine whether or not you have hepatitis, and which type of the virus you have.

Since symptoms are not always evident, testing is critical to confirm whether you are infected. However, some individuals who have hepatitis might have these symptoms:

- Fever
- Fatigue (feeling tired)
- Loss of appetite
- Nausea, vomiting
- Stomach pain
- Dark-colored urine
- Diarrhea
- Gray-colored stools or pale stools
- Joint pain
- Jaundice (yellowing of eyes and skin)

Usually, there are no signs of chronic hepatitis until serious liver damage has developed.

The test for hepatitis C is very convenient and no preparation is required. Your doctor will probably order an antibody test (sometimes called an anti-HCV test), which is done through a blood draw from your vein. The blood sample will be analyzed for the presence of antibodies to the virus, which indicates exposure to the virus. If the antibody test is “nonreactive” (negative), hepatitis infection is not likely. If the test is “reactive” or positive, the person has been infected with hepatitis C. If your test is positive, your doctor will probably order an additional test to confirm the results of the antibody test.

In order to decide on the appropriate treatment plan, your doctor will also order tests to pinpoint the exact kind of hepatitis C virus that is present and to provide additional information that helps him/her develop a monitoring and treatment plan. These tests, which detect, analyze, and measure viral particles in the blood, also involve a simple blood test.

Quest Diagnostics, the world’s leading provider of diagnostic testing, information and services, offers a broad hepatitis C and B virus testing menu, including tests to help determine hepatitis C exposure and identify abnormal liver function; viral RNA testing to monitor viral load during therapy; and hepatitis C genotyping to aid in predicting treatment duration and success.

**If you do test positive for hepatitis C, do not panic.** Individuals who are aware that they have hepatitis C can be treated and possibly avoid liver damage, which is why testing is so critical. Hepatitis C treatments are effective in the majority of the patients with the virus, and new antiviral drugs are being introduced that show great promise for individuals with specific types of hepatitis C. Treatment for hepatitis C usually lasts about 6 to 9 months. If you have hepatitis C, you and your doctor can discuss treatment options that will help prevent further liver damage and disease and allow you to live a long, healthy life.

Successful treatment for hepatitis C does not necessarily protect a person for life. It is possible to be infected and get sick from hepatitis C again. So, it is important to follow these general steps for prevention of hepatitis:

- Wash your hands after going to the bathroom and before touching food.
- Use condoms during sexual relations.
- Avoid tap water when traveling in countries that may have water sanitation issues.
- Don’t share toothbrushes, razors, or nail clippers with an infected person.

If you are experiencing symptoms or you are a baby boomer in the target years, remember the recommendations of the CDC and ask your physician for a one-time hepatitis C test. If you have not been previously vaccinated or are unclear on your vaccination history, ask if you should be vaccinated against Hepatitis A and B. These life-saving tests and vaccines are convenient, widely available, and effective.

#### FOR MORE INFORMATION:

- CDC website: [www.cdc.gov/knowmorehepatitis](http://www.cdc.gov/knowmorehepatitis)
- National toll-free hepatitis C helpline: 877-435-7443 Sponsored by HELP-4-HEP, a partnership among several well-known and nationally recognized non-profits with a combined 90+ years’ experience in hepatitis C education, support and patient advocacy.



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# Hospice of Marion County: It's YOUR Choice

**A**lthough hospice care has been mainstream medicine for 30 years, it is still vastly misunderstood and, sadly, underutilized. Today the statistics are still 50/50 when it comes to dying in crisis in an institutional setting versus the comfort of home under hospice. Although federal guidelines stipulate an estimated six-month prognosis for hospice eligibility, the majority of patients receive less than a week of care and of that percentage, about a third receive less than two days. That means patients and their families are being referred too late in the process and are ultimately deprived of months of comfort, compassion and solace that only hospice can provide.

## Why is this happening?

According to a report released in September, end-of-life care in the nation must be re-evaluated at every level. (See "Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life (2014)", Committee on Approaching Death: Addressing Key End of Life Issues; Institute of Medicine). The 21-member nonpartisan committee examined over-treatment, late referrals to hospice and what is known as "futile care" – aggressive treatments that have no possibility to cure. The committee's overall conclusion is a call for sweeping change.

"The bottom line is the health care system is poorly designed to meet the needs of patients near the end of life," said David M. Walker, former U.S. comptroller general and the committee's chairman. "The current system is geared towards doing more, more, more, and that system, by definition, is not necessarily consistent with what patients want, and is also more costly."

## Have you had the "Conversation"?

Many of the report's recommendations could be accomplished with commonsense approaches to illness when there is no longer the possibility for cure. An example is encouraging insurers to reimburse health care providers for appointments concerning advance directives with patients. End-of-life planning, both in conversation and in writing, is essential for patients to receive the kind of care they want and for families to gain peace of mind. If a physician does not broach the subject, patients must be their own advocates. Living Wills and the user-friendly FIVE WISHES are full legal documents available for free from Hospice of Marion County. They are simple to complete,



*Long-Distance Love A visit via Skype with her brother in California brought a smile of joy to this patient's face, just days before her passing.*

require no attorney and are both legal and revocable. The important thing to do is to actually complete the document, provide copies to all involved in one's health care and keep it in an accessible location in the home (not in a bank safety deposit box).

Other recommendations would require a reversal from emphasis on hospitalization to home care, which is where patients most often indicate they want to be. Financial incentives would need to be scrutinized, as well.

"We know that there may be a need for new legislation to be introduced to accomplish that, and we recognize that that's harder to accomplish in a politically charged environment," said Dr. Philip A. Pizzo, former dean of the Stanford University School of Medicine and the committee co-chairman.

Dr. Pizzo also referred to a recent survey of doctors about their own end-of-life preferences, which showed that "a vast majority want to be at home and as free of pain as possible, and yet that's not what the doctors practice on their patients."

## Meeting a Patient's Needs

Further the panel pointed the finger at medical schools, calling for greatly increased training in palliative care and setting standards so that more clinicians know how to compassionately and effectively treat patients who choose to be made comfortable with hospice care and avoid extensive and useless medical procedures.



[www.hospiceofmarion.com](http://www.hospiceofmarion.com)  
352-873-7400

 [www.facebook.com/Hospiceofmarion](https://www.facebook.com/Hospiceofmarion)



"If you meet their needs, treat their pain, treat their depression, get them some help in the house, your costs plummet," said Dr. Diane E. Meier, a committee member and the director of the Center to Advance Palliative Care. Fewer patients would end up in emergency rooms getting expensive care they do not want, she said, adding, "It's a rare example in health policy of doing well by doing good."

Dr. Meier's program was the inspiration for Hospice of Marion County's palliative consulting service launched in 2007. Today HMC's is a nationally recognized model for others, consulting in all area hospitals and with physicians. Marion County's palliative team members are experts in pain management and symptom control. Fifty percent of the patients they see are referred to hospice care due to the severity of their condition, but the other 50 percent may recover well, once their pain and symptoms are managed.

**A Look at Today's Headlines**

Two glaring contrasts often grab the media's attention: 1. Long "battles" with disease, endless treatments, relapses, recurrences and eventual death in the ICU, or 2. States with Death with Dignity laws (Oregon, Washington, and Vermont), which is where a 29-year-old woman with brain cancer has moved to end her life in her own time. The brave story of Brittany Maynard puts the question on the front page.

Hospice of Marion County offers a third alternative: When cure is no longer an option, comfort care is the answer. There is no need to suffer the effects of either disease or the side-effects of treatment. Palliative medicine addresses both the physical, as well as emotional, mental and social needs of the patient, as well as supportive measures for the entire family. The holistic compassionate approach of hospice is unique in the medical world but could well be the model of care recommended by the Dying in America committee to change the way we live ...and die.



*Hospice of Marion County's professional staff of physicians, nurses, aides and social workers visit patients in their own homes, where a Gallup poll confirms that 90 percent want to spend their final days, surrounded by family and in comfort.*



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# NOT READY FOR SURGERY?

## New Non-Surgical Options to Permanently Alleviate Pain and Improve Movement!

By Craig Chappell, DO

**W**hether you are a professional athlete, a sports minded student, a tri-athlete or an active adult, Dr. Chappell specializes in activity related injuries and nonsurgical orthopedics.

Dr. Chappell provides treatment for the following conditions:

- Sports Injuries
- Chronic Pain
- Overuse injuries (tendonitis, plantar fasciitis, tendonosis and stress fractures)
- Acute injuries (sprains, muscle strains, joint injuries, and fractures)
- Trigger point injections for pain control
- Arthritis treatment and bracing
- Nerve blocks for pain control
- Unstable and loose joints
- Headache treatments
- Back and Neck pain
- Concussion care

### Have you or someone you know ever heard these words?

*"Come Back When You're Ready for Surgery..."*

*"My massage treatments or adjustments help initially but are short lived.."*

*Did you know that there are non-surgical options to permanently alleviate pain, improve movement, function and quality of life? There's a good chance that surgery is not your only option. Have you ever heard the old saying, "don't judge a book by its cover"? The same could be said when looking at imaging studies. Lets take a simple Pop Quiz:*

By looking at the x-rays below, can you tell which patient has more pain and dysfunction?



Give yourself a point if you determined that the x-ray is of a knee and the knee on the right has a significant amount of degeneration, as seen by narrowing of the joint space. Logically you may assume that the bad looking knee is also the one with more pain.

In recent studies the conclusion is that knee pain, stiffness, and duration of disease are more predictive of dysfunction than x-ray. Therefore, it is better to consider a person's functional status in addition to radiological findings while planning the treatment of knee pain.

This same process is also carried over to all other joints in the body. The trick is in determining the **MAIN PAIN GENERATOR**. So if the bony changes seen on x-ray are not the cause of pain, what is? Theoretically, if I were to make a small incision on the inside of your knee there are several structures that I would pass through on the way to the bone. These may include, skin, subcutaneous tissue (fat), muscle, tendon ligament, capsule, cartilage and finally bone. So when one points to the inside of their knee to describe their pain, it could be a number of anatomical structures that they are pointing at and only one or two of them possibly could be helped by surgery. This is why determining the main pain generator is key. *Using this as an example there are several non-surgical options we offer to locate and address the pain.*

*Non-surgical options offered by Dr. Chappell include the following treatments:*

### Regenerative Injections

Regenerative injections are a rapidly emerging technique and are showing exciting potential where surgery was once the only option. Painful conditions frequently treated with regenerative injections include osteoarthritis, knee, shoulder, hip and spine, rotator cuff tears, plantar fasciitis, anterior cruciate ligament (ACL) injuries, hip/pelvic pain and instability, back and neck injuries, tennis elbow, golfers elbow, ankle sprains, tendonitis, and ligament sprains/laxity.

The basic intent of Regenerative Injections is to intentionally create a small injury to initiate a healing response. This can be accomplished in several ways, from aggressive physical therapy techniques to injections. Substances used in injections can include Prolotherapy (hypertonic dextrose), Platelet Rich Plasma (PRP) and Stem Cells.



### Prolotherapy

Prolotherapy is a regenerative injection treatment used to stimulate the healing mechanism to repair damaged or injured areas by injection of a hypertonic dextrose solution which in turn stimulates an inflammatory response and leads to healing. Prolotherapy is a viable alternative to surgery and an alternative option to pain medications and anti-inflammatory injections such as cortisone. Prolotherapy is a safe and affordable option that allows the patient to keep working and/or training during treatment.



**Platelet-Rich Plasma Therapy (PRP)**

Most people associate platelets with clot formation. While that certainly is an important function of platelets, they are also very much involved in injury healing. Platelets are extremely rich in connective tissue growth factors. Injecting these growth factors into damaged ligaments, tendons, and joints stimulates a natural repair process. But in order to benefit from these natural healing proteins, the platelets must first be concentrated.

PRP works by recreating and stimulating the body’s natural healing process. Several conditions that benefit from PRP include:

- Shoulder pain and instability, including rotator cuff injuries
- Tennis and golfer’s elbow
- Quadricep/Hamstring strains
- Knee sprains and instability
- Patellofemoral syndrome and patellar tendinosis
- Ankle sprains
- Back, Neck & Hip Pain

**Stem Cell Injections**

An exciting addition in the field of regenerative medicine is the introduction of Stem Cell Therapy. This is the use of a person’s own cells from bone marrow, fat, and blood (alone or in various combinations) which is then injected into the area which has a cellular deficiency. These immature cells have the ability to become tissues like cartilage, bone, and ligaments. Like Prolotherapy and PRP, the goal of stem cell injections are the same: to stimulate the repair of injured tissues.

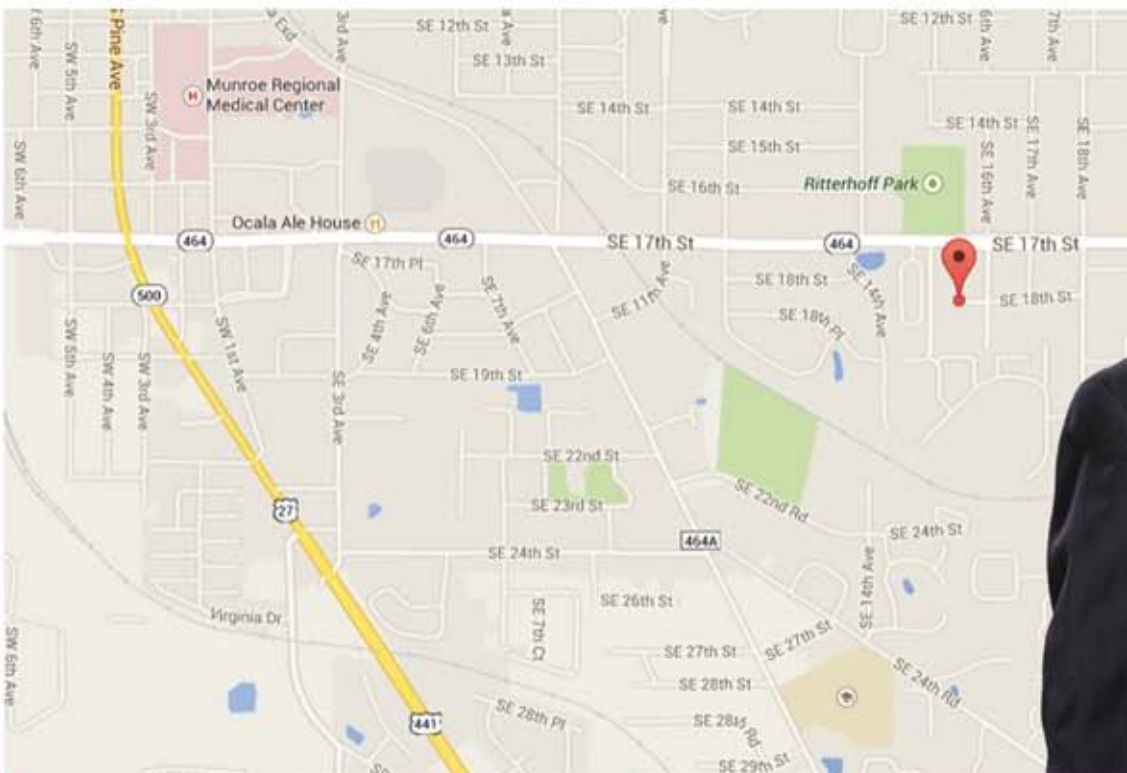
Dr. Chappell has been performing regenerative injections with the use of ultrasound guidance for the past 5 years and has taught regenerative injection technique nationally and internationally.

Dr. Chappell specializes in understanding and identifying your pain generator. This is accomplished by performing a thorough history and physical exam. Frequently diagnostic ultrasound is used to pinpoint the dysfunctional or injured area. Ultrasound allows for dynamic visualization and comparison without the side effect of ionizing radiation or uncomfortable positions. Ultrasound is also used to guide injections which allows absolute accuracy with the first stick and virtually eliminates the need to reposition the needle which happens with other forms of guidance. Less needle sticks and repositioning also results in less pain.

Please feel free to call our office and we will be happy to review your medical problems and assist you in making a decision for an appointment.

Dr. Chappell's office is located in Ocala at:  
1720 SE 16th Ave Suite 303 Ocala, FL 34471

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Results are typical and do vary.

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- Nov 6** 1:00pm - Holiday Inn Ocala - 3600 SW Avenue - *Seminar*
- Nov 11** 1:00pm - Waterfront Inn - 1105 Lakeshore Drive - *Seminar*

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Dr. Castellano

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## Dr. Anand Kesari Offers Innovative Full Spectrum Endoscopy Procedure for Improved Early Detection of Colon Cancer

Gastro-Colon Clinic is one of the first in the nation to use EndoChoice's Fuse™ endoscope system to reduce the 'miss rate' of lesions during colonoscopy



**A**lthough colonoscopy exams prevent many colon cancer deaths<sup>1</sup> and are the gold standard, for detecting colorectal cancers,<sup>2</sup> the procedure is not completely effective in preventing cancer cases.<sup>3</sup> For this reason, Gastro-Colon Clinic has invested in an innovative technology that significantly improves the accuracy of colonoscopy exams and can greatly reduce the number of potentially pre-cancerous lesions missed by standard, forward-viewing endoscopes.

The Fuse™ endoscope system from EndoChoice®, Inc. uses three small cameras at the tip of a flexible GI endoscope. "Unlike standard, forward-viewing endoscopes that use a single camera, the Fuse system lets doctors see nearly twice as much surface area," said Dr. Kesari.

"The Fuse endoscope is all about seeing more of the GI tract. It projects the expanded view on three screens to give physicians previously unseen views, such as behind colonic folds and difficult anatomy. We are pleased to offer this important new technology to our community."

1 Zauber AG, Winawer SJ, Waye JD, et al. Colonoscopic Polypectomy and Long-Term Prevention of Colorectal-Cancer Deaths. *N Engl J Med* 2012; 366:687-696

2 Rockey DC, Paulson E, Niedzwiecki D, et al. Analysis of air contrast barium enema, computed tomographic colonography, and colonoscopy: prospective comparison. *Lancet*. Jan 22-28 2005;365(9456):305-311

3 Brenner H, Chang-Claude J, Seiler CM, Sturmer T, Hoffmeister M. Potential for colorectal cancer prevention of sigmoidoscopy versus colonoscopy: population-based case control study. *Cancer Epidemiol Biomarkers Prev*. Mar 2007;16(3):494-499.



Dr. Anand Kesari



**Standard Colonoscope  
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**Fuse™ Colonoscope  
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The Fuse system recently received FDA 510(k) clearance for marketing in the U.S. “As an early adopter of the innovative Fuse system, Gastro-Colon Clinic is at the forefront of U.S. healthcare providers offering the best technology and procedures for detecting colorectal cancers,” said Dr. Kesari. “Our team is proud to be using the new system in our ongoing effort to reduce cancer and provide the highest quality care to our patients.”

In a multi-center trial conducted in the U.S., Europe and Israel, researchers performed a series of colonoscopies comparing standard, forward-viewing endoscopes and the new Fuse system.

The endoscope used in the first examination was selected randomly. After the first inspection, each patient immediately underwent a second colonoscopy performed by the same doctor, but with the competing endoscope. The 185 patient trial showed standard, forward-viewing endoscopes missed 41% of potentially pre-cancerous lesions,



or adenomas, while the Fuse system missed just 7%. Additionally, Fuse found 69% more adenomas when compared to standard, forward-viewing endoscopes. The results of this clinical study were presented at a major medical society meeting earlier this year and recently published in The Lancet Oncology.

“Standard, forward-viewing endoscopes provide up to 170 degrees of forward vision. The advantage of Fuse is that it allows endoscopists to examine twice the anatomy with a wide 330 degree view. This is especially advantageous because adenomas can be missed in difficult to find areas of the anatomy,” said Dr. Kesari. “The findings are compelling and support the data from previous studies showing the limitations of standard, forward-viewing endoscopes. EndoChoice’s innovative Fuse technology dramatically improves the effectiveness of this life-saving procedure. And improving the effectiveness of every procedure we perform here at Gastro-Colon Clinic is what we’re all about.”

Patient scheduling with the new Fuse system is now underway at Gastro-Colon Clinic. More than 15 million colonoscopies are performed across the United States each year and most insurance companies cover the costs for those patients over age 50.

**Gastro-Colon Clinic  
Dr. Anand Kesari**

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**Ask your Doctor to refer you to Dr. Anand Kesari of Gastro-Colon Clinic for all your GI and Colonoscopy needs. Get the best possible endoscopic evaluation around.**

# SIT UP! STAND UP STRAIGHT!

## Is your posture poor? Are people frequently reminding you to sit up or stand up straight?

There are many reasons why your posture may not be as straight as an arrow.

In general, prolonged posture whether sitting at a desk, driving or even reading can lead to slow but significant change in the balance of the bodies muscles, ligaments and joints with the eventual result of a compensatory posture. If left to worsen, changes can occur to the bone and prevent return to a normal and efficient posture.

### What is Upper Crossed Syndrome?

Upper cross syndrome is a collection of these changes that leads to change in tone of the muscles, followed by muscle imbalance which leads to movement dysfunction and subsequent pain or discomfort. As certain muscles tighten such as upper trapezius, pectoralis and SCMs, others such as the deep neck flexors and scapula stabilisers get weaker and are no longer able to support the body efficiently. Less efficiency leads to higher use of energy and higher strain on the body which inevitably leads to symptoms – pain and tiredness.

### Symptoms of Upper Cross Syndrome

Forward head carriage increases the curve of the cervical spine placing more strain on the joints and restricted range of movement in the neck. This can lead to joint pain as well as reducing the space for the nerves to exit the spine leading to nerve entrapment, which can include numbness, pain, weakness or tingling in the arm. In this position the muscles and ligaments may be under more strain end up becoming pain generators themselves.



Rounding of the shoulders leads to a decrease in the space around the shoulder joints, which can cause compression of muscles and tendons involved with shoulder movement as well as muscle strains and arthritis of the shoulder. Also associated is the altered position of the shoulder blades, which acts as an anchor for many stabilising muscles for the back, neck and shoulders.

Thoracic outlet syndrome can occur as the posture worsens and the nerves and blood vessels around the neck and shoulders may become trapped.

can lead to rib pain and reduced movement of the ribs in this area as well as reduced lung capacity, which can affect everyday life and sporting performance depending on the severity.

### What is the Cause of Upper Cross Syndrome?

Upper cross syndrome develops silently often over many months or years and can often become symptomatic with a seemingly innocent movement. If left untreated the symptoms can progress and start affecting the function of the low back and pelvis. It is therefore not uncommon to see both Upper Cross Syndrome and Lower Cross Syndrome together.



Using the collection of symptoms and use of special tests chiropractors can easily diagnose this syndrome and put together a plan to start reversing the changes.

Treatment can include spinal manipulation as well as soft tissue techniques such and work on rehabilitation to strengthen those muscles that have become weak.

Don't let these symptoms sneak up on you, have your posture checked to find out how you can benefit from chiropractic care.

**What is lower cross syndrome?**

Lower Cross Syndrome (LCS) is defined as an abnormal adapted posture of the lower back resulting from muscle strength imbalances. This is frequently associated with the combination of prolonged sitting and poor posture.

To fully comprehend the reason as to why there is a muscle imbalance, we need to understand the concept that when a muscle is in a shortened or tightened state (ie. such as in Prolonged sitting and poor postures) for long periods of time, it causes the weakening of muscles with an opposite function (ie. muscles that flex vs straighten your arm). This is referred as the reciprocal inhibition.

In Lower Cross Syndrome, the hip flexors become tight (due to poor posture). As a result of reciprocal inhibition, the abdominals and gluteals become weakened. Consequently, this muscle strength imbalance leads to an exaggerated curve in the lower spine which in turn causes low back pain. Because the gluteals are weak, its function is compromised and other muscles such as the hamstrings, TFL (part of your IT band), and back muscles are recruited to assist them in performing daily activities such as walking or running.

Left untreated, the joints and surrounding muscles may undergo changes, progressively leading to:

- Low Back Pain
- Sciatica
- Glute or Hamstring Pain
- IT Band Pain
- Knee Pain
- Degenerative Changes



**How do you correct it?**

You can correct Lower Cross Syndrome by applying the same concept we talked about with Upper Cross Syndrome – strengthening what's weak, stretching what's tight, and freeing up the joints in between that aren't moving properly.

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**SCHUYLER GROVE, DC**

Dr. Schuyler Grove is an Ocala native who has returned to his hometown to bring optimal health and wellness to the community. Dr. Grove takes a "whole person" approach in chiropractic care, looking for the underlying causes of disease, discomfort, and pain, as opposed to just treating the symptoms. Dr. Grove also has training in the use of supplementation and nutrition to better assist his patients in their pursuit of health.

# “Save a limb. Save a life.”

## **Limbststitute** **Comprehensive Vein Care and Limb Salvage**

**T**he statistics are staggering: Almost one of every 200 Americans has suffered an amputation — about 97 percent of those to a lower limb.

The real tragedy? Many of those losses could have been avoided with swift and adequate intervention. Simply put, the Limbststitute Comprehensive Vein Care and Limb Salvage with offices located in The Villages, Summerfield and Tavares, was created to do just that.

The newest addition to the Institute of Cardiovascular Excellence family, the Limbststitute provides comprehensive vein care and incorporates the latest technologies — closing off veins with radio waves for example — to get the best results. The staff members there are also wound care specialists and experts in artificial skin grafts. Their mission is to do whatever it takes to save a limb and give a patient their life back.

Indeed, the key to the success of the Limbststitute is that all of the many specialties involved with reversing the declining health of an arm or leg have been gathered together under one roof. Inside its 4,000 square feet of designated examination rooms, labs, testing and treatment facilities, medical professionals and physicians have been hand-selected from various specialties to form a collective team dedicated to a singular goal: the treatment and management of peripheral vascular diagnoses.

In the past, patients in danger of losing a limb traditionally would have had to shuttle between various doctors in separate facilities: a cardiologist, medical internist, phlebologist, podiatrist and specialists in infectious disease and wound care to name just a few. Not only was it inconvenient, chances are that those specialists were not committed to a total focus on limb salvage.

The Limbststitute provides a better way, with all of the tests and treatments and physicians necessary to intervene and reverse the effects of critical limb ischemia on the same page — and under the same roof.



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**Now Meet The Specialists**

**Tom Tran**  
PA-C, MPAS • Phlebologist



**Mike Richards**  
PA-C, MPAS • Phlebologist

### Member of the American College of Phlebology

The Limbstitute is fortunate to count Tom Tran among its staff of medical professionals. He brings a unique and lauded background to bear on the special challenges associated with venous disorders. He worked his way through college and went on to become a registered nurse in the ICU at Shands Hospital in Gainesville. Afterwards, he accepted positions with several emergency departments throughout Florida. Tom capitalized on his interest in venous health by inventing a medical device — the Transcatheter Extractor — and started his own company to sell his device throughout the U.S.

“I often removed a patient’s catheter through surgery,” Tran says. “This device allows for less down time for the patient and takes him out of the operating room and into the doctor’s office.”

He was named Physician Assistant of the Year in Florida in 2007 and appeared in numerous articles throughout the nation. He is actively involved as a Board of Trustees member of the Physician Assistant Foundation, and is an adjunct instructor for the NOVA University Physician Assistant Program.

### Member of the American College of Phlebology Fellow Member American Academy of Physician Assistants and Member Florida Academy Physician Assistants

Mike Richards sees patients every day whose problems could have been avoided or at least minimized with a little forethought.

“Certain things we do to ourselves on a daily basis can lead to long-term issues,” he says. “Something as simple as wearing high heels can cause damage over time to vein valves and lead to venous insufficiency, varicose veins and worse. The opposite is also true. Patients who are aware, who have proactive habits and recognize potential problems early almost always have better outcomes.”

Mike is proud to be a part of the Limbstitute family.

“What’s important with The Limbstitute is that we are able to assess and treat all of a patient’s limb issues at one location,” he says. “Arterial problems such as PAD, venous reflux that can lead to leg ulcers, wounds that just won’t heal. We have it all under one roof, along with specialties like cardiology, phlebology (vein care) and internal medicine. Even nutrition consultation, which can be critical to healing and a positive long term result.”

*Save a limb. Save a life.* It’s a prescription written daily at the Limbstitute. Certainly the statistics can be daunting. But for the professionals in limb salvage who take it one limb/one life at a time, every good outcome is a victory that spurs them on to the next challenge. The arms and legs of the people in Central Florida are all the healthier because of it.



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# TAKING BACK CONTROL OF YOUR PERSONAL FINANCES.

*How financial caregiver services can simplify your life one bill at a time.*

**T**he challenge of organizing your financial life can be daunting. There is so much paperwork involved. You can easily lose receipts and forget when bills are due. The bank regularly notifies you about an overdrawn checking account. What is the best way to track your personal finances and get the clearest picture of how much money you have at a given time? The simple answer is to become more organized. Unfortunately, often times organizing your personal finances is easier said than done. The answer to these challenges lies with financial caregivers - care providers who offer financial oversight services designed to relieve the burdens caused by personal finances.

There are several tools utilized by financial caregivers which can simplify your finances. First, assisting with the overwhelming amount of paperwork in your financial life. Most people are faced with countless bills, receipts, and notices. By taking steps to reduce your junk mail and consolidate accounts, you will reduce the amount of paperwork you deal with on a daily basis. A detailed look at your overall financial plan and various accounts can help you eliminate unnecessary credit cards or unused accounts which are cluttering your financial picture. Often times, people can function with just one bank account if they manage that account correctly. Similarly, using automatic transactions and other online payment options makes life simpler for individuals with complex financial lives. Although many people are hesitant to use technology when financial information is involved, using tools such as automated payments can ensure that bills are never paid late.

If you are behind on your bills, it can be tempting not to open them. It is important to fight the urge to ignore the bills and open them in a timely manner. By committing to deal with these bills at a regular time each month, you stay caught up on your finances and avoid costly procrastination. Managing your personal finances can be a significant time commitment; however, it is far more dangerous to allow the stack of unpaid bills to continue to grow without checking what needs to be paid.





Another important step in taking back control of your personal finances involves dedicating a specific space to your financial oversight. Keeping everything in one place makes it easy to find important documents, and also helps you monitor your financials for fraud or other financial scams. Having a designated location for your financial information will help you deal with it in a more timely manner. The quicker you deal with pressing financial issues, the less likely you are to forget an important transaction or miss irregular activity. Keeping your financial documents located in one place prevents them from getting out of control.

This organizational advice all sounds great, but how does one go about setting up such an efficient system? The best method involves enlisting a financial caregiver. At Family Wealth Guardians, clients receive personal financial caregiver services in the comfort of their own home or living facility. Our trusted caregivers help you set-up a secure home financial center. Using our personalized mailboxes, bills are handled in a timely manner and junk mail is disposed of properly.

A Family Wealth Guardians customized financial notebook stores up-to-date financial reports with detailed account monitoring. By tracking your expenses, Family Wealth Guardians makes sure your budget does not become stretched to a critical limit. You are given the option to provide a trusted family member or loved one with a copy of your financial notebook, so that they may also help monitor your financials. Any essential usernames or passwords can also be stored in your customized notebook, so that information is always readily available in the event of an emergency. The notebooks also help organize all essential estate planning documents in a manner that is easy to transport and includes valuable copies for medical personnel. Finally, Family Wealth Guardians will help you dispose of unneeded financial documents containing confidential information in a secure and private manner.

The Family Wealth Guardians team is confident we can help you implement these organizational strategies for your personal finances and create a blend of financial stability and happiness. For many, dealing with your personal finances, or handling those of a loved one, feels like an uphill battle. Don't fight that battle alone. Let Family Wealth Guardians take on the burden of managing your personal finances and give you back the control over your financial life.



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**Ryan King, Esq. - President & CEO**  
Ryan graduated from the University of Florida's Levin College of Law. He completed the Florida Bar Exam and was duly admitted by the Supreme Court of Florida to the Florida Bar in 2013. Prior to joining Family Wealth Guardians, Ryan worked as an attorney and legal advisor serving clients with Accountants and Business Advisors, Inc. in Gainesville, FL where he assisted clients with a variety of legal issues. Using his experience in estate planning and corporate law, he continues to further his legal education in an effort to better serve the needs of all clients of Family Wealth Guardians.

Ryan completed his undergraduate work at the University of Florida with a bachelor's degree in Sport Management and a minor in Business. While working on those degrees at Florida, Ryan was a member of the Florida men's basketball program. He spent nearly five years working under Coach Billy Donovan and his staff as a team manager and graduate intern. His time with the Gators included two national championship rings from the 2006 and 2007 season to go along with a lifetime of experiences. Outside of work, Ryan remains passionate about sports and spending time with his family. He devotes much of his free time to playing golf and visiting different stadiums and venues to watch his favorite teams.



**Tina Pratt - Financial Caregiver & Office Manager**

Tina recently completed her AA in Business Administration as well as an AS in Health Services Management, and is currently pursuing her bachelor's degree in Health Services Administration at Santa Fe College.

Tina brings 25+ years of accounting and administration experience to the Family Wealth Guardians team. She particularly enjoys her time spent visiting with clients in their homes and making sure they remain informed about, and secure with, their personal finances.

Tina remains very active in her community by volunteering with the Florida Chapter of The ALS Association. Over the past year, she served as the volunteer walk coordinator for Ocala's first Walk to Defeat ALS, the signature fund raising event for The ALS Association. She is hoping to develop another fundraising walk in Ocala in the near future, as well as one in The Villages. When not at work or volunteering, she spends a great amount of time with her three beautiful grandchildren.



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# NOVEMBER IS LUNG CANCER AWARENESS MONTH

**W**ith the changing of the seasons and the holidays approaching, November has another significant meaning. It is Lung Cancer Awareness Month.

Many people don't know but Lung cancer is the second most commonly diagnosed cancer in both men and women. However it is still the most common cause of cancer death next to the three most common cancers combined (colon, breast and prostate). Lung cancer is a complex disease to treat and understand. Understanding the basics of lung cancer is an important step in preventing lung cancer deaths. If you know the facts about lung cancer it will be easier to understand and talk to your doctor.

When a person has lung cancer, they have abnormal cells that cluster together to form a tumor. Unlike normal cells, cancer cells grow without order or control and destroy the healthy lung tissue around them. Many people with lung cancer don't experience symptoms until the disease is in its later stages. There are very few nerve endings in the lungs, which mean a tumor could be present without causing pain or discomfort. When symptoms are present, they are different in each person.

#### These symptoms can include:

- A cough that doesn't go away and gets worse over time
- A chronic cough or "smoker's cough"
- Hoarseness
- Constant chest pain
- Shortness of breath, or wheezing
- Frequent lung infections, such as bronchitis or pneumonia
- Coughing up blood

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Some symptoms of lung cancer may not seem related to the lungs or breathing. These symptoms can still be a sign of lung cancer because lung cancer usually does not cause symptoms in the earlier stages of the disease. This means some symptoms do not appear until the cancer has spread to other parts of the body.

#### These symptoms may include:

- Loss of weight
- Loss of appetite
- Headaches
- Bone pain or fractures
- Blood clots

If you are experiencing any of these symptoms, see your doctor immediately.

To help protect yourself against lung cancer, there are certain precautions you should take.

**1** If you are a smoker. STOP! If you don't smoke, don't start. Avoid second hand smoke.

**2** Test your home for Radon (a colorless, odorless gas)

**3** If you have been exposed to dust or fumes at work or home make sure all air ducts and vents are properly cleaned. If you have a water leak make sure it is cleaned up promptly so that no mold forms. Be careful when using cleaning chemicals that have a strong odors or fumes.

#### 4-Help fight pollution

There are several different treatment options for lung cancer. The type and length of treatment time is chosen by you and your doctors. These treatments are based on:

- the type and stage of lung cancer you have
- other existing health issues
- your own preferences

These treatments options include Radiation, chemo therapy, surgery, therapies, palliative care, clinical trials and last end of life care.

Cancer is not an easy disease to grasp but with proper nutrition and preventative care this can make a difference in your life and the loved ones around you. Let's all ban together and fight this horrible disease.

## Henry

By Alex Anderson

Senior Associate Pastor at Bayside Community Church

**H**enry killed people...for a living. Oh, it was perfectly legal. He worked for the government. His specially trained unit could get in and out almost without a sound. No weapons fired and no sensational acrobatics or choreographed Kung Fu moves, just the silent taking of another human being's life.

Another human being's life! Sounds non-personal... like a video game or Bruce Willis movie.

Henry was 63 years old when I met him. He was an electrical engineer. We had business to do together. He was doing a load calculation for a 3-Phase electrical panel installation. I met him at the docks of the harbor where he kept his boat, which doubled as his home and office. Henry lived alone. I had many meetings with Henry, but one in particular was different.

I liked Henry. He was humble, soft spoken and a very good engineer. I never had an issue with his work. That day we hung out and talked a little longer than usual, not about the project, but about life in general. I noticed that I never saw Henry with anyone except those he worked with; contractors, vendors, engineers and other project managers like myself. He told me he once had been married but that didn't work out and he had no children.

What broke my heart for Henry was that he seemed to be "completely" alone...except for his big red Irish Setter...Fred. With a concerned tone, I asked, "Did you have a church family?" Henry looked at me, grinned and said, "I'm not much on God." I told him I wasn't trying to pry. I was just wondering if he had a community of caring folks in his life. I was just about to invite him to my church when I heard these words fall from his lips like a judge pounding a gavel in a courtroom, "Naw...God wouldn't have the likes of me in a million years." To which I asked, "Why would you say that Henry?"



That's when Henry proceeded to tell me of his "past life" and retirement from "Government work" using his fingers to create quote marks in the air. I learned that he had been a Navy Seal and then later in some unnamed intelligence branch of the government. His words were not laced with arrogance or bravery, but with a distinct sense of regret and sadness.

He admitted to being an adrenaline junkie in his younger years, which drove him to achieve black belts from multiple disciplines as well as learn proficiency with many types of weapons. Even now in his sixties, once a year he would head to some place close to Brownsville, Texas and go wild boar hunting with some "Old Timers" as he called them. Their only weapon would be...a knife.

Henry was a true patriot and loved serving his country, but his heart was deeply troubled with all the lives he had taken, both young and old. He was also deeply concerned about what God thought about all the "Human Blood" on his hands, to use his words.

Like many, Henry thought God's love and acceptance was a condition of how good or bad he had lived his life. Henry believed a well known...lie, about God.

I spent the better part of that afternoon sharing with Henry how much God loved him and all of mankind. How God had proven it by sending his Son Jesus to get that message across to us, both in His life and His death.

I shared the very well read story that is unfortunately misunderstood and inappropriately named, "The Prodigal Son" (Luke 15:11-32 NIV). The story is not about the sins of the sons, but about an amazing father who represents God, and whose love knows no bounds and whose grace knows no end.

The story, as I shared it with Henry, is not about the actions of the two sons, but about the heart and actions of the father. Most people get caught up in either the younger son's issue; believing he is not good enough anymore to be his father's son (due to wasting his inheritance)...or...the older son who believes his father owes him something because he has served his father his whole life without asking for anything.

The story is about the father's unconditional love...that's it.

We can never be "good enough" for God anyway...so why try. Just settle into the love he already provides. I know it may take a bit to get comfortable being loved without "strings" attached, but give it a try. Just tell God you accept His unconditional love and see how He responds.

He won't bite, I promise, and who knows, you might even like it.

And remember to Be Life-Giving,

Alex Anderson

*Alex Anderson*

To read other life-giving articles by Pastor Alex, go to <http://belifegiving.blogspot.com/>.

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