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Health & Wellness[®] MAGAZINE

September 2018

Lake/Sumter Edition - Monthly

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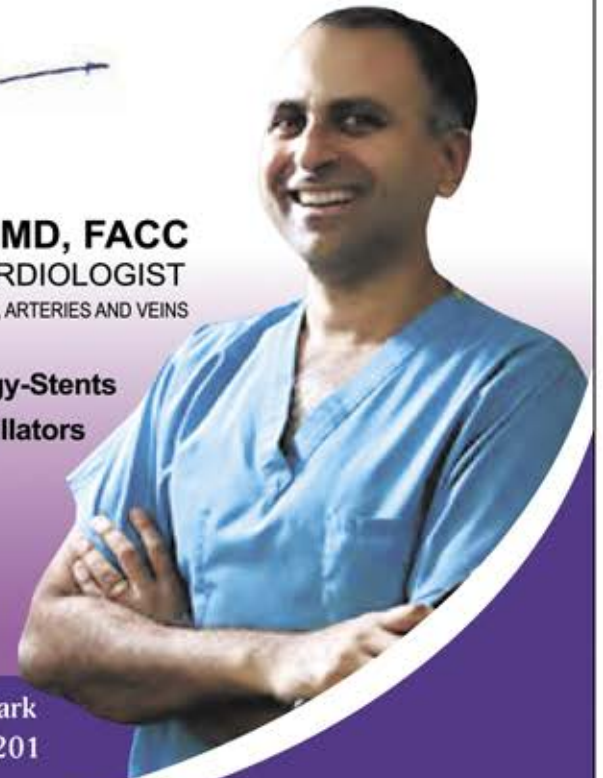
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TREATMENT OF VENOUS DISEASE/ VARICOSE VEINS

TIRED & ACHING LEGS?

If you suffer from varicose and spider veins, you are not alone.

WHAT ARE VARICOSE VEINS?

Although veins and arteries are both part of the circulatory system, they work in very different ways from each other

WHAT CAUSES VARICOSE VEINS?

Some predisposing factors include aging, standing occupations, and leg injury or trauma.

WHEN AND HOW ARE VEINS TREATED?

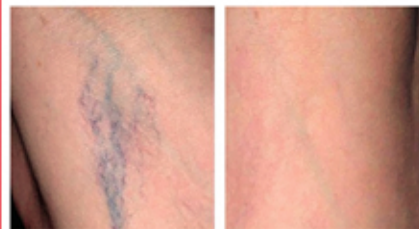
The most commonly asked questions are: "Do veins require treatment?" and "What treatment is best?"

TREATMENT METHODS

- ENDOVENOUS THERMAL ABLATION
- ENDOVENOUS CHEMICAL ABLATION
- SCLEROTHERAPY

WHAT RESULTS CAN YOU EXPECT?

Technological advances in evaluation and treatment methods allow spider and varicose veins to be treated more effectively and safely than ever before.



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- EVALUATION OF CHEST PAIN AND SHORTNESS OF BREATH
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- EVALUATION OF FAINTING (SYNCOPE)
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ENVISION MORE OPTIONS & QUICKER APPOINTMENTS AT LAKE EYE!

Outstanding eye care begins with timely service from caring, experienced professionals. Because demand for medical services in the region is high, especially among seniors, patients sometimes wait longer than they'd like to see a doctor.

That's why Lake Eye is thrilled to introduce two innovative young doctors to its healthcare team, Lindsey Walsh, OD and Adria Anguita, OD. Both are optometrists, which means they are doctors qualified to provide a wide range of diagnostic and therapeutic care. Drs. Walsh and Anguita have extensive training and experience not only assessing vision and prescribing lenses, but also performing comprehensive diagnostic testing for common disorders like cataracts, glaucoma and macular degeneration, and treating dry eye, red eye, eye/eyelid infections, injuries and other problems, so patients can see an eye doctor quicker than ever.

Although they are young, these talented doctors are highly experienced. Dr. Anguita completed her postdoctoral residency and a rotation in ocular diseases at the VA in Gainesville, alongside specialists in glaucoma, retinal and corneal diseases, neuro-ophthalmology and other areas of practice. "The basic difference between an optometrist and an ophthalmologist is an ophthalmologist is qualified to perform surgery," says Dr. Anguita. "Otherwise we undergo the same exhaustive education and training, so patients can feel relaxed and confident in our care. I really look forward to helping people, particularly seniors, overcome eye issues and achieve clearer, healthier vision."



Lindsey Walsh, OD (L)
and Adria Anguita, OD (R)

"I started my career working at the front desk of an optometry office," says Dr. Walsh. "I always wanted to be a doctor, and working there helped me decide on the field. Eye care was a natural fit." After earning her doctoral degree, Dr. Walsh completed an externship at the renowned Bascom Palmer Eye Institute, one of the nation's top eye hospitals. Dr. Walsh has specialized education in prescribing and fitting contact lenses, including scleral lenses, a gas-permeable lens designed to correct vision in people with keratoconus and other corneal abnormalities. "Many of these patients have been told they can't wear contacts, so I love being able to offer them as a means for clearer vision."

Both Dr. Walsh and Dr. Anguita are certified in corneal refractive therapy, an FDA-approved program to help correct myopia in children.

The addition of these energetic young doctors generates a freshness and vitality within the storied offices of the 41-year-old Lake Eye, and compliments the team of seasoned and respected Board-certified ophthalmologists. "We are excited by the passion and dynamism of our talented new doctors," says ophthalmologist Dr. Mark Vocci, "and we're very happy to be able to see more patients on their schedules. It continues our tradition of and commitment to outstanding care."

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Accepting New Patients!

Introducing Two Talented New Eye Doctors You'll Love



To serve patients faster and better than ever, Lake Eye is thrilled to announce that two innovative young doctors have joined our healthcare team, **Adria Anguita, OD** (left) and **Lindsey Walsh, OD** (right). Both are optometrists, doctors qualified to provide a wide range of eye health and vision services. Drs. Walsh and Anguita have extensive training and experience not only testing vision and prescribing lenses, but also performing comprehensive diagnostic examinations for problems like dry eye, infection, cataracts, glaucoma, macular degeneration and more, as well as providing nonsurgical treatments to restore vision and eye health.

Adria Anguita, OD and Lindsey Walsh, OD

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High Cholesterol = High Risk for Debilitating Diseases

Cholesterol is a natural substance that the body produces through the liver. It's waxy and circulates through the blood stream, feeding the heart and brain. But when cholesterol is derived from foods like saturated fats and trans fats, the body over produces LDL, which is the "bad" cholesterol.

HDL is the "good" cholesterol. If we did not have HDL, our brains would not work properly, and we would suffer from other bodily disorders. The same holds true for too much bad, LDL cholesterol. If we have too much LDL, then it adversely affects our overall health.

What numbers are healthy?

Your total Cholesterol is made up of LDL and HDL. There are blood tests that your physician will order to check your cholesterol level. The best combination of both types of cholesterol is HDL (good) around 40 and LDL (bad) around 100.

TOTAL CHOLESTEROL LEVEL	
GOOD	<200
BORDERLINE	200-239
HIGH	240 or higher

What are the Risk Factors?

Cholesterol along with another substance in the blood can form atherosclerosis, which is the plaque that builds up in the arteries. If you have excessive plaque, then you are at high risk of having a coronary heart attack, heart disease, stroke and other disease related issues. Triglycerides are the fat that is stored in the bloodstream from the excess fat in our diets. Triglycerides are what combine with the high LDL level and create harmful plaque build up.

What you can do

Because much of the high degree of cholesterol is associated with our food intake and our body's inability to burn fat, you can do many things to help lower your cholesterol naturally.

- Eating healthy diet
- Stop smoking (contributes to atherosclerosis)
- Start an exercise program
- Cut back on alcohol and processed foods

You should have an annual exam with your physician to check your cholesterol levels on a regular basis. If you have a high lipid count, your doctor will prescribe medication (statins) for you to help lower the total level. In addition to statins, you can change your diet to get your levels to drop more rapidly.



Foods to incorporate

A big part of lowering your LDL or low-density lipoprotein is through adding soluble fiber, omega 3 fatty acids, monounsaturated fatty acids or MUFAs, powerful antioxidants and lutein to your diet. Some of the following foods listed below can literally lower your "bad" cholesterol levels by 5-10% within just a few weeks. But in order for these nutrients to make the most efficient decrease in your cholesterol, you must adhere to an overall healthy diet. You can't eat fried chicken and then eat an apple and think you'll get the benefit. You'll need to make a plan to eliminate the processed foods in your diet.

Cholesterol Lowering Foods

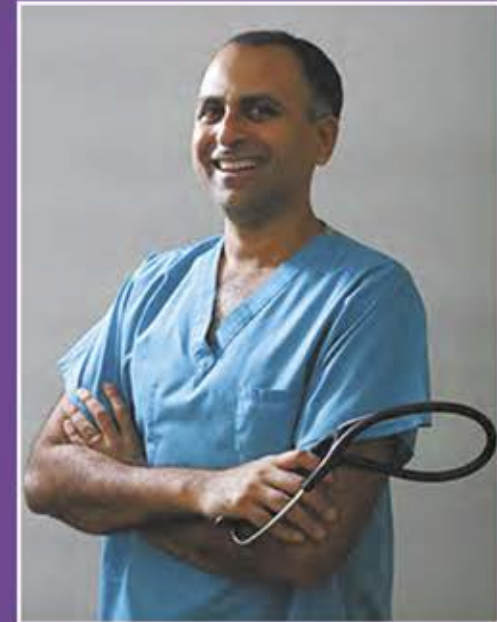
- Garlic
- Oatmeal and Oat bran
- Pears
- Apples
- Prunes
- Beans
- Red wine
- Fatty fish (salmon and sardines)
- Nuts
- Black tea
- Spinach
- Olive Oil

It's always best to speak directly with your physician before completely changing your diet or exercise program. Your doctor will construct a precise plan to suit your specific needs and incorporate some of the foods mentioned above along with a coordinated lifestyle strategy.

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To find out more information on the Dr. Vallabhan, your local specialists in the diseases of the heart, veins, and arteries, please call (352) 750-2040 or visit them online at, Drvcardio.com

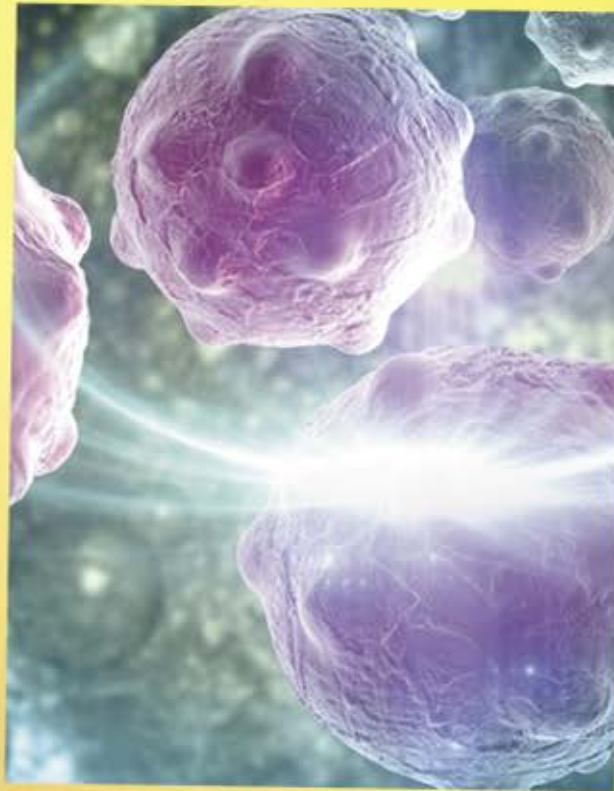
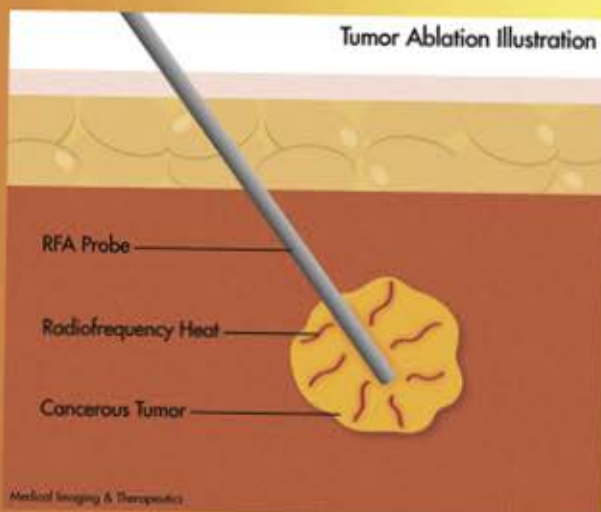
Weapons of "MASS" Destruction

Some of you may have heard the term "mass", when your doctor is describing a lesion, tumor, or suspicious lump in your body. You may have also heard of a biopsy, which is a surgical procedure to remove a small sample of a mass and send it to a lab to determine if it is malignant (a cancer) or benign (not a cancer). Further testing can indicate not only the type of cancer you have, but its genetic origin as well. If you learn that your mass is cancerous, you could qualify for an ablation. Put quite literally, an ablation destroys the malignant mass completely, leaving behind little chance for it to return and spread to healthy tissue and bones. What would you think if an ablation were an option for you?

Surgically removing a mass involves anesthesia, making an incision, and removing a portion of healthy tissue. The incision must then be sealed with stitches, which may require lengthy healing time. Imagine instead, a targeted treatment which terminates cancerous tumors in the lungs, liver, kidneys and bones using extreme temperatures, hot or cold, to destroy the tumors without causing damage to healthy surrounding tissue. This procedure, known as an ablation, is performed under image guidance, through a small incision under conscious sedation, and allows you to return home after a few short hours to recover in the peacefulness of your own bed!

Let's discuss the various "weapons of mass destruction" often used during the ablation procedure.

Cryoablation (using cold gases such as liquid nitrogen or argon to freeze), Radio-Frequency or RF ablation (heat), and Microwave ablation (also heat) are some of the options used to treat tumor masses that are three centimeters or smaller in size. Injecting chemo



drugs and radioactive substances directly into a mass can destroy it or slow its growth as well. Each of these options causes cell-death to a specific area, while keeping the surrounding tissue alive and healthy.

The technique to ablate a mass involves image guidance using Magnetic Resonance Imaging (MRI), Computed Tomography (CT), or even Ultrasound to help guide a needle, electrode or probe into the cancerous tumor. The needle is attached to a line which feeds microwaves, gases to freeze, or radio frequency energy to burn tumors, from a machine which generates the various types of energy through the needle and into the tumor. A trained specialist can control the energy used to destroy the mass so as to protect the surrounding tissue.

Until recently, many of these machines were only available in hospitals and research centers due to their immense size. Over the years they have become more portable and some are available outside of a hospital in approved outpatient centers for use by Interventional Radiologists, who use image guidance and minimally invasive techniques to promote your safety, with much less trauma and much lower costs to you and your insurance company.

The MIT Precision Shooting Team, created and trained by Dr. Mark Jacobson, is an exceptional team of technologists who are specially trained to assist in "targeting"

tumors for biopsies using CT or Ultrasound image guidance. Having successfully performed thousands of biopsies in their outpatient Interventional Radiology center in Lady Lake, Florida, the MIT Precision Shooting Team also brings its skillset to the procedure room to assist in tumor ablations with Dr. Jacobson.

Under the expertise of Dr. Jacobson, MIT, Medical Imaging & Therapeutics is a training center for Residents and Fellows of the Department of Interventional Radiology of the University of Florida School of Medicine.

About Dr. Mark Jacobson

Dr. Jacobson performs thousands of image guided interventional radiological procedures each year in his Lady Lake center and is the "go-to provider" for these procedures, not only because of the number of procedures performed and numerous



happy patients, but also because an outpatient surgical facility is a center of choice over a hospital for minor procedures not requiring general anesthesia. MIT has no procedure related infections, no history of hospital acquired diseases, is certified by the Florida Board of Medicine, is cost effective for you and your insurance company, and patients prefer the calm nurturing setting with pleasant professional staff. Local, as well as out of town physicians entrust Medical Imaging & Therapeutics for many various treatments for their patients. MIT is affiliated with the University of Florida College of Medicine as an Interventional Radiology training center for physicians in the interventional radiology residency and fellowship program.



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Why Are So Many Adults Needing Rotator Cuff Repairs?

What to Expect if your Shoulder requires treatment

Over the past decade, there has been a dramatic increase in rotator cuff injuries. As we age, our bodies are subjected to more repercussions from normal wear and tear. This is particularly the case with individual's age 60 and older, but the same wear and tear is accurate for younger people that are very active or have suffered accidental injury through sports or trauma-related causes. Additionally, living in the Sunshine State, permits most adults to be more active year round, which is why there is an uptick in sports related disorders. As more aging individuals are kayaking, playing tennis, golf and pickleball, rotator cuff injuries are growing more common.

One of the primary injuries that orthopedic surgeons treat is a rotator cuff tear. The rotator is comprised of four muscles and three main bones. Although there are multiple types of shoulder injuries, rotator cuff injuries cause a great deal of pain when lifting the arm over the head. For people that work in a field requiring lifting, extension of the arms, or big range of motion, this can be detrimental to their careers. Once the rotator cuff is damaged it can be difficult to wash or style your hair, lift objects or your arm, reach high to get something off of a shelf, pull on a shirt, or put on a hat. If you're active, your ability to swim, play tennis, golf, or anything requiring maximum arm movement, your activities will be significantly hindered because of the impingement in your shoulder.

Details of Rotator Cuff Tear

The three bones that make up the rotator cuff are the clavicle, humerus and the collarbone. The four muscles create a fulcrum for one main tendon that connects to the upper portion of the humerus bone in the shoulder, this joint allows the shoulder to rotate our arm and shoulder and to move it up, down, and to the right and left. A fluid-filled sac helps to lubricate the rotator cuff.

Over time, wear and tear can cause tiny tears to occur, which can cause discomfort and limit our range of motion. As we age the blood supply in our tendons decreases, this can also cause tears and damage to occur. Extreme shoulder impingement occurs when there is bursa inflammation or bone spurs have sheared off, causing minimal ability to move the shoulder.



Diagnosis and Treatment

Your doctor will diagnose the rotator cuff disorder by a physical examination of your shoulder and your range of motion, along with x-rays, and if needed, an MRI or ultrasound.

Your treatment options are usually to start with an anti-inflammatory medication like NSAIDs, rest and icing the area to take away any of the inflammation. This will allow the rotator cuff to heal itself naturally. If the injury is advanced, or the body will not heal itself due to health or aging-related issues, surgery may be necessary.

Three standard surgical approaches include:

- Open Surgical Repair
- Mini-Open Repair
- Arthroscopic Repair

If the tear is partial, a simple debridement may be all that is necessary, if it is a little more involved, suturing the tendons together and sometimes reattaching the ligaments to the bone may be required. Your orthopedic surgeon will be able to discuss your options in full detail with you during your consultation.

There are traditional surgery and arthroscopic (minimally invasive) surgery options. The good news is if surgery is necessary, it can usually be performed arthroscopically. With Arthroscopic surgery there is no muscle detachment, and through a small incision, the surgeon will have access to the entire shoulder joint. With proper care and maintenance,

long-term outcomes are equal to those of traditional surgery. With this minimally invasive technique, your recovery time is traditionally quicker and much less painful.

Your Recovery

- Four to six weeks
- You will need to keep your arm movement to an absolute minimum during this time
- Sling to restrict your movements
- Physical therapy to get you back to a full range of motion; this is especially true if your job or sports activities require a lot of arm and shoulder rotating or lifting

To find out more rotator cuff tears, or your other orthopedic needs, please call Advanced Orthopedic Institute at (352) 751-2862



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Prescription Drug Monitoring

Prescription drug monitoring is a critical tool in the fight against the opioid epidemic. While state-based prescription drug monitoring programs (PDMPs) let us know what drugs patients are prescribed, we must also know what drugs are actually in a patient's system, prescribed or not.

In this newsletter, we will discuss the origins of the opioid epidemic and the benefits of comprehensively monitoring prescription drug use with urine testing.

The Opioid Epidemic

It is important to remember that opioids are not necessarily "bad" drugs. For many decades, opioids such as oxycodone, meperidine, and codeine were the only medications available to alleviate severe pain. Opioids also can produce a feeling of euphoria. This is one of the reasons for the high potential for patients to develop substance use disorders (SUD) (See SAMHSA.gov/disorders/substance-use).

Prescriptions for opioids began to increase in the 1990s. Reasons for the increase during this period included a newly developed formulation of oxycodone, OxyContin® (oxycodone hydrochloride). The drug was marketed as nonaddictive.¹ In addition, opioids were increasingly used for chronic, noncancer pain.¹ The number of opioid prescriptions increased from approximately 3 million a year in 1990 to 8 million a year in 1996, and to 11 million in 1999.¹ From 2006 to 2008, the number of opioid prescriptions increased 4.1% annually.² After OxyContin® was found to be addictive, the number of opioid prescriptions written yearly began to decrease (an annual decrease of 5% per year from 2014 to 2016).²

Despite decreasing opioid prescriptions, the number of deaths involving prescription opioids increased from approximately 22,600 in 2015 to more than 32,000 in 2016 (equivalent to about 89 deaths per day).³

The discrepancy in trends between the number of opioid prescriptions written and prescription drug deaths is because of opioid misuse. Dangerous combinations of prescription drugs, such as opioids and benzodiazepines, have also contributed to the increase in deaths (Sidebar). In addition, as prescription opioids became less available, many people with SUD began using heroin. Recently, more and more people with SUD have begun using fentanyl because it is cheap and potent. Heroin is also being cut with fentanyl, which increases the risk for drug overdose.

Prescription Drug Monitoring Programs

To combat opioid misuse, almost all states have implemented PDMPs. These programs require physicians and pharmacies to report prescribing information of Schedule II to IV or V drugs.⁶ PDMPs allow healthcare providers to find out if a patient has already received a prescription for a controlled drug. These programs have helped to decrease the number of Schedule II opioid prescriptions by 30%.⁷

Do You Know What Drugs Your Patients are Taking?

Despite their value, PDMPs cannot comprehensively capture opioid misuse. One reason is the lending or borrowing of prescription medications, known as medication

sharing.⁸ Analysis of over 230,000 urine drug testing results from Quest Diagnostics has shown that medication sharing is not uncommon:⁹

- Opioids and benzodiazepines were found in over 25% of urine specimens.
- In 52% of specimens, 1 drug class was prescribed and the other was nonprescribed.
- Almost 1 in 5 specimens that were positive for prescribed opioids were positive for nonprescribed benzodiazepines.
- Over 15% of specimens with prescribed benzodiazepines also were positive for nonprescribed opioids.

Urine Drug Testing Is Important and Can Save Lives

Urine drug testing provides an objective assessment of drug use. Testing can be divided into presumptive and definitive tests. Presumptive drug tests are used to detect possible use of many drug classes including opioids. However, they do not determine which opioid a patient is taking. Nor do presumptive tests detect synthetic opioids. Definitive drug tests use more complex methods (eg, mass spectrometry), and identify specific drugs and metabolites in the test specimen. They can be used to confirm presumptive test results.

Ongoing drug testing can help monitor a patient for adherence to a medication regimen. Patients may be taking nonprescribed drugs, skipping doses, or not taking their medications at all. If a test is negative for a prescribed drug, there is a risk of diversion (illegally giving drugs to others). Unexpected results can also be because a patient has a fast or slow metabolizer opioid genotype.¹⁰

The Centers for Disease Control and Prevention (CDC) recommends that urine drug testing be performed before starting opioid drug therapy.⁵ Follow-up testing, at least annually, for prescribed and nonprescribed medications, and illicit drugs should also be considered.⁵

How the Laboratory Can Help

Quest Diagnostics offers urine drug tests for prescription and illicit opioids and other drugs that can affect pain management strategies (QuestDrugMonitoring.com/). These test options include presumptive immunoassay screens, and definitive mass spectrometry assays for confirmation and analysis.

Quest Diagnostics' medMATCH® reports match assay results to prescription information and provide a patient-specific interpretation.

Quest Diagnostics also offers pharmacogenomic testing to determine if a patient is a fast or slow opioid metabolizer.

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Combining Drugs—A Dangerous Proposition

Opioids and benzodiazepines taken together have a synergistic effect that can dangerously depress respiration. A 2017 study found that overdose deaths caused by a combination of opioids and benzodiazepines increased 1.7-fold since 2002-2003.⁴ Deaths due to combinations of prescription opioids with heroin and alcohol also markedly increased.⁴ The Centers for Disease Control and Prevention (CDC) has recommended that physicians should avoid prescribing opioids and benzodiazepines concurrently whenever possible.⁵

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May-Thurner Syndrome:

A Vascular Disorder Affecting Mostly Women

By Bryan Carter, MPA-C, Phlebology-Surgery

Blood is carried toward the heart through our veins, and is called venous flow; blood is carried away from the heart through our arteries and is called arterial flow. Because proper blood circulation aids the body's movement of nutrients and oxygen to the extremities, heart, brain and other organs, it's imperative to maintain and improve our arterial and venous blood flow as we age. However, it's not uncommon for arteries and veins to fluctuate directional flow, but with May Thurner Syndrome, it can lead to dangerous outcomes like impinged blood flow and DVTs (deep vein thrombosis).

The right iliac artery and the left iliac vein intersect within the pelvis. With May Thurner Syndrome, the left iliac vein can become "kinked" from the pressure of the right iliac artery, pressing it against the lumbar spine, and in turn, may cause the blood flow to become partially or fully blocked. This is how dangerous DVT's can form. Females suffer from this disorder more commonly than men.

Symptoms

The bad news is May Thurner Syndrome rarely shows signs and symptoms. Small indicators may be swelling in your left leg and/or some discomfort or the following.

- Enlarged veins
- Leg feels heavy
- Skin color changes
- Swollen leg
- Warmth
- Pain

Risks

- Blood clotting factors (medications, health-related or genetics)
- Hormonal Medications (birth control, menopause)
- Child birth
- Dehydration
- Scoliosis
- Spinal compression
- Female

DVTs are life-threatening and should be treated immediately. Deep vein thrombosis is a blood clot in the veins that are formed deep in within the legs. Vascular malformations, pelvic tumors or sitting for long periods of time are some of the risk factors that go along with DVTs.



DVTs are life-threatening, as they can lead to a pulmonary embolism. Thankfully, surgical solutions save lives. Every year, over 2 million people are affected by deep vein thrombosis, and sadly over 200,000 of these cases end in death. These are grim statistics since the treatment is minimal and so readily available to patients. It's unfortunate that there still seems to be more of a reactive process, than a proactive plan. Speaking to your physician is vital if you or a loved one have any of the venous symptoms or risk factors discussed above.

Diagnostic testing includes contrast venography, duplex ultrasonography, or other imaging of the iliac venous and arterial flow.

Treatment

With DVT's, and those caused by May Thurner Syndrome, the treatment is standard. A stent needs to be placed in the vein and/or artery to

open the blood flow, as well as prescribing medication for anticoagulation, like warfarin or another blood thinner to prevent future clotting complications.

Making an appointment with a phlebologist, which is a vascular surgeon specializing in venous disease is your best line of defense against this common disorder.

At the Heart of the Villages, Bryan Carter specializes in venous issues and leg health, taking great pride in getting to know his patients on an individual level. He is supported by a full-service cardiology practice. Mr. Carter is a previous Army combat medic who obtained his Masters in Physician Assistant studies with a thesis in Venous Disease and Treatment. Mr. Carter has been treating vein problems since October 2002 and was one of the first Physician Assistants to perform thermal ablation—a treatment that soon made traditional vein stripping extinct. Bryan has personally trained physicians, physician assistants and nurse practitioners throughout Florida and Georgia and is an active member of the American College of Phlebology. He is also one of only a few to be inducted into the American Venous Forum.

To find out more, please visit their website at heartofthevillages.com, or call their office to schedule your appointment at, (352) 674-2080.



Bryan Carter, MPA-C

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Avoiding Oral Pain? Don't Suffer in Silence!

Today, there are so many advancements in dentistry that make getting your dental health issues taken care of—a breeze. If you have dentures and over the years they've become loose, or are causing sore spots on your gums, it's because they don't fit properly any longer. When teeth are missing, the bone in the mandible (lower jaw) and the maxilla (upper jaw) will start to deteriorate over time. Once this takes place, you'll need to have your dentures adjusted. This is a simple fix.

There is not much worse agony, then when your mouth has some sort of pain. Whether it's from the aching nerve endings in a tooth, swollen sore gingival tissue, loose teeth, or an ill-fitting denture, don't suffer in silence, because oral pain can easily be treated.

If you'd like to feel more confident about your smile and enjoy the comfort of not having dentures or partials, then getting dental implants is the best solution. Over the past several decades, dental implantology has advanced into one of the leading procedures performed conveniently right in the dental office. It's now safer and easier than ever to get permanent replacements for a single tooth, or for multiple ones. In some cases, where patients have full dental arches needing to be replaced, dental implants can be strategically fixed into the bone, which will be the foundation that the dentures adhere to. This actually helps to salvage the healthy bone that you have within your jawline, much more so than with dentures alone. This is because the dental implants stimulate your bone and will contribute to the new regenerate of bone due to the bite occlusion and proper pressure needed for this formation. This process is called an implant-supported denture.

Using cone beam scanners, lasers and digital radiography, this cutting-edge technology, allows dental implants to be placed optimally without the need of scalpels or sutures. After the titanium posts are placed, your bone will integrate even more securely over a short period of time, making the "roots" of the implant strong and firm. In many cases, these teeth will be stronger than the patient's original tooth structure. The crown or prosthetic teeth are made to match your other teeth in size and shape. To the visible eye, these crowns will appear to be your beautiful natural teeth.



The cone beam scanner is a three-dimensional image of your teeth, soft tissue, nerve endings and bone formation. This advanced 3D technology allows for optimal treatment planning for countless procedures.

A hybrid denture is also an option for individuals that are missing several teeth in a row but do not wish to wear a partial denture because they prefer something more permanent. The hybrid denture is more like a fixed bridge, but it covers the empty spaces between teeth, without having to shave down existing teeth like with a traditional bridge. The hybrid denture adheres securely to the surrounding teeth, making it an ideal choice for many patients.

The best treatment option is, of course, to be proactive in your dental health. If you have loose teeth, or some form of gingivitis, or advanced periodontal disease, then seeing your dentist is critical to avoid losing teeth and also to treat the bacteria in your mouth. Bacteria and gingival disease is a fairly good indicator of your overall health. When your mouth has microorganisms causing disease, getting it treated will prevent it from spreading further into your system.

At Laurel Manor Dental, their dentists are highly trained in these procedures, and they take great pride in your getting you to your most optimal dental and oral health. Laurel Manor Dental goes one step further because they have an onsite specialist in periodontal disease and prosthesis. Her name is Dr. Lucia Roca.



After receiving her Doctor of Dental Surgery degree, Dr. Roca spent an additional three years studying at the University of Connecticut School Of Dental Medicine. She was then accepted into the University of Medicine and Dentistry of New Jersey/Rutgers where she performed clinical research, completed her periodontics residency and earned her Masters of Dental Science degree.

As a member of the American Dental Association and the American Academy of Periodontology, Dr. Roca has worked tirelessly to help bring dental care to those in need from the city streets of Newark, NJ to the rural villages of Guatemala. Her dedication and continual interest in acquiring new dental knowledge have deep ties, as Dr. Roca's parents are both dentists, and she herself is now married to a dentist. Dr. Roca takes satisfaction in explaining the best treatment options for her patients in English, Spanish or Italian!

If you or someone you love is in need of a dental consultation for any of the issues mentioned above, or for other general dental needs or concerns, please call Laurel Manor Dental at (352) 430-1710, or visit laurelmanordental.com.

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High Cholesterol EQUALS a Higher Risk for Diseases & Disorders

Courtesy of American House

Cholesterol is a natural substance that the body produces through the liver. It's waxy and circulates through the bloodstream, feeding the heart and brain. But when cholesterol is derived from foods like saturated fats and trans fats, the body overproduces LDL, which is the "bad" cholesterol.

HDL is the "good" cholesterol our bodies crave. Without HDL, our brains would not function properly, and we would suffer from other bodily disorders, like heart attacks and strokes. HDL helps to remove the bad cholesterol (LDL) from the body. High levels of LDL may also adversely affect overall health by causing atherosclerosis (plaque in the arteries), cardiovascular disease and other disorders.

What are Healthy Cholesterol Numbers?

Your total cholesterol is made up of both LDL and HDL numbers. Your family doctor may order tests in order to check your numbers. The healthiest combination of both types of cholesterol measures HDL, good cholesterol,) around 40, and LDL, bad cholesterol,) around 100.

TOTAL CHOLESTEROL LEVEL		
GOOD		<200
BORDERLINE	200-239	
HIGH		240 or higher

What are the Risk Factors?

Cholesterol, along with triglycerides in the blood, can form atherosclerosis, which as previously mentioned is the plaque that builds up in the arteries. Excessive plaque can increase the chances of a coronary heart attack, heart disease, stroke and other related issues. Triglycerides are the fat that is stored in the bloodstream from the excess fat in our diets. Triglycerides combine with the high LDL level and create harmful plaque build up.

What You Can Do?

Because high levels of LDL and triglycerides are both associated with food intake and the body's inability to burn fat, adopting healthier habits can help lower cholesterol naturally.

- Eat a healthy diet
- Quit smoking (contributes to atherosclerosis)
- Start a regular exercise program
- Cut back on alcohol and processed foods

Schedule an annual exam with your physician to check your cholesterol levels on a regular basis. If you have high cholesterol, your doctor may prescribe medication to help lower the overall cholesterol levels. In addition to medication, a change in diet can help to decrease LDL and Triglycerides, as well as raise your HDL to optimum levels.

Incorporate Healthy Foods and Nutrients in Your Diet

A significant contributor to successfully lowering LDL is the addition of soluble fiber, omega-3 fatty acids, mono-saturated fatty acids (MUFAs), powerful antioxidants and lutein, to your diet. However, in order to see the benefit of ultimately lowering bad cholesterol, an overall healthy diet must be maintained. This includes decreasing, and in some cases, completely eliminating processed foods from your diet. Cholesterol lowering foods can drop your bad cholesterol levels by 5-10% within a few weeks.

- Cholesterol Lowering Foods
- Garlic
- Ginger
- Oatmeal and Oat Bran
- Pears
- Apples
- Prunes
- Beans
- Red Wine
- Fatty Fish (Salmon and Sardines)
- Nuts
- Black and Green Tea
- Spinach
- Olive Oil
- Apple Cider Vinegar



It's best to speak with your physician before changing your diet or exercise program. Your doctor will develop a plan to suit your specific needs, along with a coordinated medication and lifestyle strategy.

At American House Senior Living Communities, it matters to us that our residents live a healthy and active lifestyle. That's why we invite experts over for informative presentations, year-round, to discuss healthy living, providing tips and preventative screenings to help our residents live life to its fullest. Get expert advice when you join us for one of our information health series, or stop in for lunch and enjoy a healthy, chef-prepared meal with friends and neighbors at our inviting community.

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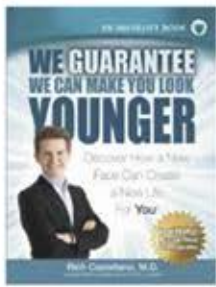
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September is Prostate Cancer Awareness Month

How to Avoid Prostate Cancer and Other Prostate Problems

If you are a man approaching middle age, make it a priority to get to know, love, and care for your prostate. Ignore this little organ at your peril! Roughly half the male population of North America and Western Europe will have enlarged prostates by their mid-50s. And prostate cancer remains frighteningly common.

What is the Prostate?

The prostate is a gland, about the size of a walnut, found just below a man's bladder. It releases seminal fluid, and during orgasm, contracts to allow ejaculation. Unfortunately, as men age, the prostate often enlarges, sometimes up to four times the size it would be in a healthy 20-year-old. This is largely the consequence of natural hormonal changes, especially the decreasing levels of testosterone and its conversion into DHT.

Tips to Avoid Prostate Trouble

Prostate trouble can be distressing (having to get up three or four times a night to urinate, suffering from unwanted leakage at work, and so on), as can the medical examinations and treatments. To avoid these problems, not to mention prostate cancer, try the following:

1) Exercise Regularly.

Exercise helps boost the immune system and reduce stress. But make your exercise gentle. Do not take up cycling or riding horses, as these activities can damage the prostate. Yoga is particularly good. If you attend a class, ask your teacher if there are any exercises she would recommend, especially those that target the pelvic area.

2) Reduce the amount of eggs you consume.

Researchers at Harvard University conducted a study into 1,000 men in the early stages of prostate cancer. They found that those who ate an egg a day doubled the risk of their cancer metastasizing. The culprit is thought to be a compound



known as choline. According to Dr. Michael Greger, an American physician and author of *How Not to Die*, who quotes from the Harvard study in his book, choline may also increase your chances of developing prostate cancer in the first place.

3) Eat plenty of seeds.

Sunflower, sesame, pumpkin, and above all, flaxseeds are all good for the prostate. They are packed with essential fats, but more importantly, they contain zinc, which is vital for a healthy prostate. Flaxseeds are also packed with lignans, proven to slow the growth of prostate cancer cells in petri dishes and possibly in human bodies as well.

4) Eat lots of tomatoes.

Tomatoes contain lycopene, a substance known to prevent prostate cancer. But to enjoy maximum benefit, you need to cook them, as the lycopene is released when tomatoes are heated. Since garlic and olive oil are also good for the prostate, try

frying tomatoes in a small amount of good-quality olive oil along with chopped garlic. If you prefer not to fry them, you can grill or even bake them.

5) Take a zinc supplement.

Zinc supplements have been shown to slow benign prostatic hypertrophy (BPH), a condition which involves the enlargement of the prostate. Zinc interferes with the conversion of testosterone into DHT, a hormonal trigger for prostate enlargement. And zinc deficiency is common among those diagnosed with prostate problems. However, make sure you buy a good quality brand.

6) Take a turmeric supplement.

Turmeric, hailed by some as nature's wonder drug, may also have benefits for the prostate. Curcumin, found in turmeric, is thought to inhibit the compounds responsible for prostate enlargement. Those who take turmeric supplements also reduce their risk of incontinence and urinary infection. When the prostate goes wrong, it tends to become swollen and inflamed; turmeric is a well-known anti-inflammatory.

7) Take a PSA test.

This stands for Prostate Specific Antigen. If your PSA levels are elevated, this may mean your prostate is becoming enlarged; it may even indicate the early stages of cancer.

Difficulties with the prostate are so common that most men will experience them at some point, even if it is merely the annoyance of having to urinate several times a night. Unfortunately, modern medicine is still far too reactive. In other words, the medical establishment waits for you to get sick, then treats you. The key is to not get sick in the first place. And that is especially true of the prostate.



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Get Fit in Ave Maria: Lower Your Cholesterol

If you have high cholesterol, your doctor has likely talked to you about exercise. In addition to improving your diet, exercise is an effective lifestyle change you can make to help bring your numbers down naturally. At Ave Maria, our residents have access to many exercise options both indoors and out.

How to Start Exercising

Although moderate physical activity such as brisk walking is safe for most people, health experts suggest that you talk to your doctor before you start an exercise program.

What Kind of Exercise Will Help?

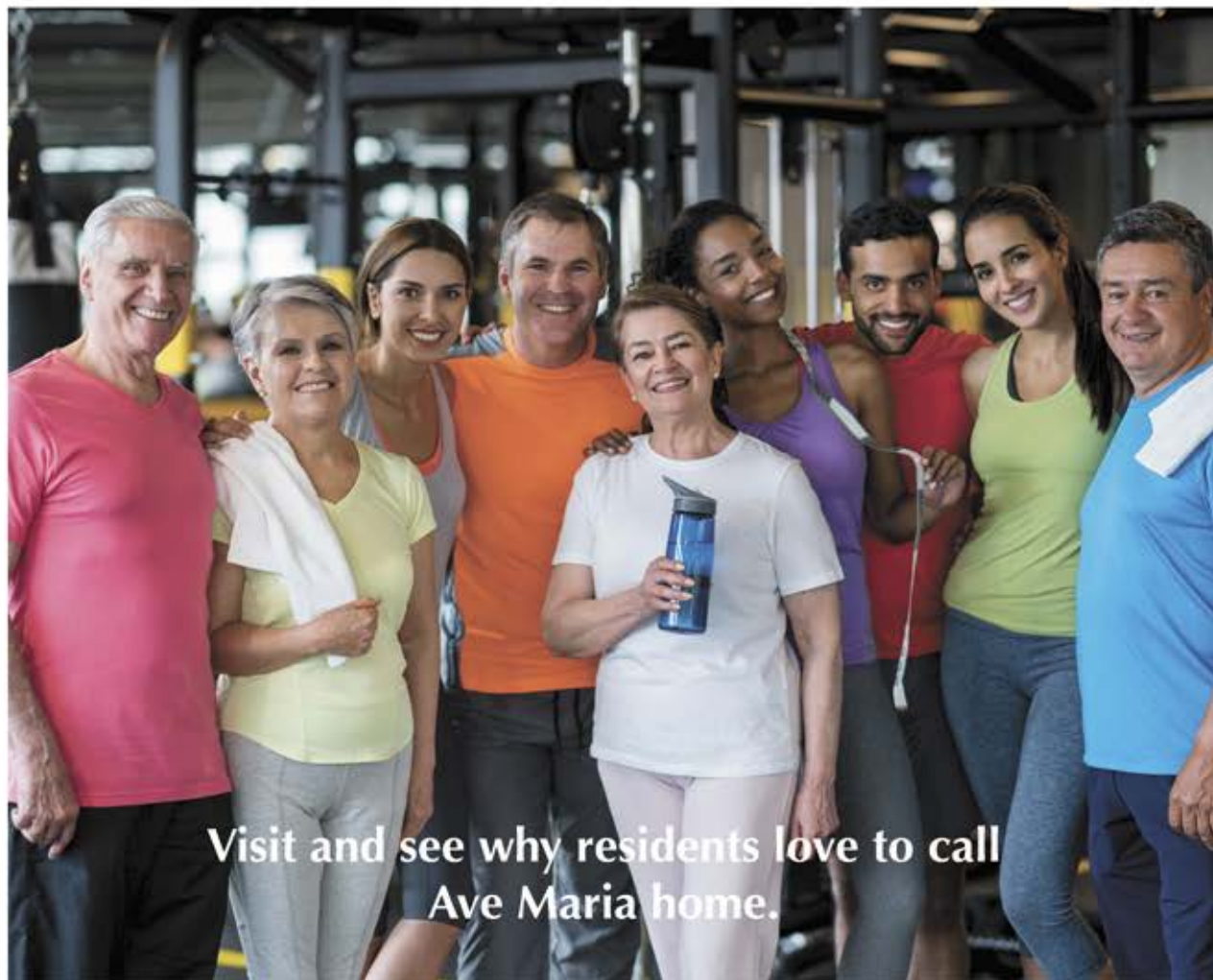
To improve cholesterol levels, as well as lower your blood pressure and risk for heart attack and stroke, the American Heart Association (AHA) recommends an average of 40 minutes of moderate - to vigorous-intensity aerobic activity three or four times a week. For overall cardiovascular health, the AHA suggests at least 150 minutes of moderate exercise — or 75 minutes of vigorous exercise — per week.

Examples of moderate-intensity exercise include:

- **Walking briskly (3 miles per hour or faster).** Ave Maria has miles of walking trails.
- **Bicycling (10 miles per hour or slower).** Our bike friendly town allows you to bike to shopping, dining and more!
- **Playing tennis (doubles).** The Ave Maria North Park is located just north of the Town Center and provides an ideal spot for tennis, baseball, basketball, and plenty of fun in the sun.

Examples of vigorous-intensity exercise include:

- **Racewalking, jogging or running.** Located in the Town Center, the Ave Maria Fitness Center spans 5,000 square feet of workout and classroom area, men's and women's showers, reception area and offices. The workout floor includes state-of-the-art treadmills, stationary bikes, and Star Trac exercise equipment.
- **Swimming laps.** Adjacent to the schools and the North Park lies Ave Maria's famed Water Park, rivaling



the finest parks of its kind in the area. With its interactive fountains, slides, pools, and pavilions, the Water Park provides hours of resort-style entertainment on a year-round basis.

- **Aerobic dancing.** The Club at Maple Ridge will be the central hub of activity and relaxation exclusive to residents of Maple Ridge, Maple Ridge Reserve, and Coquina. The Club is poised to include indoor and outdoor activities for all ages including an aerobics studio, bocce court, and dog park.

Ave Maria residents enjoy a seemingly endless array of activities, from free organized events to a waterpark, aquatics center, dog park and miles of walking trails. At Ave Maria, you don't just live here; you come alive here.

With homes from our three featured builders priced from the low \$200s to \$400s, Ave Maria indeed has something for everyone. Just a few hours south of The Villages on I-75. Make a trip of it and visit our 21 models open daily. Call (239) 325-3903 or visit avemaria.com to learn more.

How Do I Get There?

From I-75 south take Exit 111, and then make a left/east on Immokalee Road (County Road 846). Proceed 10 miles to Oil Well Road (County Road 858). Turn right on Oil Well Road to Ave Maria.

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Lakeside Landings is proud to announce their newest community, the Enclave. The Enclave has luxury homes ranging from 1500 to over 3,000 square feet. WITH OVER 15 FLOOR PLANS TO CHOOSE FROM, EVERY HOME IS BUILT FROM THE GROUND UP USING QUALITY CONSTRUCTION METHODS AND FILLED WITH FEATURES YOU MIGHT EXPECT TO PAY MORE FOR.

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Losing Weight To Get Healthy

Find out how Christine Lost 65 pounds, 40 inches and so much more

Dr. Compton and his office in the Villages, Florida is now the exclusive provider of the Ideal Protein weight-loss system, which provides you with prepackaged meals, coupled with your own groceries that will have the weight falling off of you in no time. Ideal Protein is a scientifically researched solution to provide weight loss through a four-stage diet program.

Currently, more than 3000 medical practitioners in the US and Canada offer the Ideal Protein protocol for their patients to lose weight and reverse metabolic syndrome (a group of conditions that are associated with heart disease stroke and diabetes). Compton Chiropractic Care has four chiropractic physicians and two weight-loss coaches, all with backgrounds in nutrition and medicine to help facilitate the specific plan and to ensure your health is optimized. Each patient's health conditions, medications, blood work, recent cardiovascular and metabolic paneling is reviewed before starting the Ideal Protein protocol. Ideal Protein is a scientifically researched solution for safe and effective weight-loss.

At Compton Chiropractic Care your initial consultation will be a focused medical evaluation for diseases related to obesity and cognitive factors along with a physical examination. In addition, they will obtain a weight history, which includes past diet attempts. They will give thorough goals and expected outcomes. Many patients come to the clinic with undiagnosed diabetes, high cholesterol, thyroid disorders, abnormal liver tests, or obstructive sleep apnea. On your initial visit if you have not had recent blood work or an EKG performed their medical staff will ensure these tests are completed before starting the protocol, so that you may safely begin the program and as a guide for your three-month recheck. Overall Compton Chiropractic Care's Ideal Protein weight loss protocol will include weekly progress measurements and one-on-one nutrition counseling with a weight loss consultant, behavioral modification, and a prepackaged meal replacement plan.

A Weight Loss Testimony: Christine R. explains her personal experience with the Ideal Protein program at Dr. Compton's office.

Christine's Story:

"I knew I needed to lose weight. My weight loss journey was like a roller coaster, constantly losing and then regaining. My daughter introduced me to Ideal Protein, so when my husband and I moved to Florida to retire, I looked for a physician in the area that might offer the program, and I was fortunate to find Dr. Compton's office. That was April 7, 2017.



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- Reductions in weight have significant health benefits for high blood pressure, cholesterol reduction, metabolic disease management, diabetes and lowering A1C levels
- Expert guidance and professional support under the tutelage of your personal weight loss coach
- Unlike fad diets, the Ideal Protein Protocol has a beginning and an end
- Four distinct and unique stages help assist you in making permanent lifestyle changes, facilitating your optimal health

Attend a Free Workshop!

Free, no obligation workshops offered twice per month at Compton Chiropractic Care. This is a great way to discover the Ideal Protein Weight Loss Method in a friendly, no pressure environment.

Please call us for workshop times and to reserve your spot today as space is limited! 352-391-9467

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I hadn't been feeling well for a very long time; as a Type II Diabetic, I knew that my weight had a lot to do with my backaches, and my general sense of well-being or lack thereof. On top of that, when you move to a retirement community, there are always plentiful amounts of drinks and food being passed around, which made my situation worse, so I finally had enough and set up my appointment with Compton Chiropractic Care. I can't say enough good things about my weight loss coach. He is very passionate about the program and getting his clients motivated not only to lose the weight, but also to understand how health plays the most significant role in the protocol. He's a fantastic coach, but also a dedicated, empathetic person.

During my first consultation, my coach scheduled my initial lab work. I had an EKG, blood pressure, cholesterol and blood sugar test. All of my lab work was high, and I found out that my A1C level was through the roof at 8.

My goal was to lose 65 pounds by my birthday, which was November 2nd because I was turning 65. So for seven months, I was dedicated to the plan and worked one on one with my coach. I learned so much about food, nutrition, health, and wellness, and I'm happy to report that I lost all of the weight! I'm 65 pounds lighter, and my A1c level went down to 5.4 within the first three months of being on the program. All of my other issues like high cholesterol and high blood pressure are normalized without medication.

This is unlike any other diet program because you're not counting calories or points, and you're not overwhelmed with choices because there is a very specific diet in place. This is a program that teaches you what to eat and what to avoid to lose the pounds and to get healthy. You have to change your thinking for good because you're worth it! You'll need strength, discipline, and knowledge. This program helps you face situations head on. It teaches you not to hide, you learn the importance of weighing yourself consistently, and you learn to be honest about what you're eating. Along with their delicious variety of meal packages, you'll need to learn to prep nutritious food and stick to the rules. But once you see the weight coming off and you begin to feel better physically, the plan gets easier because you'll know exactly what you need to do every day.

You never feel deprived, because you can have chocolate chip pancakes, crispy treats, cappuccino and other pre-packaged delights that leave

you satisfied, all while you're learning about what foods to incorporate into your routine. It's very structured, but that's why it works! Because it's more than just losing weight, it educates you on your body's needs and overall health.

It's an enlightening experience, and I find it fascinating to continue to learn about wellness, the food industry, our culture and how weight affects many aspects of our lives. I'm constantly researching so that I can learn more and become even healthier.

On November 2nd, I celebrated life! I turned 65 and lost 65 lbs and 40 inches! I have become the healthiest I've been in a very long time, so I had a party! I invited 115 people to celebrate my birthday and my ability to reach my goals! It was wonderful, and I'm so happy to be able to encourage others now to do the same."

Diet

The Ideal Protein weight protocol is a medically derived protocol developed and refined over a twenty-year period. Dieters are provided 65% of their weekly groceries inconvenient, pre-packaged meals. Dieters will also have a choice of vegetables and lean meat each day to round out their dietary needs. Women typically average between 2 - 4 pounds of weight loss per week, while men can range between 4 - 6 pounds per week. The long-term success for dieters is realized through the one-on-one coaching, designed to motivate and educate, ensuring the knowledge and confidence to make better lifestyle choices once Phase Four has been reached. With over 3,000 medical practitioners in the U.S. and Canada offering the Ideal Protein protocol to their patients to lose weight and reverse metabolic syndrome, Compton Chiropractic Care has chosen to align our overall goal for meeting our patient's needs with this highly regarded and successful plan.

Activity Levels

While physical activity is an important addition to any diet as it boosts metabolism and increases weight-loss - it is not necessary on the Ideal Protein program. Our philosophy is the more healthy you begin to feel once you are experiencing a reduction in weight, the more your energy levels will increase, and your need to create and comply with daily activities will simply become a part of your routine. Ideal Protein has specified emails that will help encourage dieters to move as their energy levels increase, but there is no set daily exercise requirement for the protocol.

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Cannabis - Curing Cancer

By Robert C. Goethe, MD

Lymphoma, leukemia and multiple myeloma are cancers of the blood. According to the National Foundation for Cancer Research, more than 1.2 million are either living with or in remission from a blood cancer. They account for 10% of new cancer cases in the US each year. The good news is that these cancers have significantly improved with new therapies. The majority of people will survive more than 5 years now. Ironically, often the more aggressive of these malignancies the better they respond to chemotherapy.

I have the good pleasure of knowing Hayden Fouke of Inverness Florida. He runs Nature Coast Cannabis Enterprises which is a non profit organization that seeks to promote medical cannabis and industrial hemp. What gives him the great enthusiasm for this venture is that he is a cancer survivor and he attributes this to medical marijuana. Over 10 years ago, at the age of 69, he was diagnosed with multiple myeloma and began chemotherapy for it in 2008. Not for cure but just to try to control its growth and spread. Hayden also began using medical marijuana and has now well exceeded his life expectancy and is also measuring as low as you can go for his tumor markers. Hayden is just one of many people who anecdotally have experienced cancer suppression with cannabis.

Another well known story is that of Rick Simpson, a Canadian who fell off a ladder at work and had an head injury. He suffered with dizziness and tinnitus afterwards and was treated vigorously by his physician, but nothing seemed to help. That is, until he discovered marijuana. Years later, he developed skin cancer on his arm and neck. Rather than seek surgery, he treated it topically with cannabis oil and in 4 days it was gone. Rick Simpson became a major advocate of this extract and to this day people still use his simple recipe to make Rick Simpson oil (RSO).

There are a lot more anecdotal stories about cannabis curing cancer. Cancers ranging from gliomas (brain cancer) to pancreatic cancer to basal cell carcinomas. But what to believe? Why so many anecdotes but no clinical trials? This is because marijuana and all its derivatives have been categorized as a Schedule 1 drug in this country since 1972. The federal



government and DEA have shut out the possibility of research on patients and if you do a google search you find traditional sources often say, "Although there has been some indication that marijuana might be useful for (insert disease), there have been no clinical trials and therefore it cannot be recommended." Its a catch 22.

No one will argue that medical cannabis is extremely useful for cancer patients because it increases appetite, decreases nausea with chemotherapy, alleviates pain and elevates mood. Nothing works better. There are lots of very expensive drugs including Marinol (which is a synthetic THC) but patients report nothing works as well as the natural plant.

But does cannabis really suppress/kill cancer too?

There have been some really promising findings now coming out of research, mostly from other countries. It has been found that the marijuana plant contains over 100 different molecules called cannabinoids. THC and CBD being the two best know ones. Our bodies have receptors for these molecules in the brain, nervous system GI system and lymphatics. Yes, cancer cells have receptors for cannabinoids too. It appears that when cannabinoids bind to cancer cells, they impede growth of the tumor, starve its blood supply and lead to cancer cell "apoptosis". This means the cancer cells self destruct. These qualities have been well documented in the laboratory.

Here is an example of a paper published by the International Journal of Oncology last year with the title "Anticancer effects of Phytocannabinoids used with chemotherapy in leukemia cells can be improved by altering the Sequence of Administration." This study showed that cannabis had significant anticancer effects on leukemia cell cultures and when cannabis was used along with chemotherapy, the cancer inhibition was even more remarkable. The mixtures of the different cannabinoids like what come from natural plant worked better than pure isolates of THC or CBD. This is a pretty amazing finding. Not only did it show that cannabis works, but it demonstrated that it is the mixture of the cannabinoids like what comes from the natural plant that work best. But you can bet pharmaceutical companies are hot on this trail. The problem for them is the most effective medicine is the whole plant, and they can't patent that.

Back to lymphoma and other cancers. These patients automatically qualify for medical cannabis in Florida. We see patients with all kinds of cancer in our clinics, some with newly discovered cancers that will need chemotherapy soon. Some with cancers in remission, some probably cured but with continuing symptoms that the patient wants to address. I don't think it's too far off when clinical trials will be done and cannabis will be found to cure or lessen the impact of cancer growth. In the meantime, I encourage people to read up on this new science and consider we may have been snubbing, for the last 80 years, one of the best medicines we have.



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Dr. Bob Goethe is a board certified anesthesiologist, with over 40 years of medical experience who is now semi-retired in Citrus County and chooses to support the medical marijuana initiative because he has seen it's benefits in patients and strongly believes in the cause.

Using Omega-3 Supplements to Treat Dry Eyes

By Anne-Marie Chalmers, MD

If you stare at a computer screen all day, have reached the plus-55-years-old stage of life and have had a cataract operation, it's likely you have all the makings of a serious dry eye problem.

And you are not alone. Americans spend an astounding \$3.8 billion on dry eye symptom relief every year. Unfortunately, the majority of dry eye treatments options, such as saline solutions and topical lubricants, can be inconvenient and uncomfortable to apply. In addition, the results are often disappointing.

New research on the dry eye front is prompting more ophthalmologists and optometrists to recommend another treatment option: Increase the intake of omega-3 from fish and fish/cod liver oil.

Why would getting enough omega-3 be important for helping treat dry eye symptoms? Because at the heart of most dry eye problems, chronic inflammation is wreaking havoc.

Inflammation in the Dry Eye

A long list of drugs, dry heat or air conditioning, long term contact lens wear, smoking, and diseases like Sjogren's Syndrome all contribute to increasing the prevalence of dry eyes. However, the principal cause of dry eyes seems to be the dysfunction of the Meibomian gland, thanks to chronic inflammation.

The Meibomian glands are located behind the eyelids. Their role is to produce the fats for the tears, which prevents the tears from evaporating and leaving the eye surface unprotected.

Inflammation disturbs the production and secretion of the lipids emitted by the Meibomian glands. The Meibomian glands create a mixture of lipids containing cholesterol wax esters, diesters, triacylglycerol, free cholesterol, phospholipids and free fatty acids. When the inflammation kicks in, however, the quality of that lipid mixture is changed, making it stiffer and more viscous. As a result, the lipids cease to effectively protect the tears and eye surface, resulting in familiar dry eye symptoms.

Omega-3: The Body's Natural Inflammation-Damper

It is worth noting most patients with dry eyes have an overproduction of inflammation signals, meaning the patient's inflammation response is going into hyperdrive.



But what do the omega-3 fatty acids have to do with the Meibomian glands? Scientists speculate that the omega-3 fatty acids work in two different ways to reduce inflammation in the eye. First, the omega-3s suppress the inflammation within the Meibomian glands by inhibiting the inflammation signals. In addition, they also help the meibum lipids become more fluid.

The Research on Omega-3 and Dry Eyes

Besides exploring the theory behind how omega-3 works in the eye, researchers have also been studying the practical application of omega-3 supplementation on patients with dry eye symptoms.

So far, the results are quite promising. To name just a few:

One 2015 study suggested that omega-3 supplements could help relieve computer-related dry eye symptoms, adding more data to a growing body of research. A 2013 placebo controlled, double blind randomized study found that 65 percent of patients who received omega-3 supplements experienced significant improvement of their dry eye symptoms within 3 months.

Furthermore, an investigation on Meibomian gland cells showed that EPA and DHA from fish oil reduced inflammation markers. In addition, the researchers found that the EPA and DHA increased the production of Resolvin D1. This is significant since Resolvin D1 helps restore the tissue back to its non-inflamed state.

At Omega3 Innovations, we have also been doing our own research on dry eyes. In the spring of 2015, a pilot study using one vial of Omega Cure® Extra Strength (3000 mg EPA/DHA) once a day found that 70% of the participants experienced relief from the symptoms of chronic dry eyes within three to four weeks.

Quality, Consistency and Dose Matter

While the research on omega-3 supplements and dry eyes is exciting, it is important to keep in that mind that quality, consistency and dose do matter. Some studies suggest the anti-inflammatory effects of omega-3 don't kick in unless you get a dose equal to at least 2700 mg of EPA/DHA (roughly 8 – 10 regular fish oil capsules) daily.

In addition, as the studies above suggest, consuming enough omega-3 isn't a quick fix when it comes to improving dry eye symptoms. It may take anywhere from 3 to 12 weeks of consistent daily use before you start feeling a difference. Finally, using an oil with a low oxidation level (meaning a fresh oil) will increase the potency factor.

Considering the Future of Dry Eye Treatment Options

With the increasing use of computers and an ever-aging population, the number of people affected by dry eyes symptoms will undoubtedly continue to grow. To combat the issue, we will need lower cost, effective treatments options.

Looking at above research, omega-3 supplementation could be one such answer – and one that could have a bigger health impact than treating the eyes. As one of the participants in our study commented, using Omega Cure Extra Strength not only reduced her need for eye drops and gave her more comfort when using contact lenses. It also helped improve her focus and made her skin and hair softer.

About Anne-Marie Chalmers, MD

Anne-Marie Chalmers, MD, is the co-founder and president of Omega3 Innovations. Born and raised in the United States, Dr. Chalmers graduated from Brown University and completed her medical training at the University of Oslo in Norway. In Norway, Dr. Chalmers practiced emergency, family, and preventive medicine for many years. Her research and development work has included nutraceuticals (especially omega-3) and medical delivery device systems to facilitate ingestion of multiple medication combinations.



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Estate planning does not need to be an expensive or time-consuming process, according to Attorney Patrick L. Smith. Whereas many attorneys bill their clients by the hour to handle their planning, Attorney Smith offers a complimentary consultation and has instituted a flat-fee system for his services. For example, a basic Will is a flat charge of \$75.00 and a Non-Tax Trust Package is \$695.00. This allows clients to know their costs from the start of planning and to determine their estate planning needs without surprises. Although Attorney Smith primarily practices in estate planning and asset protection, he regularly works to connect his clients with a network of attorneys to provide them with complete, affordable legal advice.

Attorney Smith also works to make legal advice accessible to the central Florida community through his weekly radio show, "Ask An Attorney," answering legal questions on the air from live callers, sharing legal information critical to FL residents, and educating his listeners on various topics.

He also incorporates information from other attorneys, financial advisors, CPAs, and other professionals who join him to answer his listeners' questions. "Ask An Attorney" airs on Gospel 90.3 FM every Saturday at 8am.

In addition to giving legal advice live over the radio, Attorney Smith is known for donating his time and legal services to multiple churches and charitable organizations in the community. Attorney Smith offers free seminars on a wide variety of legal topics for civic groups, clubs and other organizations, to inform them about the law and their legal rights.

Furthermore, Attorney Smith recently announced the publication of the third edition of *The Florida Estate Planning Handbook* through Certa Publishing, giving Florida residents an accessible, easy-to-understand introduction to key estate planning concepts. Adding to Attorney Smith's work is his law partner Attorney Joseph F. Pippen, Jr. who joined him on the third edition.

More information about Attorney Smith can be found at Joseph F. Pippen, Jr. & Associates' website: www.attypip.com. For your free consultation or to have Attorney Smith speak at your event or group, you may reach him at his Fruitland Park office by calling (352) 241-8760.

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Finding Balance Through Tai Chi: Reduce the Risk of Falls and Back Pain

As we age, many people find it more difficult to get around and maneuver their way throughout their daily activities. Perhaps you're worried about tripping over uneven pavement or flooring. Maybe you are already using a cane or walker, but still feel apprehensive about your stability, or maybe you have already had the traumatic experience of falling and now need assistance.

Having your gait (stride) checked by a professional therapist is extremely helpful for many individuals with age-related symptoms, and also for people with recent injuries that have an inhibited sense of balance.

A physical therapist will work with you one on one to evaluate your balance, walking ability, foot rotation, steadiness, and control. The therapist will devise a fall prevention program specifically for you in mind. In recent studies, Tai Chi has proven to be an excellent source in helping individuals to gain their balance back by retraining the body to walk stronger with more stability. In addition, the meditative concept stimulates balance and body awareness, as it also helps to build muscle definition with minimal force on the joints.

Tai Chi is a form of exercise that focuses on shifting weight from one foot to the other in a rhythmic pattern. This type of exercise is known to increase balance and prevent falls, especially in the aging population. Tai Chi also alleviates back pain by fostering the flexion and suppleness of the practitioner through recurrent, lengthening, body positioning.



According to the AARP, "Tai chi practitioners learn to "sink into the earth and feel the connection with their feet," which can help them negotiate uneven surfaces, explains international tai chi fitness expert Scott Cole. A 2015 study published in the journal *Arthritis & Rheumatism* found the exercise can also help with osteoarthritis, the most common joint disease in midlife, by improving mobility, reducing stiffness, and helping ease pain.

But tai chi, believed to be a centuries-old adaptation of martial arts moves according to the precepts of Chinese medicine, does more than just loosen up your limbs. "When people practice tai chi, there's a decrease of stress hormones produced by the sympathetic nervous system, which can help lower heart rate and blood pressure," says Irwin. "That's similar to the kinds of gains that happen immediately after engaging in more strenuous exercise." What's more, by going through the motions with knees slightly bent, you're working the largest muscle groups in the body – the glutes and quadriceps – which are the first to atrophy as we age.



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References:
AARP, B Stepko, "The ancient martial art is a beginner-friendly, low-impact workout" AARP.com, April 16, 2018



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What You Can Do To Lower Your High Cholesterol and Decrease Your Cardiovascular Risks

Cholesterol is a natural substance that the body produces through the liver. It's waxy and circulates through the bloodstream, feeding the heart and brain. But when cholesterol is derived from foods like saturated fats and trans fats, the body overproduces LDL, which is the "bad" cholesterol.

HDL is the "good" cholesterol our bodies crave. Without HDL, our brains would not function properly, and we would suffer from other bodily disorders, like heart attacks and strokes. HDL helps to remove the bad cholesterol (LDL) from the body. High levels of LDL may also adversely affect overall health by causing atherosclerosis (plaque in the arteries), cardiovascular disease and other disorders.

Cholesterol Numbers:

Your total cholesterol is made up of both LDL and HDL numbers. Your family doctor may order tests in order to check your numbers. The healthiest combination of both types of cholesterol measures HDL, good cholesterol,) around 40, and LDL, bad cholesterol,) around 100.

Risk Factors:

Cholesterol, along with triglycerides in the blood, can form atherosclerosis, which as previously mentioned is the plaque that builds up in the arteries. Excessive plaque can increase the chances of a coronary heart attack, heart disease, stroke and other related issues. Triglycerides are the fat that is stored in the bloodstream from the excess fat in our diets. Triglycerides combine with the high LDL level and create harmful plaque build up.

Diet & Exercise:

Because high levels of LDL and triglycerides are both associated with food intake and the body's inability to burn fat, adopting healthier habits can help lower cholesterol naturally.

- Eat a healthy diet
- Quit smoking (contributes to atherosclerosis)
- Start a regular exercise program
- Cut back on alcohol and processed foods

Schedule an annual exam with your physician to check your cholesterol levels on a regular basis. If you have high cholesterol, your doctor may prescribe medication to help lower the overall cholesterol levels. In addition to medication, a change in diet can help to decrease LDL and Triglycerides, as well as raise your HDL to optimum levels.

Incorporate Healthy Foods and Nutrients in Your Diet
A significant contributor to successfully lowering LDL is the addition of soluble fiber, omega-3 fatty acids, mono-saturated fatty acids (MUFAs), powerful antioxidants and lutein, to your diet. However, in order to see the benefit of ultimately lowering bad cholesterol, an overall healthy diet must be maintained. This includes decreasing, and in some cases, completely eliminating processed foods from your diet. Cholesterol lowering foods can drop your bad cholesterol levels by 5-10% within a few weeks; your cardiologist can speak with you about a personalized dietary plan.

Medications:

The most common cholesterol lowering drugs are statins. In recent years there have been other medication developments that may help to lower your total cholesterol levels.

It's best to speak with your physician before changing your diet or exercise program. Your doctor will develop a strategy to suit your specific needs, along with a coordinated medication and lifestyle strategy.

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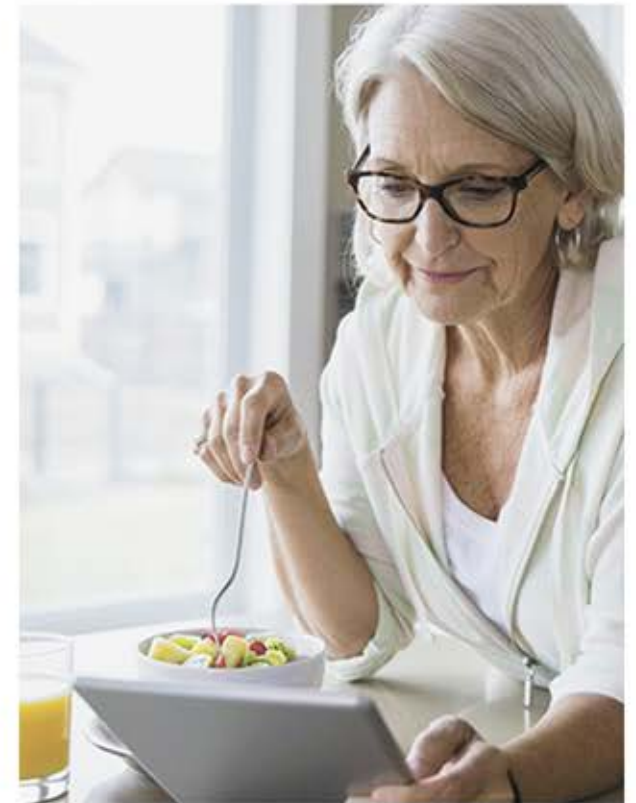
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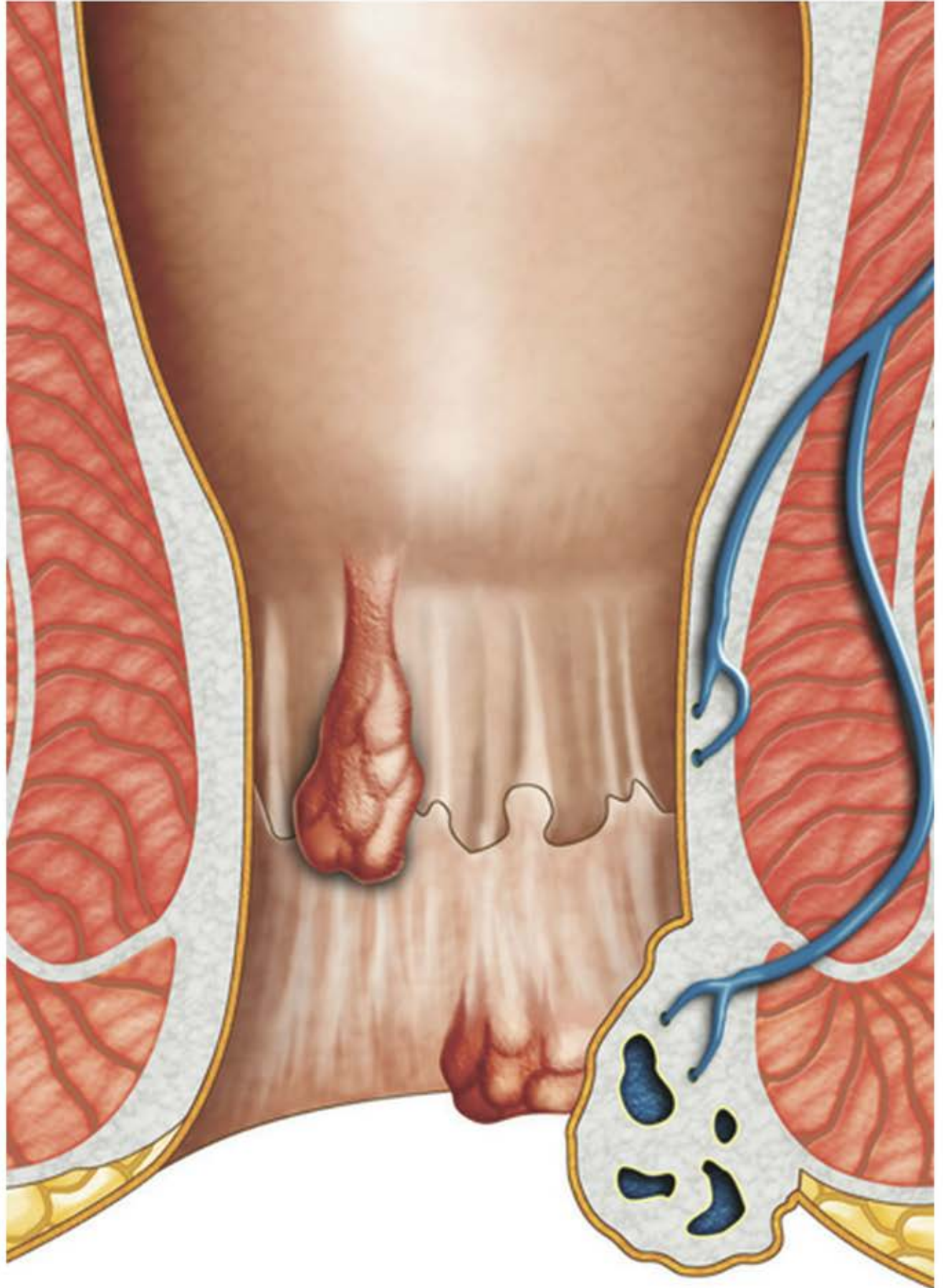
Got HEMORRHOIDS?

Hemorrhoids have been the butt of jokes for many decades. All of us have seen the commercials selling the likes of hemorrhoid treatments such as creams, ointments, liniments, pads, soaks, pillows and wipes. I'll bet you can even remember a party or two where these items were given as gag gifts. Fact is that hemorrhoids are no laughing matter if you're the one on the receiving end. They can be very painful, itchy, cumbersome and downright messy!

How do hemorrhoids form? What are hemorrhoids anyway? Well let me explain. There are many muscles intertwined in the formation of the rectum and anus. However for our purposes we will focus on two of them, the internal and external sphincters. These types of muscles are found in many places in the GI tract and work as valves that open and close tightly to regulate flow of materials. These types of muscles require a rich Arteriole vascularity (blood supply) for oxygenation and energy needs. Networks of veins are located around these muscles which collect deoxygenated blood for transport back to the heart and lungs. Hemorrhoids are formed when these small veins become engorged with blood and expand.

There are two types of hemorrhoids, internal and external. Most everyone is familiar with external hemorrhoids. They are located on the outside of the anal canal and are covered with the surrounding skin. They form from the network of veins located on the outside of the external sphincter muscle. They appear as a darker red to blue colored flap or balloon shaped nodule protruding around the anal opening. Often they are painful as there are many sensory nerves located on the external side of the anus.

Internal hemorrhoids as you might guess are located on the interior side of the anal canal at the anal-rectal junction. They are formed from vein networks on the inside of the internal sphincter muscle. These hemorrhoids are not commonly seen and are usually painless as there are few sensory nerves associated with them. Occasionally they can enlarge enough to protrude through the anus and when visualized are usually bright to dark red with a very thin membranous covering.



There are many things that can contribute to the formation and enlargement of hemorrhoids such as; heavy lifting, constipation, overzealous personal hygiene, pregnancy and labor. Any activity which causes prolonged abdominal contractions can force more blood into the rectal area causing engorgement of the venous structures and the formation of hemorrhoids.

Signs and symptoms of hemorrhoid vary between internal and external hemorrhoids. External hemorrhoids commonly present as protrusions around the anal opening which can be very painful and itchy. Most of the time when external hemorrhoids flare the symptoms will subside on their own and they will shrink back to their normal state. However, occasionally when the hemorrhoid becomes engorged, a blood clot will form and blood cannot escape the tissue. This is called "thrombosis" and is an extremely painful complication. Itching is caused by increased mucus production and inflamed tissue expansion and contraction. Less commonly, external hemorrhoids can rupture, bleed and become infected.

Treatment of external hemorrhoids generally includes a high fiber diet, adequate hydration and stool softeners if constipation is a problem. Straining to have bowel movements should be avoided. The excessive rectal hygiene and the use of wet wipes are cautioned as this can irritate the area and increase inflammation around the area. The use of topical ointments such as Preparation H, Hydrocortisone rectal cream and Tuck's pads can help relieve symptoms of pain and itching and reduce inflammation. Soaking in warm bath water keeps the area clean and relaxes muscles around the rectum which will allow engorged blood to drain from the hemorrhoids better. The use of donut pillows keep weight and pressure off of the area reducing discomfort and decrease further irritation and inflammation.



When complications such as thrombosis, excessive bleeding or infection occur your doctor may need to perform procedures such as a hemorrhoidectomy or incision and drainage.

Most of the population have internal hemorrhoids and are unaware of them unless they have been seen during a screening colonoscopy. When they enlarge, internal hemorrhoids most commonly present with bright red rectal bleeding (hematochezia). This usually is noticed after a bowel movement when streaks of blood are seen on the toilet tissue, streaking on the outside of the stool or a few drops of blood in the toilet bowl. Occasionally internal hemorrhoids can become large enough to protrude down into the anal canal which obstructs stool passage, making defecation more difficult.

Treatments of internal hemorrhoids include rectal suppositories and creams which reduce inflammation and shrink hemorrhoid tissue. Procedures such as rubber band ligation, cauterization or coagulopathy are performed on large obstructive or bleeding internal hemorrhoids.

Prevention of internal and external hemorrhoid enlargement includes a high fiber diet with adequate hydration to prevent constipation and straining. When people have chronic constipation they may need to use a stool softener or laxative to achieve soft stools. I also tell patients to limit time spent on the toilet "go when you need to and leave."

Hemorrhoids often are the cause of rectal pain, itching and bleeding. However, there are many more serious conditions such as anal/rectal cancer, colon cancer, anal fissures, abscesses and Irritable Bowel Diseases which also share these symptoms. If you should experience these or other symptoms such as new growths or bowel changes an immediate medical evaluation should be completed by your friendly neighborhood gastroenterologist. After a complete evaluation and other more ominous sources of the symptoms are ruled out, don't be surprised if the doctor says "Got Hemorrhoids."

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PROSTATE CANCER UPDATE

Although some younger men do get prostate cancer, the risk increases with age. According to the National Cancer Institute, 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. In addition to age, other risk factors include ethnicity, genetic factors and diet. 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 evidence that diet plays a role in the development of prostate cancer. Studies have found a higher incidence of prostate 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.

IMPROVEMENTS IN TREATING PROSTATE CANCER

As scientists continue to look for more genetic mutations that could be potential targets for new treatments of advanced prostate cancer, targeted therapies are also being developed for patients with non-metastatic prostate cancer. Many advances in the treatment of prostate cancer have occurred in the past decade including new surgical procedures and improvements in radiation therapy. Both of these have proven to be extremely effective and, in many instances, to have minimal side effects. Advances in both hormonal therapy and chemotherapy have made the disease much more manageable so that even if it can't be cured, a patient can still experience a good quality of life while living with prostate cancer.

There are five major treatment options for men diagnosed with prostate cancer:

- **Active surveillance** - During active surveillance, your doctor will carefully monitor your prostate cancer on a regular basis – usually every 3 to 6 months. Some prostate cancers grow so slowly that they will never lead to death or even cause any symptoms. Closely monitoring this type of prostate cancer is often the best treatment option.
- **Hormone therapy:** There are several types of hormone therapy, however, the overall goal of each type is the same: to either reduce the levels of male hormones (also known as androgens) or to prevent the hormones from reaching the prostate gland cells. Since androgens stimulate prostate cells to grow, reducing the overall level of androgens in the body can often shrink a tumor or make it grow at a slower pace.



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

- **Radiation:** Radiation treatment uses high-energy beams to destroy cancer cells. New and improved techniques such as conformal radiation therapy (CRT) and intensity modulated radiation therapy (IMRT) use computers to map out the prostate and deliver focused radiation to cancer cells while sparing healthy surrounding tissue.
- **Surgery:** Prostate cancer surgery is used to remove either the whole prostate or part of it. Surgery is most often recommended for men with early stage prostate cancer, however it can be used for later stages as well. If cancer has spread to the lymph nodes, the surgeon may not remove the prostate and suggest another type of treatment.
- **Chemotherapy:** Chemotherapy is the administration of anti-cancer drugs, either through IV injection or by mouth in pill form. Chemotherapy is not usually given unless the cancer has spread outside of the prostate gland. This also becomes an option when the cancer no longer responds to hormone therapy.

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A CHANGE IN DESTINY

By Alex Anderson, Senior Associate Pastor at Bayside Community Church

Jerry sat patiently in his shiny black Chevy Silverado in the same spot by the playground like he had done for the last four weekends. He reached over and picked up a brown paper bag, took out and slowly unwrapped his favorite mid-morning snack...a peanut butter and banana sandwich. Jerry would only use the creamy peanut butter because the crunchy kind made his teeth hurt...a problem he had lived with ever since he had barely survived a kick in the head by one of his grandfather's horses at three years old.

As he sipped his black coffee and ate he smiled to himself and wondered why he had not thought of this earlier in his career. It was the easiest money he had ever made and was a lot easier than painting houses for that no good father of his.

Across the street about three-quarters of a block away a man came out of his house, opened the door of his suburban and started the engine. The exhaust on that cold November morning created a small fog of burnt gasoline fumes that rolled down the sloped driveway towards the street. The man shortly went back inside of the house and left the suburban running.

Jerry took the last sip of his black coffee and looked at his dashboard clock and thought...'right on schedule'.

Before he could look back at the house all four doors of the suburban were open and a young family was piling in...headed for church like they had been doing for the last four Sundays.

As the suburban pulled away from the house Jerry cranked his truck, glad to have the heater on, and drove past the house with a smile. He circled the block behind the house to a vacant wooded lot, parked his truck, walked through the lot, jumped the back fence and...robbed the home.

As Jerry told me this story I could sense the remorse in his heart as his eyes began to tear up. He had already paid for his "sins" against humanity...twenty-two years in prison.



I have heard many stories like Jerry's over the years as a pastor, but how he ended it compelled me to share.

Jerry had not been a violent criminal, as a matter of fact, he was a very gentle soul and was a model inmate, even to the point of being paroled a couple of times for good behavior but he would shortly end up back in prison.

In his own words, "Back then, when I would get paroled I would still hang out with the wrong crowd. They would even say the same thing to me that the other inmates would say when I got paroled...'see you soon'."

According to Jerry the last time in the prison something happened that changed his destiny and it was why he was not still there.

Local churches sent people into the prison and held church services for the inmates. Jerry was one of those who became a Christ follower through that ministry.

Jerry also realized that he needed new friends once he was on the outside again. And finally, he needed a new identity.

Jerry said that during the two years before he was finally released for the last time, he would go around and intentionally tell the other inmates what

his life was going to be in the near future. That he would not only be paroled early (he served 22 years of a total sentencing of 30) but once out, he would make new friends, go to church and obey the law.

All those things came to pass. Jerry kept his word and is a successful mid-level manager in a service company. He also believed that even though he was a convicted felon, God would provide an understanding employer.

As we wrapped up our conversation, with tears in his eyes, Jerry said that those were church-goers whom he had robbed - the very kind of people that were responsible for bringing him to a life-giving relationship with Jesus Christ.

Jerry's final words were..."God sure does have a strange sense of humor."

To your spiritual health,

Alex E. Anderson

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