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Dr. Soloway is affiliated with many area hospitals. Currently, he teaches other doctors at local hospitals.

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Sources:

https://en.wikipedia.org/wiki/Cumberland_County_New_Jersey

<https://www.health24.com/Lifestyle/Woman/Your-life/30-weird-medical-facts-20120721>

FDA Approves Prescription Video Game for Kids with ADHD

The first video game to help treat kids with attention-deficit/hyperactivity disorder (ADHD) has been approved by the U.S. Food and Drug Administration.

EndeavorRx is a prescription-only game designed to help improve attention in 8 to 12-year-olds with ADHD who have confirmed attention problems.

It is the first game-based treatment authorized by the FDA for any condition.

The game from Akili Interactive is meant to be part of a treatment plan that may include health care provider-directed therapy, medication and/or education, according to the FDA.

“The EndeavorRx device offers a non-drug option for improving symptoms associated with ADHD in children and is an important example of the growing field of digital therapy and digital therapeutics,” Dr. Jeffrey Shuren, director of the FDA’s Center for Devices and Radiological Health, said in an agency news release.

Approval of the device follows several studies that included a total of 600 children. The

studies evaluated whether the game led to improvements in areas such as attention and school performance.

No serious side effects were reported. The most common ones were frustration, headache, dizziness, emotional reaction and aggression, according to the FDA.

Dr. Andrew Adesman, chief of developmental and behavioral pediatrics at Cohen Children’s Medical Center in New Hyde Park, N.Y., said the device seems promising and is likely to appeal to parents of kids with ADHD. But the jury is still out on its effectiveness, he added.

“Presently, many parents of children with ADHD have difficulty accessing appropriate counseling services and are reluctant to consider treatment with medications that have proven effectiveness,” Adesman said.

“To the extent that this product is only available by prescription, it is unclear to what extent insurance companies will cover the cost of this treatment approach.” He said the video game is likely to be most effective in conjunction with other treatments.

ADHD is a common disorder that begins in childhood and affects about 4 million 6- to 11-year-olds in the United States.

ADHD should be diagnosed by a professional based on symptoms such as inattention, hyperactivity and impulsivity that interfere with functioning or development, according to the U.S. Centers for Disease Control and Prevention.

SOURCES: Andrew Adesman, MD, chief, developmental and behavioral pediatrics, Cohen Children’s Medical Center, New Hyde Park, N.Y.; U.S. Food and Drug Administration, news release, June 15, 2020



Many Deaths Labeled ‘Cardiac Arrest’ Could Be Drug ODs: Study

Americans have long known that there's an epidemic of opioid abuse and deaths in the United States. But a new report suggests the true extent of these tragedies has been underestimated.

The study, from researchers at the University of California, San Francisco, finds that 1 in every 6 deaths attributed to sudden cardiac arrest among San Franciscans between 2011 and 2017 may, in fact, have been triggered by a drug overdose.

The finding has “broad implications for epidemiologic estimates of overdose-related mortality [deaths], particularly opioid-related mortality,” said researchers led by UCSF cardiologist Dr. Zian Tseng.

In fact, if the San Francisco data is replicated elsewhere, there could be “a substantial underestimate of the true burden” of drug-related deaths nationally, because these deaths are “masquerading as sudden cardiac deaths,” Tseng’s group said.

Emergency physician Dr. Robert Glatter agreed there’s probably an undercount of the number of U.S. lives lost to drug overdose. But getting supplies of the opioid overdose antidote drug naloxone out to the most vulnerable would help curb deaths, he believes.

“We must continue to focus our efforts on prevention and treatment for opioid use disorder, including ready access to naloxone for all people who receive an opiate prescription,” said Glatter, who practices at Lenox Hill Hospital in New York City.

In the new study, the UCSF researchers first looked over postmortem reports for 525 San Francisco deaths labeled after autopsy as “out-of-hospital cardiac deaths.”

A team of medical experts -- a medical examiner, a cardiac pathologist, a neurologist and two cardiologists/cardiac electrophysiologists -- reviewed the reports, which were recorded between 2011 and 2014.

Another 242 such postmortem reports, this time spanning from 2014 to 2017, was also reviewed with the same criteria.

Tseng and his colleagues noted that based on their analysis -- including postmortem toxicology tests -- 15% of the “cardiac death” cases tabulated 2011-2014 involved a drug overdose, as did about 22% of deaths in the 2014-2017 group.

Among these newly discovered cases of fatal overdose, more than two-thirds from the earlier cohort were found tied to the use of an opioid, as were about half in the later cohort.

The team also stressed that in many cases, multiple “intoxicants” were found to be present in toxicology test results -- stimulants, marijuana, sedatives and alcohol among them.

Could the San Francisco findings be extrapolated to the nation as a whole? According to the researchers, that’s tough to say, although they said the rate of overdose death in San Francisco “is nearly identical to the median overdose mortality rate among states” generally.



For his part, New York City’s Glatter said the epidemic of opioid abuse continues to evolve.

“While use of cheap illicit opiates from the street -- for example, heroin mixed with fentanyl -- contributes to a greater overall percentage of ongoing overdoses, prescription opiate use is still responsible for up to nearly a third of overdose deaths in the U.S., based on [U.S. Centers for Disease Control and Prevention] data from 2018,” he noted.

To help slow the rate of these tragedies, “we must continue to direct efforts at prevention and treatment of opioid use disorder by engaging mental health professionals, counselors and teachers to spot early warning signs of addiction,” Glatter said.

Providing addicts and those close to them with naloxone is crucial, he added.

“Data indicates that this is one area where education about the proper use of naloxone can save lives,” Glatter said. “Families, significant others and relatives who have access to naloxone are able to intervene and save lives, before people become statistics.”

The San Francisco study was published Aug. 10 in the *Annals of Internal Medicine*.

SOURCES: Robert Glatter, M.D., emergency physician, Lenox Hill Hospital, New York City; *Annals of Internal Medicine*, Aug. 10, 2020



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Pot Use While Pregnant Tied to Higher Odds for Autism in Kids

Research has shown that pot use during pregnancy may increase the risk of stillborn birth, preterm birth and low birth weight.

Now, a new study adds another danger: children whose mothers used pot while pregnant could be at greater risk for autism.

And the increased danger wasn't slight: Using data on every birth in Ontario, Canada, between April 2007 and March 2012, the University of Ottawa researchers found that pregnant women who used cannabis were 1.5 times more likely to have a child with autism than women who didn't.

There were half a million women included in the sample, and around 3,000 of them said they used pot during their pregnancy. The database did not include the particulars of these women's marijuana use -- such as how, how often, or how much they were using it.

In a previous study, the same researchers found that pot use during pregnancy was linked to an increased risk of preterm birth and other adverse birth outcomes.

The researchers used this new study to determine if there were more long-term health impacts for children whose mothers used marijuana while pregnant.

They did this by matching two Canadian health databases, one that tracks diagnoses (including autism) and one that tracks birth outcomes in general, said study author Dr. Darine El-Chaâr, a maternal fetal medicine physician at the Ottawa Hospital.

"There's been a linkage through these two registries, so we can

match the birth data with the outcomes of the babies from that pregnancy later in life," El-Chaâr explained.

To show that marijuana use alone was linked to the increased risk of autism, the researchers looked specifically at 2,200 women who used pot but did not use other substances during their pregnancy.

Still, numerous factors could contribute to an increased risk of autism, El-Chaâr noted. The study only shows that using pot during pregnancy may be associated with autism -- not that it definitively causes it.

The findings were published online Aug. 10 in the journal *Nature Medicine*.

Pregnant women who use pot are not only doing so for recreational purposes -- some say that they use it to treat pain or morning sickness. El-Chaâr said that many of the patients she works with either use marijuana to alleviate nausea or ask her if they should. "I do see women telling me that that's the only thing that helps," she said. "I generally do not have good evidence to say, 'Yes, that's true,' yet."

The mechanism by which pot use during pregnancy may affect birth outcomes and infant health is not fully understood. Still, most experts point to animal studies that have found cannabis receptors in the brains of animal embryos that are only 5 to 6 weeks old.

When a pregnant woman consumes pot, these cannabis receptors would be activated, potentially affecting

the infant's brain development.

The number of women who used pot during pregnancy may be much higher than the study reported since some may have denied using it because recreational pot was illegal when the data was collected.

Canada's nationwide legalization of recreational cannabis in 2018 was a catalyst for the study, according to El-Chaâr.

She said she was concerned that legalization could prompt a rise in marijuana use among pregnant women, despite the lack of evidence that it is safe.

Marijuana use among pregnant women in the United States is already on the rise, according to the U.S. National Institute on Drug Abuse: 7% of pregnant women reported using the drug in a 2016-2017 survey.

Andrea Roberts, a senior research scientist at Harvard T.H. Chan School of Public Health in Boston, shared similar concerns that women might interpret legalization as a sign that pot is "somehow harmless."

Roberts emphasized that pregnancy is a highly sensitive period, and women "should really not use any substances that they don't have to use during pregnancy."

SOURCES: Darine El-Chaâr, MD, assistant professor, University of Ottawa, and maternal fetal medicine physician, The Ottawa Hospital, Ontario, Canada; Andrea Roberts, PhD, senior research scientist, Harvard T.H. Chan School of Public Health, Boston; *Nature Medicine*, Aug. 10, 2020, online



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Millville Housing Authority - Assisted Living Programs at Riverview West
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Mom's Depression Can Lead to Behavior Problems in Kids



Children of mothers with long-term depression have an increased risk of behavioral problems and poor development, researchers say.

The new study included nearly 900 Australian mothers and 978 of their children. Levels of depression were examined in the mothers before, during and after pregnancy. The investigators also analyzed their children's development and behavior.

One in five of the women experienced depression once, while 11% experienced it more than once. The length of a mother's depression had a greater impact on her child than when depression occurred, according to the researchers at the University of Queensland, Australia.

"The longer a mother suffered maternal depression, the worse the outcomes for the child," study author Katrina Moss said in a university news release. She's a research officer in the School of Public Health.

"Mothers may worry that if they've been depressed during pregnancy then it's too late to do anything about it, but reducing depressive symptoms at any stage is better for them and their children," she explained.

"The earlier we can effectively detect and treat maternal depression, the better our chances of improving outcomes," Moss said.

Screening for depression could start when couples begin planning a pregnancy and continue through early childhood, she suggested.

"Maternal depression is a significant challenge for women, families and communities, and we need to look after women better at key times in their lives," Moss said.

Women who develop depression should visit their family doctor and find supportive parent resources, she advised.

The study was published recently in the journal *Paediatric and Perinatal Epidemiology*.

SOURCE: University of Queensland, news release, June 14, 2020

American Cancer Society Recommends HPV Test for Cervical Cancer Screening



An updated guideline from the American Cancer Society calls for more simplified cervical cancer screening, administered less often.

The new guideline calls for an initial cervix screening at age 25, followed by the human papillomavirus (HPV) test every five years, continuing through age 65, the guideline says.

“These streamlined recommendations can improve compliance and reduce potential harms,” said Debbie Saslow, a managing director at the American Cancer Society. “They are made possible by some important developments that have allowed us to transform our approach to cervical cancer screening, primarily a deeper understanding of the role of HPV and the development of tools to address it.”

Nearly all cervical cancer is caused by strains of HPV. The HPV test is more accurate than the Pap test and can be done less often, the ACS said.

Until all labs transition to the new standard of primary HPV testing, the guideline says HPV tests can be used in combination with the Pap test. Such co-testing can be done every five years, or a Pap test alone can be administered every three years, the guideline says.

A negative HPV test is linked to a low risk for cervical cancer. An HPV vaccine has been available for nearly 15 years to protect women from most cervical cancers.

The previous guideline called for screening to begin at age 21, but HPV vaccination has resulted in a drop in cervical cancer rates.

Compared to a Pap test alone, Saslow said the new strategy is estimated to prevent 13% more cervical cancers and 7% more cervical cancer deaths.

The guideline was published July 30 in the journal *CA: A Cancer Journal for Clinicians*.

SOURCE: American Cancer Society, news release, July 30, 2020

Beta Blocker Heart Meds Might Pose Special Risks for Women



Millions of Americans are prescribed blood pressure medicines called beta blockers, especially after a heart attack. But a new Italian study finds that these go-to drugs might not work as well for women as they do for men.

“What we found presents a solid case for reexamination of the use of beta blocker therapy for women with hypertension,” said study lead author Dr. Raffaele Bugiardini, professor of cardiology at the University of Bologna.

The study couldn’t prove a cause-and-effect link, but among patients taking beta blockers, women had a 4.6% higher rate of heart failure than men when going to the hospital with a heart attack or chest pain (angina), the study found.

“For women who have no history of cardiovascular disease and only hypertension, we think it is incredibly important for them to regulate their blood pressure through diet and exercise [first],” Bugiardini said in a news release from the journal *Hypertension*. His team published the findings in

the journal on July 13.

The new research involved almost 14,000 people from 12 European countries. All had been diagnosed with high blood pressure but had not been diagnosed with heart disease.

Besides the nearly 5% higher odds of developing heart failure overall after heart attack, the study found that the type of heart attack mattered.

Women who had a form of heart attack in which a coronary artery is completely blocked and a large part of the heart muscle is unable to receive blood -- a so-called “ST-segment elevation myocardial infarction [STEMI]” attack -- were 6.1% more likely to have heart failure than men with the same type of heart attack.

In contrast, men and women

not taking beta blockers had about the same rate of heart failure, according to the study.

“It’s possible that the increased risk of heart failure for women is due to an interaction between hormone replacement therapy and beta blockers, though this information was not collected or tested in our study,” Bugiardini said. “This and other potential factors need to be investigated in more depth.”

Experts in the United States said the findings show the importance of research focused on women.

“The historic under-representation of women in clinical trials had led to blanket treatments” that might not work equally for men and women, said Dr. Satjit Bhusri, a cardiologist at Lenox Hill Hospital in New York City.

“We know women have different physiology than men,” he said. “We also know that women present with heart syndromes differently than men. It is not surprising that women have different physiological reactions to certain medicines when compared to men.”

Dr. Evelina Grayver directs the Coronary Care Unit at North Shore University Hospital in Manhasset, N.Y. She noted that it’s long been known that beta blockers “can exacerbate episodes of heart failure for anyone, men and women.

“The use of beta blockers in setting of acute coronary syndrome needs to be approached cautiously -- and not only in women,” Grayver said. In the meantime, she agreed that “it is imperative to include women in cardiovascular research.”

More information

SOURCES: Satjit Bhusri, M.D., cardiologist, Lenox Hill Hospital, New York City; Evelina Grayver, M.D., director, Coronary Care Unit, North Shore University Hospital, Manhasset, N.Y.; Hypertension, news release, July 13, 2020

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Health Tip: Chiropractors and Back Pain

For those with back pain, even daily activities can be uncomfortable. A common treatment option is chiropractic care, says Duke University.

A chiropractor typically will use his or her hands to improve joint mobility, relieve muscle tightness and ease nerve irritation in certain areas.

Though chiropractic care can be uncomfortable at first, serious side effects are rare. Typically, patients have slight soreness afterward that eases over time.



Can Talk Therapy Heal the Body, Too?

Therapy designed to address mental health issues may also tamp down chronic inflammation, a new review suggests.

In so doing, interventions like behavioral therapy may help to rein in not only anxiety, depression and stress, but also the risk of developing heart disease or cancer, researchers say.

The finding is based on a look at 56 studies that collectively involved more than 4,000 participants.

"Over the past several years, there has been a growing appreciation that inflammation is involved in many of the serious health problems that people experience," said study author George Slavich.

"These conditions include mental health problems, such as anxiety disorders, post-traumatic stress disorder and depression, as well as physical health problems, such as asthma, heart disease, certain

cancers, and autoimmune and neurodegenerative disorders," added Slavich. He's an associate professor of psychiatry and biobehavioral sciences at the University of California, Los Angeles.

Inflammation can also cause molecular damage that accelerates biological aging. "It is a process that may be very important for understanding human health and longevity," Slavich added.

Drugs that help control inflammation are effective, said Slavich, but they can be expensive, require long-term adherence and often entail side effects.

The review panel hoped to better understand how the body reacts to nondrug treatments for chronic inflammation. The researchers targeted the potential anti-inflammatory benefits of several individual and group therapy approaches, including cognitive behavior therapy

(CBT), CBT combined with medication, grief counseling, bereavement support and psychotherapy.

Together, said Slavich, the studies revealed that patients who undergo some form of psychotherapeutic treatment can see a nearly 15% improvement in beneficial immune system function, and an 18% decrease in harmful immune system function.

Those benefits, he said, appear to last for at least six months after therapy concludes, regardless of a patient's age or gender.

CBT was found to be the most beneficial, in this regard. According to the American Psychiatric Association (APA), CBT is designed to help patients change thinking patterns that contribute to unhelpful behavior.

The investigators also observed that psychotherapy -- and CBT in particular -- tended to

control inflammation-causing immune system molecules called cytokines.

Such molecules can be helpful in battling disease and infections. But if cytokine levels stay high, even in the absence of a disease threat, they can themselves become the problem, triggering inflammation and related chronic illnesses.

But why would mental health therapy have these effects? Slavich said there are likely many factors at play.

“Several different processes have been previously shown to be associated with changes in immune system function, including life stress, threat sensitivity, negative emotions and social support,” he explained. “In addition, psychotherapy has the potential to change people’s physical activity levels, diet, sleep schedule and so forth.”

However, since the present study was not designed to test these different possibilities, future research is needed to shed light on this issue, Slavich said.

Yet the finding of a link between mental health

treatment and reduced inflammation makes sense to Dr. Jon Levenson, an associate professor of psychiatry at Columbia University Medical Center, in New York City.

“It is not surprising that counseling or psychotherapy is associated with positive changes in immune function,” he said, given prior observations that chronic stress driven by anxiety or depression is associated with an uptick in inflammatory processes.

By cutting down on stress, anxiety and depression, it appears that psychotherapeutic treatment “can essentially re-regulate immune function, once the underlying psychiatric

condition is treated,” said Levenson, who is also past chair of the APA’s Council on Consultation-Liaison Psychiatry.

But as to how and why there is an association, he agreed that more research will be needed as “we do not know the precise mechanism for this change yet.”

The study findings were published online June 3 in JAMA Psychiatry.

SOURCES: George Slavich, PhD, associate professor, department of psychiatry and biobehavioral sciences, University of California, Los Angeles, and director, UCLA Laboratory for Stress Assessment and Research; Jon Levenson, MD, associate professor, psychiatry, Columbia University Medical Center, New York City, and past chair, American Psychiatric Association’s Council on Consultation-Liaison Psychiatry; JAMA Psychiatry, June 3, 2020, online





Keep Flossing: Study Ties Gum Disease to Higher Cancer Risk

Want to avoid cancer? Consider brushing and flossing more often.

Why? Folks with bad gums might be at higher risk of developing certain types of cancer, new research suggests.

A history of gum disease appears to increase the risk of stomach cancer by 52% and throat cancer by 43%, according to data from two major long-term health studies.

People who'd lost two or more teeth also had an increased risk of cancer -- 33% for stomach cancer and 42% for throat cancer -- compared with people who never lost a tooth, the researchers reported.

"Participants with periodontal disease and a higher number of teeth lost had a higher risk of developing the two gastrointestinal cancers, even after adjusting for other major risk factors," said senior researcher Mingyang Song. He's an assistant professor of clinical epidemiology and nutrition at the Harvard T.H. Chan School of Public Health in Boston.

If these findings pan out, then a great many people in the United States could be at increased risk for these cancers. Nearly half of adults aged 30 and older have gum disease, according to the U.S. Centers for Disease Control and Prevention.

For the study, the researchers analyzed health data gathered from tens of thousands of health professionals during two long-term studies -- including over 98,000 women in the Nurses' Health Study and over 49,000 men in the Health Professionals Follow-Up Study.

During 22 to 28 years of follow-up, participants developed 199 cases of throat cancer and 238 cases of stomach cancer.

Overall, people with any history of gum disease had a 59% increased risk of throat cancer compared with people who'd never had periodontal disease, regardless of whether they'd lost teeth or not, the findings showed.

There was some difference when looking at stomach cancer. People with gum disease who lost no teeth had a 50% increased risk of stomach cancer, while those who'd lost one or more teeth had a 68% increased risk.

Peter Campbell is scientific director of epidemiology research for the American Cancer Society. He said, "The mouth, esophagus and stomach are all connected, of course, and they're important components of the digestive system. It's not surprising to see that a marker for illness of one organ is connected to another illness, such as cancer, further down the [gastrointestinal] tract."

Song said that the inflammation caused by gum disease might be one factor that increases cancer risk.

"People with periodontal disease tend to have higher systemic inflammation, which is one of the underlying mechanisms of cancer development," he explained. It's also possible that bad oral health promotes the growth of bacteria in the mouth and gums that could contribute to cancer, Song and Campbell noted. "From this study, and others like it," Campbell said, "it seems that some of the same bacteria and related pathogens that lead to tooth loss and

gum disease are also associated with tumors in the stomach and esophagus."

The cancer risk related to gum disease in this study was independent of tobacco use, which means that smokers with poor oral health might face an even higher risk of these gastrointestinal cancers, Song added.

And it's possible that the longer you have bad gums, the more likely your cancer risk will increase, Song and Campbell suggested.

"It certainly seems plausible that having a longer duration of periodontal disease would be associated with even higher risks of these cancers," Campbell said. "Some of that association may be explained by simply being older, which in itself is a strong risk factor, but we tend to account for that issue pretty well."

If you have a history of bad gums and want to reduce your potential cancer risk, Campbell recommends seeing a dentist regularly, taking good care of your oral health, learning the signs and symptoms of cancer, and undergoing all age-appropriate cancer screenings.

Song and Campbell both also called for more study into this possible cancer risk, including clinical trials.

The new study was published July 20 in the journal *Gut*.

SOURCES: Mingyang Song, ScD, assistant professor, clinical epidemiology and nutrition, Harvard T.H. Chan School of Public Health, Boston; Peter Campbell, PhD, scientific director, epidemiology research, American Cancer Society; *Gut*, July 20, 2020

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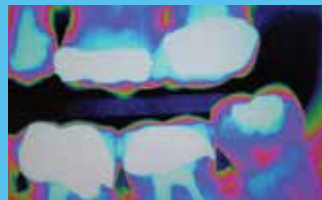
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HACK YOUR HEALTH

Your Road Map for Healthy Skin

Take a proactive approach to beat skin cancer

When it comes to skin cancer, your first line of defense is early detection. Keeping track of changes in your skin with your own eyes can be difficult, so the Huntsman Cancer Institute at UHC offers mole mapping. This process uses photography to monitor changes that may occur in your skin over time, says dermatologist Douglas Grossman, M.D., Ph.D.



Know Your Risk

You may be at increased risk for melanoma if: you have **had melanoma** in the past; **you have numerous moles**, including some that are **irregular in shape or size**; **melanoma runs in your family**; or you've had **previous mole biopsies showing dysplasia**.

“Most moles don’t change in adults so we establish a baseline and usually don’t have to repeat the photography,” Dr. Grossman says.

The ABC's of Skin Cancer

A

Asymmetry in shape in the mole.

B

Borders that are irregular.

C

Colors [multiple].

D

Diameter larger than six millimeters.

E

Evolving or changing in appearance over time.



How Mole Mapping Works

It's a difficult task to keep track of every mole on your body and notice its changes. Most people don't even try. With mole mapping, a specialist spends about

15

minutes photographing your moles, producing a definitive record of your skin.

Benefits

This total-body photography approach to skin monitoring is an effective way to detect abnormalities in suspicious moles. Eyes can lie. Photographs don't.

Middle-Age Obesity Linked to Higher Odds for Dementia

If you've been looking for a good reason to slim down, consider this: Being obese at midlife appears to increase your odds for dementia.

That's the takeaway from a large study just published by British researchers, and it echoes similar findings published in December.

Dorina Cadar, lead researcher on the new study, said the goal is to identify risk factors that are influenced by lifestyle so steps can be taken to prevent mental decline.

"We hope that a substantial portion, but admittedly not all, of dementia cases can be prevented through public health interventions," she said. Cadar is a senior research fellow at University College London.

Her team found that people who are obese at midlife have a 31% higher risk for dementia than middle-aged people whose weight is normal -- and the risk is especially high for women.

The good news: Losing weight may significantly lower the odds, the researchers said.

For the study, Cadar and her colleagues analyzed data from nearly 6,600 people aged 50 and older who were part of a British study on aging. The researchers used three sources to ascertain dementia: doctor diagnosis, informant reports and hospital statistics.

While obesity was a risk for both men and women, the risk of dementia was even higher for women with abdominal obesity -- a condition measured by their waist size. Over an average

follow-up of 11 years, they were 39% more likely to develop dementia, the study found.

This higher risk was independent of other factors, such as age, education, marital status, smoking, genetics, diabetes and high blood pressure. No association between abdominal obesity and dementia was found among men, the study authors said.

But when the researchers considered both weight and waist size together, obese men and women alike had 28% higher odds of developing dementia.

A study published in December of women only uncovered similar risks.

Dr. Sam Gandy, associate director of the Mount Sinai Alzheimer's Disease Research Center in

New York City, reviewed the new findings.

“This new paper is entirely consistent with both the field in general and with our own work in particular,” he said.

Gandy said proteins implicated in inflammation, cardiovascular disease and type 2 diabetes -- all of which are risk factors for Alzheimer’s -- may contribute to the links between obesity and dementia.

Keith Fargo, director of scientific programs and outreach at the Alzheimer’s Association, said links between underlying causes of chronic physical conditions and dementia are well known.

“The association between heart health risk factors -- such as diabetes, obesity and high blood pressure -- and cognitive decline and dementia is well established in Alzheimer’s research,” Fargo said.

These new findings add to the overall body of evidence that links obesity to higher dementia risk, he noted. The sex-based differences identified in the latest study are intriguing, Fargo said. But, “it’s too early to know whether this finding is valid based on just one study,” he explained.



The Alzheimer’s Association is running a two-year clinical trial to see if healthy lifestyle interventions that target risk factors can protect cognitive function in a diverse group of older adults.

“What’s really interesting is the possibility that living more healthfully can reduce dementia risk,” Fargo said.

The latest findings were published online June 23 in the International Journal of Epidemiology.

SOURCES: Dorina Cadar, PhD, senior research fellow, Institute of Epidemiology and Health Care, University College London, U.K.; Keith Fargo, PhD, director, scientific programs and outreach, Alzheimer’s Association; Sam Gandy, MD, PhD, associate director, Mount Sinai Alzheimer’s Disease Research Center, and professor of neurology and psychiatry, Icahn School of Medicine at Mount Sinai, New York City; International Journal of Epidemiology, June 23, 2020, online

Caregivers Give Short Shift to Their Own Health



More than 43 million American adults care for their loved ones every year, but a new survey shows they are more likely to neglect their own health in the process.

The survey found that those who regularly care for a family member or friend with a health problem are less likely to access needed services due to cost or lack of health insurance.

“Caregivers provide tremendous benefits for their loved ones, yet they may be at risk for lacking access to needed services, which puts their health in jeopardy,” said study co-author Jacob Bentley, an associate professor of clinical psychology at Seattle Pacific University.

“We found that caregivers were more likely not to have health care coverage or forgo needed medical appointments and services,” he added.

The study, published online recently in *Rehabilitation Psychology*, only included those providing care to family and friends.

“Informal caregiving provides enormous

economic value to our society because if we were to replace informal caregiving with formal, paid caregiving services, it could cost the country upwards of \$600 billion in wages for home health aides,” Bentley said in a journal news release.

“Despite the economic benefits for society and valuable assistance provided to care recipients, attention must also be given to caregivers’ own financial, physical and emotional challenges,” he noted.

Data from more than 24,000 participants was studied. The majority of participants were white women under 65 who earned between \$10,000 and \$70,000 each year. Fifty percent were employed, with the other half being unemployed or retired.

Over half of participants provided up to eight hours of care for a family member or friend each week. Care included tasks such as household chores, managing money or cooking meals.

Both caregiver health insurance status and mental health status were recorded.

“Caregivers had a 26% higher risk of not having health care coverage, compared with non-caregivers, and they were at a significantly higher risk, a 59% additional risk, for not going to the doctor or getting a necessary health service due to cost,” Bentley said.

Additionally, about one-quarter of caregivers reported being diagnosed with a depressive disorder at some point in their lives. According to the study, this represents a 36% increased risk more than non-caregivers. About 30% also experienced at least one limitation to daily activities because of physical, mental or emotional problems.

“Given the scope of difficulties acquiring health care coverage and utilizing needed services in this large national sample, we believe our findings warrant additional research and likely the development of low-cost and accessible services that meet the multifaceted needs of caregivers,” Bentley said.

SOURCE: American Psychological Association, news release, Jan. 23, 2020

After Heart Attack, Home Care Can Prevent a Return to Hospital



Receiving home health care reduces heart attack survivors' risk of hospital readmission after discharge, a new study finds.

In the United States, only a small percentage of heart attack survivors receive home care such as nursing and physical therapy, according to study authors.

The findings were presented recently at a virtual American Heart Association meeting. Research presented at meetings is typically considered preliminary until published in a peer-reviewed journal.

"Little is known regarding the impact of home health care on heart attack patients," lead author Muhammad Adil Sheikh said. "Since patients who receive home health care tend to be older and sicker than others, and these characteristics themselves can lead to hospital readmission, we wanted to investigate the impact of home health care alone on readmission." Sheikh is a clinical assistant professor and hospitalist at the University of Michigan Medical School in Ann Arbor.

He and his team used a national database of hospital readmissions to identify more than 400,000 U.S. heart attack survivors. They included 38,215 (9.4%) who received home health care.

The average age of those who had home health care was 77, compared with 60 for others. Those who got home care were more likely to have previous health conditions such as diabetes, heart failure, chronic lung or kidney disease, high blood pressure and/or vascular disease.

After adjusting for those conditions, researchers concluded that home health care patients were 11% less likely to be readmitted to a hospital within 30 days of discharge than those who did not have home care.

"Patients who received home health care are older, female or have underlying medical conditions," Sheikh said in an AHA news release. "These patients are likely to benefit the most from home health care, and this service should be utilized more often to potentially reduce hospital readmission rates."

SOURCE: American Heart Association, news release, May 15, 2020

Emergency Medicine - Continued

Vineland Senior Emergency Department at
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Slone, Helen L. - MD
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PULMONARY REHAB CAN HELP PEOPLE WITH COPD, SO WHY DO SO FEW GET IT?

Roughly 16 million Americans have chronic obstructive pulmonary disease (COPD), but only a fraction have access to a lifesaving treatment called pulmonary rehabilitation.

COPD is a family of diseases, including emphysema and chronic bronchitis, that make breathing difficult and worsens over time. The main cause is smoking. Other causes include secondhand smoke and exposure to polluted air, chemical fumes or dusts. There is no cure.

But pulmonary rehab can help after a hospital stay, according to Dr. David Mannino, director of the Pulmonary Epidemiology Research Laboratory at the University of Kentucky, in Lexington.

Pulmonary rehab teaches patients to exercise, eat well and use medications appropriately in order to regain their strength. Rehab clinics can also foster socialization, as COPD patients often feel isolated, Mannino said.

To learn more, a team from the University of Massachusetts studied data from almost 200,000 Medicare patients hospitalized for COPD in 2014. The findings were published May 12 in the *Journal of the American Medical Association*.

Of that group, 1.5% (2,721 patients) began pulmonary rehabilitation within 90 days of leaving the hospital. In total, just over 38,300 patients died within one year of discharge from the hospital.

The difference in the outcomes between those who had rehab within 90 days and those who didn't was striking: Within a year of discharge, 19.6% of the group who did not have early rehab had died, compared with 7.3% of patients who began rehab within 90 days.

"If this were a medication, it would be a blockbuster," Mannino said. "The tragedy is that it's only available to such a small percentage."

Dr. Carolyn Rochester, a pulmonologist at Yale School of Medicine in New Haven, Conn., examined the reasons why in an editorial that accompanied the findings.

Rochester noted that doctors are not incentivized to discuss or refer patients to rehab and, even when they do, many don't follow through because they don't know the potential benefits or lack access. The programs are not widely available, and are severely underfunded, she added.

One group that is trying to close the gaps is the Maryland-based Dorney-Koppel Family Charitable Foundation, which provides startup funding for pulmonary rehab clinics in areas where COPD is common.

Its spokeswoman is Grace Anne Dorney Koppel, who emerged as an advocate for COPD patients after she was diagnosed with the disease in 2001. Doctors told her at the time she had only a few years to live, she recalled. But after beginning pulmonary

rehabilitation, everything changed. "I have not only survived, but I have survived well," she said. Through their foundation, she and her husband, broadcast journalist Ted Koppel, have established 12 pulmonary rehabilitation clinics across the country and will soon open a 13th. The walls of her office are filled with photographs of graduates from the clinics the couple started.

"It is the most gratifying and satisfying thing," she said. "I see lives made almost whole again, and that is why we do what we do."

In her editorial, Rochester said access is key.

She said increased health system funding for pulmonary rehab would be a big help.

Rochester also pointed to the need for a randomized clinical trial that would include younger patients and those who have had long stays in acute hospital or nursing facilities. The average age of patients in the UMass study was 76.9 years.

With the world's attention on COVID-19, Dorney Koppel said her focus is on COPD patients who are highly affected by the disease. That includes the many individuals who may not even know they have COPD, which leaves them vulnerable to contracting the virus.

SOURCES: David Mannino, M.D., director, Pulmonary Epidemiology Research Laboratory, University of Kentucky, Lexington; Carolyn Rochester, M.D., pulmonologist, Yale School of Medicine, New Haven, Conn.; Grace Anne Dorney Koppel, president, Dorney-Koppel Foundation Inc., Potomac, Md.; May 12, 2020, *Journal of the American Medical Association*

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Folks who want to eat healthy by choosing whole grain foods aren't helped by product labels that can confuse and mislead consumers, a new study shows.

Almost half were unable to identify the healthier whole grain option when asked to rely on food package labels, researchers discovered.

A similar proportion of participants were unable to accurately state the whole grain content of different products, according to the study.

Terms like “multigrain,” “contains whole grains,” “honey wheat” and “12-grain” can be used to hawk breads, cereals and crackers as healthier options even if the product mostly contains refined flour, explained lead researcher Parke Wilde, a professor at Tufts University’s School of Nutrition Science and Policy in Boston.

“If they say it contains whole grains, it really does have to contain some whole grains. They would get into trouble if they

made a claim that was outright false,” Wilde said. “But it’s totally permitted to say it contains whole grains even if it’s mostly refined grains.

“For terms like multigrain or seven-grain or 12-grain, or the coloring, there’s no rules at all,” Wilde continued. “There’s no rules against using any of those terms on a refined grain product, or coloring the product brown, which consumers associate with whole grains.”

Current U.S. dietary guidelines recommend that whole grains make up at least half of a person’s overall grain intake. Studies have shown that whole grains can protect against heart disease, type 2 diabetes and cancer, researchers said in background notes.

Refined grains have been ground into flour or meal, with the healthy outer layers of grain stripped away. Whole wheat products contain the entire grain, which boosts the fiber content and adds higher levels of nutrients.

Wilde and his colleagues used two different methods to test consumer savvy when it comes to picking whole grain products.

In one experiment, they asked people to choose between two hypothetical products -- one product that contained a lot of whole grains but made no claims on the front of the package, and another that had lower overall whole grains but bore packaging selling itself as “made with whole grains” or “multigrain” or “wheat.”

Both products bore an ingredient list and a Nutrition Facts panel that clearly showed that the less flashy product contained more whole grains, but between 29% and 47% of participants still chose the less-healthy option that marketed itself as a whole grain powerhouse, researchers found.

“The question distinguished people who rely on the whole grain claim on the front of the package, compared to people who look on the ingredients list,” Wilde said. “If you looked at the ingredients list, you would have been able to see which product

Is It Really 'Whole Grain'?

Food Labels Often Misleading

really contained whole grains.”

The second experiment asked participants to look at four actual grain products and guess whether each contained all whole grain, mostly whole grain, or little to none.

Between 43% and 51% of people overstated the whole grain content of the products, based on what the packaging told them, researchers found.

The findings were published Aug. 10 in the Public Health Nutrition journal.

The study provides strong evidence that could support any attempt by the government to regulate misleading whole grain labels, Wilde said.

“I would say when it comes to deceptive labels, ‘whole grain’ claims are among the worst,” said co-researcher Jennifer Pomeranz, an assistant professor of public health policy and management at the NYU School of Global Public Health.

“Even people with advanced degrees cannot figure out how much whole grain is in these products,” she said in a Tufts news release.

In the meantime, people will need to do a bit more reading in the supermarket if they want to choose products that truly have more whole grains, Wilde said.

“Read the ingredients list, and know which things are indicators of whole grains,” Wilde said. Look for words like “whole grain” or “whole wheat,” and be on the alert for words like “enriched flour” and “wheat flour” that do not describe whole grains.

“You need to know they list it in decreasing order of weight. If a whole grain product lists whole grain as its first ingredient, that’s a stronger indication of whole grain content,” Wilde continued. “That’s something that consumers can do already, but you can see that it would be easier if the label had something like a percentage of whole grain content on the front.”

The Nutrition Facts label can also help people sort out the healthier option between whole grain products, said Dr. Maria Pena, who directs endocrine services at Mount Sinai Doctors Forest Hills in New York City.

“Really the trick is learning how to read a nutrition label. If you don’t know how to read a nutrition label, that’s where you run into trouble,” said Pena, who wasn’t part of the study. “You really have to focus on the amount of carbs the bread has and the amount of fiber. That’s really what helps you determine which bread is better than the other one.

“If a slice of bread has 30 or more carbs, I consider it to be not a healthy choice,” Pena said.

SOURCES: Parke Wilde, Ph.D., professor, Tufts University’s School of Nutrition Science and Policy, Boston; Maria Pena, M.D., director, endocrine services, Mount Sinai Doctors Forest Hills, New York City; Public Health Nutrition, Aug. 10, 2020

Have Diabetes? Don't Lose Sight of Danger to Your Eyes

Diabetes can wreak havoc on many parts of the body, including the eyes, but people with diabetes aren't doomed to have vision problems.

With good blood sugar management and regular eye exams, many eye conditions can be prevented or treated, experts say.

Patricia Welter, a Pilates studio owner from Palm Harbor, Fla., wishes she'd known more about preventing eye problems related to diabetes before it was too late. She was diagnosed with type 1 diabetes at 14, and lost one of her eyes because of diabetes when she was in her 40s.

"I was always scared to death of eye complications and blindness from diabetes," Welter said. Her uncle and her mother both had type 1 diabetes and had vision issues from the disease. But Welter was diagnosed in the 1970s before a lot of advances had been made in treating diabetes and diabetic eye disease.

"Looking back, I saw signs. I started getting blurry vision and would see little dots. If I had been diagnosed and treated earlier for my eye disease, maybe I wouldn't have lost my eye," she said.

When she was in her 40s, Welter started experiencing bleeding in her retina (the part of the eye that senses light and sends visual messages to the brain). She saw an eye doctor and had laser surgery performed in both eyes. Then one day she saw flashes in her left eye. The doctors diagnosed a retinal detachment. She had three surgeries to try to save the eye, but had a stroke during the third surgery and lost her left eye.

"I really felt sorry for myself the first few months," she said. But her boyfriend (now her husband) pushed her to get active again, to return to Pilates. He also challenged her to complete a half marathon, which they did together. Welter said she hasn't let the loss of her eye stop her in any way. "It's part of my being now," she added.

In addition to having diabetic retinopathy, she also developed an early cataract -- another concern for people with diabetes. Cataracts cause cloudy lenses in the eyes. Welter had surgery to correct the cataract and said it changed her world because it gave her so much of her vision back in her remaining eye.

Her advice to others with diabetes is, "Get a team of people around you to help manage your diabetes -- family, friends, co-workers, endocrinologist, diabetes educator, registered dietician and an eye doctor. If you catch eye problems early, you can treat it."

Tracey Brown, CEO of the American Diabetes Association (ADA), also stresses the need for early care.

"One third of people with diabetes have complications related to their eyes, and eye care doesn't get nearly the attention it should," Brown said. "Eye care needs to be a priority, even during this stressful time, because if you



can do the things that are required, you don't necessarily have to have the eye problems of diabetes."

Brown recently led an expert panel for the ADA's Focus on Diabetes: Look Closer at Eye Health initiative, including experts from the ADA, VSP Vision Care and Regeneron.

There are four types of eye disease that are more common in people with diabetes, according to the U.S. National Eye Institute (NEI):

1. Diabetic retinopathy
2. Diabetic macular edema
3. Glaucoma
4. Cataracts

These conditions are more common in people who have higher blood sugar levels, so managing your diabetes well can help prevent eye disease, the NEI said.

There are a number of symptoms of eye disease that should prompt a visit to an eye doctor. These include:

- Blurred or wavy vision
- Vision that changes frequently, possibly from day to day

- Areas with no vision
- Dark areas in your vision
- Difficulty seeing colors
- Seeing spots or dark strings (floaters)
- Light flashes

But even if you don't have symptoms of eye disease, it's important to have annual dilated eye exams, according to the experts involved in the ADA's eye initiative.

Kate Renwick-Espinosa, president of VSP Vision Care, said, "For the more than 100 million people with diabetes or prediabetes, an annual eye exam plays a critical role in preventing blindness."

There are newer medications that can treat diabetic eye disease, as well as laser procedures and surgeries that can help people with diabetes avoid vision loss.

Welter still regularly sees her eye doctor and a retinal specialist. Her doctors believe if Welter's problems had started today, they would have been able to save her eye.



Patricia Welter, 64, owner, Suncoast Pilates, Palm Harbor, Fla.

"The key to your eye health is control. Keep control of your blood sugar levels, exercise in some form -- even if you have to sit in a chair and do exercises, there's always a way. If you notice any changes in your vision, immediately consult your eye doctor. About 95% of eye disease is treatable if you get to it early," she said.

SOURCES: Patricia Welter, 64, owner, Suncoast Pilates, Palm Harbor, Fla.; Tracey Brown, CEO, American Diabetes Association; Kate Renwick-Espinosa, president, VSP Vision Care; July 31, 2020, American Diabetes Association Focus on Diabetes: Look Closer at Eye Health expert panel webinar

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Internal Medicine / Medicina Interna

A branch of medicine that deals with the diagnosis and (nonsurgical) treatment of diseases of the internal organs.

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Soloway, Stephen - MD, FACP, FACR, CCD
2848 South Delsea Drive, Suite 2-C
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DeMaio, Frank - MD
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LabCorp
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(856) 327-9200 Fax: (856) 327-9696
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Laboratories / Laboratorios

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(609) 319-5491
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Mental Health Services / Servicios de Salud Mental

The assessment, diagnosis, treatment or counseling in a professional relationship to assist an individual or group in alleviating mental or emotional illness, symptoms, conditions or disorders.

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Vineland, NJ 08361
(856) 537-2310 Fax: (856) 405-0105
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OAKS INTEGRATED CARE - EARLY INTERVENTION SUPPORT SERVICES (EISS)
1138 East Chestnut Avenue, Unit 3A
Vineland, NJ 08360
(856) 696-1233
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Cumberland County Guidance Center
2038 Carmel Road
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Mental Health Services - Continued

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Martin, Christianna R. - LCSW
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Stat Imaging Upright MRI
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Nephrology / Nefrología

The branch of medicine that deals with the physiology and diseases of the kidneys.

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351 Irving Avenue
Bridgeton, NJ 08302
(856) 453-4400 Fax: (856) 205-0041
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Cumberland Nephrology Associates, PA
1318 South Main Road, Suite 4A
Vineland, NJ 08360
(856) 205-9900 Fax: (856) 205-0041
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Kidney & Hypertension Specialists
215 Laurel Heights Drive
Bridgeton, NJ 08302
(856) 455-6002 Fax: (856) 455-6106
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Kidney Wellness Center of Southern NJ
1138 East Chestnut Avenue, Suite 8A
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Nephrology & Hypertension Associates of New Jersey
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Treatment for a precise genetic or acquired biological brain disorder or condition that is responsible for childhood-onset brain dysfunction.

Enriquez, Carla V. - MD, FAAP
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Vineland, NJ 08360
(856) 691-8426 Fax: (856) 696-7053
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The branch of medicine that pertains to the nervous system.

Gupta, Vipin K. - MD, PA
2848 South Delsea Drive, Suite B
Vineland, NJ 08360
(856) 691-7474 Fax: (856) 691-0372
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Neuro-Diagnostic Pain Center
60 Landis Avenue
Bridgeton, NJ 08302
(856) 455-6711 Fax: (856) 455-1979
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Skinner, Dirk E. - MD
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Millville Center Genesis Healthcare
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Millville, NJ 08332
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A person who studies or is an expert in nutrition.

Inspira Health Network - Nutrition Counseling
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Vineland, NJ 08360
(866) 754-2778
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Obstetrics & Gynecology / Obstetricia y Ginecología

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(856) 507-8548 Fax: (856) 507-2720
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Inspira Urgent Care Vineland
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Vineland, NJ 08360
(856) 507-8548
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Washington Medical Occupational Health Center
611 East Landis Avenue
Vineland, NJ 08360
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Bach, Tami L. - M.D., Ph.D.

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Sachdeva, Kush - MD

Roy, Shailija - MD

Negin, Benjamin - MD

Al Ustwani, Omar - MD

Sandilya, Vijay - MD

Clark, Jennifer - APN

Bizzard, Mysti - APN

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Salem, NJ 08079

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Sachdeva, Kush - MD

Roy, Shailija - MD

Negin, Benjamin - MD

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Regional Cancer Pavilion
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Vineland, NJ 08360
(856) 641-8670 Fax: (856) 641-8677
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Inspira Health Network - Medical Oncology/
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Vineland, NJ 08360
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Ophthalmology / Oftalmología

The branch of medicine concerned with the study and treatment of disorders and diseases of the eye.

EYE INSTITUTE OF SOUTH JERSEY, PC

3071 East Chestnut Avenue

Vineland, NJ 08361

(856) 205-1100 Fax: (856) 205-9163

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Eye Associates
251 South Lincoln Avenue
Vineland, NJ 08360
(856) 691-8188 Fax: (856) 691-0421
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Eye Center Ophthalmic Associates, PA
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Vineland, NJ 08360
(856) 696-0020 Fax: (856) 205-1721
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Eye Professionals, PA
1205 North High Street
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Vineland, NJ 08360
(856) 293-0270 Fax: (856) 293-1454
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Charles Marley Optical
1101 North Second Street, Reema Plaza
Millville, NJ 08332
(856) 825-4242 Fax: (856) 825-4242
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Duszak Eye Associates (in Walmart Vision Center)
1130 Highway 77
Bridgeton, NJ 08302
(856) 453-2739 Fax: (856) 453-2802
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Eye Openers
2136 North Second Street
Millville, NJ 08332
(856) 327-8733 Fax: (856) 327-8766
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Eyedeal Vision
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Vineland, NJ 08360
(856) 507-1800 Fax: (856) 507-1892
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What Parents Need to Know About Teens and Concussions

Concussion symptoms aren't always evident, so parents of student-athletes need to know the signs and seek a diagnosis if their teen gets hurt, experts say.

Only those closest to a teen may be able to identify the sometimes subtle changes in mood and emotion stemming from a concussion, said Dr. Rory Tucker, a sports medicine specialist at Penn State Bone and Joint Institute in Hershey, Penn.

"Parents may notice a change in their teen's sleep patterns," Tucker explained. "He or she may be more withdrawn, socializing less with friends or family members, more emotional or tearful. They may have anger outbursts or be more nervous than they were before."

Since doctors may be unfamiliar with a patient's usual mental state, parents need to advocate for their children.

"Medication is rarely necessary in the long term, but while a concussion is healing, it can sometimes be beneficial to take medication to control moods," Tucker said in a Penn State news release. "We also use medications to assist with sleep. Impairment of sleep can have a detrimental impact on emotional health and how people interact with others."

It's also important for parents to know that concussion symptoms can be similar to those of depression and anxiety, and that a concussion can worsen existing mental health problems.

Dr. Craig DiGiovanni is a postdoctoral fellow in psychiatry and behavioral health at Milton S. Hershey Medical Center in Hershey. He said, "Parents should look out for more concerning symptoms of depression that are outside the scope of common concussion symptoms, like loss of interest in activities, significant weight gain or loss, feelings of worthlessness and suicidal thoughts."

The lifestyle changes that can arise from a concussion may also be difficult for a teen, he added.

When injured student-athletes are no longer able to partake in their sport, parents can help "provide them a sense of purpose in other forms," DiGiovanni said. Support groups are another option.

"No matter what their injury, they are not alone. There is help," he said. "Young people can get help from those who came before them and help those who come after them. They can gain a lot of strength in believing they still have purpose."

SOURCE: Penn State Health, news release, July 29, 2020

Not a Myth: Contraceptives Can Cause Weight Gain



Genetics may explain why some women gain weight when using a popular method of birth control, researchers say.

“For years, women have said that birth control causes them to gain weight but many doctors failed to take them seriously,” said lead study author Dr. Aaron Lazowitz. He’s assistant professor of obstetrics/gynecology and family planning at the University of Colorado School of Medicine, in Aurora.

“Now we have looked at the genetics and found that the way genes interact with some hormones in birth control could help explain why some women gain more weight than others,” Lazowitz added in a university news release.

The etonogestrel contraceptive implant is inserted under the skin. It contains etonogestrel, a kind of progestin that inhibits ovulation, and is considered among the most effective types of birth control.

For the study, the researchers reviewed the medical records of 276 women who received the implant. They found these women had a median weight gain of about 7 pounds over an average of 27 months of use. Nearly three-quarters of the women gained weight.

Further investigation led the researchers to conclude that genetic variants in estrogen receptor 1 (ESR1) among some of the women were associated with significant weight gain.

On average, women with two copies of the ESR1 rs9340799 variant gained over 30 pounds more while using the contraceptive implant than other women in the study.

Previous research has found links between ESR1 genetic variants and the workings of other types of medications, the study authors noted.

While this study focused on the etonogestrel contraceptive implant, other birth control drugs could have similar interactions with genes that cause weight gain, the researchers said.

“It is imperative to better understand how individual genetic variation may influence a woman’s risk of adverse weight gain” while using these medications, Lazowitz said.

Currently, there is no way to identify who will gain weight when using such medications. Health care providers can provide counseling about potential weight gain or suggest nonhormonal forms of birth control such as copper intrauterine devices (IUDs), the study authors suggested.

“As our understanding of pharmacogenomics in women’s health expands, we can develop individualized counseling that may reduce the incidence of hormone-related adverse effects, improve patient satisfaction, and help prevent future health risks associated with weight gain,” Lazowitz said.

The study was published recently in the journal *Contraception*. SOURCE: University of Colorado, news release, May 12, 2020

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Many women are prescribed opioid painkillers after giving birth, and it may in some cases lead to addiction and overdose, a new study finds.

Looking at data on more than 200,000 births in Tennessee, researchers found that nearly all women who had a C-section were prescribed an opioid like oxycodone (OxyContin). The drugs were also prescribed in 59% of vaginal births.

Experts said the numbers are surprisingly high, particularly for vaginal deliveries, which can generally be managed with painkillers like ibuprofen (Advil, Motrin).

Even more concerning were the consequences: Nearly 4,600 women had what the researchers call a serious opioid-related event -- persistent use of the drug, opioid dependence or an overdose.

The findings raise concerns about overprescribing to new mothers, especially those who deliver vaginally, according to lead researcher Dr. Sarah Osmundson.

"For those women, it's probably not necessary," said Osmundson, an assistant professor of obstetrics and gynecology at Vanderbilt University Medical Center in Nashville, Tenn.

That point was echoed by Dr. Eleazar Soto, a maternal-fetal medicine specialist at UT Physicians/UTHealth in Houston.

"We typically don't prescribe a narcotic after a vaginal delivery," said Soto, who was not involved in the study. He called the 59% rate in this study "very high."

The findings, published June 8 in the *Annals of Internal Medicine*, are based on data from Tennessee's Medicaid program, which covers the

state's poor residents.

It's not clear if the patterns would hold true more generally. But, the researchers write, almost half of all U.S. births are covered by Medicaid, and understanding what's happening in that "vulnerable population" is important.

For the study, Osmundson's team analyzed state records from 2007 to 2014, which included 209,215 births. Over 30% were cesarean deliveries, and doctors prescribed an opioid in 91% of cases. One-quarter of the time, women ended up getting a refill.

Refills were less common after vaginal delivery, but they happened with more than 10% of births.

"We don't know why second prescriptions were made," Osmundson said, noting that post-childbirth pain would be expected to improve with the first prescription.

Are Painkillers After Childbirth a Prescription for Addiction?

The finding suggests doctors need to better monitor new mothers' ongoing pain-relief needs, Osmundson said.

Overall, 4,582 women went on to have serious complications related to opioids. For 69%, that meant persistent use (filling more than a 90-day supply of the prescription). Another 18.5% were diagnosed with a substance use disorder, while 2% suffered an opioid overdose and 0.2% died.

The findings are based on relatively old data. But, Osmundson said, opioids are still commonly prescribed after a C-section in the United States.

Yet there's evidence that even after those surgical deliveries, women's pain can be effectively treated with non-opioid options, Soto said. In a study reported last year, he and his colleagues randomly assigned women to receive either opioids or ibuprofen/

acetaminophen after having a C-section.

Overall, women given ibuprofen/acetaminophen had better pain control and fewer side effects.

Soto said there are some women who may need an opioid after giving birth -- when a difficult vaginal delivery causes tissue damage, for example. "But," he added, "I believe that with good counseling and setting some expectations with the patient, the use of [opioids] can be reduced significantly after discharge from the hospital."

Osmundson agreed. "I think it's important to set up expectations," she said. "We can talk about the number of days [women] can expect to be in the hospital, and say, here's what we usually do for pain management, and you can refuse [the medication] or ask for more."

As for non-drug options, Soto said that some women who undergo a C-section find pain relief from wearing an abdominal binder for a time afterward.

"I also recommend plenty of hydration and to avoid constipation, as this may aggravate the pain," he said.

SOURCES: Sarah Osmundson, M.D., M.S., assistant professor, obstetrics and gynecology, Vanderbilt University Medical Center, Nashville, Tenn.; Eleazar Soto, M.D., maternal-fetal medicine specialist, UT Physicians and McGovern Medical School at UTHealth, Houston; June 9, 2020, *Annals of Internal Medicine*, online

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Obesity in Childhood Quickly Harms Heart Health



In a finding that suggests the seeds for heart disease are sown early in life, researchers report they found evidence of stiff, thickened arteries in children who had been obese as toddlers.

“Public health efforts are needed in the very early years to prevent problems with obesity and being overweight, to avoid the risk of adolescent and adult cardiovascular disease,” said study author Melissa Wake, from the Murdoch Children’s Research Institute in Australia.

Wake’s team followed more than 1,800 children in Australia whose weight and height were checked every two years to determine their heart disease risk scores. At age 11 to 12, their blood pressure, blood vessel health, cholesterol and blood glucose (sugar) levels were also assessed.

Those who were obese or overweight as toddlers had evidence of stiffer arteries, thickened arterial lining and were at high risk of developing metabolic

syndrome later in life. Metabolic syndrome is a group of heart disease risk factors that occur together. The signs of heart disease were worse the longer children were overweight or obese.

Published recently in the journal *Pediatrics*, the report highlights the silent effects of obesity in childhood, Wake said in an institute news release.

“Our findings are in line with the World Health Organization’s calls for urgent collaborative action to address the matter through systems-based approaches and policy implementation,” she added.

“Such policies include increasing taxes on processed foods high in fat and sugar, safer and improved public transport and walking to school pathways, and making community-based sporting activities more affordable and accessible,” Wake explained.

Until now, little has been known about how body mass

index (BMI -- an estimate of body fat based on weight and height) early in life affects heart health later in childhood, according to Kate Lycett, from the institute.

“Previous studies have tended to rely on a single BMI measurement in childhood and then examined subsequent heart health outcomes in adulthood,” Lycett said. “This overlooks the considerable BMI changes as part of normal childhood growth.”

Obesity is a major public health threat, Lycett warned.

“This public health crisis threatens the modest decline in cardiovascular deaths in developed countries, which has largely been achieved through preventive efforts focused on cardiovascular risk factors,” she said.

SOURCE: Murdoch Children’s Research Institute, news release, July 7, 2020

'Morning Sickness' Doesn't Stick to the A.M., Study Confirms

As many expectant mothers can unhappily attest, the nausea and vomiting known as "morning sickness" can occur at any time of the day.

In a new study, British researchers analyzed diaries kept by 256 women from the day they learned they were expecting until the 60th day of their pregnancy.

While vomiting was most common between 7 a.m. and 1 p.m., nausea was likely all day long. And many women reported vomiting even into the evening.

The most common hour for nausea and vomiting was 9 a.m. to 10 a.m., when 82% experienced nausea and 29% experienced vomiting.

About 94% of the women had one symptom or the other during the study, and 58% experienced both, according to findings published recently in the British Journal of General Practice.

By comparing symptoms across the first seven weeks of pregnancy, the researchers

found that the chances of nausea and vomiting rose.

The likelihood of nausea was highest in weeks five through seven, and vomiting in week seven. The study only examined the first seven weeks.

"If a pregnant woman experiences sickness in the afternoon she may feel that this is unusual and wrong, or if she experiences no vomiting but feels nauseated all day she might think she is not covered by the term 'morning sickness,'" said study author Roger Gadsby. He's an associate clinical professor at the University of Warwick Medical School in Coventry, U.K.

Gadsby also noted that those women who have severe symptoms feel the term trivializes the condition.

"Nausea and vomiting in pregnancy (NVP) can have a significant negative impact on the lives of sufferers," he pointed out in a university news release.

"It can cause feelings of depression, of being unable to look after the family, and of loss of time from paid work. Very severe NVP, called hyperemesis gravidarum, is the commonest cause of admission to hospital in the first trimester of pregnancy," Gadsby said.

SOURCE: University of Warwick, news release, June 30, 2020



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(856) 690-0382 Fax: (856) 457-7056
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Ivy Rehab and Physical Therapy
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(856) 690-9977 Fax: (856) 507-9918
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Ivy Rehab Physical Therapy
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92 South State Street
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(856) 691-1287 Fax: (856) 691-3037
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Cumberland Foot and Ankle Center, LLC
10 East Main Street, Suite B
Millville, NJ 08332
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Family Foot Care Centers
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Fishman, Scott A. - DPM, PA
193 West Commerce Street
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Foot Care Centers
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(856) 691-2152 Fax: (856) 696-3474
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Hosseini, Matt - DPM
2732 East Main Street
Millville, NJ 08332
(856) 825-7331
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Reconstructive Foot & Ankle Surgical Associates
1600 North High Street
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(856) 825-9009 Fax: (856) 825-4766
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South Jersey Foot and Ankle Specialists
2950 College Drive, Suite 2H
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(856) 692-8484 Fax: (856) 896-3059
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Medical Associates
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Dendrin Medical Associates, PA
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County, PC
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(856) 691-1230 Fax: (856) 691-9150
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South Main Medical Associates, LLC
1317 South Main Road, Suite 2C
Vineland, NJ 08360
(856) 213-6080 Fax: (856) 213-6092
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Wasique Narvel, MD, LLC
2950 College Drive, Suite 1D
Vineland, NJ 08360
(856) 692-3161 Fax: (856) 692-3160
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Psychiatrists / Psiquiatras

A medical practitioner specializing in the diagnosis and treatment of mental illness.

Cilnton, Lawrence - MD, PA
1138 East Chestnut Avenue, Building 6
Vineland, NJ 08360
(856) 691-1511 ext 1 Fax: (856) 696-8548
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Psychologists / Psicólogos

A provider specializing in the scientific study of mental processes and behavior. The behavioral and cognitive characteristics of a specific individual, group, activity, or circumstance.

Padover, Gary - PhD, FICPP
1 North Valley Avenue, Rear Entrance
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 Vineland, NJ 08360
 (856) 563-1622
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Acts Rehabilitation Services, Inc
 531 East Landis Avenue
 Vineland, NJ 08360
 (856) 794-2100 Fax: (856) 794-2120
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Atlantic Physical Medicine & Rehab Center
 1237 West Sherman Avenue
 Vineland, NJ 08360
 (856) 896-2015 Fax: (856) 696-2125
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Heartland Rehabilitation Services
 2630 East Chestnut Avenue, Suite C5
 Vineland, NJ 08361
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Inspira Health Network - Rehab Care and Kids
 Rehab Care Vineland
 1038 East Chestnut Avenue, Suite 260
 Vineland, NJ 08360
 (856) 507-8585 Fax: (856) 691-3967
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Inspira Health Network - RehabCare Bridgeton
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 (856) 575-4585 Fax: (856) 455-4354
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NovaCare Rehabilitation
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www.drsoloway.com

See Our Ad Inside Front Cover, Pages 1, 9 & 58

Scrubs

Generally are considered to be any medical uniform consisting of a short-sleeved shirt and pants, typically with a drawstring.

Enterprise Uniforms II, Inc.
 20 East Commerce Street
 Bridgeton, NJ 08302
 (856) 455-3399 Fax: (856) 455-2675
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Sleep Medicine / Medicina del Sueño

A medical specialty or subspecialty devoted to the diagnosis and therapy of sleep disturbances and disorders.

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 Bridgeton, NJ 08302
 (856) 853-2131
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 1450 East Chestnut Avenue, Building 6, Suite B
 Vineland, NJ 08360
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 Vineland, NJ 08360
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Social Services - Continued

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Inspira Health Network - Diabetes Education
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Inspira Health Network - Twice Loved Treasures -
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Inspira Medical Group Business Center
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Vineland, NJ 08360
(856) 205-7070
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Margaret Winchester Enrichment Center For The
Blind & Visually Impaired
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PAFACOM, Inc.
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Vineland, NJ 08361
(856) 696-1661 Fax: (856) 691-6560
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Resources for Independent Living, Inc.
614 East Landis Avenue, 1st Floor
Vineland, NJ 08360
(856) 825-0255 Fax: (856) 213-5427
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Salvation Army, The
29 West Commerce Street
Bridgeton, NJ 08302
(856) 451-0999 Fax: (856) 453-3682
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Tri-County WIC
610 East Montrose Street, Suite B
Vineland, NJ 08360
(856) 691-1155 Fax: (856) 691-2410
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Vineland Housing Authority
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Vineland, NJ 08360
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👁 See Our Ad Front Cover & Page 59

BEWARE OF HAND SANITIZERS CONTAINING METHANOL

The American Association of Poison Control Centers has issued a warning on hand sanitizers that contain methanol (methyl alcohol).

The U.S. Food and Drug Administration has already warned that some hand sanitizers are contaminated with methanol.

Methanol is very toxic and can make you “blind drunk” because of its ability to damage the optic nerve, poison experts say.

Depending on the concentration of methanol and the amount swallowed, patients can experience nausea, vomiting and abdominal pain. Other symptoms can include headache, dizziness, drowsiness and slurred speech, the poison control center said in a news release.

These contaminated products have various concentrations of methanol, which means that some may be very toxic and cause coma, respiratory depression, seizures, blindness and death.

For questions, or if you have an adverse reaction to hand sanitizer containing methanol, contact your poison control center.

Here are some ways to be prepared and get confidential and expert help:

Text POISON to 797979.

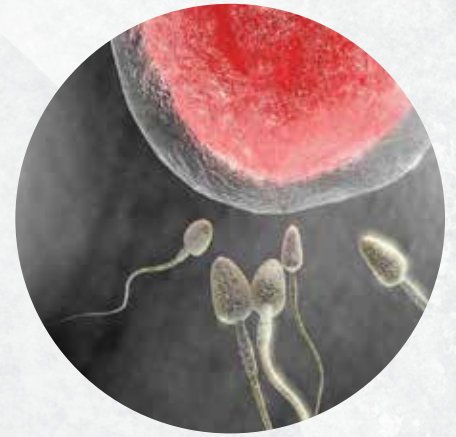
Save the Poison Help Hotline number into your cellphone (1-800-222-1222).

Display the Poison Help Hotline contact number in your home.

SOURCE: American Association of Poison Control Centers, news release, July 23, 2020



Odds of **Pregnancy** in IVF Same With Frozen or Fresh Embryos: Study



Whether a frozen or fresh embryo is transferred during fertility treatments, the odds of pregnancy are roughly the same, according to a new Danish study involving nearly 500 women. Fresh embryo transfer, however, should still be the gold standard in assisted reproduction for women, the research team said.

There was one exception to that rule, however: Women who are at risk of ovarian hyperstimulation syndrome -- a painful response to the use of excess hormones in fertility treatments.

Using only frozen embryos (a "freeze-all" strategy) during procedures such as in vitro fertilization (IVF) has become more common, noted researchers led by Sacha Stormlund, of the fertility clinic at Hvidovre University Hospital, in Copenhagen.

But the new findings "warrant caution in the indiscriminate application of a freeze-all [transfer] strategy when no apparent risk of ovarian hyperstimulation syndrome is present," the study authors concluded.

For the study, the researchers randomly selected 460 women aged 18 to 39 to receive either frozen or fresh embryos. They found that the pregnancy rates weren't significantly different between the freeze-all and the fresh transfer groups (27.8% versus 29.6%).

There were also no significant differences in the rate of loss of pregnancy between the groups and none of the women experienced severe ovarian hyperstimulation syndrome.

Also, the complication risks were not different between the groups except for higher average birth weight in the frozen group and a higher risk of prematurity in the fresh transfer group, the researchers found. The time it took to become pregnant was longer in the freeze-all group, Stormlund's group said.

Dr. Nicole Noyes directs Northwell Health's Fertility Preservation Program in New York City. Reading over the new findings, she said decisions around choosing a fresh or frozen embryo during IVF or other fertility

procedures are tough, because of factors such as the unreliability of preimplantation genetic testing of embryos.

In her opinion, Noyes said, "I believe fresh [often the first candidate embryo used] transfers produce equivalent outcomes in most patient groups and involve much less perturbation of the natural embryo course."

In fact, she added, "embryo transfer of fresh embryos remains my number-one go-to in IVF today after 30 years of successfully practicing IVF in the New York City metropolitan area at three of the best clinics."

The new Danish report was published online Aug. 5 in the BMJ. SOURCES: Nicole Noyes, MD, system chief for reproductive endocrinology and infertility, Northwell Health, and director, Northwell Health's Fertility Preservation Program, New York City; BMJ, news release, Aug. 5, 2020

Surgery - Bariatric - Continued

ESA South Jersey Bariatrics, PA
1103 West Sherman Avenue, Building 2, Unit C
Vineland, NJ 08360
(856) 362-5259 Fax: (856) 405-6978
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Imran ul Haq - MD, LLC
1122 North High Street
Millville, NJ 08332
(856) 692-4304 Fax: (856) 839-0422
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - Breast

Inspira Medical Group Breast Surgery Vineland
1505 West Sherman Avenue, Suite B
Vineland, NJ 08360
(856) 641-8635 Fax: (856) 641-8636
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - Colon & Rectal

Field in medicine, dealing with disorders of the rectum, anus, and colon. The field is also known as proctology, but the latter term is now used infrequently within medicine, and is most often employed to identify practices relating to the anus and rectum in particular.

Inspira Medical Group Surgical Associates
Vineland
1102 East Chestnut Avenue
Vineland, NJ 08360
(856) 213-6375 Fax: (856) 213-6458
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - Cosmetic & Plastic / Cirugía - Cosmética y Plástico

Surgical specialty dedicated to reconstruction of facial and body defects due to birth disorders, trauma, burns, and disease.

American Surgical Arts, PC
2950 College Drive, Suite 1-B
Vineland, NJ 08360
(856) 362-8898 Fax: (856) 362-8903
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Malik Medical Aesthetics
799 South Delsea Drive
Vineland, NJ 08360
(856) 478-4700 Fax: (856) 478-4709
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Plastic & Cosmetic Surgery Institute, Inc.
1051 West Sherman Avenue, Suite 2A
Vineland, NJ 08360
(856) 691-0200 Fax: (856) 691-5984
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - General / Cirugía - General

Surgical specialty that focuses on abdominal contents including esophagus, stomach, small bowel, colon, liver, pancreas, gallbladder and bile ducts, and often the thyroid gland (depending on local reference patterns).

Inspira Medical Group - General Surgery
Vineland
2950 College Drive, Suite 1-A
Vineland, NJ 08360
(856) 507-0600 Fax: (856) 507-0233
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Iqbal & Khan Surgical Associates
10 Magnolia Avenue, Building A, Suite E
Bridgeton, NJ 08302
(856) 455-2399 Fax: (856) 451-7791
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Iqbal & Khan Surgical Associates
1206 West Sherman Avenue, Building 2
Vineland, NJ 08360
(856) 696-9933 Fax: (856) 696-9939
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - Head & Neck

Surgical management and treatment of patients with diseases and disorders of the ear, nose, throat (ENT), and related structures of the head and neck.

Inspira Medical Group Oncologic Surgery
Vineland (Head and Neck)
1505 West Sherman Avenue, Suite B
Vineland, NJ 08360
(856) 641-8635 Fax: (856) 641-8636
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - Neurological

Medical specialty concerned with the prevention, diagnosis, treatment, and rehabilitation of disorders which affect any portion of the nervous system including the brain, spinal cord, peripheral nerves, and extra-cranial cerebrovascular system.

Atlantic Physicians & Surgeons, PA
1051 West Sherman Avenue, Suite 4B
Vineland, NJ 08360
(856) 692-4244 Fax: (856) 691-3350
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Coastal Physicians & Surgeons
415 West Landis Avenue, Suite 102
Vineland, NJ 08360
(877) 653-9110 Fax: (856) 927-3934
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Inspira Medical Group Neurosurgery Vineland
2950 College Drive, Suite 1A
Vineland, NJ 08360
(856) 507-0600 Fax: (856) 507-0233
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - Oral & Maxillofacial / Cirugía - Oral y Maxilofacial

Specialty of dentistry which includes the diagnosis, surgical and adjunctive treatment of diseases, injuries and defects involving both the functional and aesthetic aspects of the hard and soft tissues of the oral and maxillofacial region.

Southern New Jersey Oral Surgery, PA
83 South State Street
Vineland, NJ 08360
(856) 205-9922 Fax: (856) 205-1103
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Vineland Oral & Maxillofacial Surgeons, PA
1117 Highway 77, Suite D
Bridgeton, NJ 08302
(856) 451-2424 Fax: (856) 451-0354
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Vineland Oral & Maxillofacial Surgeons, PA
1318 South Main Road, Building 4, Suite B
Vineland, NJ 08360
(856) 692-8300 Fax: (856) 692-9229
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Surgery - Orthopedic Spine

Surgery performed by an orthopaedist who further specializes in the diagnosis and treatment of spinal diseases and conditions. Spine surgeons provide non-operative and surgical treatment to patients of all ages, although some focus on treating children (pediatric) or adults.

Kirshner Spine Institute
1103 West Sherman Avenue, Building 2, Unit A
Vineland, NJ 08360
(856) 267-5629 Fax: (856) 574-4043
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Ambulatory Care Center, PA
1133 East Chestnut Avenue
Vineland, NJ 08360
(856) 507-0800 Fax: (856) 507-0824
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Personal health care consultation, treatment, or intervention using advanced medical technology or procedures delivered on an outpatient basis.

Oak & Main Surgery Center
907 North Main Road, Suite C
Vineland, NJ 08360
(856) 692-0344 Fax: (856) 692-5605
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Transportation - Medical / Transporte - Medical

JAC Medi Transport, LLC
207 Bogden Boulevard
Millville, NJ 08332
(856) 765-5693
Leave a review @ [njhealthsource.com](https://www.njhealthsource.com)

Millville Rescue Squad
600 Cedar Street
Millville, NJ 08332
(856) 825-5063 Fax: (856) 825-4713
Leave a review @ njhealthsource.com

Upper Deerfield EMS
10 Hoover Village Road
Bridgeton, NJ 08302
(856) 455-2779 Fax: (856) 455-4870
Leave a review @ njhealthsource.com

Urgent Care / Atención de Urgencias

A category of walk-in clinic focused on the delivery of ambulatory care in a dedicated medical facility outside of a traditional emergency room.

Inspira Urgent Care East Vineland
3722 East Landis Avenue
Vineland, NJ 08361
(856) 213-5900 Fax: (856) 213-5905
Leave a review @ njhealthsource.com

MedExpress
301 South Main Road
Vineland, NJ 08360
(856) 692-0502 Fax: (856) 691-1710
Leave a review @ njhealthsource.com

MedExpress
3403 South Delsea Drive
Vineland, NJ 08360
(856) 293-6974 Fax: (856) 825-5165
Leave a review @ njhealthsource.com

Urology / Urología

Specialty focusing on the diagnosis & treatment of diseases of the male genital tract & the urinary tract in both males & females.

New Jersey Urology
1103 West Sherman Avenue, Suite 2B
Vineland, NJ 08360
(877) 388-2778 Fax: (856) 213-4036
Leave a review @ njhealthsource.com

Slavick, Harris D. - MD, PA
1317 South Main Road, Suite 2A
Vineland, NJ 08360
(856) 691-2225 Fax: (856) 691-7726
Leave a review @ njhealthsource.com

South Jersey Urology Consultants, LLC
2950 College Drive, Suite 2E
Vineland, NJ 08360
(856) 405-0025 Fax: (856) 462-6314
Leave a review @ njhealthsource.com

Vascular Centers

A class of diseases of the blood vessels - the arteries and veins of the circulatory system of the body. It is a subgroup of cardiovascular disease.

Pulse Vascular, LLC
1051 West Sherman Avenue, Unit 4A
Vineland, NJ 08360
(631) 534-7246
Leave a review @ njhealthsource.com

Vein & Vascular Institute
1103 West Sherman Avenue, Building 2, Unit A
Vineland, NJ 08360
(856) 238-6284 Fax: (856) 309-9774
Leave a review @ njhealthsource.com

Vitamins & Supplements / Vitaminas y Suplementos

GNC - General Nutrition Center
100 , Cumberland Mall
Vineland, NJ 08360
(856) 327-9897
Leave a review @ njhealthsource.com

The Vitamin Shoppe
2229 North Second Street
Millville, NJ 08332
(856) 825-0479
Leave a review @ njhealthsource.com

Weight Loss / Pérdida de Peso

The context of medicine, health, or physical fitness, refers to a reduction of the total body mass, due to a mean loss of fluid, body fat or adipose tissue and/or lean mass, namely bone mineral deposits, muscle, tendon, and other connective tissue.

Anne Penman Laser Therapy
2185 East Wheat Road
Vineland, NJ 08360
(856) 404-0644
Leave a review @ njhealthsource.com

Yoga / Yoga

A Hindu spiritual and ascetic discipline, a part of which, including breath control, simple meditation, and the adoption of specific bodily postures, is widely practiced for health and relaxation.

Peace Love Yoga Studios
3722 East Landis Avenue, Suite D
Vineland, NJ 08361
(856) 265-8097
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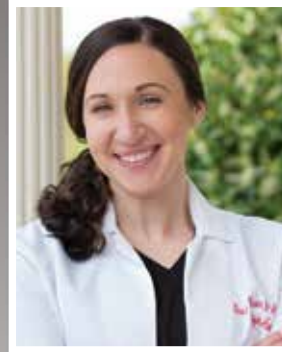
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