

CENTRAL FLORIDA'S

Health & Wellness[®] MAGAZINE

April 2019

Polk/Brandon Edition – Monthly

www.HealthandwellnessFL.com



FREE

**INTRODUCING
THE EMSELLA CHAIR...**

**PERMANENT MAKEUP 101:
WHAT YOU SHOULD KNOW
BEFORE GETTING YOURS**

**MISSING LINKS
TO RESOLVING KNEE PAIN**

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Lynette Bell

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REGULAR SCREENINGS HELP PREVENT COLORECTAL CANCER



According to the American Cancer Society (ACS), colorectal cancer is the third leading cause of cancer-related deaths in women in the United States and the second leading cause in men; however, the number of deaths from colorectal cancer has been dropping steadily in both men and women for several decades. One of the reasons for this decline is early detection and improvements in screening methods.

Almost all colorectal cancers begin as precancerous polyps (abnormal growths) in the colon or rectum, the majority of which take 10-15 years before developing into cancer; and, they may not cause any symptoms until the cancer is well-established. That's why screening is so important. With regular screenings, most polyps can be found and removed before they advance and become malignant, thereby preventing cancer from occurring. Screenings can also find colorectal cancer at an early stage, where there is a greater chance that treatment will be more effective and may even result in a cure.

ACS guidelines recommend that, starting at age 45, people who are not at an increased risk due to family history get a screening for colorectal cancer. If you have a family history of colorectal polyps or cancer, talk with your doctor about what your options are and how to reduce your risk. You may also want to begin screening earlier than age 45, or even receive genetic counseling to review your family medical history.

IMPROVING TREATMENT

The type of treatment for colorectal cancer depends largely on the stage of the cancer. The three primary treatment options are surgery, chemotherapy and radiation. In addition to these treatments, targeted therapies, including immunotherapy, may be used for cases of more advanced cancer. Targeted therapies are drugs that target specific malfunctions (DNA mutations) in the genes or proteins of cells that allow cancer cells to grow uncontrollably. These drugs, which are usually in pill form, may be given alone or in conjunction with traditional chemotherapy. Some patients with advanced colon cancer may also have a chance to benefit from specific immunotherapies. These are drugs that use your body's immune system to attack and fight cancer cells. The development of more immunotherapies is an area of ongoing research that shows great promise in the treatment of many types of cancer.

Screening remains the number one way to reduce your risk of colorectal cancer and/or treat early stage cancer. The Centers for Disease Control (CDC) estimates that if everyone over the age of 45 had regular screenings to detect pre-cancerous polyps, we could reduce colorectal cancer deaths by 50-60%. In addition to early detection, treatment for colorectal cancer has vastly improved over the last few decades. As a result, there are now more than a million survivors of colorectal cancer in the United States.

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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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Donate Life Month:

LIFE IS A BEAUTIFUL RIDE

For the 2019 National Donate Life Month theme, Donate Life America was inspired by bicycles and the phrase “Life is a beautiful ride.” Like the donation and transplantation journey, a bicycle serves as a symbol of progress, renewal and the moving circle of life.

Bicycles come in all styles, shapes and sizes, but each is comprised of the same components, essential to supporting the rider and converting their energy into motion. Similarly, organ, eye and tissue donation offers many ways to give hope, support and strength to patients waiting, recipients and donor families. We each carry the potential to help make LIFE a beautiful ride for ourselves, and then for others, by registering as a donor, considering living donation, being a caregiver and championing the cause.

National Donate Life Month is designed to educate and encourage Americans to register as organ, eye, and tissue donors, as well as to celebrate those who have saved and healed lives through the gift of donation.

On April 12, the public is encouraged to wear blue and green Donate Life colors to raise awareness of and promote donation.

The need is great. More than 100,000 men, women and children await lifesaving organ transplants. Every 10 minutes, another person is added to the waiting list. Twenty-two people die each day because the organs they need are not donated in time.

In 2018, more than 36,500 organ transplants from 17,500 donors brought new life to patients and their families. More than 84,000 corneal transplants are performed each year to restore sight. More than 1.75 million transplants heal lives annually.

There are more than 145 million people registered as organ, eye and tissue donors. You can register too by visiting RegisterMe.org.



The final week of April, April 22-29, focuses on the powerful message of ending the pediatric transplant waiting list. Nearly 2,000 children under the age of 18 are on the national transplant waiting list. More than 500 of the children waiting are between 1 and 5 years old. More than 1,900 children received transplants in 2018.

The most frequently asked questions about organ donation – and their answers:

Q. Does registering as a donor change my patient care?

A. No. Doctors work hard to save every patient’s life, but sometimes there is a complete and irreversible loss of brain function. The patient is declared clinically and legally dead. Only then is donation an option.

Q. Will I be able to have an open casket funeral if I donate?

A. An open casket funeral is possible for organ, eye and tissue donors.

Q. Does my religion support organ, eye and tissue donation?

A. All major religions support donation as a final act of compassion and generosity.

Q. Does my social or financial status play a part in whether or not I will receive an organ?

A. A national system matches available organs from the donor with people on the waiting list based on many factors, including: blood type, body size, how sick they are, distance from donor hospital and time on the list. Race, income, gender, celebrity and social status are never considered.

Q. Why register to be a donor?

A. You can save up to eight lives and heal the lives of more than 75 people. Your registration serves as a symbol of hope to patients waiting, and sharing it with your family lets them know your decision. You can register right now by visiting RegisterMe.org.



INTRODUCING **THE Emsella Chair...**

The Latest Breakthrough Treatment for Female Urinary Incontinence

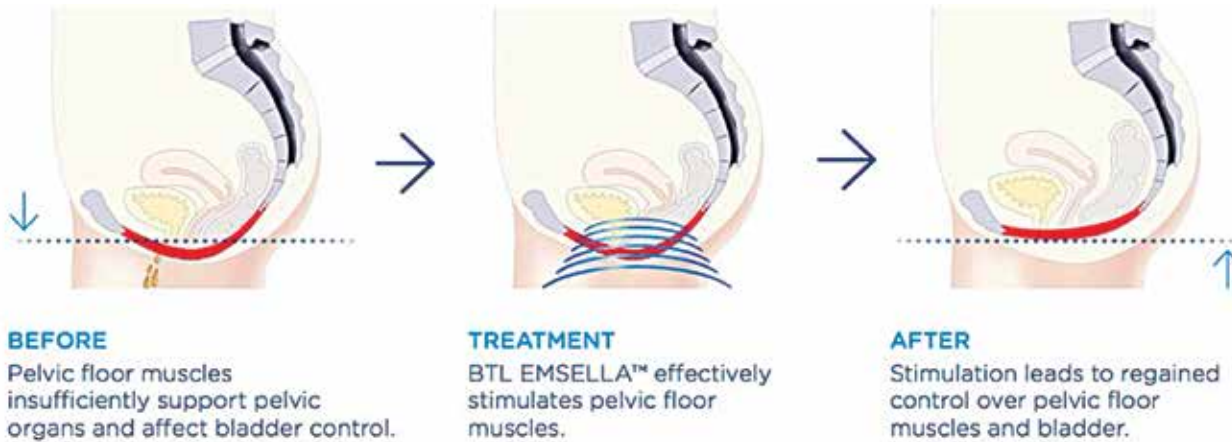


In the past, treatments for female urinary incontinence included medications, embarrassing procedures, even surgery. In May 2018, the FDA cleared the Emsella Chair as the newest, most powerful treatment for this debilitating condition. The Emsella chair is the first device of its kind for treating urinary incontinence and vaginal laxity in women. The Emsella is a chair that uses high-intensity electromagnetic field (similar to an MRI) to activate motor neurons in the pelvic floor. While this type of treatment is selective and non-invasive, it offers deep penetration into the targeted tissues of the pelvic floor and stimulates the muscles. In as few as 3 weeks, clients strongly agree their incidence of stress urinary incontinence was improved by 95%!

USED FOR THE TREATMENT OF...

Many women experience a condition called stress urinary incontinence (SUI). SUI occurs when your bladder leaks urine during physical activity or exertion. It may happen when you cough, laugh, jump, sneeze, or exercise. SUI is most commonly caused by vaginal childbirth and hormonal changes due to age. The stretching and increased laxity of the tissues causes the bladder to sag over the anterior wall of the vagina, which can interfere with the proper function of the bladder when it is full.

BODY AGING, CHILDBIRTH AND MENOPAUSE CAN LEAD TO INCONTINENCE



BEFORE
Pelvic floor muscles insufficiently support pelvic organs and affect bladder control.

TREATMENT
BTL Emsella™ effectively stimulates pelvic floor muscles.

AFTER
Stimulation leads to regained control over pelvic floor muscles and bladder.



HOW THE Emsella CHAIR WORKS...

The Emsella chair is a non-surgical, non-invasive treatment for stress and urge urinary incontinence. This treatment is delivered by comfortably sitting in an ergonomic chair fully clothed, where electromagnetic technology penetrates the targeted tissues of the pelvic floor and stimulates the muscles, building up muscle strength and restoring the support for the pelvic organs. In doing so, the pelvic floor muscles are strengthened and improved dramatically, the vaginal walls are tightened, urinary incontinence is decreased and in some cases, sexual satisfaction can be dramatically enhanced. The Emsella treatment is so powerful, during one short 28-minute treatment, it will provoke 11,200 contractions, which is equivalent to performing 11,200 Kegel exercises!

DOES THE Emsella TREATMENT HURT?

No, the treatment does not hurt. Most clients report that it feels like strong vibrations or very mild, easily tolerated contractions. There is also no downtime. The procedure only takes 28 minutes, so you can even have the procedure done during your lunch break and go back to your daily routine.

HOW MANY SESSIONS WILL YOU NEED?

The Emsella is a series of at least 6 treatments. A minimum of 6 sessions is recommended with most women needing 8-10. Since there are varying degrees of incontinence, our Nurse Practitioner Jeanna Parker will tailor a treatment plan just for you. There is no upcharge for extra sessions.

WHY WOMEN ARE SAYING YES TO THE Emsella CHAIR TREATMENT?

- Treats the entire pelvic floor
- Painlessly delivers thousands of contractions per session
- Clients remain fully clothed
- No medications, hormones or blood draws
- Completely natural treatment
- Improved quality of life
- Improvement in sleep

This unique technology revolutionizes the women's intimate health and wellness category by providing those suffering from incontinence with a completely non-invasive option.



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PDOGRO™:

What You Need to Know About the Newest Non-Invasive Treatment for Hair Loss

By Dr. Alan J. Bauman, MD, ABHRS

There is good news for men and women suffering from thinning hair, a promising new procedure just made its way to the U.S. and is being used exclusively by Bauman Medical to stimulate hair regrowth. In addition to the positive results seen in clinical trial patients, PDOgro™ is painless, can be done on your lunch break and requires no recovery time – which will no doubt be a major draw for hair loss sufferers.

HairCheck hair regrowth measurements are recommended every three months to track improvements in hair growth and to help determine when the next PDOgro™ thread treatment is indicated.

WHO CAN IT HELP?

PDO sutures have been used in various medical and surgical fields for decades, but the hair restoration field is just tapping into its potential as a hair loss treatment. Current research supports its use for stopping, slowing or reversing hair loss and promoting hair regrowth. Research has shown that PDOgro™ can be used as a stand-alone hair growth treatment or in conjunction with FDA-approved medications, low-level laser therapy, as well as other procedures including PRP, other cell therapy treatments and hair transplantation.

LOOKING AHEAD

Despite cutting-edge breakthroughs in hair transplantation thanks to the advent of sophisticated FUE technology, many patients aren't ready to take the plunge on a transplant or unable to make the financial investment, which makes therapies like PDOgro™, that can potentially reduce the need for a hair transplant so exciting for patients, physicians, and the entire hair restoration community.

WHAT IS PDO?

PDO thread insertion procedure is an exciting, new, non-invasive treatment to stimulate hair regrowth. PDO (polydioxanone) is a commonly used slowly absorbing synthetic surgical suture material that stimulates new blood vessel formation, collagen, elastin and hyaluronic acid production, as well as activates fibroblasts while it dissolves. These FDA-cleared PDO sutures have been used safely in surgery for decades and, in recent years, have shown promise in aesthetic medicine for non-surgical skin rejuvenation including tightening, lifting, and wrinkle reduction.

How does PDOgro™ work as a hair loss treatment? Dr. Bauman's unique application of the PDO threads, PDOgro™, is performed under painless local anesthesia by aseptically inserting PDO MasterThreads into the scalp in the thinning areas to stimulate hair regrowth by rejuvenating weakened follicles. This proprietary process is currently the only procedure in the U.S. using PDO threads for hair regrowth.

This painless "lunchtime" procedure works to stimulate hair regrowth through the release of growth factors and increased blood flow in the treatment area. The material slowly and safely dissolves over a period of months. The breakthrough outpatient non-surgical treatment requires no recovery, no downtime, no aftercare, and no activity restrictions.



Before and 6 months after PDOgro™ by Dr. Alan Bauman



*Before and
6 months after
PDOgro™ by
Dr. Alan Bauman*

Continued research and studies are being conducted, to help unlock PDOgro's™ maximum potential for hair loss patients. Clinical trials are now underway at Bauman Medical to determine how long the hair growth improvements with PDO threads will last as a stand-alone treatment, as well as in conjunction with other treatments.

PDOgro™ joins an arsenal of effective, non-invasive treatments used to treat hair loss and promote hair growth, including:

Platelet Rich Plasma Therapy, or PRP: Also called, “the vampire,” PRP uses your own blood, which is naturally enhanced to boost the number of platelets and key growth factors. It is then re-injected into the scalp, where it revives dying follicles and regrows lost hair.



PDOgro™ by Dr. Alan Bauman

Compounded Formula 82M: Aside from the generic minoxidil and brand-name Rogaine you find on the shelf at every pharmacy, a growing number of off-label customized compounded versions of the medication, like Formula 82M, can be obtained with a doctor's prescription. These less greasy more powerful compounded versions offer dramatic improvements over the OTC brands.

Compounded Finasteride: “FinPlus” is a specially formulated oral treatment to help men and postmenopausal women in the medical management of hair loss. This custom compound contains 25% more finasteride than the popular hair loss drug Propecia, along with a unique blend of herbs and nutrients to optimize healthy hair regrowth.

Low-Level Laser Therapy: FDA cleared low-level lasers are a key weapon in the battle against thinning. These hair growth lasers are now available in laser-embedded ball caps, which offer a discreet, hands-free treatment to the scalp without side effects.

Nutritionals & Nutraceuticals: Haircare also comes in pill form. Hair vitamins and supplements, like Viviscal Pro, Nutrafol and “SuperBiotin” can help your hair appear shinier, fuller and stronger.

The biggest takeaway should be that early intervention is the key to preventing and managing hair loss. Once you understand the cause of your hair loss, you need to determine the best way to stop losing more hair, enhance the hair you have and restore the hair you've lost. For most patients, this means using a combination, or ‘multi-therapy,’ approach: non-invasive treatments to protect the hair you have and hair transplantation to restore the hair you've lost. Some patients might accomplish their goals using only non-invasive treatments, like the treatments mentioned above.

For more information about PDOgro™, or to learn if the treatment is right for you, visit <http://www.baumanmedical.com> or call 561-220-3480.

About Dr. Alan J. Bauman, M.D.



Alan J. Bauman, M.D.
Hair Loss Expert

Dr. Alan J. Bauman is the Founder and Medical Director of Bauman Medical Group in Boca Raton, Florida. Since 1997, he has treated nearly 20,000 hair loss patients and performed nearly 7,000 hair transplant procedures. An international lecturer and frequent faculty member of major medical conferences, Dr. Bauman was recently named one of the Top 5 Transformative CEO's in Healthcare by Forbes.

His work has been featured in prestigious media outlets such as The Doctors Show, CNN, NBC Today, ABC Good Morning America, CBS Early Show, Men's Health, The New York Times, Women's Health, The Wall Street Journal, Newsweek, Dateline NBC, FOX News, MSNBC, Vogue, Allure, Harpers Bazaar and more.

A minimally-invasive hair transplant pioneer, in 2008 Dr. Bauman became the first ABHRS certified Hair Restoration Physician to routinely use NeoGraft FUE for hair transplant procedures.



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Bring a Companion to Your Hearing Evaluation

Presented by Kevin T. Barlow, Aud.D., Doctor of Audiology

Written by: Dana Luzon Coveney, Au.D, FAAA





As an audiologist, it is my job not only to diagnose a hearing problem, but to figure out what are the biggest struggles each patient has in their everyday life. Hearing loss is often very gradual and hard for a patient to recognize when it starts. When it comes to a hearing loss, most of the time it is a spouse, friend, or loved one who notices the problems in the first place. During a consultation with a patient, I aim to discover what are their biggest communication requirements and who is the person they struggle to hear the most. Having that person with you during the consultation process is really important. We address not only the patient’s hearing concerns, but the companions concern as well.

Most of the time we find that the hearing loss affects the patient’s AND the companion’s quality of life and I want to make sure to answer everyone’s questions during the consultation appointment. I ask questions about the patient’s listening lifestyles and main goals for improvements in their everyday situations. As an Audigy Certified Audiologist, I spend a lot of time making sure the patient and companion are heard and that all

of the questions and concerns they are thinking about have been answered.

If treatment with hearing devices is recommended during the consultation, realistic expectations are discussed with both the patient and the companion. Often times, I find that patients or loved ones think the hearing devices will cure the hearing problem. In reality, hearing aids have specific limitations when it comes to hearing “normally” and there are specific distance limitations as well. I counsel both the patient and companion that hearing devices work their best when you are communicating face to face at a 3-6 foot distance and they do not pick up speech clearly through walls or from different rooms. I go over so much information during the consultation the companion also acts as a second set of ears to pick up what their loved one may have missed.

Once the patient has been fit with their hearing devices, I use a program called Live Speech Mapping to verify the devices are picking up their companion’s speech at a soft and conversational level to ensure an optimal hearing experience.

It takes a team to help you achieve better hearing, having a companion with you during the process is what will help get the best results. If you feel you or a loved one are experiencing hearing difficulty, schedule an appointment today and let us be your home for hearing healthcare!

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PERMANENT MAKEUP 101:

What you should know before getting yours

Part II



In Part I we discussed the definition and essentials of PMU, its historical development, the advantages and aspects to be considered before planning any PMU procedure. In Part II we continue to answer these important questions to help you to make an informed decision about the procedure that you wish to get done. However, you can (and should) ask your permanent makeup artist any other questions that you might have. Now let the questions begin!

1. What are the reasons to have PMU done?

- *Convenience*: Some people want to save time and money by not having to do their makeup every day, yet retain the benefits of enhanced facial features.
- Difficulties to properly apply makeup due things like vision problems, arthritis, shaky hands, etc.
- Hair/color loss due to alopecia, chemotherapy, accidents, burns, surgeries, etc.
- Allergies and sensitivities to normal makeup.

2. Is PMU forever?

- It should **NOT** be. Lets clarify something: the “permanent” in “permanent makeup” doesn’t refer to the durability of the results; it refers to the fact that once it is implanted to the skin, it can’t be wiped off like normal makeup (to be

PMU “free”, it is necessary either wait months/years for the pigment to lose molecular density and fade, or to start a removal process).

- PMU pigments nowadays are designed to lose molecular density faster. Why? Because our facial features are constantly changing and what suits them now, might not in 5, 10, 15 years. And that’s why having more “forgiving” pigments that allow some range of shape/color adjustment during the “touchups” or color refreshment sessions that will be needed as time goes by, seems to be a great idea. Now when PMU is done too deep on the skin and/or with the wrong pigments, it will take longer for it to fade (sometimes it barely does) and the color will age poorly. This said; please remember that even when faded, some amount of pigment will always remain in the skin.

- Bottom line, Permanent Makeup is done with long lasting (compared to normal makeup) results in mind, but a well performed PMU procedure should start showing color fading in a matter of months (Manual techniques) or after a few years (Machine techniques).

3. So how long a PMU treatment really last?

This is a matter that depends of several factors but as a general idea, manual procedures can last between 6- 18 months and machine procedures between 2-6 years, before a color refreshment is needed. Keep in mind that the darker the color, the longer it lasts. This is why permanent eyeliner is the longest lasting procedure, and also why pure black pigments should not be used for eyebrows (with a few very special exceptions).



Lips contour and color restoration & correction



Eyebrows restoration client with partial alopecia



Upper Eyeliner for eyes shapes enhancement



Powder Eyebrows for hair density enhancement

4. What are those factors in how long Permanent Makeup really lasts?

• **Technique:** Manual techniques (microblading, soft tapping etc.) last shorter than machine techniques. This is not because the pigment is delivered to a deeper layer when using a machine as most people believe (all cosmetic tattooing should deliver pigment on the basal membrane of the dermal layer of the skin), but because the machine has the possibility of delivering larger amounts of pigment to the skin. The needles of a machine can penetrate the skin between 50 and 3000 times per minute, and that's something that can't be achieved when working manually.

- **Skin type:** Oil on the skin is one of the more effective agents for breaking down the pigment molecules. This means that oily skin type will have faster pigment metabolism, hence the color will fade faster.
- **Lifestyle:** Another powerful agent for breaking down pigment molecules is the salt in sweat, so spending a lot of time outdoors, exercising, or in saunas will prompt more frequent color refreshments.
- **Health conditions:** some health issues and medications affect the durability of the pigment in the skin.

There are still several important matters to be considered before getting PMU, but time and writing space disappear when you are having fun. In our next article we will go over some of these questions:

- What kind of technique is better when getting PMU treatments, manual or machine?
- What are contraindications for PMU?
- Why should I have a prior consultation?
- Is it painful?
- How long is the treatment time and what's done during it?
- What results can I expect?
- How long will the results last?
- What aftercare do I need to follow?
- What kind of at-home maintenance should I follow?
- What should I do if I am unhappy with my results?

For additional information visit our FB or IG "MiBella DermaStudio" pages, or feel free to contact me at:
bella.brunk@mibelladermastudio.com

*Be happy,
that's your best makeup!*



I am a Colombian native, happy wife, and a proud mom. Former psychologist & educator. Currently a practicing Esthetician & PMU artist. I just love my new life and career in the USA providing Permanent Cosmetics and Skin Care Services!



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MISSING LINKS TO RESOLVING KNEE PAIN

By Anthony Pribila, PT, DSc, CMPT, CMP, CEAS

Having strong and mobile knees are an important part of daily function. Your knees help cushion and take weight off the hips and spine. Your knees make it possible for you to squat to and from a chair, use a toilet, get in and out of your car, and climb up and down stairs.

Besides excess body weight, a past history of trauma, factors such as smoking, height, posture, poor diet, foot and knee alignment can all make a case for knee pain.

The joints of the knee are cushioned by cartilage and meniscus and kept in proper alignment by ligaments and tendons with a neurophysiological component of the nervous system ensuring smooth mechanics. A breakdown in one or more of these components can lead to debilitating knee pain. When this occurs, you may seek out the help of a physical therapist for rehabilitation. Rehabilitation is much more than giving a standard exercise sheet to an individual with instructions to ice and take medication. Proper rehabilitation requires working closely with a highly skilled therapist to determine factors that have contributed to knee pain and implementing an individualized treatment plan for lasting results.

A proper exam must include the hip, knee, ankle and spine. A thorough assessment will determine if there is a spinal component causing muscular inhibition or neural dysfunction. This can be accomplished by a palpation, strength testing, combined motion pattern testing, and a functional movement screen. Movements such as completing a proper squat are assessed for dysfunctional movement patterns. This can be due to problems with functioning of the spine, hip, knee and ankle. Typically, a person will need good mobility of the ankle and hip with good stability of the spine and knee. Often forgotten components of the knee include assessment of the patellofemoral and proximal tibiofibular joint. A proper functioning knee also has a rotation component to it of 6-11 degrees for normal biomechanics. Both knees should be compared and assessed for anomalies and treated accordingly.

Treatment should begin with patient education on their condition, restoring joint mechanics and mobility through joint specific manual therapy techniques, localized pain or inflammation reducing modalities and formulating an individualized exercise program tailored to address your individual deficits. Specialized knee mobilization techniques may include oscillatory traction to the tibio-femoral joint to relieve knee pain while providing improved synovial fluid motility. Superior tibio-fibular joint mobilization may be performed especially when the client has IT band syndrome. Sacroiliac joint mobility is also assessed and treated as needed as this may cause a functional leg length discrepancy leading to weight shifting with compensatory movement patterns in standing and with gait. Exercises will include muscular trigger point releasing techniques, stretching, strengthening, and at times self-mobilization techniques to reinforce



treatment. Taping can also be performed in the form of Kinseio-taping, or most often joint taping to assist in achieving pain free mobility instead of limiting it. Aquatic therapy is a great starting point for some clients who are arthritic or have trouble exercising on land. This heated and buoyant environment minimizes weight on the joints allowing for resistance exercises while minimizing joint pain. TRS has a pool therapy program in our Lakeland location where we provide one on one care for individuals post injury or once healed post-surgery. This also allows for an excellent transition from a pool therapy program to our out-patient clinic.

Footwear is another important component that should be addressed as poor fitting shoes or shoes that give improper support can cause pain from the foot all the way up to the spine. An example would be an individual with high arches and rigid feet often needing loose fitting shoes to allow for foot mobility compared to someone with flat feet needing ridged shoes to help absorb stress. In certain situations, custom orthotics may be recommended. TRS offer's two different types of orthotics; one is a hard plastic custom molded orthotic and the other is a softer but still supportive custom orthotic which is often more economical for clients on a budget.



Our goals are to provide a reset for your body by finding and correcting areas of biomechanical dysfunction, reinforcing those areas treated with a specific exercise plan, support in the form of taping, orthotics or bracing and gradually reloading tissues to allow for proper functional strengthening.

Having a skilled and thorough assessment with multiple options for treatment of your knee and surrounding areas is crucial in achieving a successful outcome.

If your suffering from knee pain call us today at **813-876-8771** or check out our website: **www.therapeuticrehabspecialists.com** for more information on our rehab and wellness program. We have three offices for your convenience located in Lakeland, Brandon and Pinellas Park.



Brandon
Physical Therapy Office
 1129 Professional Park Drive
 Brandon, FL 33511
813-876-8771

Lakeland
Physical Therapy Office
 1826 N. Crystal Lake Drive
 Lakeland, FL 33801
813-876-8771

Pinellas Park
Physical Therapy Office
 6231 66th Street North
 Pinellas Park, FL 33781
727-470-6070

therapeuticrehabspecialists.com

An Easy Fix for FLAT FOOT

Those suffering from flat feet know how problematic it can be throughout life.

The key to mitigating a life of problems is early recognition & treatment.

A parent's suspicion of flat feet often begins when their children begin to walk. However, all children's feet are pudgy at birth and through the early years of walking. The real sign of flat footedness usually occurs from ages 3-5 when an arch fails to form. In other words, the flatness should go away, if it doesn't resolve at age 5 you can assume it's an issue that should be further examined by a medical professional.

-The common misconception that the flatness will resolve is incorrect. Just like any other deformity, it will not autocorrect.-

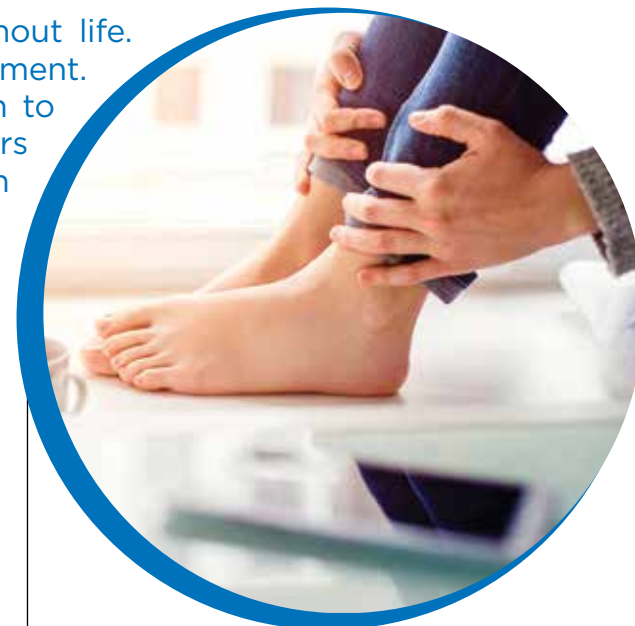
What's important to understand is balance. The development of the anatomy under normal circumstances and what happens when circumstances aren't normal. I'm speaking of course of the foot and how it functions beneath our weight, with every step. Ideally the thousands of steps taken daily by all people, especially children, we want to ensure balance. My belief is, balance encourages normal anatomical development and more likely lifelong normal function.

The bones of a child are soft and constantly changing as they progress toward skeletal maturity. Think of a sack of potatoes. The more you bang the bag around, the more bruised, softened and mashed they become. Imagine the potatoes are the bones of a child. And although even the worst of circumstances doesn't flatten or bruise the bones like potatoes, they are subject to abuses of walking and imbalance. This leads to the adult flat foot. It's not to say there aren't other ailments that can lead to a flatfoot, but this is one very common cause.



Here you can visibly see the progression of the deformity, and how it affect the structure of the foot over time. Hyperpronation becomes worse and secondary deformities (Bunions and hammertoes) begin to form.

So, what happens and where does the imbalance come from. It's essentially malalignment. The misalignment happens mostly due to flexibility, sure kids are flexible, and some adults too. This is easily found with examination. In my opinion it is balance and a balancing act really. The bones under the ankle interdigitate together through 3 surfaces like 2 inverted tripods against one another. Those surfaces are relatively small and support all the weight of the body. They need to remain in close opposition for the balance act to occur, all the while walking. When the ligaments and soft tissues around them are weak, the interdigitating surfaces of the tripod fall passed one another and collapse the natural space in between them. This collapse as a child is a "Small Problem". Now imagine thousands of steps per day and years of imbalance resulting in a variety of symptoms and subsequently a "Big Problem".



So, what is this *natural space* that we're so concerned about? It's shaped like a funnel and is called the sinus tarsi. God created this funnel and it functions like a natural axis of rotation. Like a wheel on your car the feet function to move us along. But unlike a wheel that spins the bones of the feet recreate this effect through rotation of the funnel.

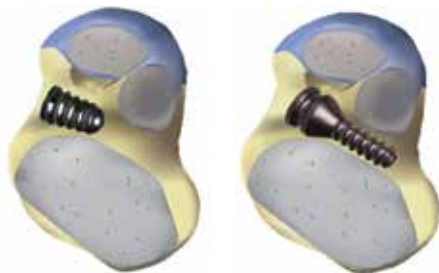


This space needs to remain **open** for the “balancing act” to occur. This space is precisely where the instability occurs.



Above is an x-ray of a patient whose feet are misaligned. You can clearly see the space between the ankle and heel bone (sinus tarsi) is collapsed.

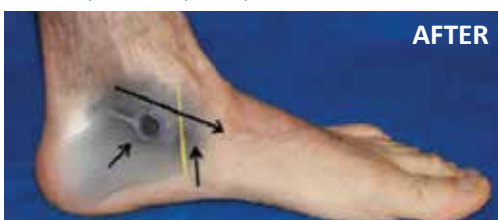
Imagine an axle with wheels like on your car. To maintain a smooth ride your axle must be true and free of imperfection. The flat functioning foot has a weak axis of rotation and is overly flexible. So how to fortify the axis of rotation? A simple and minimally invasive procedure that's been around for a long time and addresses the imbalance. Introducing Gramedica's HyProCure Stent. A small fix for a small problem. Technically the term to describe the procedure is called Subtalar arthroeresis. Consider it a blocker of abnormal motion. It's a small titanium device that looks like a dowel. Note in picture below, how the HyProCure stent pictured right is anatomically correct as compared to the older device on the left. The stent is inserted down the funnel of the axis of rotation in the foot. It strengthens and preserves the space like the axle of rotation on your automobile.



Older device left, the HyProCure Stent pictured middle

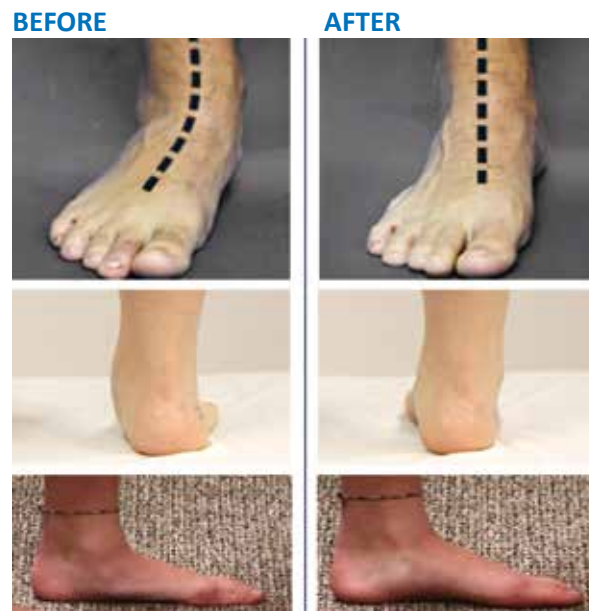


You can visibly see collapsed space and the flatness of the foot.



You can visibly see the stent has been placed and the arch has been restored.

Although it's not perfect and cannot give you the foot of a gazelle, it's very powerful and result are immediate as observed in the image below.



We know if the flat foot doesn't resolve fairly young, it's not going away. As time wears on the child becomes the adult and the deformity will continue worsening. It's likely to be related to many other deformities and a continued worsening flat foot. At this point, it's likely to be related to more complex problems in adulthood requiring invasive corrective surgical procedures. “Big Problem requiring a big fix” as pictured below.



Reconstructive Surgery

While This can be effective, it destroys the integrity of the foot, and required a long painful recovery process.

Or the less invasive and clearly effective minimally invasive technique to restore balance as pictured:



HyProCure

Easy insertion. Typically done in about 15 minutes. No permanent damage to the bone of joints.

Big fixes are sometimes necessary, but most of the time fixes are best when they are done early. Early intervention begins first by realizing the flatfoot deformity is present and not going away. Then by addressing the flexibility in the soft tissues we can provide the successful balancing that's ideal for long term development.

The insertion of the HyProCure stent is a minimally invasive procedure performed through a 2 cm incision and takes approximately 20 minutes under general anesthesia. The procedure is fairly basic and cost effective. Although best done in the younger patient, I've performed the procedure successfully in many adults as well. In the appropriately chosen patient, age is irrelevant.

Post procedure care often involves a walking boot for up to 2 weeks, or longer if necessary. Generally, patients are walking immediately, unlike other reconstructive techniques. This is a hospital-based procedure, at the moment, but for those without insurance we've developed reasonably priced options that can be done in the office. Complication rate is very low and the outcome is very effective. Moreover, if the implant if not well tolerated by the patient it can be removed just as easily as it was inserted. So, before you accept that your child will outgrow a flatfoot deformity, think again. Small problem – small fix, the HyProCure Stent. Contact our office for more information.



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midfootanklevein.com

WHAT IS A PERSONAL MEDICAL CONCIERGE AND HOW DO YOU GET ONE?



Q: “What is a Personal Medical Concierge?”

A: “I always tell my patients to think of me as their personal assistant for all their healthcare and wellness requirements. No matter what it is; whether they are feeling unwell, want to know about the medication they are taking or if they need to make an appointment with their Medical Doctor, all they have to do is call me on my personal number at any time, and I will help them in whatever way they need. Once assigned to a patient it is my job to get to know them, understand their conditions and circumstances and then be available to them any time to help them in any way that I can. In short, I work for the patient.”

Q: “What qualifications do you need to be a Personal Medical Concierge?”

A: “The minimum requirement is to be a qualified Medical Assistant with a minimum of three years of experience. As you can imagine, being able to provide patients with the information and support they need whenever they need it means being qualified is essential.”

Q: “What is the benefit of having a PMC?”

A: “Actually, there are many benefits, but probably one of the main benefits is the fact that my patients have my direct contact number; someone they know personally always available to help them with their healthcare and wellness needs 24/7. For example, with many medical centers, you can only reach them when they are open. Also, you do not have one specific person that you can speak to, you have to ring the reception and whoever picks up the call ends up dealing with you. A receptionist is unlikely to be medically trained and will not know who you are from a medical standpoint, so all they can do is take your details and refer you to someone else, get someone to call back or make an appointment for you. When a patient calls me, I know exactly who they are and what their medical status is. It means I can start to help my patients directly the minute I pick up the phone.”

The reinvention of healthcare by Reliance Medical Centers means that many seniors can now get their own Personal Medical Concierge. To find out more and understand the benefits of having a PMC I decided to visit Reliance Medical Centers to interview two PMCs and find out what they do and how patients benefit.

Q: “Can you give me an idea of the range of things you do for your patients as a Personal Medical Concierge?”

A: “It really comes down to the individual needs of each patient. My job description is simple, provide whatever support I can to keep the patient healthy. It is my job to get to know the patient and help them as required, both reactively and proactively. It can be as simple as following up with our in-house pharmacy to see if a prescription is ready for delivery, or it can be more complex such as discussing their medication and making sure they know when it needs to be taken.”

Q: “What do you mean by proactively?”

A: “In addition to taking calls from patients and helping them, because I am always aware of their medical status at any given time, I put time into my schedule to follow up with them as and when needed. I make sure that they are feeling well, perhaps call to find out if they have any questions or even follow up with them in the event they have had an appointment or procedure with an external provider. I do what I can to take care of my patients and ensure their best health outcomes.”

Q: “How are you able to keep up to date on the status of any given patient?”

A: “I am one member of an eight-member Care Focus Team. All patients get allocated one of our Care Focus Teams, and each team is headed up by a Medical Doctor, i.e. the Primary Healthcare



Delmira Rosario

Physician of the patient. Each morning and regularly in the evening we all meet to review our patients and make sure that each of us in the team is following through on what needs to be done to ensure that our patients are getting the VIP medical service that they deserve.”

Q: “Who can apply for a Personal Medical Concierge?”

A: “Any senior can apply for a PMC. If they have an approved Medicare Advantage plan, then they can immediately sign up to one of our Care Focus Teams, which includes a Personal Medical Concierge. If the patient does not have a Medicare Advantage plan, then they can meet with our Patient Navigator; he will help the patient review



Jessica Joe

all the different options so that they can make the right choice for them.”

Q: “How does a senior apply for a Personal Medical Concierge?”

A: “That’s simple; they just have to call our main switchboard, explain that they would like to find out about how they can get their own Personal Medical Concierge assigned to them and come in for a discussion and tour of the facility.”

The above Q and A covers just a small portion of my interview. Having listened to everything the Personal Medical Concierges had to say, I only have one thing to say about getting a Personal Medical Concierge – I want one!



Reliance

MEDICAL CENTERS

LOCATIONS

Lakeland

3655 Innovation Dr.
Monday – Friday: 8am – 5pm
Saturday: 9am – 1pm
Lab: 7am – 4pm

Winter Haven

111 Avenue A SE
Monday – Friday: 8am – 5pm
Lab: 7am – 4pm

RelianceMedicalCenters.com

Relieving Anxiety and Depression with CBD



The intriguing anatomy and process of our brains help us to better understand the production of fear, anxiety, worry and the decision to take flight or to fight. Although medical professionals are still discovering new reasons for depression and anxiety to this day, we know that a tiny portion in the brain called the amygdala, stores emotional and threatening thoughts, along with memories from our early childhood to present day.

There are neurotransmitters throughout the entire body that send signals to the brain, alerting you instantaneously of real or perceived danger. Stress is made up of both psychological and physical symptoms. The psychological part creates the nervousness, fear and worry, while the physical aspect produces sweating, rapid heart palpitations, a rise in blood pressure, nausea and shortness of breath.

When anxiety disorders are left untreated or undertreated, several areas of the brain like the hippocampus (regulates emotions) and the prefrontal cortex (decision making, planning abilities) shrink causing long-term damage.

The standard care is behavioral therapy, counseling, and anti-anxiety medications. The problem is treatment is often just not enough due to the brain's complexities, and anti-anxiety meds are addictive and very often fail to keep working for many patients.

What's the alternative? Our brain and nerve cells have cannabinoid receptors, so our bodies naturally react to cannabis (industrial hemp). The structure of cannabis interacts directly with our cells. Our natural endocannabinoid system works synergistically with industrial hemp, creating a multitude of beneficial reactions in the body. The endocannabinoid cells have tiny receptors that take in chemicals and produce responses. This natural system in our bodies regulates things like mood, sleeping, immunity, pleasure, memory and much more.

What is CBD oil? Well, most of us have heard about the health advantages of Hemp or Marijuana, but the major difference with CBD is that it has none of the psychoactive factors or intoxicating effects of cannabis. The THC level (the chemical that makes one high) is removed through an extraction process. In most cases CBD oil is primarily free of the mood-altering components; this is especially the case with the CBD oil used in Your CBD Store Lakeland's organic products.

Our brain and nerve cells have cannabinoid receptors, so our bodies naturally react to CBD oil (cannabinoids) through intermingling directly with our cells. Our natural endocannabinoid system works synergistically with CBD, creating a multitude of beneficial reactions in the body.

Even though it is not prescription, CBD derived from Hemp Oil is becoming a trusted source of many medicinal benefits. CBD can be used to target many conditions.



Why Choose Your CBD Store Lakeland? Their SunMed Products are Superior!

SunMed Broad Spectrum Hemp Oil products are made with the highest quality, organically grown hemp; it comes from Denver, Colorado and is registered with the Colorado State Department of Agriculture. The phytocannabinoid rich (PCR) hemp has a naturally high CBD level, as well as an abundance of other beneficial cannabinoids (CBG, CBN, CBC) as well as flavonoids, terpenes and essential amino acids.

While most CBD oil companies extract CBD making a pure CBD isolate, SunMed offers a high-CBD broad spectrum hemp oil, without the THC. By extracting the THC patients can gain the benefits of other cannabinoids and terpenes that are lost in pure CBD oil products available from other brands.

SunMed Broad Spectrum Hemp Oil and SunMed Hemp Oil products are intended to be used as an herbal supplement. Please consult your doctor before you quit taking any medications with intentions of replacing them with the natural and holistic option of CBD.

These products have not been reviewed by the U.S. Food and Drug Administration (FDA) and are not approved treatments for any medical conditions.

Your CBD Store Lakeland

At Your CBD Store, we believe in bringing the highest quality CBD products to market. We formulate our products with our customers' needs in mind, using other cannabinoids and terpenes, creating unique synergies that increase efficacy, target specific ailments, and increase the binding of CBD. We believe you the customer should see our product from soil to oil and should be seeing the best product on the market along that journey. By setting the standards in the CBD industry, Your CBD Store Lakeland is moving plant medicine to the 21st century.



Your CBD Store®

Your CBD Store Lakeland

3145 S FL Ave., Lakeland, FL 33803

(863) 937-3195

Lakeland.CBDrx4u.com

Help detect children at risk of autism earlier!

“8 Basic Early Autism Signs”

By peptalkbox



As of 2012, one in 50 kids between the ages of 6 and 17 had some form of autism, compared with one in 88 only five years earlier. Some recent studies suggest that, with early intervention, as many as one in five children on the autism spectrum can recover to the point where they are no longer considered autistic.

Behavioral, occupational and speech therapies may make the difference, and the key is timing! Detecting children at risk of autism as early as 6, 9, 12, 18, 24 and 30 months of age could be a life-changer. Unfortunately, most children with some form of autism are diagnosed at 5 or older, too late to benefit from early intervention.

First social and communication warning signs can be easily missed by parents and doctors, often because of a lack of awareness about early autism symptoms.

First Six Months

Sign 1: No big smiles or other warm, joyful expressions

Did you ever smile at a baby and he gives you a great big toothless grin back? By a certain age, most babies respond to a facial expression or a smile, especially from a parent. Typically, babies start to laugh and squeal by around six months of age. But it is also important to understand, some babies are all smiles while others are a little more subdued. Variations in how much a baby smiles are also normal. In addition, babies start showing joyful expression at different ages. But if your baby is not smiling by about six months of age or laughing in response to your playfulness by a year, it can be an early sign of autism.

Infants typically smile when smiled at, but babies with developmental delays often don't respond to smiles from caregivers. Diagnosing autism early helps children get the services they need to help them achieve their highest level of functioning.

Other signs to watch for during this period:

- He or She doesn't respond to loud noises.
- He or She doesn't follow moving objects with her eyes.
- He or She doesn't grasp and hold objects.

By Nine Months

Sign 2: No back-and-forth sharing of sounds, smiles or other facial expressions

father, son, dad, kid, boy, parent Infant does not try to imitate sounds and movements others make, such as smiling and laughing, during simple social exchanges.

Early signs of autism in babies and toddlers often involve the absence of normal development, not the presence of abnormal behavior. For example, if your baby does not make eye contact when you are doing things, such as feeding or playing with her, it could be a sign of a problem. In general, babies are interested in faces and will meet a parent or caregiver's eyes at least some of the time. If your baby or toddler resists eye contact on a regular basis, it could be an early warning sign of autism.

Infant does not try to imitate sounds and movements others make, such as smiling and laughing during simple social exchanges.

Other signs to watch for during this period:

- He or She doesn't smile at people.
- He or She doesn't babble.
- He or She doesn't pay attention to new faces.
- He or She doesn't turn her head to locate where sounds are coming from.
- He or She shows no affection for you.
- He or She doesn't laugh or make squealing sounds.

By 12 months

Sign 3: Lack of response to name

An infant should generally respond to his or her name with increasing consistency from 6 to 12 months of age. Lack of responsiveness to one's name is a sign of developmental delay.

Other signs to watch for during this period:

- He or She doesn't reach for objects.
- He or She doesn't smile on her own.
- He or She doesn't try to attract attention through actions.
- He or She doesn't have any interest in games such as peekaboo.
- He or She doesn't crawl.

By 14 Months

Sign 4: No babbling or 'baby talk'

Babbling refers to the sounds that babies make before they begin to talk, such as vowel and consonant combinations like "ba," "da," and "gee." At 14 months, kids should should look at someone while they babble, and take turns babbling with caregivers (like a back-and-forth babbling "conversation").

Speech delays are not always due to autism. There are several conditions that can lead to delayed language development. But in many instances, toddlers will compensate for language delays by finding ways to communicate other than using words. For example, babies and toddlers who do not use any words will make gestures and point to objects. Babies will often lift their arms up to let you know they want to be picked up. This type of nonverbal communication is also part of language development, which children with autism may not display.

Other signs to watch for during this period:

- He or She doesn't use gestures such as waving or shaking her head.
- He or She doesn't point to objects or pictures.
- He or She can't stand when supported.

By 16 Months

Sign 5: No back-and-forth gestures, such as pointing, showing, reaching or waving.

This includes things like pointing to ask for things (pointing to the cookie bag up on the shelf) or pointing to get someone's attention (pointing to an airplane flying by). Children at this age should also be reaching to be picked up, waving, and shaking their head (for "no"). This period is pretty similar to the 14 Month Period. Speech delays are not always due to autism.

Other signs to watch for during this period:

- He or She doesn't use gestures such as waving or shaking her head.
- He or She doesn't point to objects or pictures.
- He or She can't stand when supported.

By 18 Months

Sign 6: No spoken words.

Paradoxically, many researchers now argue that in order to better understand and treat this subgroup of nonverbal people with autism, the field needs to move beyond focusing on speech production. Emerging research suggests that seemingly unrelated issues, such as motor skills and joint attention, may instead be key.

Some children with autism may be under sensitive to sound or touch. They may not seem to feel pain. For instance, a child with autism may not cry when they fall and obviously cut themselves. The opposite can also be true. Some children are overly sensitive to touch. For example, they may not like the feel of fabric against their skin or certain textures of food.

Other signs to watch for during this period:

- He or She can't walk.
- He or She doesn't speak more than 15 words.
- He or She doesn't use two-word sentences.
- He or She doesn't seem to know the function of common household objects, such as a telephone, fork, and spoon.

By 24 Months

Sign 7: No meaningful two-word phrases that don't involve imitating or repeating.

Not looking at caregivers when communicating or playing with them, not imitating actions like clapping hands, banging on a drum, or people's speech sounds. Not looking in the direction of a caregiver's finger when he or she points to something. For example, a typical 12- month old will look when their mother points to a toy on the shelf.

Babies thrive on affection. In fact, research shows babies who do not get cuddled or shown physical affection can have development delays. Although babies and young children do vary on how much snuggling and affection they enjoy, most babies and toddlers do enjoy hugs and affection from their parents. Babies who do not want to be touched may resist cuddles or squirm to get away from a hug. You may also notice your baby is excessively fussy with no known cause and is hard to comfort. This resistance to affection may be due to sensory disorders issues that can accompany autism. Additionally, some children with autism have a difficult time showing expressions of affection and bonding.

Other signs to watch for during this period:

- He or She doesn't imitate your actions or words.
- He or She can't push a wheeled toy.
- He or She doesn't follow simple instructions.

**By Any Age**

Sign 8: Any loss of speech, babbling or social skills.

This type of regression doesn't happen with all children with autism. But approximately 20 to 50 percent of parents of children with autism report that their child lost some of his or her skills during the second year, usually around 18 to 24 months of age.

Babies and young children are quickly learning all types of things from language skills to walking. In fact, it may seem your toddler learns several new words every day. But if your child seems to be regressing and losing skills, words or social connections, it could be a red flag.

It's important to understand if your child displays some of the symptoms above it does not necessarily mean he has autism. There are normal variations in development. Parents should understand children reach developmental milestones at different ages. Comparing every milestone stone with a friend's baby may cause unnecessary stress.

Other signs to watch for during this period:

- He or She doesn't follow simple instructions.
- He or She doesn't smile on her own.
- He or She pays more attention to objects than people.

What to do if you're concerned

If your child has any of the early warning signs of autism, seek help right away so that s/he can receive the intervention s/he needs as early as possible. Despite the fact that we know more about the early signs of autism, the reality is that many children are still not diagnosed until around age four. Trust your instincts if you are concerned. The earlier a child receives the intervention he needs, the better his outcome will be. If you are concerned about your child's communication development:

- **Talk to your child's doctor** – the American Academy of Pediatrics recommends that doctors screen children for autism at the 18- and 24-month check-ups. However, if you feel that your child has some of the early signs of autism, speak to your doctor as soon as possible.
- **See a speech language pathologist** – speech-language pathologists are trained to assess communication skills in very young children, including "social communication skills." These are the types of communication skills affected in autism.
- **Do not "wait and see"** – if you suspect your child is slow in his or her social and communication development, seek help as early as possible.

Please visit www.PepTalkBox.com for more information.

REPLACE BAD HABITS WITH BETTER HABITS & IMPROVE PERFORMANCE WITH VIBROACOUSTIC THERAPY. A GENERIC THERAPEUTIC MODALITY AND A SELF-HELP TOOL

FROM THE MINUTE WE WAKE UP, WE ACTIVATE OUR HABITS IN AN AUTOMATIC WAY. OUR MISSIONS, SUCH AS GETTING READY TO SCHOOL / WORK ARE BASED ON HABITS.



WHAT IS A HABIT?

"A habit (or wont) is a routine of behavior that is repeated regularly and tends to occur subconsciously.... Old habits are hard to break and new habits are hard to form because the behavioral patterns which humans repeat become imprinted in neural pathways, but it is possible to form new habits through repetition." - Wikipedia

From a pragmatic perspective, habits serve a good functional purpose. Habits consume less energies when we execute things– We don't think about how to take a shower, or place dishes in the dishwasher. Driving is a habit; We get into a programmed mode

which enables to arrive to our destination while talking on the phone, listening to music or think about our next vacation.

The problem starts with our bad habits. They may be destructive to our health, wellness and wellbeing.

WHY DID WE START OUR BAD HABITS ANYWAY?

Obsessive or too much drinking, eating, smoking, computer gaming are examples of bad habits. They started to serve a purpose of an escape of stress and/or conflict and /or social pressure, and / or a desire. At some point many people with bad habits understand their negative consequences on their personal life and

the impact on the significant people they interact with at home and at work. That is awareness. – Aha moment of facing yourself in the mirror and saying:" this is not good for me, it's harming my relationship or my job, what shall I do? ... "

For some, the awaked awareness in itself, and realizing the negative impact of the bad habit may lead to a decision of adopting better lifestyle and stop the bad habit. For instance – some people decide to stop smoking and they do it all at once. In most of the cases, however people may try better habits as a replacement but it will be very challenging, non-consistent and eventually they will be stuck with the bad habit. If you read again the definition at the beginning of this article, you understand that once a habit is embedded as a neutral pattern it creates conditioning of bodymind – a pattern of behavior that is activated in certain circumstances.

HOW CAN WE REPLACE BAD HABITS WITH BETTER HABITS?

You may go to a hypnotherapist or a psychotherapist which may be effective, depends on their professional expertise, their personality and the chemistry between you two.

You may also explore what triggers from the external world and your internal conditions activate your habits. Observe your 24X7 and write a journal. This is a great opportunity to realize what causes you to operate in an conditioned bodymind way.

HOW CAN VIBROACOUSTIC THERAPY HELP IN THE PROCESS TO REPLACE BAD HABITS WITH BETTER ONES?

Vibroacoustic therapy equipment (mats/ pillows / teddy bears) is a wellness generic, holistic and integrative balancing therapeutic modality and self-help tool. Olav Skille the inventor of Vibroacoustic Therapy (Norway/Finland), found the correlation



between specific harmonic low sound frequencies and reduction of pain and stress in various parts of the body. In addition, other frequencies help reduce insomnia, fatigue and anxiety. **One of the frequencies brings you into deep meditation or self-hypnosis state of being. In this inner mental condition, you can insert a new positive habit to replace the bad one.**

The steps to replace a bad habit with a better one:

1. Calm and clear the desktop of your mind and reduce mental, emotional and physical stress while having a Vibroacoustic Therapy session. **Vibroacoustic Therapy is the easiest, soothing, most effective and effortless way to reduce stress daily.**



2. Focus on visualizing imagery and/or positive experience, which manifests in your mind, that resonates as a good replacement of the bad habit. For instance, if you come back from work, drink 3 beers and eat potato chips. What comes to your mind as a replacement for a beer? Vegetable juice with pepper? Seltzer with ginger? and instead of potato chips? Fresh cauliflower, carrots and cucumbers?
3. Write a scenario which describes how you activate the new habit and visualize a huge X on your current habit. Record yourself describing what happens as you are enjoying the flavors and the taste of the new habit and play it while you are have an additional session on the mat in a self-hypnosis mode.
4. When the time comes to the regular 3 beers ritual, with awareness, activate and replace it with the new scenario. Only this time in real in your living room.
5. Add some physical exercises on the Vibroacoustic Therapy mat to feel good, active and happy.

At the beginning the new scenario will take place as result of will power and awareness. The more you activate it into your life, it will be embedded in your subconscious as a new positive habit that will come naturally. Motivation and passion will grow as your bodymind realize the benefits of drinking and eating healthier substitutes and feeling good and vital.

Life is a serious game of awareness. With Vibroacoustic Therapy you can stop being a slave to your bad habits and start being a creative self-manager of your being.

Vibroacoustic Therapy may be a great added modality to psychotherapists and hypnotherapists.



Hello I'm Avigail Berg-Panitz – the owner of TheSoundwell vibro-therapy.

I was fortunate to be mentored personally by Olav Skille – the inventor of the original Vibroacoustic therapy (Norway/Finland). We use his original harmonic frequencies compositions in our products – (vibroacoustic therapy mats, pillows and teddy bears), to facilitate inner body massage to organs, tissues and cells.

I'M AN ENERGY HEALER, MEDITATION FACILITATOR, VIBROACOUSTIC THERAPIST AND WELLNESS-WELLBEING LIFE COACH. I HAVE MA IN HOLISTIC HEALTH FROM LESLEY UNIVERSITY.

My perception is based on providing tools for bodymind balance so that you can drive life and enjoy your life journey – your way.

You are welcome to set an appointment with me to map your challenges and together create a plan to clear your mind from clouds of thoughts, emotions, sensations, memories, imagination and belief system that limit your advancement and drain your vitality.

The tools we will be using to dynamically balance mental and emotional systems:

Energy healing, Vibroacoustic therapy, meditation, wellness-wellbeing coaching and expressive-creative writing.

I advise therapists, physicians, chiropractors and individuals of how to dynamically balance bodymind and integrative vibroacoustic therapy to increase life quality and recharge vitality.

Contact me today to set an appointment
www.vibro-therapy.com
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 914-433-2849



Vibroacoustic therapy is a wellness balancing platform and does not replace medical diagnosis and treatment.



by Andrew M. Curtis, ESQ



TRUSTS ARE NOT JUST FOR THE WEALTHY



Perhaps the most common misconception among the general public concerning the areas of wills and trusts is the notion that if a couple owns less than \$5,000,000.00 in assets, that they don't need a revocable living trust. This is a false notion. For example, I recently had a fellow come to my office whose mother has just died. All she owned was a \$50,000.00 condo, and had a will, which read "I leave my condo to my child". What could be more simple and clearer than that? Well, believe it or not, the child had to go through probate before he could get the condo, and the legal fee was \$2,000.00. A revocable living trust could have avoided this.

Another reason for having a revocable living trust is to protect against incapacity. In the trust, you designate who would manage

your assets in the event, let's say, you get Alzheimer's disease. Without a trust, court proceedings might well be necessary, and a stranger could even be designated by the court to manage your affairs.

Further, once the decision is made to have a trust, the trust can in effect allow you to "rule from the grave"! with your assets distributed the same way you would have done as if you were still alive. For example, most wills simply say that on a person's death that his or her children inherit equally. However, think about it – once your child inherits your money, he or she is completely free to leave it to whomever he or she wants, such as a boyfriend, spouse, or other non-blood relatives. So let's say your daughter dies 5 years after you, and leaves the inheritance she got from you to her husband. Even if you like her husband, this could prove



to be a bad result, because the husband could remarry and the new spouse could have children from a previous marriage, and now all of a sudden your hard earned money is going to support kids you never knew. Further, if you leave your assets to your son in a regular will, his wife could divorce him and take the money. A Solution is to leave you assets to your children in a lifetime trust. They could each use the money for their normal living, but would be protected, and upon death, the remaining assets would pass to the child's children, (your grandchildren), or if none, to the child's siblings, not to some stranger.

Another place where trusts are extremely useful is in second marriage situations. If you simply leave your assets to your new spouse, he or she is free to leave the assets to his or her children, and not to yours, once

you pass on. Instead, a trust could be used, so that your assets would be available to care for your spouse after you die, but upon the spouse's subsequent death, the assets would pass to your children, not theirs. Don't assume your spouse will, follow your wishes, because after you die, his or her relationship with your children could change with the passage of time.

Another use of a trust is to manage assets inherited by children who are not good with money. You could provide that the child would get only the income from his or her inheritance, for example.

Trusts can also be used to protect your children's inheritance in the event they go bankrupt, divorce, or face a lawsuit.. And for persons with handicapped children, a "supple-

mental needs trust" can be utilized, to make sure the government simply doesn't take the disabled child's, inheritance as reimbursement for government benefits, and to make sure the child does not lose such benefits.

Thus, there are many reasons why a trust may be advisable for even a person of modest means.

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

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Offices located in Boca Raton and Fruitland Park, The Villages

**visit www.elderplanner.com
or call 800-731-8784.**

April is Autism Awareness Month

What is Asperger's Syndrome?

History

Asperger's syndrome (also known as Asperger's Disorder) was first described in the 1940s by Viennese pediatrician Hans Asperger, who observed autism-like behaviors and difficulties with social and communication skills in boys who had normal intelligence and language development. Many professionals felt Asperger's syndrome was simply a milder form of autism and used the term "high-functioning autism" to describe these individuals. Uta Frith, a professor at the Institute of Cognitive Neuroscience of University College London and editor of *Autism and Asperger Syndrome*, describes individuals with Asperger's as "having a dash of autism."

Asperger's Disorder was added to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) in 1994 as a separate disorder from autism. However, there are still many professionals who consider Asperger's Disorder a less severe form of autism. In 2013, the DSM-5 replaced Autistic Disorder, Asperger's Disorder and other pervasive developmental disorders with the umbrella diagnosis of autism spectrum disorder.

Characteristics

What distinguishes Asperger's Disorder from classic autism are its less severe symptoms and the absence of language delays. Children with Asperger's Disorder may be only mildly affected, and they frequently have good language and cognitive skills. To the untrained observer, a child with Asperger's Disorder may just seem like a neurotypical child behaving differently.

Children with autism are frequently viewed as aloof and uninterested in others. This is not the case with Asperger's Disorder. Individuals with Asperger's Disorder usually want to fit in and have interaction with others, but often they don't know how to do it. They may be socially awkward, not understand conventional social rules or show a lack of empathy. They may have limited eye contact, seem unengaged in a conversation and not understand the use of gestures or sarcasm.

Their interests in a particular subject may border on the obsessive. Children with Asperger's Disorder often like to collect categories of things, such as rocks



or bottle caps. They may be proficient in knowledge categories of information, such as baseball statistics or Latin names of flowers. They may have good rote memory skills but struggle with abstract concepts.

One of the major differences between Asperger's Disorder and autism is that, by definition, there is no speech delay in Asperger's. In fact, children with Asperger's Disorder frequently have good language skills; they simply use language in different ways. Speech patterns may be unusual, lack inflection or have a rhythmic nature, or may be formal, but too loud or high-pitched. Children with Asperger's Disorder may not understand the subtleties of language, such as irony and humor, or they may not understand the give-and-take nature of a conversation.

Another distinction between Asperger's Disorder and autism concerns cognitive ability. While some individuals with autism have intellectual disabilities, by definition, a person with Asperger's Disorder cannot have a "clinically significant" cognitive delay, and most possess average to above-average intelligence.

While motor difficulties are not a specific criterion for Asperger's, children with Asperger's Disorder frequently have motor skill delays and may appear clumsy or awkward.

Diagnosis

Diagnosis of Asperger's Disorder has increased in recent years, although it is unclear whether it is more prevalent or more professionals are detecting it. When Asperger's and autism were considered separate disorders under the DSM-IV, the symptoms for Asperger's Disorder were the same as those listed for autism; however, children with Asperger's do not have delays in the area of communication and language. In fact, to be diagnosed with Asperger's, a child must have normal language development as well as normal intelligence. The DSM-IV criteria for Asperger's specified that the individual must have "severe and sustained impairment in social interaction, and the development of restricted, repetitive patterns of behavior, interests and activities that must cause clinically significant impairment in social, occupational or other important areas of functioning."

The first step to diagnosis is an assessment, including a developmental history and observation. This should be done by medical professionals experienced with autism and other PDDs. Early diagnosis is also important as children with Asperger's Disorder who are diagnosed and treated early in life have an increased chance of being successful in school and eventually living independently.

Source: <http://www.autism-society.org>

I Have A Wait Problem

You're reading a health and wellness magazine and you're thinking: that guy can't spell. But the truth is that you read it correctly: I have a wait problem: I don't like to wait. But who does?

Think about it... do you like to wait? Do you love sitting in the waiting room at the doctor's office? Do you look for the longest line at the grocery store so you can spend more time waiting? When the light turns green, does it make you happy when the car in front of you just sits there? Do you keep your fingers crossed that wait times are an hour at the amusement park? If you answered "no" to the questions above, then you have a wait problem too.

It's been estimated that we spend ten percent of our lives waiting. That comes out to be over two hours of everyday. I have a wait problem: I'm not very good at it. But I don't have a choice. Waiting is a part of our lives.

And waiting isn't just a part of everyday menial tasks, but big things in life too. Things like waiting for Mr. Right or Miss Perfect; waiting for your first grandchild; waiting for retirement; waiting on test results; waiting to hear back about the interview; waiting...

From a spiritual perspective, waiting is very important. So important, in fact, that God talks about it including these words: *"Even youths shall faint and be weary, and young men shall fall exhausted; but they who wait for the LORD shall renew their strength; they shall mount up with wings like eagles; they shall run and not be weary; they shall walk and not faint."* (Isaiah 40:30-31, ESV)

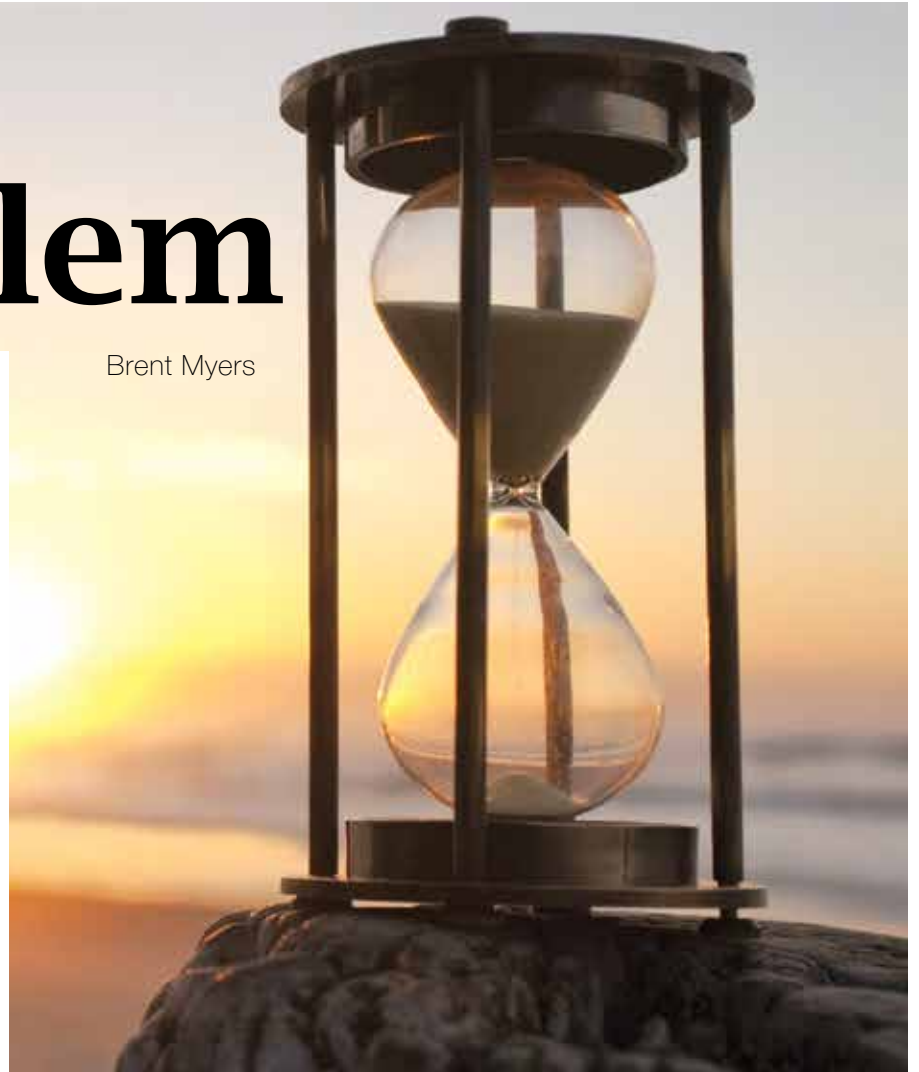
Waiting is expected by God.

Notice what he says... "...they who wait for the LORD..." Isaiah doesn't single out an individual or use the word "if". God – the creator and controller of time and all circumstances – knows we will have seasons of waiting. And He expects us to wait on Him.

God uses waiting to build our character.

Look at the different stages of development: flying high (wings), running, and walking. Waiting gets us to a place where we learn to take in the highest highs, but at the same time realize that slow and steady gets us where we need to go. Waiting helps us grow into constant and consistent forward movement in our lives... even when we are waiting.

Brent Myers



Waiting is rewarded by God.

Isaiah shows us that waiting has its rewards. Tired of being tired? Close to giving up? Don't want to wait anymore? Read the passage again: "...and not be weary..." "...and not faint..." God honors us when we wait. God rewards our faithfulness in the midst of our waiting.

Waiting is the fruit of our faith.

Finally look at this: "...but they who wait for the LORD..." When we learn to trust our circumstances to God, we show that we really believe that He is in control. We demonstrate that we actually believe that He knows best and that He works all things together for good. When we wait on the LORD, we show the depth of our faith. So... how do I get better at waiting? The ability to wait on the Lord stems from being confident and focused on who God is and in what God is doing. It sounds simple – and it is – but simple is not the same as easy (because it's not).

But look at it like this... I heard the other day, "there are no problems, only opportunities". So at least now I know I don't have a wait problem after all – just a wait opportunity (and lots of them)!



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