

CENTRAL FLORIDA'S

Health & Wellness[®] MAGAZINE

November 2018

Lake/Sumter Edition - Monthly

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  **FREE**

**PROGRESS
AGAINST
LUNG
CANCER**

**THE DIABETES
AND HEART
DISEASE
CORRELATION**

**GET RID OF
CATARACTS
& Manage Glaucoma
in the Same Surgery**

**FOOD ALLERGIES:
Whole-Food and
Component Testing**



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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- | | |
|--|--|
| • CARDIOLOGY CONSULTATION | • EVALUATION OF CHEST PAIN AND SHORTNESS OF BREATH |
| • EXERCISE STRESS TESTING | • EVALUATION OF CARDIAC ARRHYTHMIAS |
| • NUCLEAR STRESS TESTING | • EVALUATION OF FAINTING (SYNCOPE) |
| • ECHOCARDIOGRAPHY | • EVALUATION OF FATIGUE |
| • EVALUATION OF HEART VALVE DISORDERS | • CHOLESTEROL DISORDERS (DYSLIPIDEMIA) |
| • EVALUATION OF CORONARY ARTERY DISEASE | • PREOPERATIVE SCREENING |
| • EVALUATION OF HYPERTENSION (HIGH BLOOD PRESSURE) | • WEIGHT LOSS AND NUTRITIONAL CONSULTING |



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- Pulmonary function testing
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Welcomes Dr. Erin Dariano**

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Perseverance. A powerful element in fighting cancer.

Edith Picallo has persevered through tough challenges in her 70 years — immigrating from Cuba, losing her husband to cancer, raising three kids alone and beating cancer twice. A new stage 4 lung cancer diagnosis had her wondering if she had what it took to beat it again. Her initial prognosis was severe — less than a year to live. But when she found Florida Cancer Specialists, her doctor conducted genomic testing to personalize her therapy. The result — her tumor shrank 47 percent in just six months. Now, three years after her diagnosis, Edith's story shows that when hope and science join forces, great outcomes can happen.

"Florida Cancer Specialists did a genetic test to determine the right medicine for me and my lung cancer, and it is working."

-Edith Picallo, Cancer Survivor

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And that's how I treat it.

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GET RID OF CATARACTS & MANAGE GLAUCOMA IN THE SAME SURGERY

Introducing

iStent
inject®

For adults with mild-to-moderate primary open-angle glaucoma who are planning to have cataract surgery, technology has finally excelled to meet demand with the remarkable new iStent *inject*® implant.



Board-certified ophthalmologists (from left to right):
Scot C. Holman, MD; Scott R. Wehrly, MD; Vinay Gutti, MD

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Accepting New Patients!

The smallest implant known to medicine, the iStent *inject*® contains two tiny stents crafted to continually manage intraocular pressure and naturally relieve the eye of excess fluid. Lake Eye's Dr. Scott Wehrly, Dr. Scot Holman and Dr. Vinay Gutti are the first local eye surgeons to perform this remarkable procedure. "As the first local practice to perform endoscopic cyclophotocoagulation, or ECP, with the iStent Trabecular Micro-Bypass, of course we were intrigued by the new iStent *inject*," says Dr. Wehrly. "It takes the technology a step further, with two stents to control fluid and pressure, which for many patients means arresting the progression of glaucoma and protecting vision from further damage."

"We are excited to be the first local eye surgeons to implant the iStent *inject*," says Dr. Holman. "For glaucoma patients undergoing cataract surgery, this combined procedure is a way to

remove cataracts, improve vision with a new, custom-selected lens, and manage glaucoma so effectively that some patients are able to reduce their need for glaucoma medication. It's remarkable," adds Dr. Gutti.

The iStent *inject*® stents are carefully placed during cataract surgery. Afterward, the patient will neither see nor feel the implant, yet it will work continuously to safely assist the eye's fluid drainage system, help maintain healthy eye pressure, and prevent or reduce the progression of glaucoma-related vision loss. For some patients, it can mean a reduction of the number of glaucoma medications they need.

If you have mild-to-moderate primary open-angle glaucoma and are planning on having cataract surgery, talk to your Lake Eye doctor about the iStent *inject*® and open your eyes to a brighter, clearer future.

Considering
Cataract Surgery?
**CONSIDER
THE LOCAL
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Lake Eye's team of cataract surgeons is the first to master and implement the industry's latest and most advanced cataract procedures. We were the region's first practice to perform the CATALYS® Femtosecond Laser-assisted cataract surgery, the safest, quickest and most accurate technique to eliminate cataracts. We were the first to implant the FDA-approved Symphony® extended range of vision intraocular lens for seamless vision correction at all distances. We were also the first to combine cataract surgery with the revolutionary iStent inject® Implant, to remove cataracts and effectively manage glaucoma in a single event.

Having performed more than 50,000 successful eye surgeries, our surgeons are dedicated to giving you the best possible experience and satisfaction.

**Lake Eye—the clear choice
for clear vision.**

*Board-certified
ophthalmologists (from left to right):*

**Scot C. Holman, MD; Vinay Gutti, MD;
Scott R. Wehrly, MD**

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The Diabetes and Heart Disease Correlation

High blood sugar and cardiovascular disease have more in common than most people are aware. In our country nearly 30 million people have diabetes, and a vast majority of our population unknowingly has what's known as prediabetes, which quickly escalates into the disease within a short amount of time.

The heart and the issue of high blood glucose are very closely associated because of many risk factors contributing to what's known as metabolic syndrome.

Metabolic syndrome is a condition in which the high insulin and leptin levels are resistant causing high blood pressure, high cholesterol, high triglycerides and visceral fat to become significant risk factors for heart disease and coronary disorders.

Insulin is a hormone that helps move sugar into the blood for energy, in the case of an insulin resistant person, they have too much sugar, and the body cannot adequately utilize the source. This leads to weight gain, obesity, and subsequently, a more sedentary lifestyle. Leptin is a hormone that helps regulate body weight by sending signals to the hypothalamus in the brain. When the signals are damaged, the body becomes leptin resistant, and a person may often feel extremely hungry and irritable, which contributes to a vicious cycle of overeating foods that are high in sugar and unhealthy fats.

In recent years, metabolic syndrome has become a commonly identified risk factor for cardiovascular disease because a vast amount of Americans are overweight and their bodies become inflamed; this inflammatory response affects their vascular structures. When the vessels are circulating high-glucose blood, atherosclerosis occurs at a greater intensity. Atherosclerosis is a build-up of plaque and causes a hardening of the arteries.

Unfortunately, Sugar has become a major staple in the American diet. The normal fasting blood sugar levels should be around 70-99 mg/dl. The normal A1C, which measures the blood glucose level, should be below 5.7%. With diabetes and even prediabetes, these levels are at an unhealthy height and can be very hard to lower without a major intervention with medication, exercise, dietary changes and a lifestyle overhaul.



Once you have metabolic syndrome, you must lose weight, lower your lipid levels, and reduce hypertension and combat stress. At this point, merely lowering your blood glucose is not enough. This is precisely the reason why so many people with diabetes that reduce their blood sugar, still are at high risk for cardiac episodes.

Metabolic Syndrome Affects

- High Lipid Counts
- Being Overweight
- Poor Diet (Sugar Cravings)
- Visceral fat
- Abdominal fat
- High blood pressure
- Lack of exercise

If you have diabetes, it's critical that you see a cardiologist because it's not a matter of, "Will I have heart issues", but rather when?

Dr. Vallabhan

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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

PROGRESS AGAINST LUNG CANCER

According to the American Cancer Society, lung cancer is the leading cause of cancer deaths in the United States. More people die of lung cancer in a year than from breast, prostate, colon and pancreatic cancer combined. Lung cancer is the second most common cancer in both men and women – it ranks just behind prostate and breast cancer, respectively.

EARLY DETECTION SAVES LIVES

Although there have been some real advances in the treatment of lung cancer, the average five-year survival rate for lung cancer in the U.S. is only 16.3 percent, unless it is detected early. If the disease is detected early, while it is still localized within the lungs, the five-year survival rate soars to 52.6 percent. So, your chances of surviving lung cancer are three times greater when it is detected early. If it is found while still in Stage 1, which is the earliest stage, there is an average five-year survival rate of over 80 percent.

The bad news is that only about 15 percent of all lung cancer cases are diagnosed at an early stage because, often in the early stages, there are no real symptoms. That is one of the reasons why regular screenings are so important – especially if you are a current smoker or if you have ever been a heavy smoker for longer than 15 to 20 years.

Recent studies have found that, through the use of low dose spiral CT scans of the chest, lung cancer can often be detected in its early stages before it becomes incurable, or even before a patient is showing symptoms. This type of screening can detect early stage cancers that cannot be seen on traditional chest X-rays. Check with your physician to see if you could benefit from a CT lung scan. Researchers are also exploring other detection tools, including a blood-based test. So far, however, results are mixed.

IMPROVEMENTS IN THE TREATMENT OF LUNG CANCER

Many advances in the treatment of lung cancer have occurred in the past decade, including the development of medications known as targeted therapies, which interfere with certain processes that cancer cells use to grow and spread, and immunotherapies, a type of targeted therapy that boosts the body's immune system to fight cancer. These drugs have given oncologists many more options in treating lung cancer and have made treatment more effective and safer for patients.



About 85 percent of all cases of lung cancer occur in people who are smokers or have smoked in the past. The remaining 15 percent of cases occur in non-smokers, for reasons not yet fully understood.

Newer immunotherapy treatments have significantly improved survival rates for some lung cancer patients. A recent study, presented at the American Association for Cancer Research (AACR) Annual Meeting in April 2017, demonstrated that, for a small subset of patients, immunotherapy can work for a very long time.

LUNG CANCER RESEARCH INVESTIGATES MANY POSSIBILITIES

Many clinical trials are looking at newer combinations of chemotherapy drugs to determine which are the most effective. Especially important for older patients who may have other health problems, doctors are studying these combinations to discover if treatment outcomes can be further improved. Sometimes, chemotherapy is also being used in combination with some targeted therapies and has been shown to improve survival rates.

With some types of lung cancer, research has shown that receiving chemotherapy before radiation or surgery may actually be helpful. Chemotherapy may shrink the tumor, making it easier to remove it with surgery. It may also increase the effectiveness of radiation and it can destroy hidden cancer cells at the earliest possible time.

More research needs to be developed for even more effective treatments for lung cancer. Currently, there are no cures for lung cancer and even the best options don't help all patients. However, doctors are able to offer more treatment options with better outlooks for patients than a decade ago.

World-Class Cancer Treatment Close to Home

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

Florida Cancer Specialists treats patients with all types of cancer and offers a number of services, such as an in-house specialty pharmacy, an in-house pathology lab and financial counselors at every location, that deliver the most advanced and personalized care in your local community.



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Villages North

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For more information, visit FLCancer.com

Chronic Obstructive Pulmonary Disease (COPD): What you Need to Know

Nearly 24 Million Americans have COPD. Most of them are over the age of 40 and have a history of smoking, or being subjected to respiratory irritants such as chemicals and pollutants.

COPD is a disease that is encompassed by chronic bronchitis, emphysema, and asthma, causing shortness of breath, productive coughing and inflammation of the airways. It is a progressive lung disease with no cure. Most patients are put on steroids (oral and inhaled), bronchodilators and antibiotics.

Individuals with COPD often have incidents of fluid build-up, which can make it difficult for them to breathe. They frequently feel as if they are drowning and call 911 often due to this terrifying sensation. This is why it's important to speak to your physician about your COPD treatment and the best at home care techniques to keep you safe and comfortable.

Depending on the stage of the disease, some patients might need to consider home health care or private duty nursing. When under home health care, their team of nurses and medical director can prevent these readmissions to the hospital by several means. The medical team can prescribe medications to block fluid build-up, have a daily vital reading monitored by a home health program, and have specialists help with understanding nutrition, and how to keep calm and learn to breathe more functionally through the episodes. Your physician is still in charge of your medical care, and all reports from the home health team are reported to your primary care doctor.

Having a disorder like COPD is challenging with continual progressive changes and side effects. Talking to your physician about any fluctuations in your health or symptoms is critical.

COPD Symptoms

- Coughing
- Producing phlegm
- Wheezing
- Shortness of breath with normal activity
- Blue tinge to fingernails
- Fatigue

COPD Treatment

- Bronchodilators
- Steroids
- Pulmonary rehabilitation
- Oxygen therapy



- Exercise
- Breathing exercises
- Diet
- Smoking cessation

Many former and current smokers are diagnosed with COPD. November is National Smoking Cessation Month.

Realistic advice to help you quit smoking

- Get rid of all tobacco & lighters
- Plan ahead. Talk to your doctor now about smoking cessation programs, treatment options and medications.
- Let your family and friends know that you're quitting
- Find a new hobby to stay busy
- Avoid the same old routine that allowed you the convenience of smoking
- Keep track of the money you save, write it down everyday and make a tally
- At the end of each week that you continue to not smoke, treat yourself to something nice.
- Don't give up! It's not easy, but it's worth it to quit.

By quitting smoking you can alleviate additional damage to your lungs and allow them to heal, reduce your risk of coronary artery disease, stroke and cardiovascular disease.

Statistics According to the U.S. Department of Health and Human Services

- Within 20 minutes of quitting, your heart rate will decrease
- Within 12 hours of quitting, the carbon monoxide levels in your blood will decrease to normal
- Within 3 months of quitting, your risk of a heart attack decreases and your lungs will begin to work better

- After 1 year, your added risk of coronary artery disease is half that of someone who smokes
- After 5 years, your risk of stroke is the same as that of a nonsmoker
- After 10 years, your lung cancer death rate is about half that of someone who smokes
- After 15 years, your risk of coronary artery disease is the same as that of a nonsmoker

If you have a persistent cough or are experiencing unusual respiratory symptoms, please make an appointment with your physician now. It's better to be proactive than reactive when it comes to your health. If you let symptoms linger, that's when they turn into progressive, advanced diseases.

Rivers Family Medicine continues to provide their patients with the highest quality of care; they are continually looking for innovative methods of working together with their patients to ensure that they are not only aware of but also involved in the management and improvement of their patient's health.

Rivers Family Medicine welcomes Dr. Erin Dariano. Dr. Dariano has been practicing Family Medicine in Lima Ohio at Lima Memorial Hospital for the past seven years. Dr. Dariano, D.O., Completed her undergraduate degree at Bowling Green State University, and her medical degree at Ohio University College of Osteopathic Medicine. She is a board certified D.O., Doctor of Osteopathic Medicine. Dr. Dariano is committed to providing thorough, compassionate, mindful care for her patients.

To schedule an appointment with Rivers Family Medicine, please call (352) 205-4302.



Dr. Dariano, D.O.

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Advanced Treatment for OVERACTIVE BLADDER

Have you tried treatment for overactive bladder and still suffer from any of the symptoms below?

- ✓ Urgency to get to the restroom in time
- ✓ Increased frequency of urination
- ✓ Getting up at night 2 or more times to urinate
- ✓ Wearing adult protective undergarments or pads
- ✓ Inability to empty your bladder completely
- ✓ Curbing your usual activities because you must be near a restroom at all times

If you are a man or woman who said yes to any of these, then you should know about some of the advanced therapies that are available and can drastically improve your quality of life.

Commonly used therapies such as behavioral modification, bladder training and medications are a first line of therapy for overactive bladder (OAB). Unfortunately, in many patients, these do not work or don't work well enough. Some patients may even be unable to tolerate the common side effects of medications such as dry mouth, dry eyes or constipation. If you or someone you know has OAB, the use of sacral neuromodulation or Botox may be the answer. In a specialty trained urologists' hands these treatments can succeed where others have failed.

SACRAL NEUROMODULATION

Sacral neuromodulation (SNM) allows regulation of the nerves that go to the bladder. This works by sending messages back to the brain to regulate the "on-off" switch for bladder function. A simple way to think of SNM is as a pacemaker for the bladder. It can help to bring your bladder function back to normal function if it is too active or even underactive.

SNM is approved by the FDA for the treatment of refractory OAB, urge incontinence and urinary re-tenion. Currently one company (Medtronic Inc., Minneapolis) produces this SNM device for international use under the name InterStim®. In Europe, it is also



used successfully to treat bowel dysfunction including severe constipation, fecal urgency, frequency and fecal soiling. This is possible because there are nerves in the pelvis that work on both the bladder and bowel.

SNM is a very appealing option to patients due to its high success rate (up to 80%) and a unique trial phase. This trial phase of 3 to 7 days is called a percutaneous nerve evaluation (PNE) and is a simple procedure that places a thin temporary lead next to the nerve that controls bladder function. This can be placed using local anesthesia or light sedation and takes minutes to perform. This gives the patient the ability to "test drive" the device without going through the full implant. It also helps patients to gain insight on just how much the InterStim could help them. At the end of the trial, the leads are removed in the office without damaging the nerve.



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If the PNE is successful in reducing symptoms, it is likely that the full implant will work in these patients. The InterStim uses an implantable lead and small battery that are placed for long-term treatment of OAB or urinary retention. Once placed, the InterStim can last up to ten years depending on its use. The battery can be easily changed under local anesthesia. After implan-

tation, the InterStim is virtually undetectable even in a bathing suit. This device can drastically improve a patient's quality of life.

BOTULINUM TOXIN (Botox)

Botox injections are another option in the treatment of OAB. The Botox is placed directly in the bladder muscle for treatment of OAB and urge incontinence.

This is done with a simple cystoscopy (small telescope) and can be done under local anesthesia or sedation. It works by binding to nerve endings allowing for relaxation of the bladder muscle. This has been shown to improve symptoms in up to 70% of patients and up to 60% of patients will have complete resolution of their OAB or urge incontinence. Botox, however, only lasts 6 to 9 months and needs to be repeated. The FDA considers this an off-label use even though it has been used successfully for years. Use of Botox in the bladder carries no greater risk to the patient than cosmetic procedures.

These are only a few of the many options that can significantly improve quality of life. A full range of treatments for OAB and any other urologic concerns are offered at Advanced Urology Institute.

Food Allergies: Whole-Food and Component Testing

In estimated 5% of children and 3% to 4% of adults in the United States have a food allergy.¹ Allergic reactions to foods can range from local (isolated oral irritation), to systemic (hives or a life-threatening, anaphylactic reaction).¹ Eight foods, or food groups, account for 90% of serious allergic reactions in the United States: peanuts, tree nuts, eggs, milk, fish, crustacean shellfish, wheat, and soy.¹

This newsletter discusses different methods of testing for food allergies, including whole-food allergen testing and component testing. Food allergy testing helps predict whether it is safe to eat a certain food, or whether to avoid the food entirely.

Whole-Food Allergy Tests

In addition to clinical history, whole-food allergy tests have traditionally been used to diagnose IgE-mediated food allergies. These tests include skin prick tests (SPTs) and blood tests (serum IgE tests) using crude extracts of food. Whole-food allergen tests (serum IgE or SPT) are very sensitive, but not very specific. For example, IgE responses to nuts may be directed at similar proteins from other plant or tree species and not the nut of concern.^{2,3} In these cases, if the nut of concern were eaten, the cross-reactive IgE would likely cause at most a mild clinical reaction. Likewise, for milk and egg, IgE responses directed toward heat-labile proteins may be associated with clinical tolerance in baked goods.² In contrast, IgE responses directed toward heat-stable peanut-, tree nut-, milk- and egg-specific proteins are strongly linked to anaphylactic hypersensitivities.^{2,3}

Because of these issues, whole-food allergen tests have limited value for discriminating between IgE-sensitized and truly allergic patients.^{1,2} This distinction is very important clinically. Both sensitized and

allergic patients have positive whole-food allergen tests (SPT or serum IgE). But sensitized individuals may not experience symptoms and may benefit from continued consumption of the food to maintain clinical tolerance. In contrast, truly allergic patients develop symptoms immediately after ingesting the food, and subsequent ingestion may provoke more severe allergic reactions.

Food Component Tests

Food component testing involves serum IgE tests using individual protein components of the whole food, rather than crude extracts. These tests confirm whole-food IgE reactivity to suspect foods, and identify the specific protein(s) to which IgE binds.^{2,3}

As such, they can be used to help predict patient risk for a clinical reaction when the food is eaten.^{2,3} When compared to whole-food SPTs and IgE tests, food component IgE tests are better able to identify patients at high risk of anaphylactic reactions to the suspect food.^{2,3} Examples of currently available food component tests and the interpretation of results are presented on the next page.^{1,3,4}

How the Laboratory Can Help

Quest Diagnostics offers IgE testing for a wide range of whole foods, as well as component IgE testing for select food allergens, including peanuts, tree nuts, milk, and egg: QuestDiagnostics.com/home/physicians/testing-services/condition/allergy/allergen-component-testing.html.

QuestDiagnostics.com

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Peanut Component Tests

Peanut Component Proteins	Meaning of Positive IgE Reaction
Ara h 1, 2, 3	High risk of systemic reactions including anaphylaxis (Ara h 2 nearly always associated with clinical peanut allergy)
Ara h 9	Variable risk of strong allergic reaction (often accompanied by sensitization to other peanut proteins)
Ara h 8	Low risk of systemic reaction (associated with local reactions or no reaction at all)

Tree Nut Component Tests

Tree Nut Component Proteins	Meaning of Positive IgE Reaction
Hazel Nut Cor a 9, 14 Cashew Ana o 3 Brazil Nut Ber e 1 Walnut Jug r 1	High risk of systemic reactions including anaphylaxis
Hazel Nut Cor a 8 Walnut Jug r 3	Associated with mild local reactions, as well as systemic reactions
Hazel Nut Cor a 1	Low risk of systemic reactions Associated with local reactions or no reaction at all

Milk Component Tests

Milk Component Proteins	Meaning of Positive IgE Reaction
α- and β-Lactalbumins (proteins unstable when heated)	High risk of reaction to fresh cow's milk Low risk of reaction to baked foods containing milk
Casein (protein stable when heated)	High risk of reaction to all forms of cow's milk

Egg Component Tests

Egg Component Proteins	Meaning of Positive IgE Reaction
Ovalbumin (protein unstable when heated)	High risk of reaction to fresh eggs Low risk of reaction to baked foods containing egg
Ovomucoid (protein stable when heated)	High risk of reaction to all forms of egg



Food Allergy Diagnostic Strategy²

- Medical history and exam
- Whole allergen IgE testing or skin prick testing
- Food component IgE testing if whole-food allergy test is positive
- Oral food challenge if indicated based on clinical history and allergy test results
- Potential medical management
 - Strict avoidance diet and anaphylaxis precautions during meals if allergy is present
 - Modified diet (ie, milk and egg only in baked goods)
 - Unrestricted diet

What Does Component Testing Mean for You and Your Patients?

Patients want to know if they are truly allergic to a food. Food component IgE testing can help you make more informed decisions about

- The likelihood that an oral food challenge will be passed
- The need for dietary restrictions
- The need to carry epinephrine
- The likelihood that a food allergy will be outgrown⁴

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Traveling Tips for Venous Insufficiency

By Bryan Carter, MPA-C, Phlebology-Surgery

It's that time of year again; when we hit the road or the sky and travel for vacations, relaxing getaways, spending time with family and taking the kids or grandkids to their favorite destinations.

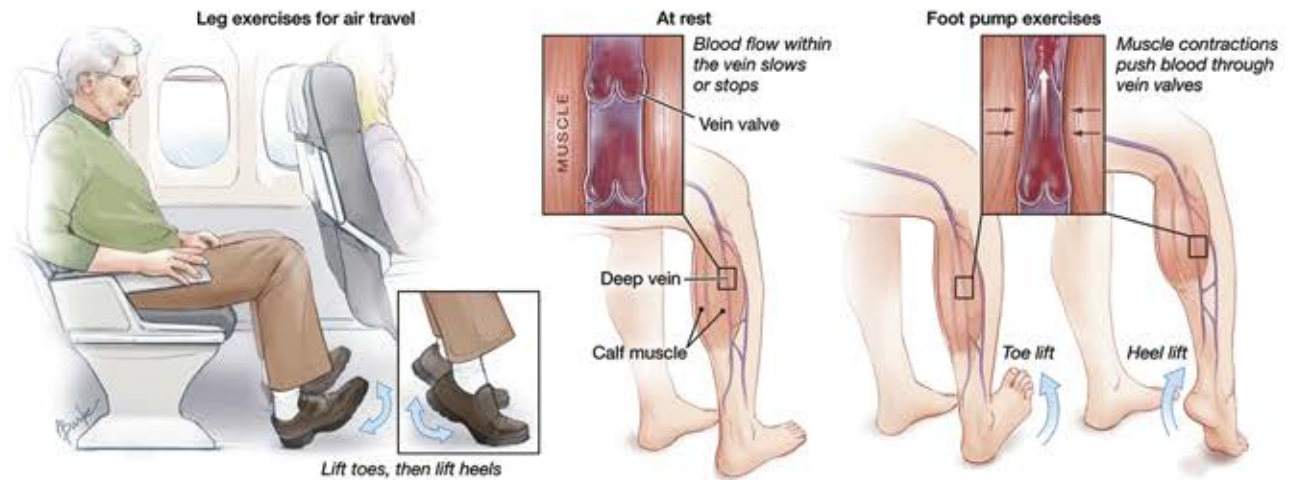
The hottest days are upon us during the upcoming summer months, so it's imperative that everyone stays hydrated, especially the elderly and children. Because we come in all shapes and sizes, drinking at least $\frac{1}{2}$ your body weight in ounces is the recommended amount for each person. So if you are 200 lbs., you should consume 100 ounces of water per day, which is approximately 3 liters.

If you suffer from any venous insufficiency issues, it's critical to keep moving your toes, ankles, and calves while sitting for an extended periods of time in a car, train or when on a plane. This will help the blood to keep moving and pumping back to the heart instead of pooling into the feet. If you ever get swollen feet or legs after sitting for long periods of time, you should see your physician about ways to control your venous insufficiency and to get a full check up for your overall health.

What is venous insufficiency?

Various forms of venous issues affect 25 million Americans. Their legs are swollen, achy and they have a heavy sensation. When our veins are working properly, they pump blood back to the heart. Valves in the veins are made to open and close in one direction. If these valves or the wall of the veins are damaged, the blood is unable to work against gravity, and the result is a pooling of the blood in our legs. This pooling is called stasis and can present significant risks to our health.

Sometimes venous insufficiency is more of a cosmetic issue and poses little health concerns. This is usually noted in spider veins, which is when the tiny capillaries are damaged, but when the veins are damaged, this can cause varicose veins, which can lead to a much more severe health issues. Neither of these should be taken lightly. A medical professional will be able to report whether or not your symptoms are superficial, or dangerous and in need treatment.



Symptoms of venous insufficiency:

- Swollen legs
- Discoloration on skin (brown or red)
- Tingling/burning/itching sensations
- Heaviness
- Aching
- Cramping

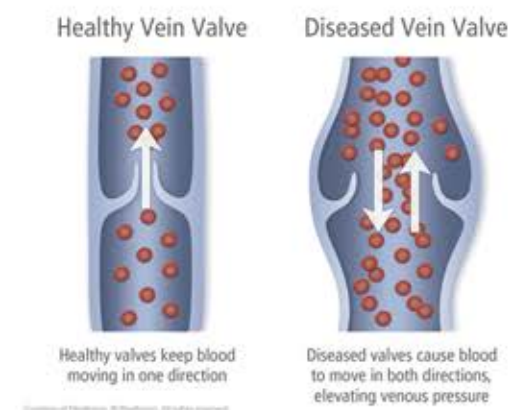
One of the easiest ways to better control and improve your legs blood flow is to wear compression stockings, but beware, not all compression stockings are the same.

Sure big box stores sell them by the thousands, but they fail in comparison to medical grade and personally fitted stockings.

It's important to understand what compression stocking do. They are tight fitting long socks that go up to your knee and create gradient pressure throughout your foot and legs to help push the blood back to the heart.

Medical grade compression stockings are measured in millimeters of mercury (mmHg). The highest compression available is 30-40 mmHg, then 20-30 mmHg, 15-20mmHg and the least or lightest compression is 8-15 mmHg.

The major differentiating factor between a medical grade stockings and the generic version is the precise measuring that is done to make certain you are wearing the appropriate compression volume. Getting the correct dimensions consist of first measuring around the smallest part of the ankle above the ankle-bone. Second, a measurement is taken of the largest part of the calf circumference, and lastly, at a 90-degree angle, a measurement is taken from the distance of the bend in the knee to the floor. Speaking to your physician is vital if you or a loved one have any of the venous symptoms.



Treatment Options for Venous Insufficiency Include:

- Compression Stockings
- Gradient Compression Devices
- Increased Exercise
- Medications
- Surgery (non invasive thermal and chemical ablation performed in the office)

If you have any questions or concerns call and schedule appointment today with Mr. Carter. He has been treating vein circulation problems for 15 years.



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National Diabetes Month 2018

November is National Diabetes Month, a time when communities across the country team up to bring attention to diabetes and its impact on millions of Americans.

If you're one of the 27 million people in the U.S. with type 2 diabetes, you and your doctor have likely discussed the importance of a healthy diet and moderate exercise. Losing extra pounds, eating better, and becoming more active are some of the most important steps you can take to keeping your diabetes under control. The lifestyle amenities and healthy eating options found in Ave Maria, FL help residents stay on-track and make healthy lifestyle decisions.

Weight Control

For many people, healthy meal planning consists of a long drive to the grocery store, fighting traffic, finding a parking spot and then lugging the groceries back home. Residents of Ave Maria merely walk to the local Farmers Market in the Town Center. The outdoor market features several vendors which include fresh locally grown produce and citrus, fresh seafood, Italian breads, local honey, and more.

If you're looking for a more extensive selection, Publix grocery market is a quick walk or golf cart ride away. Located in the La Piazza Publix Center, shoppers enjoy the convenience of a fresh meat counter, bakery, deli, and an abundant selection of fresh produce.

The abundance of healthy food options in Ave Maria is endless.

What Kind of Exercise Will Help?

Two types of physical activity are most important for managing diabetes: aerobic exercise and strength training. The American Diabetes Association® recommends 30 minutes of moderate-to-vigorous intensity aerobic exercise at least five days a week or a total of 150 minutes 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!



Visit and see why residents love to call Ave Maria home.

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.

Health Experts at the Mayo Clinic recommend people with Type 2 diabetes follow a diet of:

Healthy Carbohydrates. Focus on the healthiest carbohydrates, such as fruits, vegetables, whole grains, legumes (beans, peas, and lentils) and low-fat dairy products.

Fiber-Rich Foods. Foods high in fiber include vegetables, fruits, nuts, legumes (beans, peas, and lentils), whole-wheat flour and wheat bran.

Heart-Healthy Fish. Fish can be a good alternative to high-fat meats. For example, cod, tuna, and halibut have less total fat, saturated fat and cholesterol than do meat and poultry.

Good Fats. These include avocados, almonds, pecans, walnuts, olives, and canola, olive and peanut oils.

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.

Ave Maria

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Take I-75 to Exit 111, follow the signs to Ave Maria Town Center

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- Treats ED & Peyronie's Disease

"After countless dollars and time spent on treatments that didn't work, Gainswave worked and has given my wife and I a renewed sexual relationship. Thank you TNT."

- John, actual TNT Gainswave Client



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Advanced Treatment for Men With ED



Although it can be an uncomfortable topic for men, erectile dysfunction is extremely common. This is especially true for men ages 40-70 years of age. Some causes of the disorder are vascular disease, which leads to narrowing of the arteries and decreased blood flow, diabetes, heart disease, high cholesterol, physiological effects, and Prostate cancer. It's important to see a medical professional if you are experiencing difficulty in getting and maintaining an erection.



Treat ED's Cause with GAINSWave

The standard treatments for erectile dysfunction are prescription medications or injections that cause an erection for a limited amount of time. However, there is a better way than the standard of care by actually treating erectile dysfunction at its core. The GAINSWave is a revolutionary, non-invasive treatment that addresses the underlying causes of ED. GAINSWave uses scientifically proven technology through sound waves to stimulate blood circulation, tissue regeneration, and removes plaque build-up. Traditional treatments for ED, such as pills or injections, lose effectiveness over time and have to be used every time a man wants to engage in sexual activity. GAINSWave helps men to feel like themselves again and to enjoy their lives.

According to Sexual MD Solutions, GAINSWave utilizes high frequency, low-intensity soundwaves to improve blood flow to the penis, remove micro-plaque, and stimulates the growth of new blood vessels. GAINSWave uses a specific protocol designed to optimize efficacy, safety, and results. Over 80% of Erectile Dysfunction (ED) issues are caused by poor blood flow. GAINSWave has developed a protocol to treat ED and Peyronie's disease as well as enhance sexual performance.



Peyronies Disease also can be treated with GAINSWave

Peyronies disease is defined as relating to symptoms of ED due to it's arcing shape. Peyronies is a build up of scar tissue in the penis that causes a curvature or bend in the erected penis. This disorder typically causes a great deal of pain during intercourse. This condition affects nearly 12% of the male population.

GAINSWave has been shown to be an effective procedure to break down the scar tissue and reduce the curvature of the penis for someone suffering from typical Peyronie's disease.

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

DON'T JUST MASK YOUR SYMPTOMS—TREAT THE ROOT CAUSE!

If you want drug-free alternative options for your health needs, TNT treats both male and female patients who desire alternative therapies to get to the root cause of their conditions.

Total Nutrition & Therapeutics

At TNT, their goal is to empower you to achieve your optimal state of health. Their vision is to create a wellness mindset momentum that is infectious—leaving obesity, illness, and disease behind—for lives that are truly healthy. Looking better, feeling better and functioning optimally is the key to a life of vitality! Let them help you achieve wellness for life!

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Lakeside Landings—Is Waiting For You to Experience The Best of the Best.



Do you want to experience the ultimate resort lifestyle, with sun-filled days and fun filled evenings? Lakeside Landings has the answer. With beautiful homes, peaceful surroundings and contemporary amenities, to maintenance-free living, it's no wonder why more and more people are calling Lakeside Landings their hometown.

Residents enjoy a massive pool, equipped with waterfalls, along with walking paths, tennis, and a state-of-the-art clubhouse; Lakeside Landings has you covered. Meet up at the cabana once a month for drinks and a time to mingle with neighbors, connect through various social clubs, or get in on the action and join the weekly poker or bridge games. Whatever your lifestyle choice, you will not be disenchanted in this well thought out community.

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.

And after living out all of your tranquil moments and indulging in your refreshing routine, if you feel like you need to experience the world, you're in luck! Disney World is less than an hour drive away.

Lakeside Landings residents live out their dreams, one day at a time in the warmth and comfort of a safe and social atmosphere.

Come and find out why so many people love to call Lakeside Landings home.

Call today to schedule your model home tour at 352-330-4305.



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Am I a Candidate for Dental Implants?

By Lucia Roca, DDS, MDS, Board Certified Periodontist

Generally speaking, if you have lost teeth you are a candidate for dental implants. It is important that you are in good health, however, as there are some conditions and diseases that can affect whether dental implants are right for you. For example, uncontrolled diabetes, cancer, radiation to the jaws, smoking, alcoholism, or uncontrolled periodontal (gum) disease may affect whether dental implants will fuse to your bone. It is important to let your dental surgeon know all about your medical status (past and present) together with all medications you are taking, whether prescribed, alternative (herbal) or over-the-counter.

Where and how implants are placed requires a detailed assessment of your overall stomato-gnathic system ("stoma" – mouth; "gnathic" – jaws), within which the teeth function. This will necessitate compiling records that include study models of your mouth and bite, and specialized radiographs (x-rays), which may include 3D scans known as computerized tomograms (CT scans). Planning with the help of computer imaging ensures that dental implants can be placed in exactly the right position in the bone.

How and why is bone lost when teeth are lost?

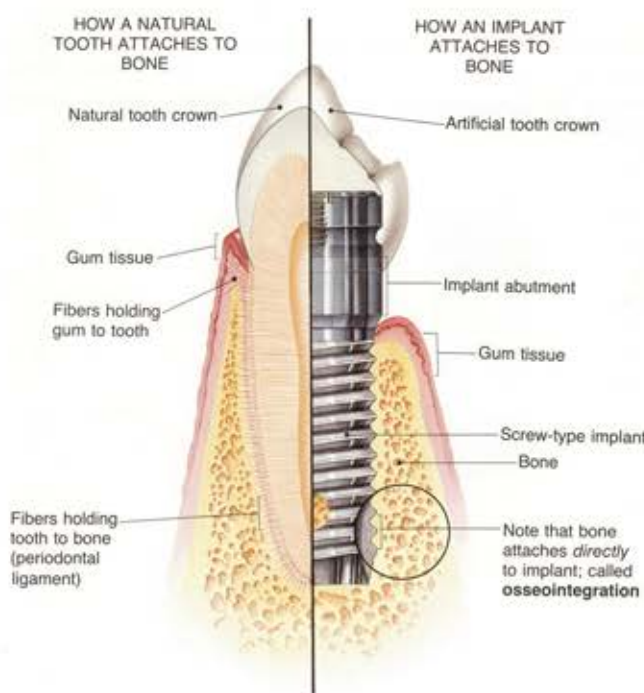
Bone needs stimulation to maintain its form and density. In the case of alveolar (sac-like) bone that surrounds and supports teeth, the necessary stimulation comes from the teeth themselves.

When a tooth is lost, the lack of stimulation causes loss of alveolar bone. There is a 25% decrease in width of bone during the first year after tooth loss and an overall decrease in height over the next few years.

The more teeth lost, the more function lost. This leads to some particularly serious aesthetic and functional problems, particularly in people who have lost all of their teeth. And it doesn't stop there. After alveolar bone is lost, the bone beneath it, basal bone — the jawbone proper — also begins to resorb (melt away).

How can bone be preserved or re-grown to support dental implants?

Grafting bone into the extraction sockets at the time of tooth loss or removal can help preserve bone



bone volume needed for implant placement. Surgical techniques are also available to regenerate (re-grow) bone that has been lost, to provide the necessary bone substance for anchoring implants. In fact, a primary reason to consider dental implants to replace missing teeth is the maintenance of jawbone.

Bone needs stimulation to stay healthy. Because dental implants fuse to the bone, they stabilize it and prevent further bone loss. Resorption is a normal and inevitable process in which bone is lost when it is no longer supporting or connected to teeth. Only dental implants can stop this process and preserve the bone.

How are dental implants placed and who places them?

It takes a dental team to assess and plan dental implant placement and restoration — the fabrication of the crowns, bridgework or dentures that attach atop the implants and are visible in your mouth. The dental team consists of a dental surgical specialist — a periodontist, oral surgeon, or a general dentist with advanced training in implant surgery; a restorative dentist, who plans and places the tooth restorations; and a dental laboratory technician who fabricates them.

Placing dental implants requires a surgical procedure in which precision channels are created in the jawbone, often using a surgical guide. The implants are then fitted into the sites so that they are in intimate contact with the bone. They generally require two to six months to fuse to the bone before they can have tooth restorations attached to them to complete the process.

At Laurel Manor Dental, they are highly trained in treating receding gingival tissue, and they take great pride in your getting you to your most advantageous dental and oral health. Laurel Manor Dental goes one step further because they have an onsite specialist in periodontal disease. Her name is Dr. Lucia Roca, and she is also certified in the Pinhole Technique.

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 clarifying 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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Shoulder Joint Replacement

Groundbreaking Procedures from The Advanced Orthopedic Institute

Living in Florida provides abundant fair weather for all residents throughout the entire year. By way of good weather, adults are staying much more active as they age. In our sunshine state, older individuals are golfing, playing tennis, pickleball, kayaking, swimming and the list goes on and on; but with all of that healthy activity comes injury and wear and tear.

Whether you have had trauma to your shoulder from an accident, or have pain due to advanced arthritis, degenerative joint disease, or soft tissue and ligaments disorders, shoulder pain can be debilitating. If you have tried all of the pain medications, alternative methods, physical therapy and still are having difficulty with range-of-motion or impingements and discomfort, it may be time to speak to your orthopedic surgeon about shoulder replacement surgery, or otherwise known as shoulder arthroplasty.

Typical Shoulder Replacement Surgery

During the standard shoulder replacement procedure, the surgeon will cut off part of the top of your humerus bone, which is located in the joint of the shoulder. The Surgery consists of reshaping the shoulder joint and placing a metal stem (a few inches long) into the shaft of the humerus bone. A metal or plastic plate is then attached to the glenoid socket. These two connected devices will then take the place of the "ball and socket" in the upper shoulder area. Over time, the new joint replacement will allow the shoulder to move more freely and to be free from the excruciating pain that the individual was accustomed to on a daily basis.

Enhanced Shoulder Replacement Surgery

At the Advanced Orthopedic Institute, they have implemented a new procedure, which is an innovative shoulder replacement procedure that is recommended for certain patients that have more of an active lifestyle. This new shoulder system is stemless and allows for more natural movement.

The surgical method that your surgeon suggests will be based upon your condition and the overall health of the bones and joint in the shoulder. The determination will support your best-case scenario and preeminent outcome.



Shoulder Arthroplasty Recovery

After your surgery, your initial recovery time usually takes about six weeks, but full recovery can take a few months up to a year. Many patients report feeling no pain, and also having an increased range-of-motion very soon after surgery. Your surgeon will also provide you with an exercise and stretching program, along with physical therapy for an allotted period of time.

Advanced Orthopedic Institute (AOI) handles all aspects of orthopedics, with specialization in total joint replacement. Dr. Alfred J. Cook, Jr., specializes in sports medicine, including shoulder surgery and replacement, rotator cuff repairs, knee procedures and arthroscopy. Dr. John T. Williams, Jr., is a total joint replacement surgeon who specializes in hip and knee replacements and revisions.

Both doctors also use early intervention treatments for arthritis.

To find out more about stemless arthroplasty, or your other orthopedic needs, please call Advanced Orthopedic Institute at (352) 751-2862



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Cornerstone Hospice Focused on Each Patient's Life, Not End-of-Life

Submitted by Cornerstone Hospice and Palliative Care

Nearly 60 years after the end of World War II, former US Army Sergeant and Villages resident Charles Mellott was honored for his service during a special ceremony, surrounded by family and friends. The Cornerstone SALUTES! ceremony was arranged by the Cornerstone Hospice social worker who was part of the team that ensured the 93-year-old lived his last days in comfort and with dignity.

Mr. Mellott's cardiologist had recommended Cornerstone to care for Mellott. His daughter said the time was right. "It took a huge load off of my 90-year-old mother as a caregiver," says Del Hunt. "She was then able to prepare for his passing."

Hunt said the Cornerstone Hospice team treated her father with compassion. "They spent time getting to know him personally, listening to him with their undivided attention. He looked forward to the routine visits from his nurse and she became his friend," said Hunt. The hospice team even coordinated care with her parents' assisted living facility.

"When our teams collaborate on a patient they aren't focused on how this person is going to die, but rather how he'll live out his last days, and that his family receives the necessary support to allow for it," said Chuck Lee, President and CEO of Cornerstone Hospice.

Each Cornerstone Hospice patient is cared for by members of what is called a "multidisciplinary team" which includes a physician, nurses, nursing assistants, a chaplain, a social worker and a specially-trained volunteer. The team addresses symptom control, pain management, and emotional and spiritual support expressly tailored to the patient's needs and wishes.

Hospice focuses on caring, not curing and, in most cases, care is provided in the patient's home. It also is provided in freestanding hospice centers, hospitals and long-term care facilities or wherever a patient resides.

Due to misconceptions about what hospice provides, patients often are brought in too late when much discomfort and strain has already been experienced by the patient and the family.



Cornerstone Hospice volunteer Retired Col. Paul Farineau salutes Charles Mellott at a Cornerstone SALUTES! ceremony. Cornerstone's veteran volunteers provide honorees with a certificate, a commemorative pin and a salute to thank veterans for their service to our country.

Patients may be eligible for hospice services when a doctor certifies a patient has a terminal illness and a life expectancy of six months or less. Hospice services are available to patients of any age, religion, race, or illness and are covered under Medicare, Medicaid, and most insurance plans.

Cornerstone provides special services to ensure overall comfort and support including its nationally recognized seven-day care model which ensures continuity in the care team and improved communications amongst staff and the patient, the Pet Peace of Mind program, bereavement counseling and Cornerstone SALUTES! for veteran patients. Cornerstone SALUTES! is a comprehensive hospice program respectfully celebrating veterans' service to our country, at home and abroad, and providing care that recognizes the challenges unique to military families.

"Veterans often have emotional and physical conditions related to their service which require additional insight from the care team," said Lee. "With one in four people dying today being a veteran, we take extra steps to help them during their last days."

"Words could not describe how that made my dad feel. He was finally recognized for his service to this great country. He appeared to be more at peace and held his head higher. I feel in my heart it did bring closure for him," said Hunt.

About Cornerstone Hospice

Cornerstone Hospice is a leading community-owned provider of end-of-life care in Central Florida. For 34 years Cornerstone has set the standard for hospice care as we serve more than 7,000 people in Lake, Sumter, Orange, Osceola, Polk, Hardee and Highlands counties each year. For more information, to donate, or to volunteer, call 866-742-6655 or visit www.CornerstoneHospice.org



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www.CornerstoneHospice.org

Meet the Medical Director of MIT

My decision to develop a multi-modality imaging center in the tri-county area is influenced largely by my passion to provide top quality medical imaging and interventional care to a community which I have called home for nearly 20 years. As a resident of Lake County, and the son of a long-term Villages resident, I am acutely aware of the needs of the senior community, and the demand for a boutique-style, state-of-the-art radiology and vascular center, where patients can actually consult and develop a personal relationship with their radiologist physician, who will help formulate an individualized treatment plan.

Having worked as an interventional radiologist in the tri-county area since 1997, I have served on numerous hospital committees, including the board of directors of both Leesburg and The Villages hospitals, I have established enduring relationships with many local business leaders, hospital administrators, and hundreds of local physicians. In addition, prior to opening MIT in 2013, for 5 years I performed onsite diagnostic and interventional radiology at nine hospitals in central and southwest Florida, and provided tele-radiology support to several additional hospitals throughout Florida, Kentucky, Ohio and Pennsylvania. First-hand exposure to a multitude of healthcare systems has allowed me to incorporate a variety of the most desirable attributes of each, into a practice of my own. Through my travels, I have personally come to know many of the region's top medical specialists with whom I have developed an extensive professional network; an invaluable resource to my patients and referring physicians.

I am confident that my proven track record of providing outstanding diagnostic and interventional radiology to the Central Florida region, as well as my intimate familiarity with the local medical climate, affords me the unique opportunity to provide an exceptional level of personalized service in a warm and inviting setting. Our constellation of customer service oriented staff, leading-edge technology, and unwavering focus on the patient, allows MIT to consistently deliver the 'highest definition' care.

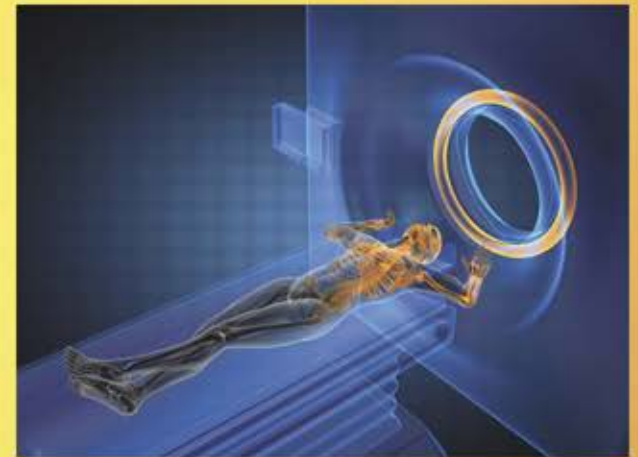
Many of you may not be familiar with the term Diagnostic Radiology. Until recently, a diagnostic radiologist was mainly known in hospital circles as the physicians' physician. In other words, the specialist other doctors call upon to help determine what is wrong with the patient. How does this occur? We interpret MRI, CT, Ultrasound, X-ray and other medical images, review clinical and laboratory data and interview patients to determine what symptoms they are experiencing, so that the pieces of the puzzle can be put together in context, establishing the proper diagnosis and allowing for development of an appropriate treatment plan.

Oftentimes, treatment can also be provided by Interventional Radiologists, performing minor procedures utilizing imaging guidance, or the assistance of a real-time X-ray machine, called a C-Arm, or an MRI, CT or Ultrasound. This is the beauty of my profession. I can diagnose and treat as well! My subspecialty is vascular and interventional radiology. What does all this mean? First I am a diagnostic radiologist. I attended College, and then medical school for 4 years, and completed a 4-year residency in diagnostic radiology to learn all about disease processes in the body and how they can be visualized in the images produced by various machines. I need to know how they correlate with symptoms and health history to create a story. Furthermore, after a year of training in surgery and a year of fellowship in vascular and interventional radiology, I earned the title of Interventional radiologist and am board certified in both specialties. Few people have heard of this subspecialty because we are typically found in hospitals, working "behind the scenes" using fine needles and guidewires with the guidance of imaging equipment to perform cutting edge procedures which were once open surgeries requiring extensive recoveries. Interventional radiologists pioneered many of the procedures you are familiar with today, such as vein ablation, angioplasty and stenting, and biopsies of organs deep inside the body, just to name a few. If you research Interventional radiology in Wiki-pedia, you will be astonished by the devices, procedures and technology this specialty has developed in the last 50 years, truly revolutionizing medicine.

Interventional Radiologists pioneered endovascular surgery, which has become the alternative to open vascular procedures, using guidewires and real-time image guidance to achieve excellent outcomes with fewer complications and shorter recovery times. Oncologists refer patients for biopsies, port placements, drainages of abnormal fluid collections and for interventional therapies known as thermal ablation to treat a variety of primary and metastatic tumors. Neurologists use Interventional Radiology for the treatment of stroke, carotid artery stenosis, spine fractures and to obtain spinal fluid for testing. OB/GYNs send women for treatment of uterine fibroids, pelvic congestion syndrome, and procedures such as hysterosalpingograms and fallopian tube recanalization to evaluate and treat infertility. Nephrologists use interventional radiologists to treat renal artery stenosis, place dialysis catheters and nephrostomy tubes and to keep dialysis fistulas and grafts functioning. These are just a few ways in which an interventional radiologist can offer patients non-surgical treatment options. As the specialty continues to evolve, modern Interventionalists are now able to provide direct patient care by performing in-office procedures that were once only available in a hospital setting.



Dr. Mark Jacobson



At MIT, not only do we perform diagnostic imaging, but we are uniquely set up to also perform a multitude of in-office interventional procedures. These procedures are performed by expert hands, and with the safest imaging equipment, utilizing extremely minimal or no radiation while communicating with you and your other doctors. Our down to earth team is devoted to your physical and emotional well-being and will take the time to explain every test, process, and option, so you'll know that you are among trusted, experienced, professionals who genuinely care about you. We welcome any partners, family or friends you wish to include in your healthcare decision making if it helps you feel more comfortable and safe.

MIT opened its doors in 2013, and is one of the few independently owned (not owned by a hospital) Interventional Radiology centers in the country to offer such procedures outside of a hospital. Advantages include avoiding the risk of hospital acquired infection by drug resistant organisms - a huge plus for immune compromised patients - as well as time-efficient scheduling and delivery of services, at considerable cost savings. Furthermore, all our physicians are American trained and Board Certified.

Our center is certified by the Florida Department of Health Board of Surgery, and Accredited by the American College of Radiology. Our latest achievement, after just 3 years in service, is to have been selected to be as a training center for Interventional Radiology Fellows from Shands University of Florida Medical Center.

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Melatonin with Omega-3: Not Just for Sleep

By Bo Martinsen, MD

Some 25 years ago, many of my patients at my clinic in Norway were working for an international IT company that required them to travel frequently. Seeing how exhausted they would be from their travels, I explored possible remedies. Back then, melatonin was starting to be touted as a jet lag aid, so I suggested my patients try it out.

For some patients, melatonin seemed to help. But it also struck me that melatonin's effects seemed to vary greatly from one person to another in terms of sleep. After a year or two, I became less fascinated by melatonin's sleep-inducing abilities and did not talk about it frequently.

Fast forward two decades and my interest in melatonin has renewed as I've found that the benefits of this molecule extend far beyond that of sleep. Researchers today are exploring the role of melatonin in cancer medicine, aging, and immune health. In addition, there is a small body of research that has started to look at the synergy between melatonin and my specialty, omega-3 fatty acids. From the research, it appears that melatonin and omega-3s increase the benefits of one another and may also be instrumental for protecting the powerhouse of the cell -- the mitochondria -- from damage.

What Is Melatonin?

Melatonin is a molecule that's indispensable for life. Secreted by the brain's pineal gland in response to darkness, melatonin helps regulate our circadian rhythm. It is also found plentifully in the intestinal tract, liver and retina, working simultaneously as a scavenger of cancer cells, an anti-inflammatory agent, and as a powerful antioxidant.

This antioxidant function is what initially drew me back to melatonin. Studies indicate that melatonin can protect omega-3 fatty acids from lipid peroxidation, a process in which free radicals attack and damage molecules. If an omega-3 molecule becomes damaged by exposure to oxygen, for instance, it's prevented from carrying out its functions in the cell. Omega-3s are highly susceptible to lipid peroxidation because of their many double bonds. That's why melatonin's potential ability to shield these vulnerable fatty acids from damage could be instrumental for maintaining the safety and efficacy of foods and supplements that contain omega-3s.

How Melatonin and Omega-3 Work Together

Aside from protecting them from lipid peroxidation, melatonin also seems to promote the absorption of omega-3 fatty acids in the body. Studies show that,

when taken together, melatonin increases the levels of the EPA omega-3 fatty acid in the brain, thus improving the omega-6 to omega-3 ratio. This is also significant since scientists note the benefits of EPA for specific cell types involved in reducing neuroinflammation.

Intriguingly, omega-3 fatty acids also appear to be helpful for the body's production of melatonin. Because omega-3 fatty acids make up a part of the pineal gland, some scientists believe that the pineal gland may actually be synergistically regulated by the omega-3 molecules.

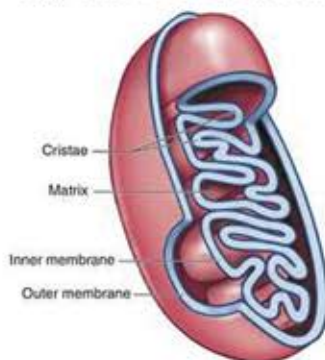
Melatonin and Omega-3s May Fight Aging

Perhaps most interesting of all is how melatonin and omega-3 may work together to fight aging via supporting the mitochondria.

If you don't remember from your biology class, here is a reminder: The mitochondrion functions as the cell's powerhouse, providing the energy our cells need to function. It is also connected with cellular aging. It's believed that, if we can improve mitochondrial functioning and prevent damage to these important cell structures, we can delay the onset of age-related chronic diseases.

Both melatonin and omega-3 appear to come together to protect the mitochondria from damage. Research reveals that the omega-3 fatty acid DHA is important for optimal mitochondrial function. And in a recent study, it was also discovered that melatonin "exhibited a protective effect on mitochondrial function."

While scientists are still trying to understand the intricacies of whether mitochondrial damage is a cause or symptom of aging, it is clear that omega-3 and melatonin are crucial for optimal mitochondrial functioning. Take a look at the mitochondrion, an intricate



labyrinth of membrane surface. Omega-3 molecules make up a significant portion of this membrane. And it is here that the omega-3 molecules meet melatonin during energy creation, directly on the inside surface of the membrane.

New Formulations for Optimal Health

The more we discover about melatonin and omega-3s, the clearer it becomes that these molecules belong together. Omega-3 rich foods often contain high levels of melatonin. Cod liver oil, for instance, is a good source of both, but during the regular refining process, almost all of the natural melatonin is lost.

By combining melatonin and omega-3s together again, perhaps we can work towards smarter formulations for optimal health. We found that when we added melatonin directly into our omega-3 oil, the results were different than taking melatonin alone or as a tablet. While more research is still needed on this partnership, these early findings are promising.

About Dr. Bo Martinsen

Dr. Martinsen is an omega-3 specialist, innovator, and advocate for natural foods. As co-founder of Omega3 Innovations, he has created multiple patented technologies for medical devices designed to improve consumer compliance. He is also the creator of several medical food products that combine dose-effective ingredients of omega-3 fish oil with soluble fibers and other nutrients. Before Omega3 Innovations, Dr. Martinsen practiced medicine in Norway, focusing on occupational and preventive medicine.



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Medical Marijuana

The Natural Alternative

By Bob Goethe, MD



Medical marijuana is catching on in Florida. We are now well past 130,000 patients on the registry and it is predicted there will eventually be over 400,000 patients using cannabis in Florida. We have been getting great results with chronic pain patients- back pain, migraines, fibromyalgia, severe arthritis. These folks are often on narcotics, Gabapentin and steroids. These drugs can be addicting and have some serious side effects. Cannabis can usually replace these medications and has an amazing safety profile. And it works! Parkinson's and seizure patients find good control of symptoms as do people with Crohn's disease and irritable bowel syndrome. PTSD patients and those with similar conditions like severe anxiety and panic attacks find low dose cannabis soothes anxiety and promotes sleep better and safer than Xanax, Ambien and Klonopin. Cancer patients appreciate it for its anti nausea effects as well as its appetite stimulating ability. Plus, there is some recent research showing cannabis seems to slow down cancer cell growth and augment the efficacy of chemotherapy. It's an amazing natural medicine and we should be very grateful that Florida has become progressive enough to recognize this.

Now there are 31 states that allow medical marijuana and the list is growing rapidly. People seem to be waking up to the very strange and unfair way cannabis has been demonized by the federal government and incorrectly placed

into the category of a Schedule 1 drug, which says it is a dangerous, addicting drug with no clinical usefulness. This is wrong. Even the government knows this. While we have all these hoops to jump through and government intrusion into our ability to access it, the FDA has been granting patents to drug companies on the ingredients in the plant that it claims are dangerous and not useful. THC, the ingredient in the plant that causes euphoria, has been around as Marinol the synthetic drug for years. It can be used for nausea in cancer patients and appetite for AIDS patients. CBD, the other main compound in the cannabis plant, has been recently been bestowed a patent to GW pharmaceuticals who basically just took the compound out of the plant, put it in a vial and now sell it as a prescription for seizure patients for about \$32,000 a year. It is not even a fraction of that price when obtained from the natural plant, but that is not a fact that the FDA/ Pharmaceutical companies want you to know.

Besides the continued ban on the natural plant whilst at the same time endorsing companies that purify and sell its extracts under drug patents, there is another reason to be concerned about what is going on with this plant politically. Almost all studies have shown that to achieve the best results from cannabis, whether for cancer or for seizures or anxiety, the whole plant extract works much better than any particular molecules extracted and purified from the

plant. Pharmaceutical companies can extract and purify the individual components and mark up the price but in fact whatever they come up with lacks the potency of the whole plant which contains over a hundred cannabinoids besides THC and CBD as well as these molecules called terpenes. This effect is known as the entourage effect. That's why medical cannabis is preferred by cancer patients over Marinol (pure THC) and Plant extract with THC and CBD works better than pure THC or CBD to inhibit cancer growth. It's thought that whole plant extract works better than pure CBD which now is sold as Epidiolex for the before mentioned \$32,000 a year for prescription.

One common misconception about medical cannabis is that people take it to get high. People don't seek medical marijuana to get high, they seek it to treat their medical condition. The products used medically are typically fairly high in their CBD concentration which works well as an anti-inflammatory and anti-anxiety medicine and also counteracts the THC euphoric effect. Most people don't want too much of the euphoric effect, at least in the day time and so they will use a product during the day that relieves the symptoms without any psychoactive effect and then may choose a product for night time use that makes them sleepy. That's one of the things people need to adjust to. When you have a medical marijuana card, you can pick your own products and adjust the dose with the help of your physician.

I have been amazed at the success we have seen with medical cannabis. If you want to learn more, go to our website compassionclinicflorida.com

We do frequent seminars in Crystal River and the Villages and we are always available to answer questions and dispel myths at 362-601-4200.



On Facebook like our page for more information, search for Better Health Compassion Clinic. If you're interested, please call **352-601-4200** or email DrBobGoethe@gmail.com - Check out our website: www.compassionclinicflorida.com

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 its benefits in patients and strongly believes in the cause.



Open Enrollment 2019

Make it Count: Five tips for choosing a health plan

By Dr. Mayrene Hernandez, chief medical officer,
UnitedHealthcare Florida

This fall, millions will head to the polls to cast their vote in the mid-term elections, but there is also another important choice to make: your health care coverage for 2019.

More than 12 million Florida residents will have the opportunity to select or switch their health insurance plans for 2019 during “open” or “annual” enrollment. But unlike Election Day, the dates aren’t the same for everyone and vary depending on your situation:

- For the more than 175 million Americans with employer-provided coverage, many companies set aside a two-week period between September and December when employees can select health benefits for the following year.
- For the 60+ million people enrolled in Medicare, Medicare Annual Enrollment runs from Oct. 15 to Dec. 7 each year.
- Health insurance marketplace or individual state exchange open enrollment runs from Nov. 1 to Dec. 15.

For most people, changes made during this time will take effect Jan. 1, 2019.

Choosing health benefits can feel stressful, but it doesn’t have to be. Following are five tips to help make the process easier.

Open Enrollment

In addition to regular health insurance, open enrollment is also a good time to look at other benefit plans that can help protect you and your family from head to toe such as vision, dental and financial protection.

Take Time to Review Your Options

Take the time to explore your options and understand the benefits and costs of each plan so you can find the coverage that works best for you. Pay attention to more than just the monthly premium and review what out-of-pocket costs, including the deductible, copays and coinsurance, for which you may be responsible. You should also consider any changes to your health over the last year or if you have any major health events planned for 2019 – such as having a baby or surgery – to determine if your current coverage still fits your needs.

Prevent Financial Surprises

Before you select a plan, check to see if your doctor is in your health plan’s care provider network. Visiting doctors that are in-network is one way to help keep your costs lower. If you select a plan that would make your visit to a particular doctor or hospital fall outside the network, make sure you understand what the costs you may incur.

Be sure to also see if your medications are covered by the plan. Even if you don’t expect to change plans, it’s important to make sure your drugs will still be covered in 2019. People with Medicare should remember that Original Medicare doesn’t cover prescription drugs, so if you are looking for help covering the costs of your medications, choose either a Part D plan or a Medicare Advantage plan with prescription coverage.



Look for Ways to Save

Ask about incentive-based wellness programs that reward you for living a healthier lifestyle. Some health plans offer incentives for their members to participate in activities that may help improve their health, such as completing a health assessment, visiting a gym, lowering their cholesterol, participating in a wellness-coaching or tobacco-cessation program, or even just walking.

Also, check to see if your plan includes 24/7 telehealth services. Telehealth services can be especially convenient for consultations on minor health issues that occur and can save both time and money. Often, telehealth is available to members of employer-sponsored, individual and Medicare Advantage plans.

Don’t forget about additional benefits and features

Open or annual enrollment is the ideal time to select benefit plans that can help protect you and your family from head to toe, so consider adding vision, dental and financial protection plans such as life, accident or critical illness coverage. For people on Medicare, many are surprised to find that Original Medicare doesn’t cover most dental, vision and hearing services. But many Medicare Advantage plans do and often include additional perks like gym memberships or discounts on hearing aids.

Learn the Lingo

Do you have a full understanding of health care terms, such as premium, deductible, coinsurance and out-of-pocket maximum? If not, there are resources online, including UnitedHealth Group’s Just Plain Clear Glossary (in English, Spanish, and Portuguese) to help you learn and understand health care terms.

For help navigating open enrollment, visit UHCOpenEnrollment.com for more tips, articles and videos about health insurance and health care topics.

Dr. Mayrene Hernandez is the chief medical officer for UnitedHealthcare Florida. She is also part of part of UnitedHealth Group’s South East Clinical Services Leadership Team, where she oversees hospital inpatient management in Florida.

HEALTH INSURANCE



[Click here for more information](#)

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Open enrollment for 2019 health care coverage started in September and varies for employer-provided coverage, Medicare and individuals. Deadlines to apply or change coverage range from Dec. 7 to 15, 2018 for Medicare and individuals but it’s recommended residents start the process as soon as possible.



Diabetic Neuropathy: How Physical Therapy Can Help

Roughly, 29 million Americans have diabetes. Many of these cases are undiagnosed, but for those individuals that struggle with the disease, symptoms of diabetic neuropathy can be debilitating.

Diabetic neuropathy is a progressive disease that affects nearly 200,000 new patients per year. Understanding the disease state is complex, but in short, having high blood sugar levels, along with low blood and oxygen supply, damages the nerves throughout the body. This damage generally affects the long peripheral nerves that feed sensations to the legs, feet, and toes from the spinal cord, through communication with the brain. If your condition has progressed, you may feel nerve damage sensations in your upper extremities as well.

Peripheral Neuropathy Symptoms

- Numbness
- Tingling
- Burning sensations
- Painful aching
- Joint inflammation
- Joint damage
- Balance issues
- Skin discoloration & texture changes
- Muscle cramps
- Feelings of stiffness
- Non-healing foot & ankle ulcers

Once the peripheral nerves are damaged, there is no cure. Along with medications and drug therapies, there are proven methods to lessen



the symptoms of peripheral diabetic neuropathy. Physical medicine provides alternative therapeutic and rehabilitating procedures that can offer significant pain relief and limit drug dependency. Physical therapy helps with balance and can reduce the risk of falls.

When you have diabetic neuropathy, your feet and legs can feel so numb that you may trip, fall and injure yourself just by trying to get through normal daily activities. This can be dangerous for obvious reasons. Along with dietary changes, orthopedic shoes and compression stockings, physical therapy can help.



Physical & Occupational Therapy Benefits

- Manual stretching
- Hip & Ankle Alignment Strategies
- Decompression
- Massage therapy
- Electrical nerve stimulation
- Help with daily tasks & Living
- Cold laser treatment

Patient & Occupational Education is critical to alleviate further injury and to promote the most efficacious healing. Coupled with family participation, self-help management to promote and maintain independent function, and mobility is critical.

Physical therapy is used to help with numerous indications and conditions like retraining the body to improve gait and balance and also after hip, knee or shoulder replacement and so much more. There is no better way to alleviate pain, increase range-of-motion and live a more mobile higher quality of life than through physical & Occupational therapy.

To find out more or to schedule your appointment, please contact Innovative Therapies Group today.

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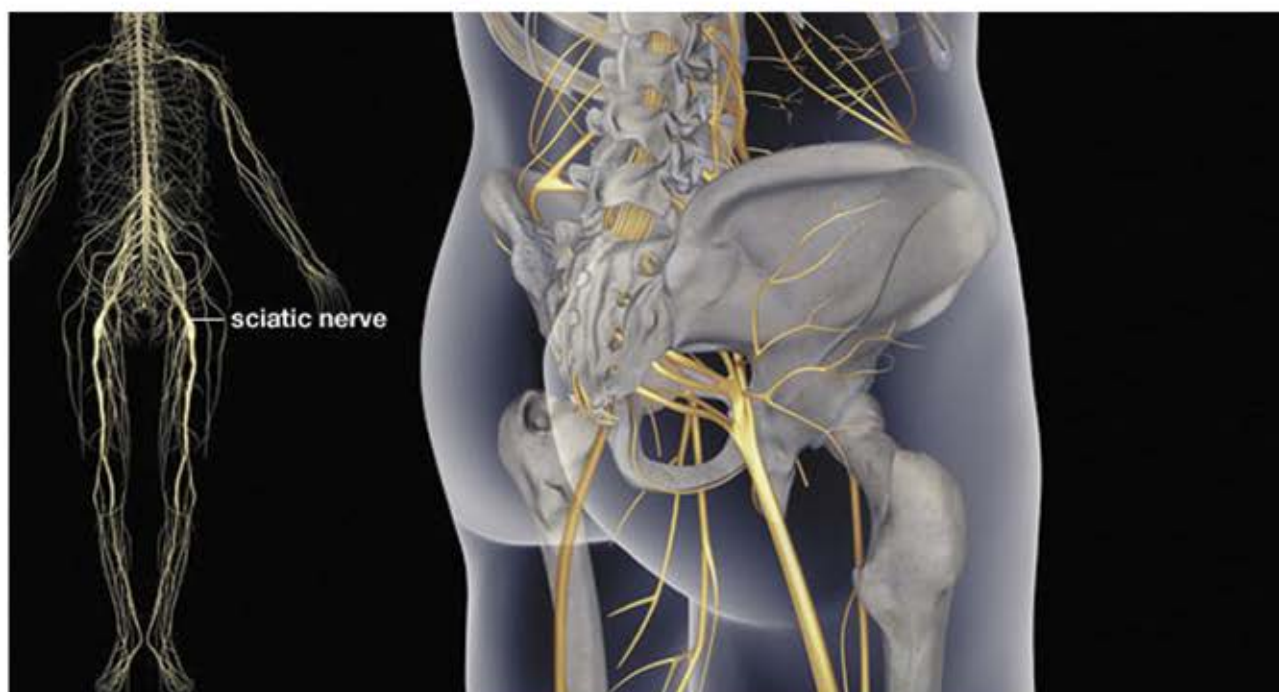
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By Compton Chiropractic Care

Currently there are millions of Americans who suffer from low back and leg pain. A recent survey showed, a large majority of these patients are over the age of 65. When you figure that the Villages has a population exceeding 100,000 and a majority are over the age of 65 then it becomes easier to understand why so many local residents experience this pain. In fact, seven out of ten patients who walk into Dr. Compton's office complain of low back or sciatic pain. It is common knowledge that Chiropractors treat low back pain among other muscular skeletal complaints. What is not well known is that there are over a dozen different techniques and treatment plans to treat the same condition. Different Doctor's feel one technique is better than another but the proof is in the pudding. What makes a Doctor truly unique and beneficial to their patients is being able to properly diagnose a condition the first time and realize when a particular protocol is not working and escalate care to the next level.

Sciatica is defined by The Mayo Clinic as: *Pain that radiates along the path of the sciatic nerve, which branches from your lower back through your hips and buttocks and down each leg. Typically, sciatica affects only one side of your body.*

Sciatica most commonly occurs when a herniated disk or a bone spur compresses part of a nerve. This causes inflammation, pain and often numbness in the affected leg. Although the pain associated with sciatica can be severe, most cases resolve with conservative chiropractic care in a few weeks. Interestingly enough; due to the anatomical location of the sciatic nerve, sciatic type pain can also be caused by Piriformis syndrome or sacro-iliac joint dysfunction. These two conditions masquerade around with similar signs and symptoms and can lead to improper diagnosis and treatment. This means patients spend money and do not get better, never a good thing.



The Doctors at Compton Chiropractic are board certified and have degrees from Palmer College (The First Chiropractic Medical School). Among other common conditions they treat low back and sciatic pain on a daily basis with great success. The Doctors are integrated with several local primary care physicians, urgent cares, neurologists, pain management physicians, and orthopedic surgeons. This level of integration means that the patient benefits faster and more effectively.

These days it's hard to walk around the golf course and not hear someone talking about their "sciatica". Unfortunately, the great game of golf tends to wreak havoc on one's spine and muscular systems. This is one reason why many top pro golfers (Tiger Woods, Tommy Armour) among other athletes have a chiropractic physician on staff. Certainly if professional golfers with great swings utilize chiropractic care, then local residents who have trouble swinging could potentially benefit more.

Compton Chiropractic has been serving The Villages since 2006 with knowledgeable Doctors and friendly staff who treat sciatica pain on a daily basis. They primarily utilize "Cox Flexion Distraction Technique" which was developed by Dr. James M. Cox in the early 1960's as a non-surgical method of treating disc related injuries. Since that time Doctors of different specialties around the country have studied and utilized these methods with great success.

Many residents are familiar with the terms herniated disc, sciatica, pinched nerve, bulging disc and stenosis. Many are also aware that surgery has been the most common treatment for these injuries in the past. However, years of research and technology have pushed us into the 21st century and now there is hope for those who suffer from this debilitating pain. It is now commonplace in medicine to try the most conservative means of treatment first. This approach is a win: win for patients and doctors alike because it means less wasted time and money.



WHETHER OR NOT YOU'VE GOT A PRIMARY CARE PHYSICIAN (PCP), AT DR. COMPTON'S OFFICE, ALL PATIENTS ARE WELCOME.

WE WORK WITH YOUR CURRENT PHYSICIAN:

If you have a regular family practice relationship, your current PCP can treat you simultaneously, and all communications between Dr. Compton's office and theirs will be shared and interconnected.

WHAT IF I DON'T HAVE A PCP?

Many patients come directly to Dr. Compton's office, as referrals are not required.

WE CAN REFER YOU OUT IF NECESSARY:

All cases and patients are different. For example, if we feel it's in your best interest to see an orthopedic specialist, or if you need additional images, we refer you out and can also coordinate this with your PCP's preferences.

Doctor Compton states that, "some patients will require surgery for pain relief", however in most cases he can postpone or prevent surgery for his patients.

The Doctors at Compton Chiropractic have received additional education on the Cox Technique among others. This conservative treatment has been shown to decrease disc pressure by approximately 75% thus allowing relief of the signs and symptoms of disc related pain (Sciatica).

The average treatment time is only about 15 minutes and most patients report feeling better in just a few visits.

Patient Testimonial

"I suffered from sciatica for 25 years until a friend told me about Doc. After 4 treatments I was back on the golf course and out of pain." - K.R.

Doctor Compton's office is located in The Palm Ridge Plaza off CR 466 and they accept all major insurances. Office hours are M-F from 9am to 5 pm.



"Putting your families health in our families hands"

Providing Quality Chiropractic Care to patients in and around The Villages, Florida.

Our Philosophy

- Treat patients as individuals identifying their unique needs and set of problems
- Perform a thorough Orthopedic and Neurologic examination with all new patients
- Use the highly reliable and world-renown Palmer "hands on" technique of Chiropractic care
- Provide patients with non-surgical alternatives to pain
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LOCAL ATTORNEY PATRICK L. SMITH OFFERS FLAT FEE ESTATE PLANNING SERVICES



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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The Pastor, The Widow, and The Doctor

By Alex Anderson,
Senior Associate Pastor at Bayside Community Church

A pastor went to visit a widow. She greeted him with a warm smile. She invited the pastor in and offered him a cup of coffee. As they sat at the kitchen table in her modest home and talked the pastor began to realize how poor the widow was. Not only was the home in need of repair, which included a new roof, but she wore clothes that were very clean and neat, like the inside of her home, but were tattered and in need of replacing.

The pastor was moved with compassion for the widow and felt bad for even drinking her coffee. He began to pray in his heart how he could help the widow.

Under the circumstances, she was surprisingly buoyant. She never complained and had a smile on her face.

Her husband died less than two years earlier. He had been a blue-collar worker all of his life and made very little income. He did not leave any money for retirement nor did he have life insurance.

Out of compassion, he asked how she was doing financially knowing that she was not able to work due to health problems. As a small crease formed on her forehead she paused and looked into her coffee cup and hesitated but with a little more nudging from the pastor she shared her financial situation.

Her only income was a little less than \$500 per month from Social Security and she obviously had no savings. In addition to her home needing thousands of dollars in repairs, she owed thousands of dollars in medical bills. Her words began to settle into the pastor's hearts with an uneasy sick feeling. "How could anybody live on less than \$500 per month" was his first thought and the second was, "What could be done about it?" His internal prayer to God was "This has to be fixed, Lord. She must not live like this any longer."

The pastor thought, "The moment I get in my car I'll call the church treasurer and immediately have money given to her." He also decided to leave her



with the hundred dollars in twenties he had in his wallet, hoping to leave it in a way that she would find after he left.

As they continued to talk the pastor had a thought that he knew came from the Father in Heaven but he wrestled with the very idea. He decided to obey Holy Spirit and asked the widow a very personal question that could have seemed inappropriate and taken the wrong way under the circumstances. So he asked her permission first to ask the question since it could be a very sensitive issue. She said she trusted that he heard from God and would like to hear the question.

So he asked, "Do you tithe?"

For a moment she just sat and stared at him. And after gathering herself she looked him in the eye and said, "No. Not really. In the past my husband and I would give a little here and there but we did not honestly give God ten percent of our income. Why do you ask?"

The pastor, who know the real reason God instituted tithing, began to teach the widow. After about thirty minutes had gone by the widow's eyes lit up

and she said, "Do you mean to tell me God uses the tithe as a way of getting the things I need to *me* and He's not trying to get something *from me*?" The pastor smiled and said, "Of course. The truth is God doesn't really need the money for Himself. Yes, the tithe is used by the church for expenses and to help others, but it so much more than that."

The pastor could see a glimmer of hope in the widow's eyes. After they had finished talking the pastor prayed for the widow and as he was leaving quickly put his cash in his empty coffee cup while the widow was looking the other way.

The widow began to tithe that week and over the following months, a young doctor learned of her needs and, after talking with his wife, kind of adopted her. With great joy, the doctor and his wife replaced the widow's roof, bought her a newer model car, and helped her with many other financial needs. The doctor even reported that his own practice began to experience record growth shortly after he began to help the widow.

I know the pastor in this story very well and it gave me great encouragement to learn of how the Lord had responded to the widow and the young doctor's faith. With our natural mind, it makes no sense to give when you don't have enough, but the difference is to whom it is given.

There once was a credit card commercial that had the tagline, "What's in your wallet?" So my question is, "What's in your hand?" And if you put it in God's hand with a small amount of faith, what could happen?

To your spiritual health,

Alex E. Anderson

Senior Associate Pastor at
Bayside Community Church
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