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September 2020

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NEGLOGISTS ONCOLOGISTS

ON ACCURATE BREAST CANCER DIAGNOSIS VIA IMAGING AND UNDERSTANDING YOUR RISK FACTORS

AUTISM SPECTRUM DISORDER

BEHAVIORAL THERAPY
PROGRAMS ARE AVAILABLE
TO HELP YOU AND YOUR
CHILD THRIVE

THE MOST FREQUENTLY ASKED QUESTIONS

ABOUT AMNIOTIC, PLACENTAL, AND UMBILICAL "STEM CELLS"

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South Tampa Edition - Monthly

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BRIDGING THE GAPS IN HEALTHCARE

IMPORTANCE OF CONTINUITY
IN PATIENT CARE DURING THE
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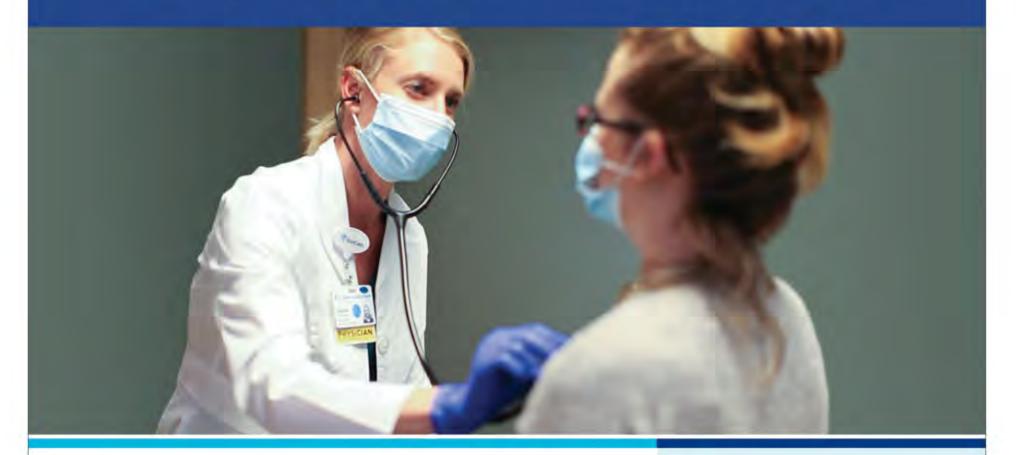
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How Nancy Went from Excruciating Neck Pain All Day, Everyday....to No Pain!

illions of people are suffering from chronic pain. Some resort to surgery and some may take pain medications to mask the symptoms or just suffer silently through it all, day in and day out, they are alternative treatments that are helping alleviate pain for countless individuals. One of those methods is radiofrequency denervation (RF).

Radiofrequency Denervation

Using light sedation and local anesthesia called radiofrequency denervation is the answer that many individuals are waiting for to alleviate their pain. Neurotransmitters directly sensitize the nerve endings in our bodies via the brain. With radiofrequency denervation, the nerves that are damaged, narrowed, or impinged, are treated with a low-level of localized heat, causing the nerve to stop sending signals to our brain through an interruption in the nerve conduction.

This procedure is entirely safe and effective. It has been used for many years, with long-lasting results for people suffering from pain. The entire process is performed and monitored under fluoroscopy, which is a moving X-ray that is visible to the surgeon on a digital screen. The nerve endings are then located through a probe that is inserted through a tiny needle into the spinal area. Once the damaged nerves are determined, a small lesion is created through the controlled heating of the probe through medium-frequency alternating current. This will alleviate the pain signals to the brain, allowing the patient to be virtually pain-free. The entire procedure takes approximately 20-30 minutes, and patients can resume normal activities within a short period of time. It is easy to reach the nerves of the hip and knee with this approach.

Radiofrequency denervation is able to treat other areas in the body as well. It is commonly used for headaches, facial pain, back pain, complex regional pain syndrome, peripheral neuropathies, trigeminal neuralgia, disc denervation, and neck pain.

A Patients Perspective

About nine months ago, Nancy began to have pain in her neck, shoulders, and arm. She also started to have numbness and tingling in her fingers. "Every time I put my arms up to use my computer, rest them on a table, or even during a manicure, my pain was excruciating. I was in pain 65% of the day." Nancy explained. Her MRI showed cervical spondylosis, which is narrowing of the vertebrae and impingement of nerves.

Like so many others, she continued to live with her pain with no relief from traditional treatments like NSAIDs (ibuprofen), and massage. When it started to affect her quality of life severely, Nancy knew she had



to do something. Her husband told her about Dr. Sunil Panchal's success in helping many patients with alternative treatment methods.

Nancy had worked in the medical field for over 20 years, and she told her husband that she would never see a pain specialist because Nancy did not believe in that type of patient care, but as time went on, she needed relief and decided to see Dr. Panchal.

"When I met Dr. Panchal, he was very thorough and spent a lot of time with me. He explained that radiof-requency denervation would be a good option, and he also was upfront that sometimes RF takes several attempts to work. I was hesitant at first, decided to give it a try." Nancy continued, "I had my procedure in early November, and my pain is completely gone. Dr. Panchal is a very meticulous physician; his patient care and follow up is also very impressive. I've had three follow up appointments with him since my procedure to track my progress, and things are perfect. In his waiting area, many of the patients like to share their stories, and there are so many people that are pain-free because of his innovative, dedicated care."

The cervical spine is often afflicted with pain and stiffness due to multiple conditions and alignment issues. Commonly arthritis plays a significant role in cervical spine degeneration, which can lead to a limited range of motion and a great deal of pain, but other conditions affect the cervical spine as well. These can include herniated discs, stenosis, facet dysfunction trauma, and improper posture. RF is an ideal procedure for many patients that want to avoid surgery and addictive medications.

Although surgery is critical in certain situations, finding alternative methods to treat the underlying condition is always the first step. The National Institute of Pain is a state-of-the-art facility that specializes in the treatment of spine and orthopedic conditions, as well as acute and chronic pain management. They provide the utmost quality of care for patients to address the problem directly, and if needed, provide for their pain management needs.

At the National Institute of Pain, they treat each patient individually, using the latest equipment and various innovative procedures to diagnose pain and determine your care needs. The National Institute of Pain's President and Founder, Sunil J. Panchal, MD, is a board-certified interventional pain/ minimally invasive spine physician. He earned his Bachelor's degree in Biology from Rensselaer Polytechnic Institute in Troy, NY, and earned his medical degree from Albany Medical College of Union University in Albany, NY, In addition, Dr. Panchal completed The Business of Medicine Graduate Program at Johns Hopkins University in Baltimore, MD. Dr. Panchal completed an internship in general surgery at the University of South Florida in Tampa, a residency in anesthesiology at Northwestern University in Chicago, IL and a fellowship in interventional pain medicine at the University of Illinois in Chicago. He previously served as co-director of the chronic pain service and director of the multidisciplinary pain fellowship training program at Johns Hopkins University and subsequently as director of the division of pain medicine at Cornell University in New York. He is a member of the North American Spine Society. the North American Neuromodulation Society, the International Neuromodulation Society, and the American Academy of Pain Medicine. Dr. Panchal has authored numerous peer-reviewed journal articles and has served as a reviewer and editor for several iournals. He is the co-editor and co-author of the textbook Comprehensive Treatment of Chronic Pain by Medical, Interventional, and Integrative Approaches (2013). Dr. Panchal is a principal investigator in numerous clinical trials, including a current study evaluating sacroiliac joint fusion. Dr. Panchal also served as the Chair of the National Comprehensive Cancer Network Cancer Pain Panel and has lectured widely at the national and international level. He is actively involved in the development of novel analgesics and neurostimulation devices, and in clinical research protocol design.

At The National Institute for Pain, their goal is to strive to deliver the highest quality of comprehensive care for those who are suffering from spine, joint, and nerve injuries. They have many alternatives to help you with your personalized treatment needs. Please visit their website at www.nationalinstituteofpain.org, or call them at (813) 264-PAIN (7246).

The National Institute of Pain

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ADVANCED AND INDIVIDUALIZED CARE

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

By Regenexx Tampa Bay, Regenerative Medicine

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

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

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

Are there stem cells in these tissues?

There are in fact stem cells in these tissues at the time of birth. However, once the tissues are processed, the cells are sterilized (killed). If these products did contain stem cells, the product would be classified as a drug by the FDA, requiring approval before being used in human clinical trials. It would not be marketable until clinical trials for each indication were completed and the drug was determined to provide benefits that outweigh its potential risks. This takes many years and can cost \$1 billion or more. No wonder some unscrupulous companies want to bypass this process. The FDA has issued enforcement letters to companies selling unapproved products stating that their products are regulated as drugs. However, until now, the FDA has only enforced these rules sporadically expecting that the industry would regulate Itself. Unfortunately, companies knowing the FDA has stated that they won't get aggressive with enforcement until Nov. 2020, have flourished.



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

What else does amniotic fluid contain?

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

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

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

How do you know these vials contain no stem cells?

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

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

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







James Leiber, D.O. | Ron Torrance II, D.O. | Ignatios Papas, D.O.



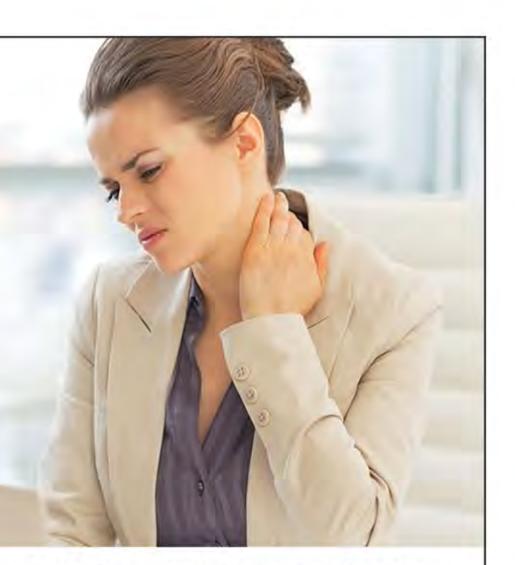
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A Breast Surgical Oncologist's Insight on Accurate Breast Cancer Diagnosis via Imaging and Understanding Your Risk Factors

here are multiple types of breast cancer, and it affects both men and women. Importantly, the statistics of survival are increasing, mostly due to patient education and early diagnosis. In the United States, the CDC reports that over 276,400 women are diagnosed with invasive breast cancer annually, along with 48,530 new non-invasive breast cancer cases. Breast cancer also affects approximately 2,600 men each year.

We caught up with BayCare's Breast Surgical Oncologist, Dr. Lago Toro, to find out more about the importance of early diagnosis, genetic testing, and risk factors.

Imaging

I encourage patients to get a mammogram yearly, and if they are high risk or have had breast cancer before, they ideally should be screened for high risk. High risk screening entails mammograms and MRIs on a yearly basis but staggered every six months along with a clinical breast exam. Many patients have dense breast tissue, making it challenging to accurately diagnose them with traditional mammography. High risk screening allows for a more in depth exam of the breast tissue.

Screening Recommendations

The American Society of Breast Surgeons recommends, women less than 25 years of age should undergo formal risk assessment for breast cancer. Women with an average risk of breast cancer should initiate yearly screening mammography at age 40. Women with a higher-than-average risk of breast cancer should undergo annual screening mammography as well as offered yearly supplemental imaging, such as MRI; this screening should be initiated at a risk-based age. The MRI and Mammography can be alternated every six months for those with any high-risk factors.



The Role of Genetics and Other Risk Factors

Genetic risk factors and breast malignancies require multi-panel genetic testing. Multi-panel testing is a type of genetic testing that looks for mutations in several genes at once. A family or personal history of breast or other cancers, as well as specific hereditary genetic mutations, can leave you at a significantly higher risk of developing breast and different types of cancer. The multi-panel genetic testing, regardless of sex, can facilitate early diagnosis and increase survival rates.

We do genetic testing in our office. If there is a first-degree family history, for example, if a mother or sister was diagnosed at age 40, we recommend that the patient start screening mammograms ten years prior to their family member's age of diagnosis. While I believe at home exams are important, it's critical to have a clinical physical examination with your OB/GYN or PCP, since they can palpate and find early signs and lumps to facilitate the patient's imaging needs. Early diagnosis stipulates a 97% survival rate.

Some of the symptoms to look for are palpable masses around the breast and the armpit region, nipple discharge (especially spontaneous), skin changes, dimpling, pain and nipple retraction.

Biopsy and Treatment

If an abnormality is detected on imaging, we are able to perform a minimally invasive biopsy (ultrasound-guided core biopsy, stereotactic core biopsy, or MR-guided core biopsy) procedure that uses image-guidance to see if the abnormality is benign or malignant.

Not every benign lesion needs to be surgically removed. There are multiple options for cancer treatment nowadays. Some include lumpectomy, which conserves the breast and can be performed with hidden scar breast surgery. There are also different types of mastectomies performed as well as immediate reconstructions. If we need to treat the malignancy with radiation, there are different options. The traditional radiation includes energy delivered to the breast in a sequential fashion for a period of a few weeks. An alternative in some cases, is accelerated partial breast irradiation or brachytherapy. Brachytherapy allows the radiation energy to be directly targeted to the lumpectomy bed. This is done through a catheter that I place under ultrasound-guidance in the office. The catheter has chambers in which the radiation seeds are funneled through. The procedure takes about five days, twice a day treatment.

Diagnosis and Screenings

Mammograms help diagnose breast cancer at an earlier stage and save lives; eliminating metastasizing cancer and deaths. However, not all breast cancers are detected with mammography. It's critical to speak to your doctor about which options are best for you.

It's also very important to continue with screening mammograms and MRIs during this COVID-19 pandemic. We are open for screening and diagnostic studies. Breast health is important and we are here to help. We're taking all CDC precautions to screen and sanitize to keep your safety as a priority.

Don't wait, schedule your appointment today.

It's easy to schedule a screening mammogram or other imaging exams, such as a CT, MRI, ultrasound or X-ray online at baycare.org or by calling (855) 269-4333.



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Claudia Lago Toro, MD, Breast Surgical Oncologist

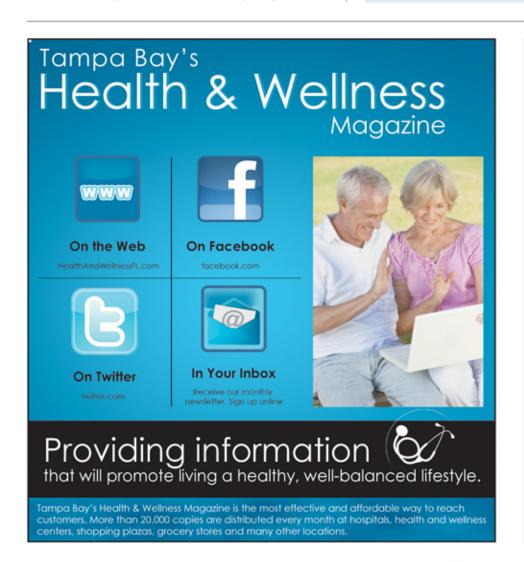
Claudia Lago Toro, MD, is board certified in general surgery. She received her Doctorate in Medicine from the University of Puerto Rico School of Medicine in San Juan, Puerto Rico. She followed that up with a general surgery residency at Baystate Medical Center the Western Campus for Tufts Medical School in Springfield, Massachusetts. Dr. Lago Toro continued her medical education by completing a breast surgical oncology fellowship at Bryn Mawr Hospital in Bryn Mawr, Pennsylvania. As a breast surgical oncologist, she treats male and female

breast cancer patients, as well as those with benign breast disease. She has been chosen by her peers as TopDoc in Tampa a few years in a row. Dr. Lago Toro has extensive experience in minimally invasive breast biopsies, mastectomies, including nipple-sparing approach and the administration of breast brachytherapy for radiation therapy. She is also certified in hidden scar breast surgery and performs nipple-sparing mastectomies. Her clinical interests include patient education and creating awareness of breast cancer, and she has served as a resident clinical educator at Tufts University in Boston, Massachusetts. Dr. Lago Toro is a member of the American Society of Breast Surgeons, the Society of Surgical Oncology and the American Society of Clinical Oncology.

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Autism Spectrum Disorder:

Behavioral Therapy Programs Are Available to Help You and Your Child Thrive

utism Spectrum Disorder (ASD) affects 1 in 54 children (18.5 per 1,000 8-year-olds). Boys are more than four times as likely to be identified with ASD than girls. Many parents sense developmental delays or notice their child has an issue between 12 months and 2 years, but often it can go undiagnosed for many years. 1

BCOTB (Behavioral Consulting of Tampa Bay) is the go-to Autism Spectrum Disorder expert and one of the first clinics of its kind in the Tampa Bay area. BCOTB has been offering services to children with autism and related disorders since 2003 and now offers services at 4 clinic locations to better serve you. BCOTB is owned and operated by a Board Certified Behavior Analyst (BCBA) and has been recognized for numerous awards over the past decade.

BCOTB's programs are designed to address a child's skill deficits as well as problem behaviors and are created to meet the individual needs of the child. The goal of the programming is to teach children the necessary behaviors/skills to be independent and thrive in a variety of environments such as their home, school, and community settings. Skills taught during the intensive 1:1 therapy sessions include, but are not limited to, language/communication skills, social skills, academic skills, self-help skills, and independent behavior. The goals are taught using researched-based behavioral strategies and are graphed and tracked during each session to ensure success.

Kelley Prince, M.A., BCBA, President and Founder of BCOTB spoke to us about their programs, services and Autism Spectrum Disorder in general, "Parents are the experts on their own children and often have a gut feeling when they feel that there is something "different" about their child. Usually this is when the child is as young as 12 or 18 months of age. Since the signs of autism are very slight early on (social delays), a medical professional may tell the family to wait until the next appointment to see if their child makes any progress. Most families refrain from seeking a professional opinion until much later when the child isn't making the language gains of their peers. This can be anywhere from 24-36 months of age.



"I encourage caregivers to seek an evaluation from a specialist such as a psychologist or a neurologist familiar with Autism Spectrum Disorder or other developmental and behavioral conditions as soon as they feel that something may be "off". Parents should always follow their "gut" feelings and get an in-depth assessment and analysis. The younger a child is diagnosed, the better they respond to therapy. Early intervention shows better outcomes at a quicker rate.

"For example, if a child doesn't get diagnosed or doesn't receive therapy until say age seven, they have seven years of delays and behavioral habits to overcome, whereas a younger child has less of a gap to learn age-appropriate skills. 98% of our patients are diagnosed with ASD; however, we treat other conditions such as Down Syndrome and behavioral conditions, as well."

"Since Autism is a spectrum disorder, some children with ASD exhibit only a few signs of the disorder that show up in the early months of infancy while others may display multiple signs and delays that are undiagnosed until much later. What should parents look for if concerned?

Signs by age (Published by Autism Speaks):2

By 6 months

- Few or no big smiles or other warm, joyful and engaging expressions
- Limited or no eye contact

By 9 months

• Litt le or no back-and-forth sharing of sounds, smiles or other facial expressions

By 12 months

- Little or no babbling
- Little or no back-and-forth gestures such as pointing, showing, reaching or waving
- Little or no response to name

By 16 months

Very few or no words

By 24 months

 Very few or no meaningful, two-word phrases (not including imitating or repeating)

At any age

- Loss of previously acquired speech, babbling or social skills
- · Avoidance of eye contact
- · Persistent preference for solitude
- Difficulty understanding other people's feelings
- · Delayed language development
- · Persistent repetition of words or phrases (echolalia)
- Resistance to minor changes in routine or surroundings
- · Restricted interests
- Repetitive behaviors (flapping, rocking, spinning, etc.)
- Unusual and intense reactions to sounds, smells, tastes, textures, lights and/or colors

Kelley added, "My best friend's son was just not quite where he needed to be developmentally. At his 18-month checkup, his doctor said these issues were nothing to worry about and to wait for his 24-month checkup. I encouraged my friend to see a psychologist that I work with regularly and, after an in-depth assessment, he was diagnosed with mild ASD.

"At BCOTB, after a child is diagnosed, we recommend and conduct a full evaluation of the child's skills and create customized plans for working with the child on a whole level, which usually includes language, social skills, self-help, problem behaviors, and communication. We also provide programs and services for children that do not have a diagnosis but may engage in problem behavior.

"Our programs depend on skill level, condition, and response of the learner. We prefer to work with children for at least 10 hours per week or more, as repetition is critical. For example, if we are teaching a child to walk next to their parent or caregiver while in a store (i.e. not running off), we see better results and quicker skill acquisition when the training is practiced 100 times per week rather than 10 times per week. Repetition and reinforcement of the target skill is a key element of Applied Behavior Analysis (ABA) therapy."

BCOTB Services:

- Verbal Behavior Program (language training)
- · Feeding Therapy
- Individualized Education Plan (IEP) development and support
- . Social Skills/Peer Play
- Functional Behavior Assessments
- · Toilet Training
- · School Shadowing
- · SRA Programs for Reading, Language and Math
- Problem Behavior Reduction Programs

Most major insurance covers BCOTB services and programs but, in most cases, a diagnosis is important for reimbursement purposes.

President/Founder Kelley Prince, M.A., BCBA

"My career in applied behavior analysis began in 1998 when I began providing behavioral therapy services for a family who had a child with autism. I was immediately intrigued by all of the benefits that such therapy had to offer, and I immediately knew I wanted to learn more about how I could help other children and their families. I studied Applied Behavior Analysis at the University of South Florida, graduating with a master's degree in 2004. In 2003, while in my last year of graduate school, I founded BCOTB. At the time, it was one of the only clinic of its kind in the Tampa Bay area in which Applied Behavior Analysis services were offered.

"Since 2003, BCOTB has grown to four office locations and employs 75+ people in the Tampa Bay Area. Our original location was opened in 2007, which we quickly outgrew. Since that time, the Tampa location has expanded two more times and currently resides off of Hillsborough Avenue right outside of Westchase. Knowing that BCOTB wanted to be able to reach more clients in the autism community, we opened our first satellite location in 2009 in Wesley Chapel. This location also quickly expanded and has recently relocated to a larger facility located outside the Seven Oaks subdivision and services the clients in the New Tampa, New Port Richey and Wesley Chapel area. Our third phase of expansion occurred in 2013 when we opened our Brandon facility. Located at the corner of 301 and Adamo Drive, the Brandon facility services clients from MacDill AFB, Lakeland, Valrico, Brandon and Riverview areas, And, finally, in 2018, BCOTB opened its 4th clinic location on North Dale Mabry Highway in Carrollwood and is now considered our main location.

"I am proud to say that BCOTB has had a successful past and is continuing to grow. The success of our business can be attributed to our management structure, policies and procedures and, most importantly, our therapy team.

"All of BCOTB's therapists receive training which meets the requirements for the Registered Behavior Technician credential provided by the Behavior Analyst Certification Board and successfully complete competency assessments. Staff receives ongoing performance reviews to ensure they are utilizing appropriate teaching and behavior reduction procedures in order to maximize your child's progress."





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> Wesley Chapel 27604 Cashford Circle Wesley Chapel, FL 33544 (813) 345-8584

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HYPERBARIC OXYGEN CAN HELP WITH TUMOR SIZE REDUCTION AND CANCER TREATMENTS

Undersea Oxygen Clinic

f you are diagnosed with cancer, please consider your options carefully as you progress towards your cure. As a growing trend, individuals are choosing non-standard care for their treatment. You may want to consider an adjunct to your treatment called hyperbaric oxygen therapy (HBOT).

Using HBOT, the Undersea Oxygen Clinic (www.underseaoxygenclinic.com) can raise the percentage of oxygen you breathe to more than 140% due to the laws of physics and how they relate to atmospheric pressure. High quality and peer reviewed studies have shown that HBOT can saturate the parts of the blood that are not red blood cells (plasma) so thoroughly with oxygen that it can sustain life even without the red blood cells that normally transport oxygen being present. (1)

HBOT super-saturates oxygen into the body's tissues. which promotes increased capillary growth (the tiniest blood vessels) and increased white blood cell (immune cell) activity, which assists your body in fighting infections in a number of ways; by promoting tissue healing secondary to an increase in collagen production, by reducing pain and by reducing swelling. HBOT can also help inhibit certain toxins and reduce the size of any gas bubbles in the body or blood stream. Also, it can have a synergistic effect with antibiotics, which means that it can enhance their ability to fight bacteria, and certain types of chemotherapeutic agents. HBOT can also mobilize the body's circulating STEM cells, which are the cells that are responsible for replacing cells that are old, damaged or dead. It has been shown that a single ~2-hour treatment with HBOT at certain pressures of oxygen can double a certain type of circulating STEM cell known as a CD34+ pro generator STEM cell. These particular STEM cells are important because they are the human cells responsible for salvaging and restoring damaged cells and tissues within the body. Finally, and after approximately 20 hours of HBOT, the circulating CD34+ STEM cells can be increased by up to 800%. (2)

Another important benefit of HBOT is that it can help with a process called angiogenesis. This is when your body makes new blood vessels to get oxygen to areas that have blocked blood vessels, whose blood vessels are damaged or not working correctly or because of the demand from tissues that are working harder than they normally do. These new blood vessels provide a new path for the oxygen to be delivered to



the tissues that need it so those tissues can heal faster. This increased oxygen helps your body to produce more collagen, which is an important part of the scaffolding of every cell.

The prospect of using HBOT for cancer recovery or to reduce tumor size has been a topic of conversation and multiple research studies over the past 20 years. To be clear there is no double-blind placebo-controlled trail showing the efficacy of HBOT for cancer treatment but there is ALSO not one demonstrating parachutes work for skydiving either (3) but we do not see skydivers without parachutes. There are myriad peer reviewed papers demonstrating efficacy of HBOT in certain situations involving cancer treatment.

It has been demonstrated in a clinical trials that HBOT can decrease the rate of growth of tumors and prostate cancers. (4)(5) It is believed currently that the mechanism of action is HBOT induces hyperoxia which produces reactive oxygen species which can damage tumors by inducing excessive oxidative stress. (6) Additionally and importantly, HBOT is frequently administered to cancer patients as adjunctive therapy. (7) Ultimately there is a significant reduction in the number of large cancer colonies observed following HBOT. (7) These results indicate HBOT retards the growth of tumor cell colonies for breast cancer. (7) Even if you choose to have chemotherapy for your cancer, HBOT in combination with chemotherapy has been reported to increase the potency of the chemotherapy requiring less overall chemotherapy. (8) There is evidence that HBOT helps with tumor control because it oxygenates the tumor preventing the all too damaging metastasis. There are many papers which show hope for lung, cervical, prostate, and myriad other forms of cancer, Finally, if radiation is required, HBOT can and does heal radiation cystitis and proctitis faster than without. (1)

If you are looking for an alternative to chemotherapy for cancer, ask your practitioner about HBOT. HBOT is a non-invasive, scientifically proven methodology for increasing oxygen supply to the body which has been in use for hundreds of years. As a provider, medical professionals must evaluate the cost vs. benefit of each protocol. We believe that most everyone agrees that the current methodology for treatment of cancer lacks adequate results.

Thinking differently about the problem and possible solutions will increase options and may improve outcomes. The physics and physiology behind this information are all evidence-based facts from scientific papers published in major journals. HBOT has a proven track record of success as the main treatment or as an adjunctive or add on treatment for many diagnoses.

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BRIDGING THE GAPS IN HEALTHCARE:

IMPORTANCE OF CONTINUITY IN PATIENT CARE DURING THE PANDEMIC AND BEYOND

By Jason Waz, President of Competitive Edge Physical Therapy

hysical therapy does not solely encompass recovery from an injury; instead, it focuses on enabling a person's body to function at its optimal level and to maintain energy balance within the system as a whole. Along with physicians, nutritional consultants, and mental health specialists, physical therapy serves as one component in a larger health care system that has become increasingly focused on overall health and wellness of patients. Optimal health is a continuum: if function is impaired at one level, it affects the rest of the body. In the face of a global pandemic, the importance of a comprehensive health care team including physician and non-physician providers has become paramount.

Health care has evolved to a specialist-based system, with the goal of funneling patients to an expert to best manage their care. However, this system often leaves patients in between specialists and without members of the care team on the "same page" to promote optimal health and wellness. Competitive Edge Physical Therapy (CEP) has served the Tampa community for the past 13 years to keep patients healthy and active while building and maintaining relationships with trusted physician and non-physician providers to bridge the gaps between specialties. These relationships are critical for success in helping patients to understand their treatment plan and commit to a program aimed at maximizing their health. CEP leverages these partnerships to enable effective, ongoing communication between providers regarding mutual patients. By discussing care plans, re-evaluating the success of current interventions, and brainstorming "outside the box" for alternative treatment strategies, these strong relationships add the missing link in continuity of patient care.

In development of these partnerships, the critical component is a like-minded treatment approach among all disciplines. For CEP, this includes identifying community providers that share the vision of utilizing the most up-to-date and effective treatments while promoting the goals of optimal health. CEP offers the latest in recovery science and "bio-tech" to expand the scope of physical therapy practice beyond injury rehabilitation into the realm of achieving optimal health and wellness for all clients.

Similarly, CEP's community relationships harness emerging treatments to maximize outcomes, whether through advanced imaging, stem cell therapy, nutrition science, or regenerative modalities. Each individual specialty works toward the common goal of helping patients to achieve optimal health and function—a goal that is now more important than ever when navigating a global pandemic.

When managing patients for acute or chronic injuries, physical therapists work with physicians in a team based approach by helping patients understand importance of regular treatment/follow ups and to educate patients on setting new routines for ongoing progress despite limitations caused by the pandemic in accessing care. Dr. Kevin Elder at BayCare Sports Medicine is one of CEP's trusted physician relationships. He shared his perspective as a referring physician provider to physical therapy, stating that "optimal care in a sports medicine setting involves a team based approach, where there is good communication and respect for the professional capabilities of all those involved in providing high-quality sports medicine evaluation and care. In my own practice of sports medicine, it is common for me to receive communication on a daily basis from physical therapists about patients that we are treating together, and this open line of communication allows for not only a very tailored, specific approach, but also allows for best outcomes." In a sports setting, this team based approach is carried out as athletic trainers provide on-the-field management of injuries, communicate with team physician for further evaluation, and then the physician communicates with physical therapy for return to sport progression. This approach is paralleled in a non-athletic population, where effective treatment requires communication between referring provider and the physical therapy team to discuss any changes in the condition requiring further evaluation or imaging, or if there is need to consider a different direction of the treatment.



For those that may not require physical therapy services for an injury, the global pandemic has served as a call for many patients to seek their own care through more holistic measures to promote health and wellness. CEP is equipped to provide an additional link to these services by utilizing expertise in the field of neuromuscular science to optimize the body systems and create a well-balanced whole. This can encompass treatment via heart rate variability diagnostics, neuro biological electrical stimulation (NEUBIE) and pulsed electromagnetic field (PEMF) therapy at CEP, as well as referrals to trusted nutritional counseling or regenerative specialty providers that serve to optimize cellular function and boost the immune system. CEP relies on our partnerships with these specialists to establish comprehensive care plans for patients and promote optimal health for all clients.

CEP has defined itself as the premier physical therapy organization focusing on using state of the art biotechnology to rehabilitate injuries and achieve optimal health across the lifespan. Drawing on relationships established throughout years in physical therapy practice, CEP remains committed to redefining conventional healthcare by maximizing continuity of care among specialties to ensure patients meet their health and wellness goals.





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Only 1 out 5 Women get Diagnosed with Early-Stage Ovarian Cancer: Symptoms are Often Overlooked

By Parveen Vahora, M.D.

t's known as a "silent killer" because it often goes undiagnosed until the disease state is advanced. If left untreated, ovarian cancer rapidly grows and spreads into the abdominal and pelvic areas.

Today, we're able to diagnose the initial onset of these symptoms better, as we now know that most of them are directly related to ovarian and reproductive cancers and disorders. However, the key is to make certain that women who are experiencing any of these symptoms go to their physician immediately to be tested.

Symptoms

- Abdominal pain
- Bloating
- Constipation
- Fatigue
- Feeling full
- Heart Burn
- Irregular menstrual cycles
- Nausea
- Painful intercourse
- Pelvic discomfort
- Urinary urgency or frequency

Due to ovarian cancer cell's rapid growth, if you 've got one or more of the symptoms mentioned above that do not subside, you must seek medical attention quickly.

Common Risk Factors

- Genetics (BRCA1 and BRCA2)
- Family History
- Personal history of cancer
- Endometriosis
- Ovarian cysts
- Reproductive issues
- Infertility
- Hormone replacement therapy
- Being overweight
- Hormonal Imbalance
- Lynch Syndrome

Genetic Risks

Reproductive cancers can be linked to a hereditary genetic mutation called BRCA; this includes breast cancer as well. Although a high percentage of ovarian cancers are genetically passed down, many women with no family history are also at risk for developing ovarian cancer. Lynch Syndrome is also a genetically inherited syndrome that causes various cancers, including bowel, endometrial, and ovarian, as well as other cancerous conditions like colon, stomach and uterine cancers.

According to the National Cancer Institute (NIH), "A woman's lifetime risk of developing breast and/or ovarian cancer is greatly increased if she inherits a harmful mutation in BRCA1 or BRCA2.

About 1.3% of women in the general population will develop ovarian cancer sometime during their lives (1). By contrast, it is estimated that about 44% of women who inherit a harmful BRCA1 mutation and about 17% of women who inherit a harmful BRCA2 mutation will develop ovarian cancer by the age of 80 (2)."

Testing is CRITICAL

The most common diagnostic testing involves a gynecological examination, transvaginal ultrasound, blood tests for the antigen CA-125 (detects cancer cells), and genetic testing for BRCA1 or BRCA2 mutations

Genetic testing is a cutting-edge medical technique that looks at your unique genetic makeup, and that can be used to see how your DNA might shape your health over the course of your life. A sample of DNA is collected—typically with a small sample of blood or saliva—then analyzed in a lab to look for evidence of genetic disorders or vulnerabilities to some diseases. For example, people with specific gene mutations might develop some cancers earlier in life, or at a higher rate, than the general population. This is precisely the case with BRCA mutations.

If you are predisposed to ovarian cancer or have a family history, Dr. Vahora's genetic risk panel includes BRCA 1&2, Lynch genes and others that can put you at risk for ovarian, breast and or uterine and colon cancer. Hormone therapy may not be indicated if you are a carrier if these genes or if you have a family history of cancer or have had cancer.

Surgical Intervention

If you have an ovarian cancer diagnosis, Dr. Vahora will work directly with you to discuss the possibility of having an oophorectomy (removal of ovary) on one or both ovaries, which also might include the fallopian tubes, or a full hysterectomy. These precautionary surgeries will reduce your risk of ovarian cancer by approximately 90% and breast cancer by 50%.

If you have your ovaries removed or a hysterectomy, your hormones will become even more imbalanced, which can lead to vaginovulvar atrophy (VVA: dry, painful, condition). Hormone therapy is not always an option and it does not improve VVA; however, an

advanced technique that has helped countless women is available. Mona Lisa Touch® is a ground-breaking laser procedure that revitalizes and rejuvenates the vagina.



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The laser assists with the bodies cell renewal to regenerate the mucous membrane and help with the restoration of collagen and renewing the proper trophic balance to the membrane. Now it's possible to have relief from VVA!

Advanced And Individualized Care

The office of Dr. Parveen Vahora is small, intimate, and welcoming. Women under their care are treated with the utmost respect, which means they offer personalized care: educating on conditions and treatment options as well as preventative measures. Their focus is on sexual health—offering MonaLisa Touch® for patients going through menopause as well as post-menopausal women, breast cancer survivors, and those suffering from pain during intercourse or intense dryness. They also offer genetic testing for breast, ovarian, and colon cancer. From birth control to robotic surgery, Dr. Vahora has got you covered.

They follow Enhanced Recovery After Surgery (ERAS®) protocols, which take a comprehensive look at all areas of the patient's journey through surgery and recovery, creating a well-coordinated, team-oriented approach to surgical care for better outcomes. Weaving this into personalized care plans, Dr. Vahora and her team get patients back to their normal routines faster.

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5 Practical Ways to Power Up Your Immune System



specially amidst the COVID-19 pandemic, we've all been inundated with the advice to practice social distancing and maintain proper hygiene. However, it's also critical to boost the immune system; after all, a robust immune system can be more effective at fighting off viruses, bacteria and illness. Here's why...

Your body acts as a host for viruses at all times, and if you're not strong enough to combat a given infection, the cells mutate and can aggressively cause you to become very ill. One way to either ward off infections completely or fight them proficiently is through a bolstered immune system. This is especially important for seniors, who may be more susceptible to infections and communicable illness.

So let's explore five (5) ways to boost immunity by focusing on certain lifestyle factors that are relatively easy to control. Take these into consideration and it's possible to make minor lifestyle changes that can give your immune system a major boost.

Emphasize Nutrition and Dietary Supplements

A diet that's high in antioxidants is critical for immunity. Foods like fruits and vegetables, dark chocolate, olive and coconut oils, avocado, legumes, garlic, onions, cold water fish, bone broth and eggs all contain vital nutrients that can keep you healthy throughout the year.

Vitamin C, Green tea, curcumin, ginger and garlic all have antioxidant and anti-inflammatory properties in both supplement and food form. Glutathione is also a great supplement to boost immunity. Glutathione is one of the most potent antioxidants and tends to be most useful for detoxifying and healing the body.

Due to the modern lifestyle and poor dietary choices, the average person has a reduced amount of "good bacteria" in their gut. Good bacteria is critical for overall health. As such, it's recommended to either consider taking a probiotic supplement or eat more fermented foods which can support your health. Those may include probiotic yogurt, cheeses, and foods like kombucha, miso, kimchi and others that are suddenly all the rage.

All of these considerations and many more factor into the meal and menu creations at upscale communities like Aston Gardens At Tampa Bay, where Chef and his culinary team turn out healthy (and delicious) meals all day, every day. From regionally inspired dishes to international specialties, and of course, old-fashioned comfort favorites, residents enjoy a diverse menu that satisfies the palette while also satiating both mind and body.

Sleep

Getting the appropriate amount of rest is critical for both your brain and body, as it promotes well-being and regenerative functioning. Sleep can bolster the immune system, but if you're having trouble breathing while sleeping, the lack of oxygen can also lead to impaired immune function and many other issues, such as heart disease, pulmonary disorders and cognitive issues. So if you tend to have trouble sleeping, seeking help to promote more restorative rest would be a worthwhile endeavor. Here are some additional insights and tips for getting quality rest—the kind that will offer maximum benefit to the immune system:

- Get into a routine: Going to sleep and waking up at the same time each day can help train your body to go to sleep "on time"
- Avoid making the bed a couch: By reserving the bedroom for only sleep—and romance—the body becomes better conditioned to sleep when there
- Avoid electronics and caffeine before bed: Try reading for 15 minutes instead
- Exercise early in the day, not late: Exercise releases endorphins that make it harder to rest and fall asleep
- Invest in a good mattress: Look for one that fits your personal preferences and sleep habits...and replace it every 8-10 years
- Maintain a comfortable room temperature: Generally, cooler conditions are better for more restorative sleep
- Don't stay in bed: If having trouble falling asleep, get up for a while and try again rather than stewing about it in bed
- Talk to a professional about sleeping pills: Work with your doctor to address any lingering medical issues and explore sleeping pills as a potential remedy for sleep troubles

Exercise

Any exercise that you can fit into your daily routine is beneficial. Regular exercise improves immune function and is thought to reduce respiratory disorders as well. For the immune system and many other vital functions of the body, it's beneficial to take a brisk walk, exercise in a chair, get physical therapy, enjoy pool exercises or generally do whatever your level of fitness will safely allow you to do.

At Aston Gardens, various exercise options are available to suit residents of all fitness and experience levels. From the onsite fitness center to daily classes, which run the gamut from water aerobics to chair yoga and beyond, it's easy to fit exercise into your daily routine.







We Are The Right Place To Be Right Now

As a company that's served the best interests of seniors for nearly 30 years, we are no stranger to emergency management. Our commitment to the health and safety of our residents has long been paramount, and although COVID-19 is a new threat, it is by no means the first one we've faced head on.

In any emergency situation, it's imperative to know where trusted resources can be found. For seniors and families specifically, the importance of safeguards required for COVID-19, in many ways highlight the numerous benefits of living in a supportive community setting like the many we offer.

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Picking the Right Provider: Why Not All Hospice Organizations Are the Same

ospice is hospice, right? Not exactly. A common misconception about hospice care is that all hospice organizations are the same, but this is far from the truth. Hospice is a philosophy of care that focuses on pain management, symptom control and comfort at the end of life. But, almost every provider is different, and can even offer different services and additional patient programs.

The hospice that took care of your Aunt Susy in Ohio is a different hospice than the one visiting your neighbor across the street. While some hospices belong to a corporate national chain, most are local community hospices that focus on the community in one particular area or county.

Not all hospices are not-for-profit organizations. According to the National Hospice and Palliative Care Organization, less than one-third of all hospices are actually non-profit organizations. Non-profit hospices are able to fundraise and use donations to cover the cost of care for patients who do not have insurance, Medicare or Medicaid, ensuring that everyone who needs care, gets it.

In Pasco County, patients have a choice.

In Florida, hospices can only care for patients in the county for which they are licensed. This means that in many counties, patients have very few or even one choice for which hospice they will use for care. Pasco County is one of the counties in which patients make the decision of which hospice provider to use. Because Pasco County residents have that option, it's important to know how to make that educated decision.

If you feel you may be faced with that decision at some point, whether for yourself or a loved one, it's important to gather all the information ahead of time so that when the time comes, you can easily voice your preference to ensure you receive the care and services you want.

Questions to ask when considering a hospice provider:

- Is it a non-profit organization?
- Are they local and in my area?
- What kind of accreditations have they earned?
- What kind of additional programs do they offer for me and my loved ones?

Gulfside Hospice – Offering Unique Programs To Go Above & Beyond

Every day, more than 450 Pasco County residents receive hospice care from the team at Gulfside Hospice. They emphasize that hospice care is about more than just the patient — it's about the whole family. With an interdisciplinary approach to care and an array of services and programs, Gulfside Hospice is able to help patients and families live their lives to the fullest.

Because Gulfside is a non-profit organization, they are able to receive special funding and grants that allow the team to offer special programs and services for patients. Three of Gulfside's programs that make a big impact on patients, families and the community are the We Honor Veterans program, the Pet Peace of Mind program, and Comfort Connections dementia program.

We Honor Veterans

Gulfside is a Level Four partner of the We Honor Veterans program, which is partners with the VA to provide specialized care to patients who are veterans. Currently one out of four hospice patients is a veteran. These patients and their families have very special needs, especially at the end of life. All staff members at Gulfside are trained to care for their unique needs, and they place a special emphasis on pairing veteran patients with veteran volunteers who can better understand their situation.

Pet Peace of Mind

Pets are family. Many times patients come onto hospice care and one of their biggest concerns is what will happen to their pet. The Pet Peace of Mind program at Gulfside helps make sure the pet is cared for with food, supplies and basic veterinary and grooming needs. When the time comes, the team will also work to find a forever home for the pet if needed.

Comfort Connections

The goal of this program is to provide enhanced care to those living with dementia, Alzheimer's Disease, and similar disorders at the end of life. The program offers extra support and resources for caregivers, engagement and socialization projects for patients, education on the disease progress for caregivers, and support groups for the community.



Gulfside Hospice – Providing Quality Care for 30 Years

In addition to these unique programs, Gulfside also provides quality care for the patients based on their individualized plan of care. This includes regular visits from physicians, nurses and CNA's, the ability to contact the nursing team 24/7, coordination of medical supplies, medication and equipment, spiritual care from chaplains, and so much more.

Gulfside is the only not-for-profit hospice that serves Pasco County exclusively, and was the first hospice in Pasco to receive The Joint Commission's Seal of Approval Accreditation. To learn more about how Gulfside can help you and your family, call (800) 561-4883 to speak with one of the organization's experts. For more information, visit Gulfside.org.



Hope and Optimism

By Pastor Timothy L. Neptune

ope is confidence in God...not wishful thinking. To have hope is to trust in God to meet our needs...even in the midst of difficult times. When we do go through tough times our confidence in God can get a little rattled, as the Old Testament figure Job experienced. In the midst of his pain and heartache he cried out, "Where then is my hope? Who can see any hope for me?" (Job. 17:15)

Ultimately, hope comes from God. The Scriptures say, "May the God of hope fill you all with joy and peace as you trust in him, so that you may overflow with hope by the power of the Holy Spirit." (Romans 15:13) Hope is an essential element of the Christian's life. In 1 Corinthians 13 the Apostle Paul included hope as one of the top three qualities of a person's life: "And now these three remain: faith, hope and love. But the greatest of these is love." (1 Cor. 13:13)

As followers of Christ, we are called to be dispensers of hope. We should exude a confidence and trust in God that demonstrates that we have hope. Yet I pose the question, "Can a person be filled with hope without being filled with optimism?" According to the encyclopedia, optimism is "to anticipate the best possible outcome." Can we demonstrate hope in God without anticipating the best possible outcomes of the situations we face?

I believe we can. In fact, I think hope is best exemplified when it is demonstrated in the face of negative circumstances. There are many times when hope and optimism go hand in hand. David had both when he faced Goliath. He had confidence in God and he expected the best possible outcomes...Goliath's defeat and an Israelite victory over the Philistines. And yet, there are many examples of people who had hope in God but did not anticipate the best possible outcomes.

Simon Peter is a good example. He and the disciples had been fishing all night and had caught nothing. They had worked so hard and yet still had nothing to show for their labors. And then Jesus tells them to cast out the net one more time. Simon did not expect to catch any fish. He was pessimistic. But, he had confidence in Jesus, so he cast the net. Though the circumstances did not look promising, his hope in God made up for his lack of optimism.

Esther is another good example. She had confidence that God would ultimately provide deliverance for the Jews but as she prepared to go before the King she said, "...I will go to the king, which is against the law; and if I perish, I perish!" (Esther 4:16) She demonstrated hope but not necessarily optimism.

The point is this: hope and optimism are not the same thing. You can still be hopeful even if you are not optimistic. You can still be a dispenser of hope even if you think you are going to face hard times ahead because you know that God will meet your needs.

Jesus didn't sound very optimistic when he said, "These things I have spoken to you, that in Me you may have peace. In the world you will have tribulation (a rather pessimistic view); but be of good cheer (maintain your hope), I have overcome the world (which is the basis of our hope)." (John 16:33)

Hope doesn't mean that the best possible situations will always occur, but it does mean that in some way God will bring something good or useful out of the situation. As we look into the future, we may not always be filled with optimism, but we must always be filled with hope...God is still in control!





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