



Help Wanted, Cures Needed:

Diseases are cured, medicines approved and lives saved because of medical research. And some of it happens right here in the River City. The **Jacksonville Center for Clinical Research** conducts ongoing studies on several diseases and disorders, run by local physicians. Right now, the center is recruiting locally for cholesterol, smoking cessation, and arthritis studies. Studies can last from 12 weeks to 6 years, and are provided at no cost to participants. jaxresearch.com * BY JOCELYN TOLBERT

Heart Smart

Groundbreaking procedure offers new hope to heart patients

A new option is available to heart patients in Jacksonville. **Transcatheter Aortic Valve Replacement (TAVR)** has been approved for wider use, and St. Vincent's Medical Center Riverside was recently selected to perform this innovative procedure. TAVR is minimally invasive and is an option for older, high-risk patients suffering from severe aortic valve stenosis, one of the most common valve disease disorders. Instead of open-heart surgery, which is risky and invasive, TAVR allows doctors to make a small incision in the thigh or through the ribs to replace the defective valve. Results are apparent almost immediately. *

BY JOCELYN TOLBERT



RAGING DEBATE

THE INFORMATION BATTLE BETWEEN SYNTHETIC AND BIO-IDENTICAL HORMONES RAGES ON

BY LAURA HAMPTON

Women of a certain age are conditioned to fear the "m" word. Older female relatives, medical practitioners and even talk show hosts regularly scare up stories of hot flashes akin to self-combustion, sleep deprivation that make one want to hibernate in a cave for a year, and mood swings that make the *Real Housewives* look like well-adjusted women. Though the symptoms of menopause can be intimidating, Dr. Sarah Paschall, a Jacksonville obstetrician-gynecologist and member of the North American Menopause Society, says it's a normal part of the aging process.

"As we get older and head towards menopause, our ovaries are losing their normal function, and they sort of become dysfunctional before they stop functioning."

Hormone Replacement Therapy (HRT) has long been prescribed to combat menopausal symptoms, but when the Women's Health Initiative (WHI) published its findings in 2002, attitudes toward prescribing estrogen started changing.

In the WHI study, researchers found that women who were given estrogen and progestin had a higher risk of breast

cancer, heart disease, stroke and blood clots. In the wake of these findings, many women discontinued hormone therapy, and the search for safer alternatives began.

Enter bio-identicals.

Though there is no precise medical definition, the Endocrine Society recognizes bio-identical hormones as compounds that have exactly the same chemical and molecular structure as hormones that are produced in the human body.

Advocates of bio-identical hormone therapy contend that, because they are plant-derived and made cell-by-cell to match the natural hormones in our body, bio-identicals are safer than synthetic hormone replacement therapies.

Many in the medical community, including Paschall, disagree.

"I don't absolutely tell my patients not to use bio-identicals, but I still need to tell them about the risks of this medicine."

Bio-identicals carry the same risk for the most serious adverse events with which conventional hormone replacement has been associated, specifically breast cancer and cardiovascular disease.

"You're still getting some estrogen conversion," Paschall says. "So, this is not risk-free."



“I don’t absolutely tell my patients not to use bio-identicals, but I still need to tell them about the risks of this medicine.”

Dr. Sarah Paschall, OB/GYN

The FDA has approved bio-identicals estrogen estradiol and progesterone for the treatment of menopause in women. As a result, many family practitioners and gynecologists have started prescribing them in lieu of their synthetic counterparts. In recent years, however, bio-identicals have become available through “anti-aging” clinics, which usually offer additional services to help women, and men, feel and look younger.

The LOHAD Anti-Aging Center, for instance, offers weight management services, medical aesthetics and spa treatments.

First-time patients are given a comprehensive lab test that includes medical health indicators such as cholesterol level, vitamin deficiencies and hormone levels.

Though estrogen and progesterone are standard hormone replacement therapies for women dealing with menopausal symptoms, the LOHAD Center tests and treats deficiencies in testosterone for women, DHEA, Human Growth Hormone, thyroid hormone, pregnenolone, melatonin and cortisol.

Use of the Human Growth Hormone in anti-aging therapies is the most controversial, but some of the other hormones have also been questioned by physicians.

According to an article on bio-identical hormones in the March 2011 issue of *Harvard Women’s Health Watch*, “Any prescription that adds testosterone or DHEA to your hormonal mix is taking you even farther from the tested path. In effect, you’re experimenting with your body and your health.”

Despite the controversy, some women say that it helps.

Before visiting the LOHAD Center, 47-year-old Christina Bishop was an exhausted full-time employee and mother of three. “I didn’t have a whole lot of drive, and I didn’t want to do anything.”

Blood tests revealed a low progesterone level and low thyroid function. After about 60 days of taking bio-identicals, she started noticing an improvement. “My whole outlook is just better,” says Bishop.

Estrogen replacement, or traditional hor-

mone replacement therapy, costs between \$50 and \$100 for a 30-day supply. Bio-identicals run between \$100 and \$140 per month. In addition, some insurance companies may not cover bio-identicals because they are produced in a compound pharmacy.

Of all the uncertainty surrounding bio-identicals, the way the drugs are created is Paschall’s main concern.

Compounding pharmacies are not governed by the FDA, so they are not required to include warning labels on medications and the dosage is not standardized, which means

the level of hormone taken can be different from batch to batch.

“I think it does benefit some people, but bio-identicals don’t have the quality control that other things have,” Paschall says. “It just worries me.”

As though hot flashes, sleep deprivation and mood swings were not enough to worry about, deciding if, when and how to replace depleting hormones can drive peri-menopausal, menopausal and post-menopausal women to the edge of sanity.

Perhaps the best advice comes from the



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FDA. "Talk to your health care professional about treatment options to determine if compounded drugs are the best option for your medical needs."

BLIND SPOT

FOR TOO MANY, GLAUCOMA ISN'T DETECTED UNTIL IT'S TOO LATE

BY JOHN O'MARA

"It's been called the silent thief of sight," says Dr. Rajesh Shetty of Florida Eye Specialists. The thief he's talking about is glaucoma, a common disease that afflicts millions and is present in untold thousands who don't yet know they have it. In layman's terms, glaucoma is a gradual condition that causes damage to the eyes and can result in blindness if not treated. In most cases, there is no physical pain or discomfort associated with the disease. As a result, many are unaware they have it or ignore the fact that their vision is lessening.

"In most cases there may be no symptoms from the patient and hence it is vital for patients, especially those at high-risk (like those with family history of glaucoma), to have regular eye exams and vigilant eye doctors," says Dr. Arun Gulani of the Gulani Vision Institute. "With technology today we can look into the three-dimensional analysis of the microanatomy of the eye and even determine very early onset functional damage before anatomical damage. Glaucoma patients may still have 20/20 vision (central vision) but may lose their visual fields (peripheral vision) and be unaware until very late."

While there are other, less common causes, glaucoma is often associated with a buildup of pressure inside the eyes. The intraocular pressure damages the optic nerve, the transmitter of images to the brain. The pressure is caused when eye fluid isn't circulating normally in the front part of the eye. Without treatment, total blindness can result within a few years.

In its early stages, the disease is easy to overlook, so to speak. But doctors know exactly who is most at risk. Glaucoma most often occurs in people over age 40; however, it can strike young adults, children and even infants in rare cases. Among those with increased risk of contracting it are people of African-American, Irish, Russian, Japanese, Scandinavian or Hispanic descent. In addition, diabetes, family history and taking certain steroid medications are factors.

"There is no geographic relationship with glaucoma," says Dr. Shetty. "There is a significant ethnic and racial component." Because of this, Florida experiences a larger than average number of cases.

"We have an older demographic," Dr. Shetty continues. "Plus, in Northeast Florida and Southern Georgia, we have a large

African-American population. So, we see it more often than other regions. And half of all cases are undiagnosed. Older patients, in particular, are not as quick to visit a doctor because of failing vision. They often attribute it to something else, getting old."

Among the first signs of glaucoma is the loss of peripheral vision. Shetty and other physicians caution that by the time that happens, however, it can be too late. "When I see a patient, many have already lost vision in one eye," he says. "It is easy to catch and treat if it is still in an early stage."

Treatment may take a patient down three paths. Generally, medications are the first option offered. Eye drops can reduce the formation of fluid in the eye or increase its outflow, thus managing the pressure on the eye. In other cases, laser surgery or microsurgery are better choices. Both types of surgeries are performed to do the same thing as medication, but depending on the particular patient's situation, one or the other will produce better results.

"Glaucoma surgery has declined due to very effective medications that are now available, including long-term medication via intraocular or extraocular discharging implants," says Dr. Gulani. "Least invasive surgical techniques are emerging using technology as the driving force in that micro-invasive surgery with better long-term impact and consistent control of pressure has now become reality."

"Laser surgery is usually quick and easy, with very little risk," says Shetty. "Surgery involving stents or shunts (tiny tubes that increase or decrease flow) is more involved and can take a few weeks of recovery. Neither are things to be frightened of, and care is always customized to the needs of the individual patient."

"Given today's computer precision microsurgery, along with technological advances in the form of miniature implants, the recovery time as minimal compared to what it was just a few years ago," says Dr. Gulani. "Since modern medications and technology control glaucoma in most patients to a consistent level, these patients can undergo laser cataract surgery using new generation multifocal lens implants, including advanced LASIK techniques, to see without glasses. Think about it like this—somebody with high blood pressure can undergo elective surgery to improve their lifestyle, as long as their blood pressure is controlled and there is no irreversible damage that has been detected."

Glaucoma cannot be prevented, but if caught and treated early, the disease can be managed. Fortunately, most people with the disease who have regular eye exams and follow a treatment plan do not go blind. However, if vision loss has already happened it cannot be restored. *



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