

HOTT TOPICS *in Wellness*

PROFESSIONALS' VIEWS AND ADVICE ON TODAY'S TOPICS IN

Health, Wellness and Looking Your Best

What is That Pain?

by Dr. Edward Adler

The hip is a large weight bearing joint and lies deep in the groin. It consists of two bones; a ball or femoral head at the top of the thigh bone and a socket or acetabulum in the pelvis. The bones are covered with a thick layer of cartilage allowing for nearly frictionless motion. Muscles and ligaments surround the joint to provide motion and stability. Hip arthritis affect much of the elderly population but individuals as young as 25 can develop hip problems that require treatment.

Hip difficulties most commonly occur from diseases that affect the cartilage such as rheumatoid arthritis. Other causes are interruptions of the blood supply to the hip joint (avascular necrosis) and developmental disorders such as slipped epiphysis and dysplasia.

Most commonly a problematic hip will cause pain in the groin or front of the thigh. Occasionally the discomfort will radiate to the knee. The joint gets stiff making activities of daily living such as putting on shoes and socks difficult. If you feel like you have a groin pull that won't go away you may have early arthritis in the hip.

An orthopaedic surgeon can diagnose a hip problem with a history and physical examination. An x-ray or occasionally an MRI will be required to confirm the diagnosis.

The initial treatment consists of rest, low impact exercises, and activity modification. Medication can be helpful in the short term. If pain continues surgery may be indicated. Over one hundred thousand hip replacements are performed annually in the United States. "Younger patients may be candidates for a hip resurfacing procedure instead of the traditional total hip replacement."

Employing the latest techniques a qualified total joint surgeon can perform the procedure in an hour or two. Most patients are out of the hospital in three days and back to work in a few weeks.

Dr. Edward Adler is a Clinical Assistant Professor of Orthopaedic Surgery at the NYU School of Medicine. He specializes in surgery of the arthritic hip and knee, revision surgery for failed hip and knee replacements, and post-traumatic conditions of the lower extremities. He has designed and developed surgical instrumentation for improved techniques in joint replacement. Dr. Adler has presented several papers at national and international meetings on topics from congenital hip deformity to the management of infected knee replacements.

Dr. Adler has offices in Manhattan as well as Flushing (212) 427-3986. Further information regarding his practice can be viewed at the following link: <http://madisonaveortho.com/pages/adler.php>



Lowering Your Blood Pressure Takes Hard Work

by Dr. Tara Timmerman

As Americans, we love the quick fix, get-rich-quick schemes and fast food. But when it comes to our health, we have to be prepared to put in the hard work.

At least 65 million Americans have been diagnosed with hypertension, or high blood pressure. Most people want that elusive quick fix, and after they're treated with a single medicine and adopt a healthier lifestyle, they feel they've done enough.

Unfortunately, taking a single anti-hypertensive medicine may only impact one of the many different neuro-hormonal systems in your body. That's why it is not uncommon for a patient to require more than one medicine to effectively lower their blood pressure. Every patient responds differently to a given medication or combination, and the only way to determine your response is by a trial-and-error approach. This, unfortunately for the quick-fixers, requires regular follow-up visits with your treating physician.

Hypertension is an all-out epidemic in the United States, and it's one of the greatest risk factors for heart disease. In order to effectively treat an individual's high blood pressure, it is imperative that a strong doctor-patient relationship be formed. A doctor must be able to explain exactly what hypertension is, what the risks are associated with it, and what must be done to improve it. This requires open and frequent communication and frequent office visits to bring your blood pressure down.

For patients, it is critical that you understand the importance of regular follow-ups, even if you feel healthy. Just because your blood pressure is controlled one month doesn't mean you're in the clear. The most frustrating aspect about treating hypertension may be that there's no way to know exactly what response a person will have to a given medicine regimen or how long that response will last. But the good thing is that controlling high blood pressure is entirely possible and achievable, as long as both the doctor and the patient are committed to it.

For more information, log on to www.ash-us.org/about_hypertension and click on "ASH Pamphlet: Understanding Hypertension".

Dr. Tara Timmerman is a graduate of Mount Sinai School of Medicine. She completed a residency in Internal Medicine at Boston University Medical Center, and a fellowship in Nephrology/Hypertension at New York University. She is board certified in both Internal Medicine and Nephrology, and is currently practicing on the Upper East Side of Manhattan. She is available for consultation by calling 212-737-4174.

Focus on Nutrition

by Robyn Flipse, MS, RD

Food or Supplements - How to Ensure Good Nutrition?

In a world where instant messages have already made e-mail the new snail mail, is it any wonder that many people feel they can achieve instant nutrition by simply taking a daily multivitamin-mineral supplement? The attraction of supplements over food is certainly easy to understand. Popping a few pills is not only faster than shopping for food, preparing it, eating it and cleaning up the mess, it's also more convenient and mindless. No big decisions to make once the shelf is stocked with all your essential nutrients in capsule form. But can you be sure you're getting everything you need in those once-a-day formulas?

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The Truth About Dietary Supplements

Most of the information about dietary supplements reaching consumers is generated by the manufacturers of the products and relies heavily on personal testimonials. This is because the Dietary Supplement Health and Education Act (DSHEA) of 1994 exempted dietary supplements from strict oversight by the Food and Drug Administration (FDA). This means that unlike drug products, which must be proven safe and effective for their intended use before marketing, there are no similar provisions in the law regarding dietary supplements.

It is also worth noting that the FDA does not analyze dietary supplements before they are sold to consumers and does not have resources to analyze dietary supplements sent to the agency by consumers who want to know their content. Instead, consumers must contact the manufacturer or a commercial laboratory for an analysis of a product's content.

A final point of concern is that, unlike drug products, manufacturers and distributors of dietary supplements are not required by law to record, investigate or forward to the FDA reports of injury or illness related to the use of their products. According to the regulations, once a dietary supplement is marketed, the FDA has the responsibility for showing that it is "unsafe" before it can take action to restrict a product's use or removal from the marketplace.

Eating for Optimal Nutrition

At the end of the day, no matter how carefully you select your dietary supplements, they cannot replace food. In fact, by definition a "supplement" is meant to be taken in addition to or along with your meals, not instead of them. Yet there are many people using dietary supplements who develop a false sense of security that all their nutritional needs are being met and they neglect the more important piece of the puzzle, namely, to choose their meals wisely.

To get the best value in the foods you eat, follow these simple rules:

- Choose as wide a variety from each food group as possible.
- Eat what's fresh, colorful and in season.
- Select minimally processed foods.

We have a choice at every meal and snack to eat for good nutrition or to leave it up to a dietary supplement. Which will it be for you?

Robyn Flipse, MS, RD of Nutrition Communication Services is a registered dietitian with over 25 years of experience in nutrition education, consulting and media relations. To learn more about her credentials and services visit, www.RobynFlipse.com.

Dentistry and Heart Disease

by Dr. Wayne Silverstein

The "Quiet" ones can sometimes be the most dangerous. I have noticed over many years in practice that patients are more aware of tooth related pain than any other oral discomfort. Pain associated with teeth is straight forward to relieve and can quickly become pain free. The more difficult oral health problems to tune into are the ones of a periodontal nature. The patient may overlook seemingly benign symptoms such as bleeding or frequent food traps. Feeling little to no pain, the problem often goes unchecked. Hence, my use of the term, "the quiet ones."

Today, there is a greater public awareness concerning periodontal disease, and more treatment options for patients than ever before. However, periodontal disease still remains the most common cause of tooth loss in adults. Periodontal disorders are characterized by inflammation and a bacterial infection in the gums surrounding the teeth. Over the years much research has been done to support the connection between gum disease and the development of heart disease, which is, the number one cause of death in our country. In addition, accumulating research is further defining the link between periodontal disease and other systemic conditions such as diabetes, adverse pregnancy outcomes and other vascular diseases. We now know the bacteria associated with Periodontal disease can travel into the bloodstream putting the body at higher risk for infection.

The good news is with regular checkups, periodic cleaning, many cases of tooth loss or loss of bone support can be reduced. This is why I find it imperative that Periodontal treatment should be encouraged for all patients, not just on its benefits for better oral health, but to ensure an overall healthy body.

For further information to help in early diagnosis and treatment of periodontal disease you can log on to American Academy of Periodontology at perio.org

I hope you enjoyed reading Madison smiles first newsletter. Four times a year I will be featuring prominent doctors and experts in the most relevant wellness issues to create what I believe is a valuable tool to leading a healthy and better life.

Dr. Wayne Silverstein DMD; Cosmetic and Implant Dentistry

