



Washington DC Edition February 2023

OBSTRUCTIVE SLEEP APNEA

MEDICAL WEIGHT LOSS

EYE DISEASE

ALL-ON-FOUR
DENTAL IMPLANTS

CHRONIC PAIN & DEPRESSION

DIABETIC PERIPHERAL NEUROPATHY

SENIOR LIVING

BAD BREATH

Diabetes, Stroke & Cardio Health

This Sleep Disorders

Featured Professionals – pages 24-31



Michael Glickman, MD Family and Obesity Medicine



Stephen Kominsky, DPM



Lynda Dean-Duru, DDS Children's Dentistry



Teresa Hilliard, DPM Podiatry



Sherlene James Bond DPM, MS Diabetic Foot Care Specialist



Yemi Adesanya-Famuyiwa MD, FACOG Fertility

Integrative & Complementary

Healthcare

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Aazaz Haq, MD



Barbara J. Brown, PhD
Psychology – Mental Health



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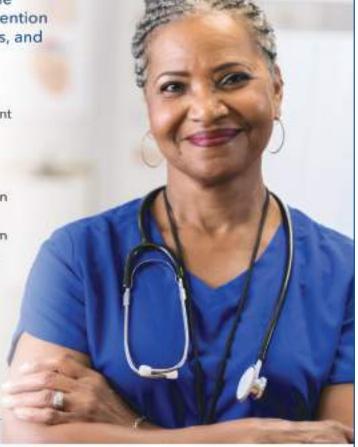
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By Rashmi K. Parmar, DMD, D-ABDSM, Sleep Better Maryland

Sleep apnea is a very serious condition, yet more than 80% of people who have it are undiagnosed. This means out of the 24 million plus people that have it, approximately 19.2 million don't even know they have it.

This is tragic in many cases as they develop life-threatening health issues. They don't even know that their health problems are tied directly to their lack of sleep due to sleep apnea.

Your body needs sleep in order to reboot and repair itself. Lack of sleep causes oxygen levels to decrease and carbon dioxide levels to increase. Your brain signals your body to wake up and start breathing again.

These micro-awakenings have a severe impact on your quality of sleep and overall health.

Who Is At Risk For Developing Sleep Apnea?

There is no one that is immune to sleep apnea. However, there are some who are at risk more than others. Here is a list of factors and a brief explanation:

• Excess weight. Most but not all people with obstructive sleep apnea are overweight. Fat deposits around the upper airway may obstruct breathing. Medical conditions that are associated with obesity, such as hypothyroidism and polycystic ovary syndrome, also can cause obstructive sleep apnea.

However, not everyone with obstructive sleep apnea is overweight and vice versa. Thin people can develop the disorder, too.

- Narrowed airway. You may inherit naturally narrow airways. Or your tonsils or adenoids may enlarge, which can block your airway.
- High blood pressure (hypertension). Obstructive sleep apnea is relatively common in people with hypertension.
- Chronic nasal congestion. Obstructive sleep apnea occurs twice as often in those with consistent nasal congestion at night, regardless of the cause. This may

Don't Let Sleep Apnea Ruin Your Life, Your Relationships, and Your Health

be due to narrowed airways.

- Smoking. People who smoke are more likely to have obstructive sleep apnea.
- Diabetes. Obstructive sleep apnea may be more common in people with diabetes.
- Sex. In general, men are twice as likely as premenopausal women to have obstructive sleep apnea. The frequency of obstructive sleep apnea increases in women after

menopause.

- A family history of sleep apnea. If you have family members with obstructive sleep apnea, you may be at increased risk.
- **Asthma.** Research has found an association between asthma and the risk of obstructive sleep apnea.

How Do You Know If You Might Have Sleep Apnea?

There are several signals you

might have sleep apnea, but two of them are prominent. One is daytime sleepiness. You don't sleep at night so you are tired and fatigued all day. The other is snoring. It is a sign that your airway is obstructed.

The way to know for sure is to have a sleep study. This will tell you whether or not you have it and how severe it is. Call a sleep apnea specialist today and be on your way to a better nights rest and better health.



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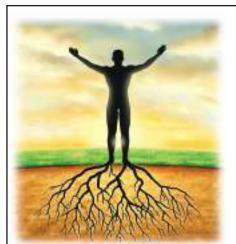
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Your Health Magazine is on a mission. There are far too many people, insured or not, who do not go to the doctor when they should, and in millions of cases, don't know who they should go to, or why.

People are encouraged to buy a new house, car, cell phone or big screen TV, and those companies make themselves very visible and their products easily attainable.

Information about, and from, local healthcare providers is not easy to find, and many times those services are difficult to access.

Information and encouragement always lowers fear and trepidation about anything, and this is especially true in healthcare. While general information is available on web-sites, specific information from local providers is almost impossible for people to find. This is one of the key reasons chronic and episodic conditions are not cared for. It is our mission to:

Make A Difference By Empowering and Encouraging People To Live Healthier By Going To the Doctor When They Should.

There is a lot of evidence that the health professionals who participate in Your Health Magazine have helped many people over the years. We at Your Health Magazine salute you!

G. Scott Hunter, Editor-in-Chief

If you would like to find out how you can participate in one of our upcoming editions, please contact the office nearest you.

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Genicular Ablation For Knee Pain



By Madhavi Chada, MD Synergy Spine and Pain Center

Genicular ablation is an innovative option for treating knee pain without surgery. Usually it is preceded by a diagnostic block with local anesthetic agent. If adequate pain relief is confirmed, patients may proceed for radiofrequency ablation (RFA) or neurotomy.

The Genicular RFA procedure is performed with specialized RF needles which will be placed on the target, the genicular nerve branches of the knee. After confirming the placement

of needles with fluoroscopic guidance, RFA will be performed where the tips of the needles will be heated to 80°C (176°F) for 90 seconds. This will disrupt the nerves which transmit pain from the joint. This procedure is performed under mild sedation with local anesthesia.

The pain relief from this procedure may last anywhere from 6-12 months.

Risks and Side Effects

There are few risks associated with genicular RFA, but they tend to be rare. The potential risks include, immediate or delayed allergic reaction to anesthetics /contrast, infection, bleeding, temporary increase in pain and transient facial flushing.



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Kyphoplasty

Treatment For Spinal Compression Fractures

By Netsere Tesfayohannes, MD, ABA, ABAP Georgetown Pain Managment

In the United States this year, 700,000 people and one out of every four post-menopausal women will suffer from a painful bone injury called a vertebral compression fracture. This common type of bone injury results in the collapse of a vertebra, a type of bone that makes up the spine. Although there is a safe, effective, and minimally invasive therapy available, two-thirds of these fractures fail to be diagnosed. This is unfortunate, as missing this condition can result in under-treated pain, limitations on daily activities, breathing problems, and dependence on dangerous pain medications.

Bone density in both women and men starts to decrease after age forty, but the loss of density greatly accelerates after women enter menopause and can progress to osteoporosis, a disease characterized by very low

bone density, Although most compression fractures occur in patients with osteoporosis, one-third of vertebral compression fractures occur in patients without osteoporosis.

If a fracture occurs suddenly, patients can experience sudden severe back pain that often wraps around the sides and is felt in the chest. Because of this, it is sometimes confused with diseases of the heart or the lungs. The pain is often worse when standing, sitting-up, or walking around. If very severe, the patient can have trouble breathing.

Patients who have symptoms of a fracture should see their doctor for evaluation. After a examination that suggests a vertebral compression fracture, they will often be sent for an MRI. This imaging shows the level of the fracture and also reveals whether it is old or new. Some doctors treat compression fractures with pain medicine, physical therapy, and bracing. However, many cases continue to cause severe pain and long-lasting health effects unless treated more definitively. Unfortunately, many patients and physicians are not aware that there is



Netsere Tesfayohannes

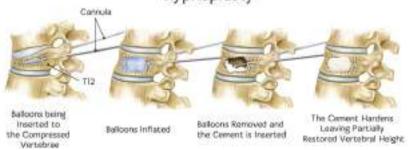
a minimally invasive procedure called kyphoplasty that can quickly, safely, and effectively treat a patient's pain without the long-term use of opioids and other pain medications.

If an acute compression fracture is present on an MRI, a patient should be referred to a pain management physician or another physician who performs kyphoplasty. This procedure can often be performed in a doctor's office, preventing the need for an overnight stay in a hospital. On the day of the procedure, the patient is given a medicine to relax and then is asked to lie on their belly. An x-ray machine is then used to locate the fractured bone and a narrow tube is placed into it through a very small opening in the skin. A small balloon is inflated within the bone to create a small space and the fracture is then filled with bone cement. The entire procedure can take as little as 45 minutes. Many patients feel immediate pain relief and are able to return to their daily lives the day after the procedure. However, some patients may take a week or longer to feel better.

Kyphoplasty most successfully reduces a patient's pain within two weeks following a fracture. Unfortunately, if the window of opportunity is passed, the pain can become more challenging to treat and further complications can occur.

If you think you or someone you care about is experiencing symptoms of a vertebral compression fracture, be reassured that there are safe, effective, and minimally invasive therapies available. Schedule an initial pain evaluation at Georgetown Pain Management to determine if you're eligible for kyphoplasty or other pain therapies. Most insurances are accepted and new patient evaluations are currently being scheduled. As awareness of this condition increases and more patients are offered kyphoplasty as a minimally-invasive therapy, it is hopeful that fewer patients will have to live with the severe pain that results from vertebral compression fractures and can return to their full lives more quickly and comfortably than before.







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Peripheral Neuropathy Treatment



By Dr. Henry N. Jenkins Jr. DC, CCEP Disc Centers of America

Peripheral neuropathy is a condition that affects the nerves that carry messages from the brain and spinal cord to the rest of the body. It occurs when these nerves become damaged or diseased, which can result in pain, muscle weakness, and loss of feeling in the affected areas. Millions of people in the United States are affected by this condition each year.

Peripheral
neuropathy is a
condition that
affects the nerves
that carry
messages from
the brain and
spinal cord to the
rest of the body.

The peripheral nerves originate in the spinal cord and branch out along lines in the body known as dermatomes. When a nerve becomes damaged, it can affect one or more dermatomes, causing pain to radiate out to specific areas of the body. This type of nerve damage can also interrupt communication between the brain and other parts of the body, which can result in muscle weakness and loss of feeling.

There are many different causes of peripheral neuropathy. Some people develop this condition as a result of diabetes, poor nutrition, disease, or infection. It can also be hereditary, although this is less common. In some cases, the cause of peripheral neuropathy is never determined, which is known as idiopathic neuropathy.

Treatment for peripheral neuropathy depends on the type and severity of the condition. For some people, anti-seizure medications or antidepressants may be effective in managing symptoms. Capsaicin cream, which is derived from chili peppers, may also be used to provide modest improvement in symptoms.

Relieving the pain of peripheral neuropathy is often the top priority when treating this condition. However, it is important to note that peripheral neuropathy is not always curable, and treatment may focus on managing symptoms. The goal of treatment is to help patients manage their symptoms, improve their quality of life, and prevent further nerve damage.

In conclusion, peripheral neuropathy is a painful condition that affects millions of people each year in the United States. It occurs when

damage or disease has occurred in the nerves that carry messages from the brain and spinal cord to the rest of the body. The cause of this condition can be varied, including diabetes, poor nutrition, disease, infection, hereditary, or idiopathic. Treatment for peripheral neuropathy depends on the type and severity of the condition, with the goal of relieving pain and managing symptoms, improving the quality of life of patients, and preventing further nerve damage.

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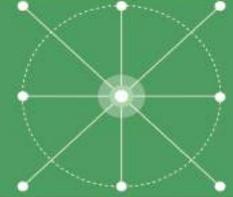
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Submitted by Washington Open MRI

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A recent study by Dr. Michael Freeman published in July 2020 states, "There are approximately 869,000 traffic crash-related cervical spine injuries seen in hospitals in the US annually. The annual counts of whiplash and spinal disk injuries in the US likely exceed 1.2 million and 33,000, respectively. National insurance claim data, which include cases of cervical disk injury diagnosed both in and outside of the emergency room indicate this data likely undercounts cervical disk injuries by 92%, and correspondingly undercounts

Please see "Chronic Pain," page 38

A Reason To Smile Again

All-on-Four Dental Implants



Submitted By Sivakumar Sreenivasan, DMD, MDS Dental Implant Center of Rockville

Can just four implants replace all of the teeth on the top or the bottom of your mouth? Thanks to advances in dental implant technology, that answer is a resounding yes.

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Please see "All-On-4," page 38

All-On-4: Same Day Smiles



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By Deeni Bassam, MD, DABPM The Spine Care Center

Diabetes is an unfortunate affliction, which plagues the lives of millions of Americans. Most of us are already familiar with the basic understanding of diabetes as a problem in

standing of diabetes as a problem in the regulation of glucose (sugar) in our bloodstreams. This simple problem of too much sugar, over time, leads to a cascade of secondary effects ultimately wreaking havoc on organ systems across the body.

It would be an overreach to attempt to discuss, or even to list, all of the end organ effects of diabetes in such a humble article so, instead, we focus on only one such complication of diabetes known as painful diabetic peripheral neuropathy (PDPN).

Although several theories for the origin of PDPN exist there is significant evidence that PDPN is the consequence of dysfunctional nerve endings in our feet, which in turn is the consequence of damage to the most delicate of arteries which supply nourishment to these nerve endings. Relentless hyperglycemia in poorly controlled diabetics leads to the destruction of the micro-vascular system and an asphyxiated peripheral nervous system responds with signals of distress we know all too well as pain.

Over time, a pattern of constant burning pain in the feet develops along with loss of sensations and even changes in the overlying skin. The pain can become severe enough to interfere with simple activities of daily living and is described as "suffering" by many. In severe cases, progression of the blood flow limitation leads to dead and gangrenous tissues necessitating around two thirds of the amputations done in our country.

Thankfully, treatments do exist for both the primary causes and secondary effects of PDPN. The single greatest way to prevent the development of PDPN is tight control of blood sugar.

Your primary physician can help you with the tools to manage your diabetes effectively and evaluate you for one of several new FDA approved medications for the symptoms of

Diabetic Peripheral Neuropathy
- Oh, My Burning Feet

PDPN. These medications have been shown to make a positive difference in pain levels, sleep quality, and functional capacity. It is unclear at this time if these medications will have an effect on the natural progression of PDPN.

For more advanced cases of PDPN, which do not respond to trials of readily available medications, referral to a pain specialist could be considered to review other treatment options. In Europe, there is extensive experience with implantation of small devices in the body, which electrically stimulate certain nerve fibers, which in turn cause a significant improvement in blood flow to the feet.

This treats primarily the pain of PDPN and does so presumably by improving the blood flow and nutritional state of the nerve endings. In many European countries this is used in lieu of amputation.

If you are a diabetic you should work closely with your physician in managing all that comes with this chronic condition. Remember that the best way to prevent the development of PDPN and its complications is tight control of your blood glucose level.

Back Pain? Back and neck pain can be treated.

Back and neck pain are among the most common reasons for doctor visits, and are major causes of disability, lost work days, and high healthcare costs. Back or neck pain is a symptom, not a disease. That means the pain is likely being caused by something that can often be relieved when treated by the board certified physicians at The Spine Care Center.

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- Post Laminectomy Syndrome
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Study Of Potential Alzheimer's Treatment

Submitted by Re:Cognition Health

Alzheimer's disease starts with mild memory loss. What if there was a pill to prevent the disease from getting worse?

Studies of an investigational drug are underway to see if it may be effective in slowing the progression of Alzheimer's disease in people who carry two copies of a certain gene (APOE/4) that increases the risk of developing it and other dementias.

While one in four people carries one copy of the gene, only 2 to 3% of the population carries two, and hence are at greatest risk.

Results in a small, ongoing phase II trial of the drug in early Alzheimer's patients with two copies of the gene showed "significant improvement" on memory tests after six months, according to Alzheon, a Massachusetts-based company developing it and a number of potential drugs for Alzheimer's.

Phase three clinical trials of the drug, named ALZ-801, are getting underway. These constitute the final step before the FDA reviews the drug for possible approval. The company's nationwide study is called ApolloE4.

Volunteers Being Sought

In our area, people can participate in the study via Re:Cognition Health – a clinic in Fairfax, Virginia.

Anyone age 50-80 with a diagnosis of mild cognitive impairment (memory loss) is eligible to volunteer. Free genetic testing and testing for Alzheimer's will be done, and participants will be reimbursed for their time.

Participating is also an opportunity to help future Alzheimer's patients, pointed out Monica Bland, operations manager at Re:Cognition Health. "They would be contributing to science and helping people in the future," Bland said.

The 18-month, randomized, doubleblind study requires nine inperson visits to Re:Cognition Health. Participants will also undergo three MRIs or CT scans (their choice).

Half of participants will receive the study drug, and the other half will receive a placebo. Each will take one pill in the morning and one in the evening. The drug has already been proven safe in phase 1 trials. It has been well tolerated in studies so far when taken twice a day with food. Alzheon is hopeful the treatment will eventually save millions from suffering from Alzheimer's disease.

Currently there are no approved drugs that stop or prevent the clinical decline typical of Alzheimer's disease.

Volunteers Being Sought

In our area, people can participate in the study via e:Cognition Health — a clinic in Fairfax, Virginia.

Travel expenses are paid, for all visits.

"Our end goal is to help patients [by providing] other options for Alzheimer's disease medications, because there is not much out there," Bland

said. "The FDA-approved drugs aren't doing much." For more information or to volunteer to participate in the ApolloE4 study, call 703-520-1000.





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*Trials also available for healthy volunteers to stop them from getting memory loss in the first place.

571-418-0142 Fairfax Clinic

8316 Arlington Boulevard Suite #420 Fairfax, VA 22031 hello@re-cognitionhealth.com **Re:Cognition Health Fairfax** opened its doors in May 2018 is led by Neurologist, Dr. Scott Turner. Currently, the clinic is specializing in phase 2 and 3 pharmaceutical trials focused on finding a disease-modifying medication to treat those suffering from Mild Cognitive Impairment and Alzheimer's Disease.

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By Michael Rogers, DDS Fairlington Dental

Various surveys report that when you meet someone for the first time, you notice their smile more than any other feature. This fact is why so many people are interested in cosmetic dentistry. Cosmetic dentistry can include whitening, porcelain veneers, orthodontics (braces), dental implants, oral surgery, gum lifts, tooth-colored fillings or even a fresh set of dentures. And depending which type of dentist you go to, you may be offered only one or two of these options, whereas a combination of several treatments may be more appropriate. Since there are so many options to choose from, this article will help you make an informed and intelligent decision about which options are best for you.

Whitening

Tooth whitening uses various forms of hydrogen peroxide, which has been shown to be not only safe for teeth but also beneficial to the gums. The major drawbacks to whitening are sensitivity and unpredictability. Various "whitening strips" can be purchased over the counter and work well for light staining on otherwise normal teeth. Custom bleaching trays provided by a dentist provide even better results, if you are willing to wear them for at least 15 minutes a day for a few weeks. In-office bleaching in a dental office does the same job very quickly and any sensitivity is short lived. Finally, "Kor Whitening" is a special system developed to treat tetracycline staining which combines in-office treatments and take home trays to get the best results with the least sensitivity.

Porcelain Veneers

Porcelain veneers are thin facings that are bonded to the front of your teeth to restore your smile. They can completely cover stains, as well as even out crooked teeth and make chipped teeth look like new. The results can be dramatic and immediate, and the veneers can last for decades. The drawbacks are high cost, sensitivity, and the need to replace them periodically. But for certain cases the advantages far outweigh the disadvantages. The veneers can usually be

Cosmetic Dentistry Know ALL Your Options

completed in just a few visits, making them perfect for patients wanting "immediate gratification."

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If you don't mind waiting some months for your new smile, orthodontics may be a much better option than porcelain veneers. For patients with nice looking natural teeth, just crooked or gapped, orthodontics is a more natural and cost-effective approach. Invisalign is a series of clear plastic trays which gently move your teeth to their new, straight position. At an average treatment time of only 11 months, Invisalign is quicker and easier than traditional braces, plus there are no diet restrictions and no issues brushing and flossing.

The Comprehensive Approach

The comprehensive approach utilizes all of the above options and more by combining two or more treatment modalities. It starts with identifying the patient's desired result, budget, lifestyle issues and time frame. All of these factors can influence a patient's decision about treatment and should be taken into consideration by the dentist.





Dr. Michael Rogers Our Complete Health Approach

At Fairlington Dental, we understand the connection between a healthy

smile and a healthy body. As a result, we look at the whole person to discover the reasons a patient may have gum disease or a bad bite. A number of studies link heart disease and other serious conditions to the presence of periodontal (gum) disease. This research makes it vital that we take a Complete Health approach to your dental care. Dr. Rogers will listen to you, conduct a careful assessment, and carefully explain your proposed customized wellness plan. He will then take the time to answer all of your questions. You become a partner in your oral health goals!

Our team has mastered the techniques of gentle dentistry and is skilled at helping patients with any level of apprehension relax and grow comfortable with visiting the dentist. Anxiety and tension have a variety of sources, so it's important for us to listen to your concerns as well as your goals and history. Then we address your anxieties and proceed with gentle treatment only when you're ready. We deliver all of this in an office that is environmentally aware, while you enjoy a variety of spa-like amenities during your visit.

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The Different Causes Of Neck Pain

By Levi Pearson MD, DABA, DABPM Metropolitan Pain and Spine

Neck pain is a common issue that affects many people at some point in their lives. The neck, also known as the cervical spine, is made up of bones, muscles, nerves, and other soft tissues that work together to support the head and allow for movement. When any of these components become damaged or irritated, it can lead to pain and discomfort in the neck.

There are many different causes

of neck pain, including poor posture, injury, disease, and even stress. Poor posture, such as slouching or holding the head in a forward position for long periods of time, can put extra strain on the muscles and ligaments in the neck, leading to pain and stiffness. Injuries, such as a whiplash from a car accident or a fall, can also cause neck pain. Certain diseases, such as osteoarthritis, rheumatoid arthritis, or a herniated disc, can also lead to neck pain. Stress can also cause neck pain, as tension in the muscles can build up and cause pain and discomfort.

Symptoms of neck pain can vary depending on the cause, but common symptoms include stiffness, soreness, and a dull ache. The pain may be felt in the neck, shoulders, or even in the arms or hands. Some people may also experience headaches, difficulty moving the neck, or even a tingling sensation in the arms.

Treatment for neck pain depends on the underlying cause of the pain. For minor cases of neck pain caused by poor posture or stress, simple home remedies such as rest, ice or heat therapy, and over-the-counter



Levi Pearson, MD, DABA, DABPM

pain medications can help alleviate symptoms. Gentle stretching and exercise can also help to improve posture and relieve muscle tension.

In more severe cases, a healthcare professional may recommend physical therapy to help strengthen the muscles and improve range of motion. Chiropractic care or massage therapy may also be beneficial. For chronic cases of neck pain, medications such as nonsteroidal anti-inflammatory drugs (NSAIDs) may be prescribed to reduce inflammation and relieve pain. In some cases, interventional pain procedures such as epidural steroid injections, medial branch facet injections, and and spinal cord stimulation, as well as possible surgery may be necessary to correct underlying issues, such as a herniated disc.

Prevention of neck pain is key, and maintaining good posture, regular exercise, and stress management can help. Proper posture while sitting or standing is also essential, as is maintaining healthy body weight and avoiding smoking.

It is important to consult with a healthcare professional if neck pain persists or becomes severe. They will be able to properly diagnose the cause of the pain and recommend the most appropriate course of treatment.

In summary, neck pain is a common issue that can be caused by a variety of factors, including poor posture, injury, disease, and stress. Symptoms of neck pain can vary and include stiffness, soreness, and a dull ache. Treatment options depend on the underlying cause of the pain and can range from home remedies to physical therapy, medication, interventional pain procedures and treatments, and even surgery.

While neck pain is common, it does not have to be chronic. Taking proactive measures to prevent neck pain can help you avoid it in the first place, and getting proper treatment if it does occur can help you manage it and get back to your normal activities.

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Optical Insight



What Is Diabetic Eye Disease?

By Jacqueline D. Griffiths, MD New View Eye Center

Approximately 20.8 million Americans have diabetes. More than half of these individuals are at risk for vision loss and other health problems, because they don't know they have the disease.

Diabetic eye disease, a group of eye problems that affects those with diabetes, includes diabetic retinopathy, cataracts and glaucoma. The most common of these is diabetic retinopathy, which affects 5.3 million Americans age eighteen and older.

Diabetic retinopathy is a potentially vision threatening condition in which the blood vessels inside the retina become damaged from the high blood sugar levels associated with diabetes. This leads to the leakage of fluids into the retina and the obstruction of blood flow. Both may result in vision loss.

The National Eye Institute (NEI), the Federal Government's lead agency for vision research, urges all people with diabetes to have an eye examination through dilated pupils at least once a year.

Blurred vision may occur when the macula – the part of the retina

that provides sharp, central vision – swells from the leaking fluid. This condition is called macular edema. If new vessels have grown on the surface of the retina, they can bleed into the eye and block vision. But, even in more advanced cases, the disease may progress a long way without symptoms. That is why regular eye examinations for people with diabetes are so important.





Normal Vision

Diabetic Retinopathy

More than one third of those diagnosed with diabetes do not receive the recommended vision care and may be at risk for blindness. Because there are often no symptoms in the early stages of diabetic retinopathy, your vision may not be affected until the disease becomes severe.

Once diagnosed with diabetes, schedule a complete dilated eye examination with your eye doctor at least once a year. Make an appointment promptly if you experience blurred vision and floaters that:

- · Affect only one eye
- Last more than a few days
- Are not associated with a change in blood sugar

In advanced cases of diabetic retinopathy, laser treatment has been shown to reduce the loss of vision. This surgery does not cure diabetic retinopathy, nor does it prevent future vision loss, especially if diabetes or blood pressure is not well controlled.

Diabetes can also affect your vision by causing cataracts and glaucoma. If you have diabetes, you may get cataracts at a younger age and your chances of developing glaucoma are doubled.

Early diagnosis of diabetes and effective control of blood sugar and hypertension through proper diet, exercise and medication can help reduce your risk of developing eye diseases associated with diabetes. Finding and treating the disease early, before it causes vision loss or blindness, is the best way to control diabetic eye disease. So, if you have diabetes, make sure you get a dilated eye examination at least once a year.



Jacqueline D. Griffiths, MD

Selected as a "Super Doctor",

Washington Post Magazine

Voted
"Top Ophthalmologist"

Washingtonian Magazine & Northern Virginia Magazine

Jacqueline D. Griffiths M.D. earned her undergraduate degree at Yale and her medical degree from the University of Michigan. Her Ophthalmology residency was completed at Georgetown University Medical Center.

Dr. Griffiths has been in private practice since 1994. She started her own practice and laser center, NewView Laser EyeTM in 1999 where she serves as the Medical Director. NewView's Mission is to provide Excellence in Ophthalmologic services by giving personalized attention to every patient.

Dr. Griffiths is Board Certified and began performing laser vision correction practically from its inception in this country. She has performed thousands of cases and participated with the CRS-USA LASIK trials to get the LASIK procedure approved by the FDA.

In addition to offering CustomVue LASIK and EpiLase, NewView offers CKSM, no-stitch cataract surgery, annual eye exams, contact lenses, glaucoma and diabetic screening exams, and cosmetic services including Botox, Restylane, Radiesse, Juvederm, and eyelid surgery. NewView Optical offers affordable high quality frames and lenses for the entire family (ages 5 and older).

Dr. Griffiths is the immediate past Ophthalmology Section Chief of Reston Hospital Department of Surgery, the former Chief of Ophthalmology for the Reston Ambulatory Surgical Center in Reston, VA as well as Loudoun Hospital in Leesburg, VA, Diplomate of the American Board of Ophthalmology, a Fellow of the American Academy of Ophthalmology, a member of the American Society of Cataract and Refractive Surgery, the Washington National Eye Center and others.

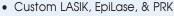


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By Yeji Lee, LAc Active Care Chiropractic & Acupuncture

Today, we rely heavily on electronic devices such as smartphones

Carpal Tunnel Syndrome and Acupuncture

and computers, leading to an increase in pain related to daily activities. One of these conditions is nerve pain in the wrist area, known as carpal tunnel syndrome.

In Western medicine, a syndrome often indicates a complex disease with no direct cause, making it difficult to find an exact treatment. However, acupuncture is a treatment option that can help manage this syndrome.

Before seeking treatment for carpal tunnel syndrome, it is important to understand the symptoms and how to diagnose the disease.

Symptoms





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Master of Chinese Oriental Medicine in Beijing University
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Tingling: Carpal tunnel syndrome may start with mild pain and gradually intensify. The most common initial symptom is tingling in the fingers, especially from the wrist to the middle finger. The tingling may feel like an electric shock and can spread to the arm as the symptoms worsen.

Numbness: Patients may also experience numbness while using their smartphone or holding objects such as a phone, book, or newspaper.

Weakness: In severe cases, patients may also feel weakness while holding objects, leading to dropping them when trying to pick them up.

Diagnosis

The most common physical tests for carpal tunnel syndrome are Tinel's sign and Phalen's maneuver, which doctors can perform. If these tests are positive, they can strongly suspect carpal tunnel syndrome. Ultrasound and MRI can also assist in the diagnosis and show if the median nerve and surrounding soft tissues are swollen or compressed. However, before making a diagnosis, doctors must rule out other possible diseases.

Treatment

Traditional oriental medicine offers several options for treating carpal tunnel syndrome, including acupuncture and moxibustion.

The most straightforward way to treat carpal tunnel syndrome with acupuncture is by targeting the wrist, arm, hands, and fingers. One treatment may already help, but it may take time to completely heal. The duration of treatment varies per person and situation.

Other acupuncture options for this syndrome include electric acupuncture, moxibustion acupuncture (also called warm acupuncture), and magnetic acupressure. Moxibustion with acupuncture is highly recommended. Patients can receive acupuncture from an acupuncturist in a clinic and perform moxibustion at home for convenience.

Sleep-Mouth Issues and Your Baby



By Lynda Dean-Duru, DDS Ashburn Children's Dentistry

Did You Know That Breastfeeding Affects How Well Your Child's Face and Jaws Grow, and Sets Them Up For Good Sleep?

You waited nine months for the arrival of your precious baby. But what happens if you find out you are experiencing excruciating pain during breastfeeding? After all, this powerful instinct is meant to help create the bond between mother and child. Mothers in this situation either power through, supplement with bottle feeding, or they give up altogether, only to suffer from mom guilt.

Many babies have restrictions that make it difficult, sometimes impossible, to breastfeed. Typically, these situations involve anatomic, functional, and sometimes neurological issues with the baby.

When babies are not able to easily breastfeed, this impacts the growth of their face and jaws. The tongue acts as a natural pump while breastfeeding and drives the development of the face, jaws, and airway. When tongue function is compromised, breastfeeding, breathing, sleep, and the growth of the face and jaws are adversely affected.

We are born as obligate nose breathers, which means that nature intended that our tongues lay on the roof of our mouth and that we breathe exclusively through our nose. Open mouth posture and subsequent mouth breathing, noisy breathing, snoring, frequent nose congestion, teeth grinding, allergies and sometimes asthma-like symptoms can occur in the absence of good nasal breathing and often lead to breathing-related sleep disorders.

As the baby grows, non-restorative sleep generally shows as restlessness, lack of focus, attention issues,

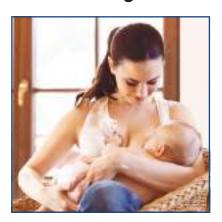
anxiety, sensory issues, and other behavioral issues seen in many toddlers and young children. Often many of these children are misdiagnosed as having ADHD.

Other symptoms include:

- Development of a narrow or long face
- Gummy smile
- · Crooked teeth and misaligned jaws
- · Difficult toothbrushing and gagging

- Sleeping with head and neck hyperextended or with "butt" in the air
- · Picky eating
- Bedwetting beyond potty-training
- Sleepwalking

If you notice any of these problems with your child, ask your pediatrician for a referral to a specialist or dental professional who is familiar and educated on the connection of sleepmouth issues to overall health.





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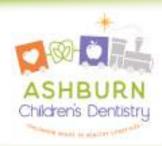
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Every Child Deserves a Healthy Start



By Ranti Aryani, DDS, FAAOSH Presidential Dental

High-quality sleep is extremely important for children. Tired children can have trouble focusing, struggle in school and be more irritable. However, troubled sleeping can sometimes be caused by more than just a lumpy pillow.

Sleep disordered breathing (SDB) is a common issue among children, with an estimated nine out of ten children suffering from one or more symptoms related to SDB. These symptoms can include:

- ADD/ADHD,
- Lower IQ,
- · Chronic allergies,
- · Aggressive behavior,
- · Mouth breathing,
- Swollen adenoids and tonsils,
- Daytime drowsiness,
- Crooked teeth,
- · Restless sleep,
- Bedwetting,Nightmares,
- Dark circles under the eyes,
- Snoring,
- Irritability,
- Frequent headaches,
- · Arrested growth, and
- Low grades in math, science, and spelling.

The HealthyStart System is an oral appliance therapy that addresses the root causes of SDB by promoting the proper growth and development of the jaw and airway to optimize airflow and promote proper nasal breathing while simultaneously straightening the child's teeth. This system has been specifically designed to address these issues and improve the overall health of children.

When SDB-induced breathing problems are addressed, many symptoms of SDB disappear. Children are able to breathe properly and can learn, grow, and reach their full potential. Many children with the above health disorders are being "treated" with powerful medications without evaluating the possible root cause of their issues. The HealthyStart System

evaluates the child to determine if there is a breathing and sleeping issue and if they may benefit from the treatment.

The HealthyStart System is non-surgical, non-pharmaceutical, pain-free, and non-invasive. It is soft, comfortable, and worn at night or as directed to assist parents who struggle with children affected by

SDB, a restricted airway, and crowded or crooked teeth. The system is also FDA Cleared, BPA, silicone, and latex-free, ISO certified, and a Health Canada Class II Medical-grade device.

It is important to note that when treatment begins early, the perfect smiles that the HealthyStart Appliance System creates are less likely to relapse. It creates healthier, happier kids who can breathe. As a parent, it is important to give your child every chance to succeed, and the HealthyStart System is a safe and effective way to do so. Every child deserves a healthy start, and the HealthyStart Appliance System can help them achieve it.



The HealthyStart™ System has been specifically designed to promote the proper growth & development of the jaw & airway to optimize air-

flow & promote proper nasal breathing while straightening your child's teeth. As these areas develop, many symptoms of Sleep Disordered Breathing disappear. When kids can breathe properly, they begin to learn, grow & blossom into their true potential!



Give your child the head start they need for a lifetime of good oral health.

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Michael Glickman, MD



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Meet Dr. Michael Glickman

Dr. Michael L. Glickman, MD, is a double Board Certified Family Medicine and Obesity Medicine physician who has been practicing since 2013, and founded Revolution Medicine in 2021.

Revolution was born from the idea that there is something missing in the US health care system, which has been designed to treat disease rather than prevent it. Nearly three-quarters of adults are overweight, yet doctors have little time to promote wellness, with limited advice beyond "eat less, exercise more."

Dr. Glickman's aim has been to correct this imbalance by creating a holistically tailored program that considers the whole person, mind and body, to promote weight loss, and prevent and reverse chronic disease.

When he's not taking care of patients, Dr. Glickman spends time with his wife and two children. To stay healthy, Michael weight trains, plays tennis, and cooks nutritious meals. He is a classically trained violinist and enjoys practicing in his free time. Michael graduated from the Florida State University College of Medicine, and completed his residency at VCU-Fairfax Family Practice / INO-VA Fairfax Hospital.

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Stephen Kominsky, DPM

Mid Atlantic Podiatry Associates



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Meet Stephen Kominsky:

Dr. Kominsky is Board Certified in Reconstructive Foot & Ankle Surgery by the American Board of Podiatric Surgery and is a Fellow in the American College of Foot & Ankle Surgeons.

Dr. Kominsky received his doctorate from the Temple University School of Podiatric Medicine in 1982. His undergraduate Bachelor's Degree in biology was granted from the University of Maryland in College Park.

Following graduation, his surgical training was at the Hayward Vesper Hospital in Hayward, CA, where he specialized in reconstructive foot and ankle surgery along with special emphasis on complications from diabetes. Dr. Kominsky moved his practice to Washington in 1983.

During his professional career, Dr. Kominsky has lectured on topics specifically related to foot and ankle surgery and diabetic foot care at over one hundred medical conferences around the world. He has authored numerous professional papers and articles, and has had the opportunity to edit and contribute to several podiatric textbooks.



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Lynda Dean-Duru, DDS

Ashburn Children's Dentistry

44025 Pipeline Plaza Suite #225, Ashburn, VA

703-723-8440

info@kidzsmile.com



About Lynda Dean-Duru

Dr. Lynda Dean-Duru pursues pediatric dentistry with a passion rooted in her fascinating personal story.

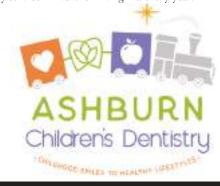
For Doctor Lynda, the pathway to dentistry started during her own childhood experience with a dentist's impact in her native Nigeria. As the eldest of nine children (including seven brothers), she witnessed a total transformation in the health of one of her little brothers after his aches and pains were totally resolved under the care of a well-trained dentist.

As a result of this transformative experience, young Lynda determined to extend that kind of care to others as her life's calling. She went on to earn her dentistry degree from the University of Benin, her General Practice residency from Howard University Hospital, her Pediatric Dentistry Specialty Training from Children's National Medical Center, Board Certification from the American Board of Pediatric Dentistry, and her Fellowship Laser Certification from the Academy of Laser Dentistry.

Doctor Lynda has undertaken much continuing education in Orthodontic training and is a fellow of the United States Dental Institute and a member of the prestigious Gnathos education group in Atlanta, Georgia. She holds a certification in Oral Myology from the International Association of Oral Myology (IAOM). She has completed levels 1 and 2 of the Advanced Light force functionals (ALF) therapy, ALF Interface Academy Foundations, Genesis, and other courses.

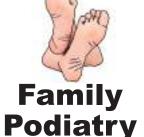
Doctor Lynda is part of an Integrative team of healthcare providers seeking to deliver optimal health to our pediatric population by education, awareness, and collaborative care. She also has a special interest in treatment that focuses on infants' breastfeeding and prevention of sleep apnea in children.

She is a member of numerous professional and civic associations and provides tens of thousands of dollars in pro bono screenings and procedures along with other community service in Northern Virginia every year.



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Teresa Hilliard, DPM



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Dr. Teresa Hilliard is a highly skilled and experienced podiatrist based in Bladensburg, Maryland. She graduated from Howard University in 1980 and went on to complete her medical education at New York College of Podiatric Medicine in 1990. She then completed her internship at Hampton University in 1989 and her residency at Washington DC Veterans Administration Medical Center in 1990.

Dr. Hilliard is particularly experienced in helping patients with diabetes. Diabetes can cause a number of complications in the feet, including poor circulation, nerve damage, and an increased risk of infection. Podiatrists like Dr. Hilliard are experts in foot and ankle care and can help diabetics manage these complications through regular check-ups, wound care, and custom orthotics. They can also work with patients to prevent amputations or other serious complications. Overall, Dr. Hilliard has dedicated her career to helping her patients maintain their mobility and overall foot health.

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Dr. Sherene James Bond, DPM, MS is a Board Certified Foot and Ankle Specialist. Although born and raised in Virginia, Dr. Bond currently resides in Maryland. She and her loving husband have two sons who are the center of their family life.

Dr. Bond received her Bachelor of Science in Biological Sciences from Virginia Commonwealth University in Richmond, VA. She went on to receive both her Master of Science degree in Biomedical Sciences and Doctorate of Podiatric Medicine and Surgery from Barry University in Miami Shores, FL. Dr. Bond received her residency certification from Richmond University Medical Center in Staten Island, NY.

Professionally, Dr. Bond's work experiences where she provided podiatric care includes Future Care Capital Region in Landover, MD; Erickson Living Community at Ashby Ponds in Ashburn, VA; Doctors Community Hospital in Lanham, MD; and the University of Maryland Prince George Hospital Center in Cheverly, MD.

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Meet Yemi Adesanya-Famuyiwa:

Degrees, Training and Certificates: M.D. – Emory University School of Medicine, 1989. Residency in OB/GYN – Georgetown University, 1989-1993. Fellowship in Reproductive Endocrinology and Infertility – The National Institute of Health,1993-1995. Graduated, Magna Cum Laude with a degree in Biological Sciences – Kent State. Board Certified in Reproductive Endocrinology and Infertility, as well as Obstetrics and Gynecology.

She is the founder of Montgomery Fertility Center, as well as the Associate Clinical Professor of Obstetrics and Gynecology at George Washington University School of Medicine and an attending physician at Holy Cross Hospital in the department of Obstetrics and Gynecology.

Practice Philosophy: Dr. Famuyiwa is at the forefront of providing state-of-the-art care based on emergent and ongoing new technologies and research. This is based on a philosophy to provide exceptional care in the most compassionate manner in order to achieve the best possible outcomes for her patients. Her work has been recognized by numerous awards.

Awards: Top Doctor in Washington-Baltimore in 2012. Castle Connolly Top Doctor every year since 2012 to 2022. Castle Connolly Exceptional Women In Medicine award every year since 2017 to 2022. Named one of *Bethesda* Magazine Top Doctors in 2019.

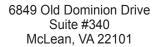


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Barbara J. Brown, PhD



Washington, DC Maryland & Virginia 202-544-5440

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Meet Dr. Barbara Brown:

With a lifetime of professional experience and personal passion in the field of mental health, Dr. Barbara Brown founded Capitol Hill Consortium for Counseling and Consultation in 2009, and currently serves as the leader of CCCC's five DC-area practices and more-than 80 clinicians and administrative staff. Out of the office, her work continues; Dr. Brown is a fixture in the community, and frequently dedicates her time to spreading mental health awareness to groups like churches, schools, and corporations.

As founder, Dr. Brown brings more than three decades of psychological experience to CCCC, LLC. With a passion for community, Dr. Brown leads a team that values diversity first and foremost, and the pursuit of ensuring that each client has an experience that allows them to live an elevated life.

Coming from a simple, but persistent desire to normalize caring for our minds, just as much as our bodies. Dr. Brown built this consortium with you, your neighbor, your family, your friends, and your community in mind.

"There is no health without mental health." These words said by Dr. David Satcher, the first Black Surgeon General of the U.S., served as the spark that fueled her determination to provide accessible, quality mental health care to all, especially in communities of color.

The clinicians and administrative staff who choose to work here do so because of their dedication to our mission of providing high-quality, accessible, and culturally responsive mental health services. We strive to provide a community of therapists that reflects the communities where we work. We are a multicultural and multidisciplinary practice. Our wish is that everyone who wants to receive mental health care can do so.

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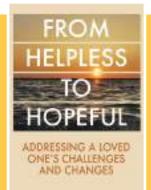
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FROM HELPLESS TO HOPEFUL

By Beth Albaneze and Co-Author Amy E. Trumbull

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This book is meant to provide guidance and ideas on how to help and what to expect when you are dealing with a loved one's acute or chronic challenge or life transition, whether it's as relatively common as retirement, a teen moodiness or as major as unemployment, medical urgency, divorce, or a clinical diagnosis of mental illness.

The goal of this book is to make people aware of the many health services available and to suggest ways to access them.

Trying to make all the parts work together can understandably provoke a lot of anxiety.

This book will help take the mystery out of some common mental health care situations and offer readers new ways to look at their challenging circumstances.

This book will also help guide families and caregivers through a process that the author has experienced personally and navigated professionally for decades.



Beth receiving the Governors Citation Award

Monica Banks Greene, PhD

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240-297-9940



Meet Monica Banks Greene:

Dr. Greene is a Life Coach specializing in individual, couples and family psychotherapy, and maintains a private practice in Largo, MD.

With over 10 years experience as a clinician, she is currently serving as a private practitioner working with a broad spectrum of clients. She has been featured on the Oprah Winfrey Network (OWN) working with couples with infidelity issues on the show called Unfaithful.

In addition, Dr. Greene has presented at National conferences and to general audiences on topics ranging from Stress Management, Domestic Violence, Managing Difficult Adolescents, Keeping Relationships Strong in Today's Times, Are We Ready for Marriage, Pre-Marital Counseling, Is Our Marriage in Trouble, Marital Counseling and Making our Same Sex Relationship Strong.

Dr. Greene is a practical, interactive, solution-focused therapist. Her treatment approach is to provide support and practical feedback to help clients resolve current problems and long-standing patterns. She incorporates a blend of conventional and alternatives approaches, drawing upon a variety of styles and techniques to incorporate what will be most helpful for each client. With sensitivity and compassion, she works with each client to help them build on their strengths to identify and achieve life goals.

$\label{professional} \textbf{Professional Counseling Experience \& Additional Training:}$

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 Conflict Resolution
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Meet Gregory Cardinal:

Degrees, Training & Certifications: Dr. Cardinal is a Midwest native and finished his undergraduate studies at the University of Minnesota. He pursued his doctoral education at Scholl College of Podiatric Medicine in North Chicago, IL and graduated with a dual degree of Doctor of Podiatric Medicine and Master of Science in Healthcare Administration and Management. Dr. Cardinal went on to complete a 3-year medical and surgical Residency with the VA Maryland Healthcare System with a focus in wound care, general podiatry and surgery. Dr. Cardinal is Board Certified by the American Board of Podiatric Medicine and is a Fellow of the American College of Foot and Ankle Orthopedics.

Special Interests/Services: Podiatrist in Motion is a unique practice whose primary focus is house calls for foot and ankle concerns. Dr. Cardinal will come to you, to your home or office; meaning no waiting rooms, no traffic and no rushed visits. He treats all ages specializing in many general podiatric concerns such as heel pain, medical pedicures, ingrown nails, warts and pediatric podiatry. He performs biomechanical exams and casting for custom orthotics. Dr. Cardinal also offers cutting-edge treatments such as laser therapy for fungal nails and musculoskeletal pain.

Personal Interests & Hobbies: In his free time, Dr. Cardinal enjoys playing tennis, running, spending time with family and friends and playing the

Practice Philosophy: Podiatrist in Motion's mission is to bring the foot care clinic to you, in the comfort of your own home, office or wherever you may need care. Private-pay only.



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Dr. Karl Smith specializes in periodontics and implantology. As a periodontist, Dr. Smith specializes in treatment of gum disease, the maintenance of periodontal health, cosmetic smile enhancement procedures, and dental implants to replace teeth that are missing. Although no one likes to go to the doctor or dentist, we strive to make your visits with us as comfortable and pleasant as possible. We strongly believe that our patients' comfort is an important part of quality dental care.

Dr. Smith believes that your right to choose a dentist is an important freedom. We work closely with your dentist, but a referral by a dentist is not required to visit our office. We also welcome referrals from patients and friends of the practice. Everyone that is interested in keeping their teeth for a lifetime should see a periodontist.

Dr. Smith's colleagues describe him as a gentle, easy-going person, and people come from near and far to experience the comfort and professionalism of his office and patient-oriented staff. He is consistently rated by his peers as a Top Dentist 2012-2021 in *Virginia Living*, *Washingtonian Magazine*, and *Northern Virginia Magazine*.

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Degrees, Training and Certificates:

Doctor of Dental Surgery Degree from the University of California, Los Angeles 1981. After graduation immediately entered General Practice in the U.S. Air Force Dental Corps. Successfully completed three additional years of advanced training in the specialty of Periodontics, Dental Anesthesia and Implants in 1992 at the University of Texas Health Science Center, San Antonio and Wilford Hall USAF Medical Center. Retired from the U.S. Air Force as a Lieutenant Colonel after four years of reserve and fifteen years of meritorious world-wide active duty service in 1996. Fellowship in the Academy of General Dentistry and in DOCS, a sedation organization for dentists.

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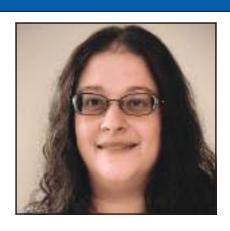
It is not a drug, "shock" therapy, or surgery. It is a safe, effective treatment for major depression without the side effects of medication.

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Jessica Temple, PsyD, ABPP-CN

Jessica Temple, PsyD, ABPP-CN serves patients in the Falls Church location. Dr. Temple completed her Master's Degree in Clinical and Counseling Health Psychology at the Philadelphia College of Osteopathic Medicine and completed her doctorate in Clinical Psychology at La Salle University. She completed her clinical neuropsychology at the Coatesville VA in Pennsylvania and completed her clinical neuropsychological Fellowship/Residency at The Institute For Rehabilitation and Research/ Baylor College of Medicine. She is an active member of American Academy of Clinical Neuropsychology, Society for Clinical Neuropsychology (APA Division 40), Rehabilitation Psychology (APA Division 22), and International Neuropsychological Society.

As a neuropsychologist, she specializes in the assessment and diagnosis of all types of dementias, assessment of cognitive impairments due to concussion, traumatic brain injury, strokes, movement disorders, multiple sclerosis, and epilepsy.

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You Don't Have to Live With Bad Breath Anymore

By Richard A. Miller, DDS, Director National Breath Center

When you are close, do people rub their fingers under their nose? Cover their mouth? Cover their nose? Slightly turn their head? Offer you gum or mints? If you have seen these gestures, chances are you suffer from

bad breath. And if the mouthwashes, mints, and gums don't work well any longer, finally, there is a cure.

As you may already know, breath odor can smell like "rotten eggs," "feces," or even "moldy cabbage" and is caused by odors produced by bacteria that live in the coatings on the tongue. These bacteria form biofilms (coat-

ings) that can only be removed by specialized and unique oral instruments invented at the National Breath Center. These Biofilm Removal Instruments® remove the coating that causes bad breath – a painless process – and the odor-causing bacteria that go with it.

A biofilm is like a living organism with its own ecosystem – with live



Richard A. Miller, DDS

bacteria, food, debris, dead skin cells, and its own waste management system – your mouth. This biofilm attaches itself into the nooks and crannies on the top of your tongue, filling up the spaces between taste buds and in many cases, covering them over. Even antibiotics cannot penetrate it so they do not eliminate bad breath. The only way is removal of the biofilm coating.

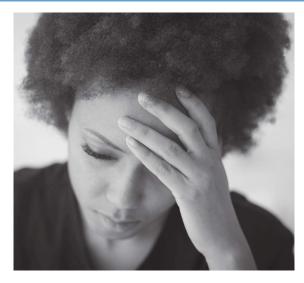
So, why don't mouthwashes, toothbrushes, or tongue cleaners work for serious bad breath? The reason is that the biofilm coating on the tongue is too thick to remove by scraping and too thick to be penetrated by mouthwashes. No matter what is used, it cannot reach into the microscopic nooks and crannies on the tongue surface leaving behind millions of bad breath bacteria to cause odors. In fact, the biofilm can be more than ¼ inch thick and doesn't cause any discomfort.

For the last 30 years a professional cure has been available that eliminates long standing and/or severe bad breath – a cure for the millions of people who have tried everything to no avail. *Original* Tongue Rejuvenation® at the National Breath Center has been available for 30 years and has a proven track record of curing bad breath.

One last thing. Most people cannot smell their own breath. It's just nature's way of allowing us to function without being aware of personal odors and smells. You might think that friends and family would tell you if there was a problem. Don't count on it. The closer you are to a person the more they get used to your breath. And most people are too polite to hurt your feelings. Halitosis sufferers get their cues from other people's actions, not their words.

So, if people react to you in close situations, you probably have noticeable bad breath serious enough to cause people to notice. *Original* Tongue Rejuvenation®, available exclusively at the National Breath Center for 30 years, is a painless technique that removes all the tongue biofilm and the odor. Then you can say goodbye to bad breath forever.

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By Toni Greene, Owner Happy Hour Yoga on Zoom!

Diabetes may occur when the body is stressed, or there is a lack of exercise and wrong diet. Diabetes can be controlled.

Stress is caused when the mind is over worked with worry and anxiety. We create stress when we think that

Diabetes and Yoga

we have to control everything and everybody. Stress comes about when we do not take the time to assess the situation. If we were to dissect the situation we are stressing about we will see that we are adding more to the problem than necessary. Our minds like to create, and our minds like to keep moving and jumping all over the place. If and when we take the time to really look at the situation you will see it really wasn't as bad as we imagined.

Diabetes can often times be controlled through diet. We often enjoy eating foods that are good to taste but very bad for the body.

When we begin to control our

thought process we can begin to heal our bodies. Controlling the thought process is harder than giving up alcohol, drugs, cigarettes, sex, shopping, etc. Control your thoughts with the help of meditation, prayer and readiness and willingness. Wanting to change is the first step. Saying no to your cravings is the second step. You will find when you eat a proper diet, and eat at a regular time every day and when you eat a balanced meal it will cut out the junk food cravings

and eliminate the snacking in between meals. You will begin to control your mind and you will have the final say in healing your body.

In yoga, we have various twists and turns that will activate and stimulate the lower and upper vertebras of the spine that will in turn regulate the uric acid that forms in the body due to excess worry and wrong diet. Relaxation will eliminate the over active mind.

Namaste/Sat Nam.

Steps To Preventing Diabetes



By Janet V. Johnson, MD Loving Care Pediatrics

More than 24 million Americans have diabetes; of those, about six million don't know they have the disease. This difficult disease, once called adult-onset diabetes, is striking an ever-growing number of adults. Even more alarming, it's now beginning to show up in obese teenagers and children.

Type 2 diabetes is largely preventable. About nine cases in 10 could be avoided by taking several simple steps: keeping weight under control, exercising more, eating a healthy diet, and not smoking.

Weight Control

Having excess weight is the single most important cause of type 2 diabetes. Being overweight increases one's chances of developing type 2 diabetes seven-fold. Being obese makes you 20-40 times more likely to develop diabetes than someone with a healthy weight.

Losing weight can help if your weight is above the healthy-weight range. Losing 7-10% of your current weight can cut your chances of developing type 2 diabetes in half.

Active Lifestyle

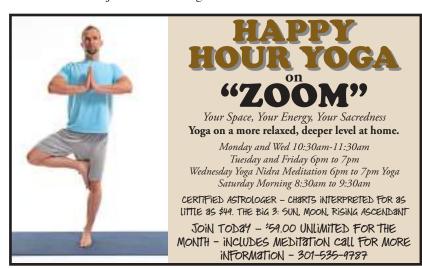
Inactivity promotes type 2 diabetes. Working your muscles more often and making them work harder improves their ability to use insulin and absorb glucose. This puts less stress on your insulin-making cells. Long bouts of hot, sweaty exercise aren't necessary to reap this benefit. Walking briskly for a half hour every day reduces the risk of developing type 2 diabetes by 30%. Similar diabetes-prevention benefits have been reported for brisk walking of more than five hours per week.

Television-watching is a detrimental form of inactivity: For every two hours spent watching TV instead of pursuing something more active increases the chances of developing diabetes by 20%; it also increases the risk of heart disease (15%) and early death (13%).

Four dietary changes can have a big impact on the risk of type 2 diabetes.

- Choose whole grains and whole grain products over highly processed carbohydrates.
- Skip the sugary drinks, and choose water instead.
- Choose good fats instead of bad fats.

Please see "Prevent Diabetes," page 38



Doesn't Your Child Deserve the Best?



Loving Care Pediatrics

Janet V. Johnson, MD

Board Certified in Pediatrics and Adolescent Medicine by the American Academy of Pediatrics
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Our Vision is



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By Quansheng Lu, CMD, PhD, LAc Wholelife Chinese Medicine & Acupuncture Center

What Is Lower Back Pain? Four out of five adults in the U.S.

Chinese Medicine For Chronic Low Back Pain

experience lower back pain at some point in their lives. Acute back pain lasts from a few days to a few weeks, but chronic back pain may last more than three months. There are many causes of lower back pain, but the most common causes are muscle strain and degenerative disc disease.

According to traditional Chinese medicine theory, external factors such as extreme weather, injury, and excessive sexual activity, can lead to the block of Qi and blood, which is thought to result in low back pain if the block of Qi and blood is located at the lower back. Traditional Chinese Medicine (TCM) includes Chinese herbal medicine, acupuncture, moxibustion, cupping, scrapping, tui-na, qi-gong and exercises. Acupuncture and Chinese herbal medicine are the main parts of TCM.

Can Acupuncture

Lower back pain limits activity and is the second most frequent reason for physician visits. Previous research shows widespread use of acupuncture for lower back pain. One meta-analysis is designed to assess acupuncture's effectiveness for treating lower back pain. The 33 randomized, controlled trials that met inclusion criteria were chronic pain, style of acupuncture, and type of control group used. For the primary outcome of short-term relief of chronic pain, the metaanalyses showed that acupuncture is significantly more effective than sham treatment and no additional treatment. The study concluded that acupuncture may effectively relieve chronic low back pain.

How Many/Often Acupuncture Sessions Do I Need?

Usually, 1-3 sessions for acute back pain; 6-16 sessions for chronic back pain, depending on the situation. Twice a week is recommended for a better treatment result.

Is Acupuncture Safe?

Yes. Acupuncture is a safe treatment. It may occasionally cause dizziness, local internal bleeding, dermatitis, nerve damage, and/or increased pain (especially when the acupuncturist is not well-trained).

Control Lower Back Pain?

sub-grouped according to acute or

It's Not Over Til 5022 Dorsev Hall Drive, #101 416 Hungerford Drive, #300 Ellicott City, MD 21042 Rockville, MD 20850 It's Over

Fertility Revisited



By Yemi Adesanya-Famuyiwa, MD Montgomery Fertility Center

It is a well established fact that fertility is intimately related to the age of a woman. After the age of 35, fertility starts to drop off significantly. In the absence of a specific diagnosis, patients trying to conceive at that age for more than six months of duration are said to have unexplained infertility.

What is little known is that in the absence of any treatment, and while waiting to establish treatment, the natural rate of conception leading to ongoing pregnancy or life birth is approximately 15% at six months for a 35-year-old woman with two years of prior unexplained infertility. This rate is 24% after 12 months. For 42-year-old women this rate decreases to 8% after six months and 13% after 12 months.

Once a cause of fertility has been established however, this rate can be expected to be much lower. Therefore, women waiting to start their fertility treatment, or between treatment cycles and with a diagnosis of unexplained infertility, may still attempt natural conception. For patients who are older who have a much diminished ovarian reserve, they may choose to explore options such as egg donation, abdoption, or child-free living.

Why Try Alone?

An online study involving over 8,000 women found that the use of a menstrual cycle monitoring app in combination with fertility indicators can improve the chances of pregnancy.

Not all apps are created equal. Five apps are noted to have higher rates of success than others. These include Clue, Fertility Friend, Glow, Kindara, and Ovia.

Please see "Fertility," page 38

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Heart Health

By Toni Greene, Owner Happy Hour Yoga on Zoom!

How to heal the heart? Love will heal the heart. The heart is the fourth energy center of the human body. The human body has at least eight energy centers known as chakras. Chakras are said to be a map for the journey through life. The journey of life has many aspects. A chakra is a spinning vortex of activity created by the presence of consciousness within

the physical body; the chakra energy carries urges, emotions, habits, and the imprints of all that happens to us. The chakras are a gateway between the body and mind. Classically, there are seven main chakras that correspond to our seven central nerve ganglia (bundles) branching out from our spinal column. The chakras in the computer world can be thought of as a CD that can be installed into our hardware (brain), which influences the flow of life force (prana). The programs from

the CD (chakras) tell us when to do things like eat, sleep, and how to relate to others. Well sometimes, like a computer system, we get bugs, viruses that affect the program. The bugs that get into our systems can be a deficiency or an excess in the chakras.

The heart is the fourth energy center and it is also the fourth chakra. Life sometimes gives us trouble and we try to find ways to cope. There are two main ways in coping with the problems or the troubles in life, they



Toni Greene, Owner

are to increase or decrease your energy center in order to deal with the difficulty. Increasing energy would include creating a fever to combat bacteria, getting your friends together to help you fight, or staying up all night to study for an exam. Decreasing your energy is a way of trying to get away from a threat, like disassociating to make the pain go away.

Excessive or an increased amount of energy in the heart center can cause codependency, focusing too much on others, poor boundaries, jealousy, being a pleaser, or being a martyr. Decreased or a deficiency in the heart chakra can cause you to be withdrawn, critical, intolerant, lonely, have a lack of sympathy, and fear of intimacy.

Ups and downs, highs and lows, these are all aspects that need to be balanced. When you are stressed and do not release or express it, you can become excessive, it can then manifest into blockages. Blockages can lead to common ailments such as hypertension, heart disease, circulatory problems, difficulty breathing, aching in the chest or upper back, a weak immune system and frequent bronchitis or lung infections.

The heart chakras can be balanced, healed and transformed by acknowledging that a blockage does exist in this center. Love is the ultimate healer of the heart. An open heart feels compassion and empathy for both yourself and others. It is important to find balance in relationships, mind, body and self. Try working on your breathing. Breathing is a powerful way to cleanse the body and purify the mind. Breathing gives life force energy or, prana. Falling in love with life gives the heart passion and opens you up to spirit and all of its perfected manifestations. Take the steps needed to balance and heal the heart. Listening to music is good for the heart and head. Learn to sit quietly and meditate. There are different ways to meditate, find the one that is comfortable for you. Let go, stop trying to control everything, let it be, forgive. It is okay to say you are sorry. It is okay to be wrong sometimes, and it is okay not to have the last word.

Sat Nam.

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the implant is made of titanium, it has the unique ability to fuse to living bone and function as part of it. So eventually, the dental implant becomes part of the jawbone and serves as a strong, longlasting foundation for your new teeth.

Besides ensuring that your implants are permanently fixed in place, this bone fusion has another important benefit: it prevents future bone loss in the jaw. This helps to maintain a more youthful facial structure – and better oral health. But perhaps the biggest surprise about the all-on-four is how quickly it can transform your life.

What's the All-On-Four Dental Implant Procedure Like?

It can be scary to get implants for the first time. Most of that fear is probably due to the uncertainty, so here is the step-by-step process for getting an All-On-Four dental implant.

First, your dentist will want to make sure your comfortable, so either local or general anesthesia will be administered.

Second, the dentist or surgeon will prepare your mouth for the implants, which involves removing your

remaining teeth that are failing. They will then remove any diseased or infected tissue from your jaw and gums.

Next, they will begin the implantation process. This means they will insert the titanium screws into your jawbone. Most likely, they will place two implants toward the front of your mouth and two towards the back of your mouth so the "anchors" can evenly bare the force of the denture.

After the implants have been placed, they will thoroughly clean the surgical sites and suturing all the incisions. Then you'll be taken to a recovery room where you can relax and take time to wake up from the anesthesia.

How Do You Know If the All-On-Four Procedure Is the Right Option For You?

At your All-On-Four consultation, you'll receive a 3D CT Scan. This scan will help determine if you need implants and assist your doctors in creating your treatment plan. So if you want to learn more about dental implants, simply schedule a consultation with an All-On-Four provider. It's the best way to find out how dental implants can change your life.

CHRONIC PAIN

such injuries by 99% or more.

There is *no reason* to continually suffer chronic pain without proper diagnosis!

Are you one of these over 1.2 million patients every year?

If so, please ask your physician about a weight-bearing positional MRI or a digital motion X-ray scan that may either document or rule out these common injuries in motion-related accidents.

It's your life, and you deserve to enjoy it to the fullest without the continual pain and suffering that restricts your physical and emotional health.

Ask about these advances in medical imaging today. You have nothing to lose and the possibility of the pain-free life you have been hoping for.

Do a simple Google search for "Weight-Bearing MRI Near me" today, and begin the journey to a painfree life that we all seek.

FERTILITY

From page 34

From page 11

The probability of pregnancy was increased by us much as 20% in women who were using monitoring apps,

The chances of a successful outcome was further increased when use of the apps were combined with the application of fertility indicators.

What are fertility indicators? Fertility indicators include basal

body temperature, cervical fluid, cervix position and/or urine LH.

When a cycle monitoring app was combined with one or more fertility indicators, there was an increase in per-cycle probability of pregnancy – in other words your chances of getting pregnant in each cycle that you attempt to do so increases.

PREVENT DIABETES

From page 33

• Limit red meat and avoid processed meat; choose nuts, whole grains, poultry, or fish instead.

Smoking Cessation

Since we know, smokers are roughly 50% more likely to develop

diabetes than nonsmokers, and heavy smokers have an even higher risk. Quitting would be beneficial and decrease the risk of type two diabetes.

The bottom line to preventing type 2 diabetes is to stay lean and stay active.

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How to Beat Heart Disease: With a Periodontist, You Can Win

By Karl A. Smith, DDS, MS

February is American Heart Month. Heart disease is the leading cause of death in the United States. You can fight back by eating healthy; becoming physically active; controlling your high blood pressure or cholesterol; and getting a clean bill of health from your periodontist

Periodontal disease, heart disease and stroke may seem to have an unlikely connection, but researchers have found that gum disease sufferers are nearly twice as likely to also suffer from coronary heart disease. Research studies have discovered that oral infection is indeed a risk factor for certain types of cancer, stroke and other serious heart and health problems.

The Connection Between Your Mouth and Heart:

There are several theories, which may explain the link between heart disease, stroke and periodontal disease, which include the following:

Bacteria In the Mouth – There are many different strains of bacteria. Researchers assert that some of these strains of bacteria enter the bloodstream through your mouth and attach to the fatty plaques in the blood vessels of the heart. This attachment then contributes to clot formation, causing grave danger to the individual.

Inflammation – Periodontal bacteria causes severe inflammation in the gum tissue, which elevates the white blood cell count.

Immune System Deficiency – Individuals who experience particularly high levels of oral bacteria may have weaker immune systems. These factors may induce specific vascular effects, which have previously been shown to contribute in the onset of certain forms of heart disease.

There is little doubt that the presence of periodontal disease can worsen existing heart conditions. In fact, for many patients periodontists and cardiologists work as a team in order to treat individuals experiencing both conditions.

Diagnosis and Treatment

Since periodontal disease appears to be a risk factor for both heart attack and stroke, it is extremely important to seek immediate treatment with an experienced periodontist. Dentists who specialize in the treatment and prevention of periodontal (gum) disease – perio-

dontists – are experts in the treatment of oral inflammation, plaque and bacteria as they receive extensive training in these areas during their three additional years of education beyond dental school. Periodontists are familiar with the latest techniques for diagnosing and treating periodontal disease, and are also trained in performing cosmetic periodontal procedures, and dental implants.

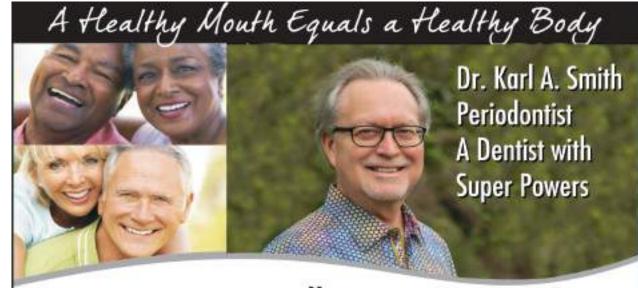
Initially, the periodontist will conduct thorough examinations to assess the exact condition of the teeth, gums and jawbone. X-rays can be helpful in

determining whether bone loss is prevalent in the upper and lower jaw.

The periodontist is also able to conduct deep cleaning treatments to remove hardened calculus (tartar) deposits from the gum pockets. An antibiotic may be prescribed to ensure that the bacteria is completely destroyed and the periodontal infection does not spread to the rest of the body. Antibiotics alone are not enough to treat periodontal conditions but dental treatment along with antibiotics can have the power to get

and keep your body healthy.

Fortunately, you can fight back against heart disease. Visiting a periodontist today to remedy gum disease may be one of the best things you can do to help lower these overall health risks. If you are over the age of 45, have any health compromise, experience bleeding gums, or are interested in keeping your natural teeth for your lifetime call a periodontist right away. Get the answers to your questions about how good dental care might just save your life.



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Sleep, Metabolism, Heart Health and Oral Health



By Shari Salartash, DDS, MAGD Dynamic Dental Wellness

Sleep apnea is more serious than just missing a restful night of sleep or snoring. There is a strong connection between sleep, metabolism, heart health and oral health. Research in the last decade shows evidence of sleep apnea increasing risk of heart disease and diabetes.

Here are a few signs of sleep apnea, often times noticed by a partner or sleep study:

- Snoring
- Long pauses in breathing during sleep
- Gasping for air during sleep
- · Awakening with a dry mouth
- · Morning headache
- · Difficulty staying asleep
- Excessive daytime sleepiness
- Waking feeling tired

Sleep Apnea

Sleep apnea is the repeated stopping of airflow for at least 10 seconds during sleep. Hypopnea is the decrease (30%), but not complete stop, of airflow which results in a greater than 3% oxygen desaturation. Patients with sleep apnea continuously go from breathing cessation (or reduction) into hypoxia which leads to a startle response and awakening from sleep then slipping back into sleep before starting the process over again. Having 5-15 events an hour is considered mild and more than 30 such events is considered severe.

Obstructive sleep apnea (OSA) and upper airway resistance is a result of physiological and anatomical conditions of the upper airway passages which cause soft tissues to fall back into the throat blocking the trachea and reducing or blocking airflow.

OSA and Oral Health

Most patients with sleep apnea have inflammation of the gums and heavy wear on their teeth. They usually have had several crowns and root canals due to heavy bruxism associated with sleep apnea. Many of these patients also suffer from TMJ or jaw joint disorder. Forward head posture and mouth breathing could be other conditions that coexist for patients suffering from sleep apnea.

OSA and Heart Disease

OSA increases the risk of transient ischemic attacks (TIAs), stroke, atrial fibrillation, myocardial infarction, incident congestive heart disease, heart failure and death.

OSA and Diabetes

Studies have shown those with the highest HbA1C levels also tended to have more severe OSA. Furthermore, those with OSA tended to have significantly more diabetic complications than those without OSA.

A few therapeutic options are:

- CPAP.
- An oral appliance. The patient should be evaluated by a dentist who is a diplomate with the Board of Dental Sleep Medicine. You can locate one at aadsm.org
- An ENT or oral faciomaxillary surgeon consultation to look for specific causes of obstruction.
- Omyofunctional therapy to strengthen the coordination of the tongue and facial muscles.
- An orthopedic orthodontic treatment to develop the patient's dental arches.

A BMI greater than 25 is frequently associated with sleep disordered breathing.



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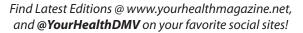












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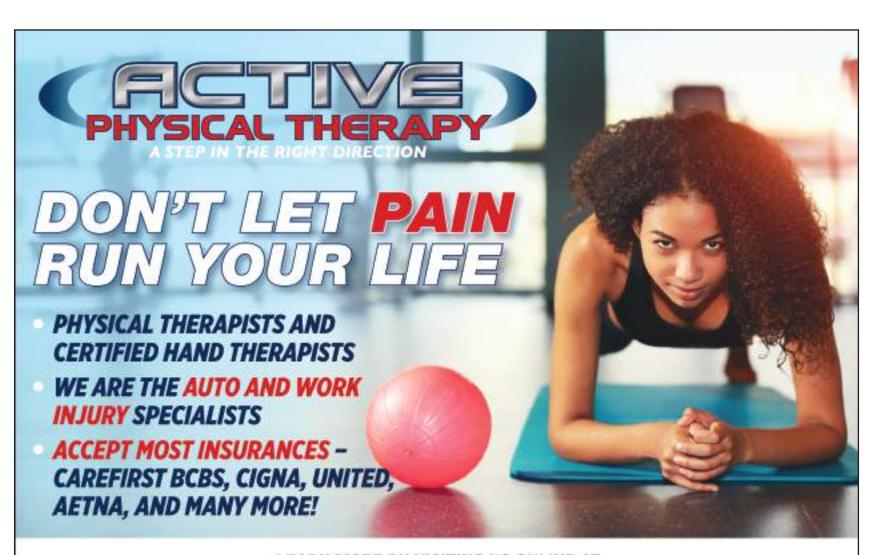
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