

T A M P A B A Y ' S

Health & Wellness®

MAGAZINE

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South Tampa Edition - Monthly

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FREE 



**Heart Rate
Variability &
Your Optimal
Health Status**

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**TIPS FOR
RELIEVING
STRESS**

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**St. Joseph's Congenital
Heart Program
Helps Mom of Five
Not Miss a Beat**

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CONTACT US

OWNER / ACCOUNT EXECUTIVE

SOUTH TAMPA - (727) 515-2353
BOB GUCKENBERGER
bobguckenberger@gmail.com

CREATIVE DIRECTOR

SONNY GRENSING
sonny@gwhizmarketing.com

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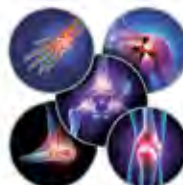
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St. Joseph's Congenital Heart Program Helps Mom of Five Not Miss a Beat

As a busy mom of five, 36-year-old Alyssa Fisher didn't spend much time thinking about her own health. She felt fine. She led an active life, working as a nurse, homeschooling her children, swing dancing with her husband on an occasional date and spending time with friends at church.

While having a casual conversation with one of those friends, Fisher mentioned she was born with the heart condition Ventricular Septal Defect (VSD), commonly known as a hole in her heart. That friend, Jennifer Brown, just happens to be a team member in St. Joseph's Children's Hospital's pediatric cardiac intensive care unit. She told Fisher about St. Joseph's Adult Congenital Heart Program and the care the center provides for adults who were born with heart defects.



Alyssa Fisher, who was born with the heart condition Ventricular Septal Defect, rests in her hospital room four days after undergoing open-heart surgery at St. Joseph's Hospital to replace her tricuspid valve.

Multidisciplinary Team Provides Care to Adults
Individuals born with a congenital heart defect (CHD) are living longer now than ever. Currently, there are 1.4 million adults in the United States living with one of many different types of CHDs, ranging among simple, moderate and complex.

The Tampa Bay Adult Congenital Heart Center at St. Joseph's Hospital, one of only two in Florida and only 47 across the United States, is accredited by the Adult Congenital Heart Association (ACHA).

The accredited program provides access to a host of medical experts who can support patients with CHDs throughout their lives. The team is comprised of board-certified pediatric cardiologists, adult congenital cardiologists, advanced cardiac imaging specialists, cardiac electrophysiologists, interventional cardiologists, and congenital heart surgeons, plus advanced heart failure, cardiac intensive care, cardiac anesthesia, and reproductive experts including maternal fetal medicine.



Alyssa Fisher, her husband Carl and their five children pose for their Christmas card photo in late 2022.

"Every patient who comes to our Adult Congenital Heart Center has access to all the specialties they need to manage their condition," said Board Certified Adult Congenital Cardiologist Suying Lam Barriga, M.D., medical director of the center.

Dr. Lam and the other professionals associated with the clinic recognize that every patient is different and has different heart issues. She said, "We review each patient's medical history in extreme detail and tailor our care to their specific needs."

Fisher's Journey Leads Her to the Center

Fisher had her first heart surgery at just 9 months old to surgically close her defect. When she was 3 years old, she needed a pacemaker. When her tricuspid valve began to fail at age 13, she underwent a third cardiac procedure to have it replaced. After that, she remained active and healthy. However, her conversation with Brown convinced her to make an appointment at the Tampa Bay Adult Congenital Heart Center.

That appointment allowed the medical experts at the center to learn about Fisher's medical history and establish a regular cadence for follow-up visits. The routine visits continued for a few years as Fisher remained healthy.

A few months ago things changed.

Fisher started gaining weight, specifically in her abdomen where she was retaining several pounds of fluid.

"People thought I was pregnant again," she said. "It began to interfere with my life. I had to tell my husband I couldn't swing dance. It made me nauseous to have that fluid jiggling around."

Fisher's replacement tricuspid valve was failing, which was preventing her heart from functioning properly. She met with a cardiothoracic surgeon and the surgery to replace her valve was scheduled.

"Our center offered the services Alyssa (Fisher) needed," Dr. Lam said. "We worked closely with the electrophysiology team to properly manage her pacemaker and with a surgeon who specializes in congenital heart disease to replace the valve."

Adults Living with Congenital Heart Disease Need Continued Care

While medical advances have made it possible for more patients with CHDs to survive into adulthood, it can be difficult for these individuals to find an adult cardiologist with the expertise to treat what was once considered only a childhood disease. Many, like Fisher was a few years ago, aren't aware or don't understand the importance of being followed by an adult congenital cardiologist who focuses on managing CHDs as well as treating any complications that may be related or unrelated to that.

We strive to educate our patients with CHD during their teenage years about their specific condition, interventions performed on their heart, and the importance of lifelong follow-up with a specialist," Dr. Lam explained.

For adults living with CHD that are not being followed by a cardiologist who is certified in adult congenital heart disease, Dr. Lam urges them to connect with an adult CHD program and receive the support they need to thrive.

"Congenital heart disease requires an in-depth understanding of the development of the human heart and the complexity of each specific defect. In addition, adults with congenital defects may develop acquired heart diseases like any of us, and we work closely in collaboration with our colleagues in adult general cardiology and many other adult specialties to provide the comprehensive care that is needed," Dr. Lam said.

Fisher Appreciates Expert Care

Fisher is thankful she found St. Joseph's Adult Congenital Heart Program. "I was confident in the surgeon and the way the adult congenital heart team worked together. They don't just try to get patients in and out, but everyone is significant to them," she said.

Fisher and her family will be moving out of state in July, but she plans to return to St. Joseph's annually to follow up with her adult congenital cardiologist.

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ESOPHAGEAL CANCER

Esophageal cancer is rare, but for several reasons, it deserves our attention.

Because it is usually diagnosed at later stages when it is more difficult to treat, about 20% of patients diagnosed with the disease will survive five years or more. Treatment and survival rates have improved in recent years.

The chance of developing esophageal cancer increases with age; the average age at diagnosis is 68. The lifetime risk in the United States is about 1 in 125 in men and about 1 in 417 in women, according to the American Cancer Society. Men are about three times more likely than women to have esophageal cancer, and white men develop the disease at higher rates than black men.

The number of people diagnosed with the disease has been on the rise in recent years. Between 2012 and 2019, the rate of esophageal cancer among adults age 45 to 64 nearly doubled in the U.S. Soaring rates of unhealthy eating, obesity and heartburn, in addition to smoking and alcohol use, appear to be contributing factors.

Understanding the Esophagus

The esophagus, commonly referred to as the food pipe, is a hollow, muscular tube about 10" – 13" long that connects the throat to the stomach. It is located in the center of the chest, behind the trachea (windpipe) and in front of the spine, and it functions as part of the digestive system, carrying food and liquid from the throat to the stomach.

At its upper opening is a ring-shaped muscle known as the upper esophageal sphincter. It opens to allow food to enter. Once inside, the food is pushed downward through a series of muscular contractions (called peristalsis) through the diaphragm, into the lower esophageal sphincter and through to the stomach.

Several conditions can occur when the sphincter muscles do not work properly. The most common is acid reflux, when stomach acid and digestive juices flow back into the esophagus and cause heartburn or inflammation.

Gastroesophageal reflux disease, or GERD, is a more severe form of acid reflux that can cause serious damage over time. Long-standing GERD can trigger a change in the cells that line the lower esophagus, causing Barrett's esophagus, which is associated with an increased risk of developing esophageal cancer.

Warning Signs of Esophageal Cancer

Cancer occurs when cells develop changes in their DNA and form a mass, called a tumor. Esophageal cancer starts in the inner layer of the esophagus wall and grows outward. Cancerous cells can also divide and spread to other parts of the body.



The exact causes of esophageal cancer are not clear. However, researchers believe that chronic acid reflux or GERD may be contributing factors. Other risk factors include smoking, drinking alcohol, obesity, improper nutrition, or undergoing radiation treatment to the chest or upper abdomen.

The Esophageal Cancer Action Network recommends talking with your doctor if you experience any of the following:

- More than occasional heartburn symptoms
- Worsening heartburn symptoms
- Pain or difficulty swallowing
- A persistent, unexplained cough or sore throat
- Coughing or choking when lying down
- Speaking with a hoarse voice over several weeks
- A family history of esophageal cancer or Barrett's esophagus

These symptoms can signal other health problems. Taking proactive steps is vital to diagnosing problems early when prevention or treatment can be more effective.

There is no screening test for esophageal cancer. If your health care provider suspects cancer may be present, a variety of exams, tests and biopsies can help to confirm a diagnosis.

Treatment Options for Esophageal Cancer

There are two main types of esophageal cancer, in addition to a few very rare types. Squamous cell carcinoma, which usually develops in the upper and middle part of the organ, is the most common worldwide. Adenocarcinoma, which begins in the lower part of the esophagus where it meets the stomach, is the most common in the U.S. and primarily affects white men.

Treatment options depend on a number of factors, including the specific type and stage of cancer, possible side effects, and the patient's overall health and personal preference. Esophageal cancer treatment can include surgery, chemotherapy, radiation, endoscopic therapy or a combination of these.

Increasingly, immunotherapies that strengthen and use the body's own immune system to attack cancer are yielding positive outcomes. New types of immunotherapy drugs have been approved in recent years to treat the most common types of esophageal cancer.

New Options Through Clinical Trials

Advancements in the diagnosis and treatment of all forms of cancer continue at a rapid pace, thanks to ongoing clinical research. Clinical trials have played an important role in these advancements, which are now saving more lives. Patients who participate in these safe and carefully supervised groundbreaking research studies are receiving the latest treatments available, which can have positive impacts on their outcomes.

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Recognized by the American Society of Clinical Oncology (ASCO) with a national Clinical Trials Participation Award, Florida Cancer Specialists & Research Institute offers patients access to more clinical trials than any private oncology practice in Florida. In the past four years, the majority of new cancer drugs approved for use in the U.S. were studied in clinical trials with Florida Cancer Specialists participation.* Trained in prestigious medical schools and research institutes, our physicians are consistently ranked nationally as Top Doctors by U.S. News & World Report.

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6 Reasons to Avoid Knee Replacement Surgery

By Regenexx at New Regeneration Orthopedics

Knee replacements are occurring far too often today and the simple truth is that they may be entirely unnecessary. This is mostly due to the fact that effective nonsurgical options now exist and that in some cases, the knee pain may actually be stemming from another part of the body, such as the spine. Even when using standard criteria for determining candidacy, about one-third of knee replacements are deemed inappropriate when evaluated by independent researchers. When knee pain is legitimately caused by a knee condition, many knee-replacement candidates seek out alternatives to surgery. There are many regenerative-medicine options, such as autologous (coming from one's own body) stem cell injections, that could potentially relieve pain and increase activity levels without "amputating" the knee, sawing bones, snipping away pieces of meniscus or frayed cartilage, and replacing the knee with a foreign device. If it is determined that your knee pain is due to a spinal condition, there are also nonsurgical options for spinal treatment to consider.

Knee replacement surgery should really be a last resort in only the most extreme cases. For those who are still considering knee replacement despite the risks that it presents, here are six reasons to avoid knee replacement surgery.

1. Chronic Knee Pain

Ultimately, chronic knee pain is the main reason that most people finally decide to have a knee replacement. They simply want relief. Unfortunately, knee replacement surgery may possibly come with even more pain. Studies have shown that many patients still have at least mild pain after their knee replacement. Some even rate their pain as greater than or equal to their pain prior to surgery. Even after two, three, or four years post-surgery, patients have reported that their pain is worsening.

As we mentioned previously, one explanation of chronic knee pain could be that the source of the knee pain is not actually a knee condition. This could be one of the reasons that the pain does not subside after surgery. It stands to reason that if the pain in the knee was caused by spinal nerves, for example, that your pain will not simply go away after a knee replacement. It is essential that



the root cause of the pain is discovered and is the focus of treatment. You do not want to have surgery on your knee joint if what you truly are experiencing is a condition in your back.

If you are curious to know whether your back is the cause of your knee pain, there are signs to look for, such as hamstring tightness, bunion formation, and if you are experiencing both back and knee pain. Note that it is not guaranteed that you will experience any of these symptoms if your knee pain stems from the low back. A low back condition can present itself solely as knee pain. On the other hand, if your knee pain is accompanied by back pain, it would absolutely be a sign to avoid knee replacement surgery.

2. Expectation May Not Meet Reality

We have all seen the TV commercials and advertisements of middle-aged and elderly people who are running on a beach or playing sports with their families allegedly after knee replacement surgery. Marketers and advertisers really make it appealing to jump on the bandwagon and give people a false sense of reality. The truth, however, is that only 5% or less (1 in 20 people) actually achieve anything close to normal physical activity following knee replacement surgery.

The disturbing trend of marketing knee replacements to those who are 55 years old or younger has also gotten out of hand in recent years. Younger patients expect much more out of their knee replacements in comparison to older patients. Because of this high expectation, 15% of younger patients actually undergo another surgery to fix their knee replacement just five years after their original surgery.

3. Pseudotumors and Tissue Damage Caused by Metal Ions in the Blood

Wear particles are microscopic pieces of metal, ceramic, or plastic that break off of the joint replacement, irritate the local tissues, and/or enter the bloodstream. These particles, as well as metal ions in the blood, have been the subject of many studies and class-action lawsuits. Additionally, the use of new plastics in artificial joints also poses issues if that plastic breaks off of the joint replacement and irritates local tissues and/or enters the bloodstream. It is also notable that minimally invasive knee replacements involve only partial replacements or resurfacing, however, these smaller devices must all be metal to withstand the stresses of the knee joint. This means more metal wear particles and ions in your bloodstream.

Many studies have demonstrated cause for concern regarding metal ions in the blood after knee replacement surgery:

- In Austria, researchers discovered that the size of the prosthesis is directly correlated with the blood concentration of metal ions. This means that the larger the knee replacement device, the more metal ions found in the bloodstream.
- In Italy, a group of researchers found more metal ions present in knee replacement patients who had a loose prosthesis. This is due to the fact that in some patients, the knee replacement device may not be seated tightly or did not bond correctly to the surrounding bone causing additional wear between the bone and the metal leading to an increased amount of metal particles.
- In Germany, a group found that after a knee prosthesis was implanted, metal ions in the blood increased precipitously.
- Other German researchers discovered higher serum levels of chromium and cobalt in knee replacement patients when compared to patients without knee replacements.

Why do these discoveries matter? These wear particles and metal ions can cause harmful metal toxicity within your body as well as create pseudotumors and tissue damage at the genetic level. Additionally, according to the FDA, other adverse reactions may include skin rashes, cardiomyopathy, neurological changes including sensory changes (auditory, or visual impairments), psychological status change (including depression or cognitive impairment), kidney function impairment, and thyroid dysfunction.

- Even when cross-linked Polyethylene is used instead of metal, a study showed that it caused the knee tissues to produce a much nastier stew of cartilage inflammation and break down chemicals.

4. Device Failure Caused By Allergies

In the past few years, multiple studies have discussed that the components of knee replacement prostheses can cause allergies. Two groups of people are at a significantly higher risk of potential rejection or loosening of their device and/or toxicity from wear particles.

- Those with any type of allergy. Even patients with allergies that are as simple as pollen or dander should avoid knee replacement surgery. People who

are considered "allergic" have hyperactive immune systems and secrete antibodies inappropriately to rid their bodies of the thing that they have mistaken as harmful. If that one thing is a knee replacement device, this drastically affects the outcome of a surgery.

- Those with metal sensitivities. Patients who have more specific allergies to metal will likely have issues with the metals that are used in joint replacement prostheses.

Unfortunately, those who consider themselves to be an "allergic person" may experience more pain after a knee replacement because of an allergy related to the replacement device and the chronic inflammation that it causes. Those people who suffer from four or more different allergies may suffer from pain that is more prevalent. The cement used to bond the device to the bone can also cause an allergic reaction. In these cases, the device is more likely to fail, need to be replaced sooner, or causes chronic pain.

5. Increased Risk of Heart Attack, Stroke, and Bleeding Stomach Ulcers

Knee replacement patients aged 60 and up are 31 times more likely to experience a heart attack in the two weeks following surgery. When you amputate a joint from a patient, there is severe trauma to the blood vessels and bone marrow space. This leads to extreme stress on the body and a higher risk of blood clots that could potentially cause an embolism in the heart, lungs, or brain. Clots are fairly common. According to one study, blood clots in the legs that produced symptoms were found in 34% of patients.

Men are at an even greater risk of having a heart attack after knee replacement surgery. One research study discovered that the risk of heart attack in men who have had a knee replacement increases by 79% in the years that follow the procedure. Additionally, the stress of undergoing the joint removal alone may be enough to trigger a stroke or a heart attack. Bleeding stomach ulcers can also occur following knee replacement. Study results show a three-times increase in stomach bleeding for up to six weeks post-surgery.

6. Increased Risk of Hip Fracture

A surprising addition to knee replacement surgery risks is the rise of hip fractures following surgery. A Swedish study observed the medical records of the "entire Swedish population born between 1902 and 1952." The risk for hip fracture for those who received knee replacements before surgery was

relatively low. In total, 3,221 patients suffered a hip fracture within 10 years following knee replacement surgery. This accounted for a 4% increase in the risk of hip fracture after knee replacement. In addition, we are also seeing bone density loss in hips. There could be a correlation between the two.

Alternatives to Knee Replacement Surgery

Although many patients have tried steroid injections or gel shots to increase the lubrication of their knee joints, this is not the best approach. Steroid shots actually kill off stem cells, cartilage cells, and increase cartilage breakdown. Even the commonly used local anesthetics used in the knees can be toxic to stem and cartilage cells. Those who suffer from mild arthritis may benefit from precise injections of highly concentrated platelet-rich plasma (PRP). These natural growth factors from your own platelets can support healthy cartilage. The Regenexx protocols allow for the ability to produce better and more individualized platelet products than the typical PRP centrifuge. If you suffer from moderate or severe arthritis, precise guided injections of your own stem cells may be a better choice to provide relief.

Since there are alternative options and a great number of risks associated with knee replacement surgery, you may want to just say no while you explore your options. Our Regenexx Procedure Candidate Form is a great place to start understanding if regenerative orthopedic medicine is right for you.



James Leiber, DO | Ron Torrance II, DO FAOASM
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HEART RATE VARIABILITY AND YOUR OPTIMAL HEALTH STATUS

Taking care of your heart health is not just for National Heart Month in February. Heart health contributes greatly to your overall optimal health status so, needless to say, it's crucial to continue your efforts throughout the year.

About CEP's Heart Rate Variability Technology

CEP's integrated heart rate variability (HRV) technology achieves a baseline of a client's physical state. The non-invasive, 5 minute procedure paints a picture of the body's wellness and recovery capacity by gaining feedback from electrical activity of the heart. Through analysis of this critical information, physical therapists can develop individualized plans to improve health status and increase functional capacity during fitness activities. In addition to assessing wellness in the general population, HRV diagnostics has also been utilized to demonstrate positive outcomes of physical therapy interventions in patients recovering from injuries when re-scanned throughout the course of treatment. Changes in HRV can be seen in many scenarios including:

- **Long term stress:** prolonged stress can cause HRV values to gradually drop, indicating that the body may need more recovery time.
- **Impact of illness:** Being sick can acutely drop HRV. If it remains low, even after symptoms disappear, it may be a sign that the body needs more time to normalize.
- **Disrupted sleep:** Jet lag or inconsistent sleep can put a strain on the body. Over time, this can impact the ANS and will be reflected in declining HRV.
- **Overtraining:** If you complete a hard workout, it can quickly lower HRV. In recovery, HRV will rebound. If HRV doesn't return to baseline, training may be too hard or too often. The body may need more time to recover.

How HRV Technology Helps Optimal Health Status

Historically, heart health has been assessed by indicators obtained from routine blood work, blood pressure monitoring and physical stress tests. However, technology now allows us to look closer into the heart's functionality, providing "insider



information" on how the body is operating as a whole. While it may appear that the heart beats to a steady rhythm, a healthy heart actually changes its rhythm with each beat. This metric is termed "heart rate variability" (HRV).

Heart rate variability is a measure of the variation of time between your heartbeats. It's a personalized metric that serves as one of the key indicators of your recovery status, overall health, and fitness level.



It provides a snapshot analysis of your autonomic nervous system (ANS) functionality—directly relating to your body's ability to turn on/off the fight or flight response. Your HRV can range anywhere from below 20 to over 200 milliseconds, and levels naturally fluctuate day to day. A key sign of health and recovery is a resilient HRV score that is able to rebound after taking a hit or gradually improves over time.

CEP HRV Testing Case Studies

We've studied a number of patients' HRV test results but CEP South Tampa's Doctor of Physical Therapy, Brock Labelle, showed especially significant improvements. Brock's HRV Testing report showed the improvements made from initial reading to follow-up over a 4-week period following NeuFit's "Master Reset" + stress reduction strategies, measured through Heart Scientific's – Heart Rate Variability technology. HRV is a great diagnostic tool to identify dysfunction in the nervous system and gauge improvement following interventions.

***Schedule Your Physical Therapy Appointment Now!
Contact CEP for Heart Rate Variability Testing***

Here's how each category improved:

Total Power

Overall rating of the energy reserves and output of the body (Normal between 2385-4545)

- Initial reading: 688
- Secondary reading: 3103

Vegetative Balance Index

This index defines the relation between the activity of sympathetic and parasympathetic divisions of the Autonomic Nervous System (Normal between 35-145)

- Initial reading: 414
- Secondary reading: 97

Neurodynamic Matrix

Displays the hormonal regulation assessment by means of neuro-dynamic analysis

- Normal between 50-100%
- Initial reading: 36%
- Secondary reading: 86%

Energy Resources

The index of the ratio of energy in versus energy out (Normal between 150-600)

- Initial reading: 106
- Secondary reading: 338

Stress Index

elates to the amount of energy the body will expand to maintain homeostasis or harmony (Normal between 10-100)

- Initial reading: 272
- Secondary reading: 55

Vegetative Index

Determining balance of Autonomic Nervous System, the more scattered the better the numerical relationships (Normal between 0.25-0.60)

- Initial reading: 0.20
- Secondary reading: 0.28

Biological age

Displays the assessment of the body's adaptation level

- Initial reading: 34 years, 7 years above actual age
- Secondary reading: 23 years, 4 years below actual age

PsychoEmotional State Index

Defines degree of devastating effect of stress on the body (Normal between 5-100%)

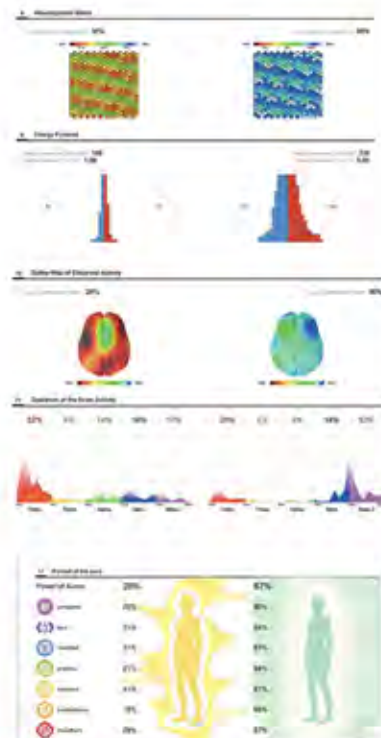
- Initial reading: 26%
- Secondary reading: 80%

Brain Wave Analysis

Frequency of brain activity extrapolated from ECG

- Higher beta waves indicate we are alert, attentive, engaged in problem solving, judgment, decision making or focused mental activity
- Initial reading: Delta wave dominant, low Beta waves
- Secondary reading: Increase in Beta wave activity, decreased Delta waves

The following are some of the charts and graphs seen in your personalized heart rate variability test report.



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How Nancy Went from Excruciating Neck Pain All Day, Everyday...to No Pain!

Millions 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.

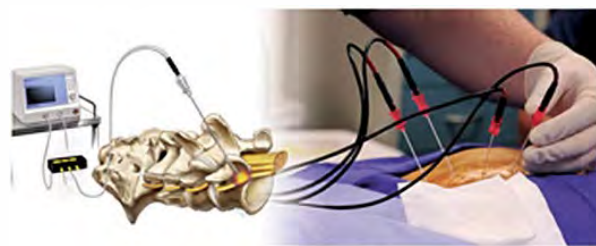
This procedure is entirely safe and effective. It has been used for many years, with long-lasting results for people suffering from pain. The entire process is performed and monitored under fluoroscopy, which is a moving X-ray that is visible to the surgeon on a digital screen. The nerve endings are 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 radiofrequency 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 Spine & 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 Spine & Pain, they treat each patient individually, using the latest equipment and various innovative procedures to diagnose pain and determine your care needs. The President and Founder, **Sunil 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 journals. 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 Spine & 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 Spine & Pain

10740 Palm River Rd. Suite 490, Tampa, FL 33619
4911 Van Dyke Rd., Lutz, FL 33558

(813) 264-PAIN (7246)

www.nationalinstituteofpain.org

Tips For Relieving Stress

Stress and anxiety are a normal part of life and usually short-lived, but for 40 million Americans, it's a daily battle. However, many times, stress is inevitable and natural when we face certain unknowns or anxiety-driven circumstances. If you are dealing with worry or fear due to a new issue in your life or out of concern for a loved one, there are steps you can take to help your unwind and promote good mental health.

Take Time for Yourself

It might be difficult, but carving out time to relax, take a bath, take a walk or simply shut yourself in a separate room for 10 minutes to do deep breathing exercises can reduce anxiety significantly and over time, you will most likely notice that these personal care methods will help you to become calmer throughout the day.

Get Moving

Most people can benefit from taking a brisk 30-minute walk. Exercise increases circulation, reduces stress, it also improves nutrient and oxygen rich blood flow, and helps you build strength. If you can work out harder, it's extremely beneficial to get your heart rate up daily with cardiovascular exercise.

Meditation

Yoga helps to improve flexibility, blood flow, muscle strength, posture, immune function, bone health, decreases depressive episodes, and can regulate blood pressure. Meditation also reduces stress, reduces anxiety, promotes emotional wellbeing, can help fight addictions, can generate health and improve immune function, and it can stave off memory disorders and increase neuronal plasticity.

Sleep

The body produces cytokines, which are protective proteins that block infection and inflammation. When a person gets the recommended, uninterrupted seven to nine hours of sleep, cytokines are produced. Without quality sleep, they are significantly less. Avoid Blue light. Blue light is a significant cause of circadian rhythm interruptions. Blue light emits wavelengths that contribute to sleep disturbances. Blue light comes from artificial lighting and electronics like fluorescent and LED lightbulbs, laptops, mobile phones, iPad, television, some alarm clocks, fiber-optic cable boxes, and other devices that use blue light. The issue is that blue light makes your brain think that it's still

daytime, which makes it difficult to fall and stay asleep. Blue light disrupts the circadian rhythm and natural sleep cycles, specifically, the delta and beta wavelengths, leading to increased activity in the brain, less relaxation and exacerbates stress and anxiety.

Combining Methods is Best

In order to overcome stress, we need a well-rounded treatment protocol that incorporates, medication (if necessary), stress management, nutrition, high-quality sleep, exercise, meditation, hormone balancing and other therapies that can help to stabilize our systems.

When to Seek Help

If your stress or anxiety are lingering, you should take steps to get treatment. Stress can show itself both physically and mentally. If you feel persistently sad, anxious, or on edge; you start having unexplained physical problems; you're unable to sleep; feel irritable all the time; or just feel overwhelmed, it may be time to seek help.

Aston Gardens

Aston Gardens is also one of the most highly sought after communities, due to their dedication to senior needs, their commitment to enriching the lives of each resident and their families by providing personalized care, welcoming living spaces, and superior amenities within three distinct tiers, which include independent living, assisted living, and memory care facilities.

Independent living focuses on being as active, healthy and independent as you want to be, but never alone. Choose from one of our independent living apartment homes, or a luxury for-sale villa and enjoy the all-inclusive carefree, maintenance-free lifestyle at America's award-winning senior living community.

Assisted living offers residents a lifestyle of personal attention and help with activities of daily living, including bathing, grooming, dressing, taking medications and eating properly. Our focus is on health and wellness, helping residents to be as independent as possible with a personalized care plan that includes engaging social activities for a healthy body, enlightened mind and renewed spirit.

With beautifully appointed assisted living suites, assisted living at The Inn is easy with the Aston Gardens One Price Personalized Plan. There are no confusing care levels to think about and our residents pay one low price for services.

SHINESM Memory Care offers a private special needs neighborhood for residents with memory care related issues. Residents needing Alzheimer's care and other dementia care receive the very best attention and services in a supportive, compassionate and secure setting. Based on each individual's needs and capabilities, the professionals at Aston Gardens At Tampa Bay create a personalized plan to help our residents live life as fulfilling as possible, in a secure and comfortable environment.

Want to know why so many people choose to live at Aston Gardens? It's the resort-style life, the caring staff, friendly community, and attention to detail that makes Aston Gardens surpass expectations.

Aston Gardens is a luxury senior living community offering the best combinations of active-adult lifestyles and personalized care services. Wake up inspired each morning with a wealth of amenities, activities, and support at your doorstep. Explore the stylish Grande Clubhouse and indulge in our unique lifestyle services: Sensations Dining, Celebrations Activities and Dimensions Wellness. Let our dedicated team members handle transportation, maintenance, housekeeping, concierge services and more. Here you will find compassionate people engaged in enriching the lives of seniors, ensuring their needs are taken care of every day. Aston Gardens At Tampa Bay offers the best value in affordable, carefree, senior living. Everything we do is focused on providing you the very best in senior living. It's all right here!

Now is the time to schedule your personalized tour! See why so many people want to call Aston Gardens their home!

Call 813-343-4673 today or visit astongardens.com.



When You Are At Your Wits End

Have you ever been at your wits' end? Have you ever been so confused that you didn't really know which way was up? Have you ever had the feeling, "I know I need to do something...but I don't know what 'something' to do."

The Bible tells the story of a group of sailors who went out to sea and encountered a huge storm that almost killed them:

²³Others went out on the sea in ships; they were merchants on the mighty waters. ²⁴They saw the works of the LORD, his wonderful deeds in the deep. ²⁵For he spoke and stirred up a tempest that lifted high the waves. ²⁶They mounted up to the heavens and went down to the depths; in their peril their courage melted away. ²⁷They reeled and staggered like drunken men; they were at their wits' end. ²⁸Then they cried out to the LORD in their trouble, and he brought them out of their distress. ²⁹He stilled the storm to a whisper; the waves of the sea were hushed. ³⁰They were glad when it grew calm, and he guided them to their desired haven. ³¹Let them give thanks to the LORD for his unfailing love and his wonderful deeds for men. Psalm 107:23-31

Can you relate to this group of sailors? Maybe the circumstances in your life have caused your courage to melt away. Perhaps you are going through a storm of your own. You may find yourself at your wits' end without any clear direction as to what to do next. If so, follow the example of the sailors in the Bible.

There first thing they did was cry out to the LORD in their trouble. Don't underestimate the power of prayer. An old gospel song says, "when God is all you have, you'll find He's all you need." God responded to the sailor's prayer by bringing them out of their distress. In fact, it says he stilled the storm to a whisper and the waves of the sea were hushed. God can do that in your life and in your situation as well. Call out to him. His timing is not always as quick as we may like but He knows what is best for each of us.

When the storm was over, the text says that God guided the sailors to their desired haven. They found their place of rest and peace. Storms don't last forever... and neither will yours. Keep your faith in God. Cry out to Him in your pain. Trust that He knows what's best and keep praying and seeking your desired haven... it may be just around the corner.

And then, don't forget to thank God when He does bring you through the storm. The story concludes by saying, "Let them give thanks to the LORD for his unfailing love and his wonderful deeds for men."

Storms, crises, pain and problems are an unfortunate reality of life. We grow through the pain and learn valuable lessons during these times. Don't give up, give in, or quit. When you find yourself at your wits' end...hang on, cry out to God, and look for His deliverance.



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THIS IS NO TIME FOR PAIN

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