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SUMMER 2016 | ISSUE 66

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# TEAM SPIRIT: EASTSIDE DENTAL

**For most of us, school's out for the summer. At Eastside Dental, Official Dental Team of the University of Windsor Lancers, first-class dental care is always in session and never out of season.**

In healthcare as in sports, you're only as good as the lineup around you. Windsor's Eastside Dental is a full-service oral health facility staffed by five dentists backed up by a full support team. Since 1976, local professionals have been delivering personable and professional dental care under the Eastside banner to Forest Glade, Riverside, Tecumseh, and the rest of Essex County. For those keeping score at home, that's 40 years of service. You might call it a dynasty.

Today, Eastside Dental's staff comprises friendly, conscientious healthcare professionals who live in the community in which they work. Alongside Dr. Mario DiPonio, who has been with Eastside since 1986, Drs. Paul Serra, Maha Mirza, and Christopher DiPonio form the core of the Eastside Dental roster. For patients who require dental implants or care for periodontal issues, the periodontist Dr. Katy Chahine also books a regular schedule of appointments for patients at Eastside. Collectively, the Eastside Dental team boasts more than 75 years of professional experience and speaks English, Arabic, Italian, French, and Romanian.

For 2016, Eastside Dental has inaugurated a unique new partnership with the University of Windsor Lancers. Going forward, Eastside Dental will proudly serve as the Official Dental Team of Lancer Athletics, meaning University of Windsor varsity athletes will be able to count on the consistent care of Eastside's team whenever they have an oral health need.

"It's a good fit," says Dr. Serra, whose wife has worked closely with the Department of Athletics and Recreation during her 15 years as a University employee. "We're a team, just like the Lancers are, and we're excited to be part of the Lancers community. The Lancers are going to be here forever."

Importantly, the Eastside dentists have been enthusiastically participating in the local sports community for several years. As a team, Eastside Dental are fervent fans of University of Windsor Athletics. The office even boasts staff members whose children played on Lancers varsity teams! "We're all pretty avid sports fans," stresses Dr. Serra.



Dr. Mario  
DiPonio

Dr. Katy  
Chahine

Dr. Maha  
Mirza

Dr. Paul  
Serra

Dr. Christopher  
DiPonio



"What's more, since I've been practising, I've treated several athletes with fairly complicated hockey-related dental injuries."

"The Lancers do a lot in the community," adds Dr. Christopher DiPonio, himself a Windsor alumnus. "They've been able to attract some of the highest-calibre student-athletes in Canadian Interuniversity Sport, and I know that several Lancers alumni have graduated to professional sports and Olympic Games. Recently, the University has been making significant improvements to its facilities, and we're happy to play a part in its growth in the community."

As the Lancers' Official Dental Team, Eastside's dentists are proud to serve Lancers athletes and coaches and University of Windsor students and faculty. (And mascots: just ask Winston.) In many cases, this means treating the unique needs of athletes with sport-related injuries.

"A sport-related dental or orofacial injury can happen in soccer, baseball, track and field, or any number of sports," notes Dr. Mirza. "We create custom-moulded mouth guards for contact sports, which we recommend. Of course, the majority of trips to the dentist are for preventative reasons. It's important to stop issues from occurring, or catch problems early before they get bigger."

To this end, the Eastside Dental team practises comprehensive dentistry, which encompasses restorative and cosmetic dentistry, dental implants, and Invisalign clear aligners – an inconspicuous alternative to metal braces for adults and teens. Eastside's home base is stocked with low-exposure digital x-ray machines, purpose-designed soft tissue lasers, special medial cameras, and a full suite of other impressive technologies.

As Dr. Mirza explains, a dentist can improve the function and aesthetic appearance of a patient's teeth while also helping him or her manage myofascial pain. The before-and-after photos are stunning.

"What we do is art blended with science," expands Dr. Christopher DiPonio. "A lot of people have multiple cavities or a lot of fractured teeth. We apply our professional knowledge to offer a wide range of services, including crowns and fillings, to make sure their teeth look good and are structurally sound as well."

Because nobody knows more about demanding schedules than varsity student-athletes, Eastside Dental makes it as convenient as possible for

patients with jam-packed itineraries – Lancers and civilians alike – to fit in quality dental care. Eastside accepts appointment confirmations via email or text message, and evening and Saturday hours are available. Eastside even offers a 24-hour emergency helpline.

For complex cases, Eastside Dental is happy to coordinate patient care with an impressive arms-length network of trusted local specialists in several areas of oral healthcare. If your unique case requires an outside referral, your Eastside dentist will work closely with you to develop the perfect custom-fitted treatment plan.

Located at the corner of Hawthorne Drive and Enterprise Way, Eastside Dental is a neighbourhood practice that's easily accessible from the EC Row Expressway. The conveniently located facility features ample free parking and is completely accessible to persons with disabilities.

Whether you're a lifelong Lancers booster or simply an Essex County resident looking to smile a little brighter, you should know that Eastside Dental is eager to welcome new patients to the team. (And if you've already had a pleasant Eastside experience, keep in mind that referrals to friends and family are always appreciated.)

Remember: your oral health has no offseason!

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**Pictured Below (Left to Right):**

Dr. Maha Mirza

Dr. Paul Serra

Dr. Christopher DiPonio

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**Dr. Maha Mirza**  
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It happens to everyone. Around the age of 45, suddenly the menu at your favourite restaurant seems impossible to read. As you hold the menu farther away and angle it to increase the light, you realize the years have caught up with you. It's called "presbyopia," or the natural loss of focusing-muscle strength.

Despite all the exercise and eating well you've done to stay looking young, despite the Botox and face creams, once the readers go on, you feel your age – and everyone else can tell your age, too.

You may have worn glasses since you were a child or had eagle vision your entire life, but by your early 50s, it's readers or bifocals. Some of us are mildly nearsighted and simply take off our glasses to read but then put them on to drive. Back and forth it goes. There's no escaping the inevitable.

LASIK has become the gold standard for eliminating glasses and contacts for great distance vision, and the procedure has helped tens of millions of people see better over the past two decades. The only reading option to date has been monovision, with LASIK or contact lenses, where one eye is set for distance vision and the other for near vision. Monovision works great for some patients, but for many others, it's a compromise that is worse than the problem of presbyopia. It leaves people feeling off-balance and compromises their night vision.

Like the solutions to most problems, good things come to those who wait. In 2015, new vision procedures were introduced, 25 years after laser vision correction first began in Canada. New laser and implant technology can help people see long distances, intermediate distances, and close up without glasses.

To understand how these techniques work, we need first to understand how the focusing elements of the eye function. Similar to what is found on a camera, there's a focusing system at the front of the eye and the film – or retina – is at the back of our eyes. The focusing system consists of two components: the cornea and the natural crystalline lens. LASIK reshapes the cornea using laser technology, essentially taking the curve from our glasses or contact lenses and placing it on the eye, allowing us to see without visual aids. The crystalline lens provides our visual fine-tuning and reading ability. As we age and develop presbyopia, our lens becomes stiffer and less flexible, making reading increasingly more difficult. This explains why, even if LASIK patients see amazingly well at a distance, they still need reading glasses.

The next stage of aging results in the lens of the eye becoming darker, more yellow and brown, and more hazy – actually blocking vision and preventing or distorting light rays from reaching the retina. This is known as cataract formation, and again, it will develop in all of us, usually in our 60s and 70s, although it can occur far earlier and, in some lucky people, later.

The solution to both these aging lens issues is to replace the natural lens of the eye with an intraocular lens implant – something we've been doing for far longer than LASIK and in far more people. About 70,000 LASIK procedures are performed each year, compared to about 4 million cataract and lens replacement surgeries annually.

Cataract surgery is the most commonly performed nonelective surgery in North America. There have been significant improvements in the safety and success of cataract surgery over the past decade, such as small, rapidly healing sutureless incisions and the use of high-frequency ultrasound or phacoemulsification to break up the cataracts. All of this is done in an outpatient procedure performed under topical anesthesia and light sedation. In the past couple of years, femtosecond lasers – which have significantly improved the safety and accuracy of LASIK surgeries over the last decade – have been introduced to lens surgery. Femtosecond lasers in cataract surgery have the ability to create the lens and corneal openings; perform lens fragmentation, even in very dense cataracts; and treat astigmatism.

With these tremendous advancements, lens surgery – or refractive lens exchange (RLE), as it is commonly referred to – is being performed at the earliest signs of an aging lens, to help reverse the symptoms of presbyopia and eliminate the early visual symptoms associated with age-related lens irregularities and visual aberrations. One key benefit is that once an RLE procedure is performed, cataract surgery will never be needed and the results will last a lifetime. Perhaps the most important benefit stems from the advancements in lens implant selection, allowing surgeons to treat astigmatism, improve visual quality, and provide more functional full-range vision.

Developed and performed in Europe over several years, these new vision correction options represent exciting medical breakthroughs. In the past, most implants only provided distance and near vision, but no intermediate vision, and many significantly impacted a patient's night vision. Now, a new class of Intraocular Lens implants are available, known as Extender Range of Focus implants.

The most notable of these implants is the Symphony implant, which has been approved in Canada and certainly represents the most exciting innovation in both cataract and refractive lens exchange procedures. Combined with femtosecond second-laser technology, a virtually painless 10-minute procedure can provide high-quality, functional, and continuous distance to near vision. In patients desiring even sharper reading vision, the Symphony can be combined with Low Add Tecnis Multifocal Lenses for superior visual performance at all distances. New trifocal lenses, such as the FineVision implant, are also predicted to be available in Canada in 2016. Compared to multifocal – or, perhaps better termed, bifocal – lens implants providing distance and near vision, this new generation of more full-range implants is achieving far greater functional vision and significantly improved patient satisfaction.

So it seems, with these latest innovations, we can reclaim our youth, eliminate reading glasses and bifocals, and not follow in the footsteps of our parents.

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by Jesse Ziter

# LEGENDS OF THE LUNCH TABLE:

## 10 Food and Nutrition Myths that Won't Go Away



### Eating carrots will supercharge your eyesight

Associating carrot consumption with eyesight is a good way to guilt your kids into spiking a few more vegetables into their diet. Unfortunately, that's about all it's good for. While carrots are a strong source of Vitamin A and beta-carotene, which do have benefits for eyesight, you won't realistically be able to eat enough of them to give your vision a noticeable boost.

Remarkably, this widely spread health myth was actually devised deliberately by the British Air Ministry. Seriously! It dates to World War II, when the Royal Air Force's Airborne Interception (AI) Radar proved remarkably successful at pinpointing Nazi bombers, even under the cover of nightfall, before they reached the English Channel.

Because this combative advantage was so pronounced, the Germans were never going to ignore it. Naturally, British intelligence officials preferred that their superior technology remained a secret. To this end, they began to plant stories in the British press about how their pilots were fed a special diet containing heroic quantities of carrots, which was what accounted for their unusually keen eyesight. It was just plausible enough to catch on, and catch on it did.

### You need exactly eight glasses of water daily

There's ultimately no hard-and-fast rule for how much water a person needs to drink to stay healthy. We now understand that the eight glasses rule comes from a group of well-intentioned physicians who wanted to give their patients a clear and persuasive push away from sugary drinks.

Eight glasses per person per day is an appropriate amount for many people in many circumstances, but it's by no means a magic number. Reasonably, larger people have different hydration requirements than their smaller peers. One useful guideline is to drink one ounce (about 30mL) of water for every other pound of your bodyweight. If you weigh 150 pounds, that's 75oz, or a little over 2.2L in daily water intake.

Even that advice, though, does not apply in all cases. If you're concerned about what you're putting into a body, your best bet is to speak to a healthcare professional. Also keep in mind that, while water is the best and most readily available source of hydration, we also ingest water by eating fruits and vegetables or drinking any other liquids. Our bodies generally do a good job of telling us when we are or aren't properly hydrated. Trust your thirst, and inspect the colour and clarity of your urine.



## Tea actually contains more caffeine than coffee

This one is a weirdly pervasive myth that common sense would not seem to bear out. If you've heard, perhaps at a party or other social gathering, that tea is more caffeinated than coffee, there's a good reason: It makes for an interesting anecdote that's slightly surprising and just true enough that you can get away with saying it. In a meaningful sense, though, it's not the case. While tea leaves do contain more caffeine than coffee beans (by weight) in their natural state, much more of their caffeine content remains after brewing in the part you don't consume. Also, a "normal" cup of coffee is typically brewed with more raw material than a standard cup of tea.

It's difficult to articulate the amount of caffeine in a cup of your favourite warm drink due to the number of variables involved. How large is the cup? How much tea or coffee beans have you used? For how long did you brew or steep the drink? How hot was the water?

That said, we can paint the broad strokes. Health Canada's official guidelines tell us that an average 237mL (8oz) cup of filter coffee contains 179mg of caffeine. A similar serving of black tea contains 43mg. Frankly, it isn't even close.

## Coffee dehydrates you

As it turns out, your daily cup of coffee almost certainly does not have the effect of dehydrating you. When we talked about this within these pages in the past, here's what we said: This incredibly popular belief largely stems from a 1928 study conducted by the *Journal of Pharmacology and Experimental Therapeutics*. Its sample size: Three people. According to our best modern science, while it's possible that the occasional cup of coffee may have a slight net diuretic effect for irregular drinkers, it takes about four days of regular consumption to become habituated. After that point, there is no compelling evidence that regular coffee drinkers suffer from dehydration at all. Recently, researchers at the University of Birmingham in England conducted a study involving men who drank three to six cups of coffee on a daily basis. The results were good for coffee drinkers worried about the drink's diuretic effects. There are none worth worrying about.

## Milk is the best or only path toward healthy bones

Dairy lobbyists and advocacy agencies have done a remarkably good job associating milk products with bone health in the public consciousness. Today, broad swathes of the population more or less conflate milk with calcium. That is, they assume it's the same thing, or that calcium is a substance only found in dairy products.

In actual fact, while calcium is indeed critical to bone health, dairy is only one source of many. According to the Harvard School of Public Health, it's not even the best choice.

If you'd like to limit your dairy intake, consider replacing it in your diet with dark-coloured leafy greens and vegetables. According to Dieticians of Canada, a cup of milk contains about 300mg of calcium, which is certainly a significant amount. A cup of collard greens, or about 150g of canned salmon, will net you closer to 400, though.

Also keep in mind that Magnesium and Vitamins D and K are also important for bone health. Of the three bone boosters, dairy products only contain Vitamin D.

## Oranges are magical orbs of Vitamin C

Just like you shouldn't trust everything the dairy farmers tell you, it's wise to be slightly skeptical of Big Citrus! While oranges are indeed an excellent source of Vitamin C (a good-sized one will get you about 80mg according to Dieticians of Canada), they're certainly not the only or best option. A whole red bell pepper, for example, might net you north of 300mg.

You'll also find superior amounts of Vitamin C in tropical fruits like guavas, papayas, and kiwi, and plenty in healthful vegetables like broccoli, cabbage, and Brussels sprouts. While oranges are hardly junk food, the link between them and their juice and Vitamin C is almost absolute in the public mind. If you're trying to watch your – or your kids' – sugar intake, just know that you have options.

## Gluten-free foods are obviously healthier

If a food is marked "gluten-free," that means it contains very little or no gluten. Unfortunately, that's all that it means. You see, gluten is a large part of why the foods that contain it taste as good as they do. In order to make gluten-free alternatives more palatable, bakers, chefs, and food manufacturers of all sizes often pack their products with more calories, fats, and sugars than might have been there otherwise.

The next time you're at your favourite health food store or supermarket, pay close attention to the nutritional information on your regular gluten-free staples and treats. Compare them, if you can, to gluten-containing alternatives. What you'll probably find is, more often than not, gluten-free foods pack in sweeteners, oils, and butters to compensate for a hard-to-avoid lack of taste. For those with celiac disease or gluten sensitivities real and imagined, it's extra important to do your due diligence before assuming that what you're purchasing is healthy.

What's more, a recent Consumer Reports survey of 81 gluten-free products across several food categories found no positive correlation between gluten-freedom and enhanced nutritional values. In fact, while many wheat-based products are commonly enriched with nutrients like iron and folic acid, their gluten-free equivalents often are not.



Our best advice: If you don't *need* to eat gluten-free food, it's probably just as healthy, or even better for you, to eat the real stuff.

### MSG is bad for you

We tackled this topic at length in a previous issue, but the point bears repeating: Monosodium glutamate is a stable form of glutamate, a natural amino acid found in many of our favourite foods, bound to salt and water. As far as the scientific community can tell, a small percentage of the population will experience a very mild response to MSG if they consume an unrealistically high dose that does not correspond at all to, say, any meal on the menu at your favourite Chinese restaurant. It's just not a problem.

As far as we're aware, every credible body that regulates food safety agrees. Health Canada, the (American) Food and Drug Administration, the United Nations food agencies, the World Health Organization, the Federation of American Societies for Experimental Biology, the European Union, and the British, Japanese, and Australian governments are all fine with MSG as a food additive.

Like many popular health myths, the mis-education of the Western world on the subject of MSG can be traced back to a single initial spark. In this case, it was a 1968 letter to the editor in the *New England Journal of Medicine*. The writer, a Chinese-American physician, wondered whether MSG might be responsible for a slate of symptoms he'd been experiencing after eating out. While the initial inquiry was entirely reasonable, our best scientific minds have now tested his hypothesis for several decades. Here's the thing: He was wrong.

### Searing meats "seals in the juices"

Our next item isn't necessarily health related, but, on a personal level, it drives us crazy. Briefly exposing a thick steak or other piece of meat to extremely high temperatures creates an attractive, toothsome sear that significantly impacts the texture and taste of the finished product. But *why*? Many amateur chefs will tell you that this technique has the effect of creating a firm outer layer of cooked meat that "seals in" the interior of the steak, preventing delicious juices from escaping.

According to *Snopes*, a truly excellent myth-fighting force on the internet, this theory was first proposed by a 19th century German chemist named Justus von Liebig. Like many ideas from the 1800s, this one has since been summarily disproven. Sorry, Justus.

The noted food science writer Harold McGee perhaps does the best of job dismissing this notion in his 1984 opus *On Food and Cooking*. Submitting the theory to scientific scrutiny in a controlled environment, he concluded that searing has no relationship to interior moisture content.

That said, his seared piece of meat probably did *taste* better. What actually happens when you sear a steak is something called the Maillard Reaction, a chemical interaction between specific amino acids and reducing sugars that creates hundreds of unique and complex flavour compounds. It's a lot to explain, but the taste tends to tell its own story.

### It is impossible to get sufficient protein out of a plant-based diet

Nope. We're not going to spend too much time on this one; the idea that only meat contains enough protein for life seems to be seeping out of the public consciousness as more and more of us turn to partially or wholly vegetarian diets. While vegetarians and vegans may need to, at least initially, pay a bit more attention than omnivores to the macronutrients they're taking in, there are plenty of non-animal proteins available.

Significant sources of dietary protein include any manner of soy-based products; beans, legumes, and lentils; whole grains like brown rice, quinoa, and farro; nuts, seeds, and associated butters; and, believe it or not, even vegetables. Broccoli, peas, and asparagus are all relatively significant sources.

*As always, this magazine's nutritional advice is provided in good faith but is ultimately offered for general information and entertainment purposes only. If you have serious concerns about your nutrition, we encourage you to seek the counsel of an actual medical professional in a recognized field.*

# Layla Di Meo

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by Zishan Ali

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### **Harold and Jamie** **REHAB / INJURY CARE**

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# FRESH CASUAL XACO TACO DOES MEXICAN WINDSOR STYLE

by Jesse Ziter



## South Windsor's new Xaco Taco is the freshest Mexican experience this side of the border.

Xaco (pronounced *Hah-Ko*) Taco, borrows its name from the Southwestern Mexican state Oaxaca, home to a storied food culture built on sun-kissed produce, slow-roasted meats, and carefully prepared accompaniments. It also borrows all the best parts of what is one of North America's cleanest culinary experiences.

Conveniently located on Cabana Road between Dougall and Howard Avenues, Xaco marks the spot for elegantly unfussy Mexican in the heart of South Windsor's increasingly impressive dining district.

An unpretentious, order-at-the-counter eatery, Xaco Taco is the kind of place where you can still sit down for a comfortable, artfully prepared meal that will more than fill your belly without emptying your wallet.

The stylish new fresh casual concept is the latest venture from John Pizzo, president of Armando's Pizza. "We just wanted to diversify and try something different," he explains. "We started talking about Mexican years and years ago; we've been wanting to do this for quite a long time. I feel that we're going to do a great job, and we're going to have fun."

The heart of Xaco Taco's menu is made up of simple, sharable staples like tacos, burritos, bowls, and salads. While Xaco Taco's permanent bill of fare will adhere pretty closely to the traditional tastes of the Mexican cuisine you already know and love, the kitchen refuses to limit itself only to authentic interpretations. Instead, Xaco Taco will also feature a weekly rotating menu of eclectic, occasionally non-traditional specialties that might best be described as Mexican-inspired, globally influenced cuisine. Keep an eye out over time for options like mahi-mahi, shrimp, *barbacoa* beef, and tofu.

Xaco Taco will also be incredibly friendly to vegetarian diners, Mexican being a cuisine that lends itself readily to a meatless lifestyle. Avoid the flour tortillas and it's also easy to piece together a delicious gluten-free meal.

Refreshingly, the Xaco Taco team is concerned about the quality and provenance of the food it sources – including ethically supplied, humanely raised animals whenever possible. "It's important for our customers to know that virtually everything is made in house from scratch," promises Pizzo. "Everything's fresh and also locally sourced. The suppliers that we're choosing are specifically ones that share our belief system."

This agreeable attitude starts with the eatery's signature salsa – which is made exclusively from fresh, seasonal produce prepared on-site – and extends to its dips, sauces, and even rice and bean dishes. The no-cans-allowed kitchen is already hard at work roasting its own tomatoes, tomatillos, and chili peppers and putting the finishing touches on a unique, house-made *queso* sauce that promises to become a restaurant specialty. Xaco Taco is even sourcing high-quality tortillas from Tortilla Leamington and Southwest Detroit's Hacienda, two family-run tortillerias, and frying its own tortilla chips in house.

Inside, expect a distinctive aesthetic as fresh as the food behind the counter. Xaco Taco's families-welcome atmosphere features plenty of *luchadore* masks and other high-energy style cues borrowed from Mexico's *lucha libre* wrestling culture. Anthony Carrabino, Senior Marketing Manager for the award-winning design agency Carrabino, has been an integral part of the brand launch. "We're all big fans of Mexican food and culture, so we wanted to reflect that," he relates. "This isn't just a business venture; there's a lot of passion behind this that will hopefully come through in the product. We're always talking about, tasting, and testing the food. This is a passion project for us."

Barring any last-minute hiccups, Xaco Taco will be open for takeout and eat-in service by the time you read this. Look for delivery in the near future, once the restaurant settles into a groove, and keep an eye out for its stadium-sized billboard at the meeting point of Dougall and Ouellette.

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# Bright Ideas:

## ON SUN & SUNSCREEN IN 2016

by Windsor Body Staff

*It's getting to be that time again. While we know you already know that it's important to stay safe in the summer sun, it's never a bad idea to brush up on your sun protection basics. Here's a quick Windsor Body primer for sunscreen season 2016:*

*What is a sunburn? I mean, I know what it is, but what's really going on?*

A sunburn is actually an acute toxic reaction in the body, which sounds appropriately scary to us. This complex chemical process, of which we're still gaining an understanding, is brought about by exposure to invisible ultraviolet (UV) radiation.

In very simple terms, after sufficient exposure UV energy will damage DNA and other molecules in the skin. As a response, the body synthesizes various proteins and enzymes; we won't concern ourselves in this space with which ones. Long story short, the blood vessels of the skin dilate, and the body recruits a squad of inflammatory cells that produce the redness, swelling, and pain we associate with sunburn. The synthesis of the proteins that kick-start this process typically takes around five hours, which is why full sunburn symptoms normally appear long after your initial exposure to excessive radiation. If you're peeling, that's because the DNA damage you've suffered has effectively brought about the destruction of the skin cells involved.

*Okay, that's a bit much. Remind me what SPF is all about, please.*

Sure. SPF stands for "Sun Protection Factor." It's a measure of how long you can safely spend in the sun relative to a normal, unprotected baseline. Slather on some SPF 30 and you can spend 30 times as long outside before burning as you would have been able to without it.

*These numbers seem to go pretty high. I'm probably good with SPF 30, right?*

Kind of, but not totally. According to Howard Sobel, a Doctor at Lennox Hill Hospital in New York City who spoke to *Lifehacker*, jumping from SPF 30 to 90 only provides a three-percent boost in sun protection.

So, if an ultra-high-SPF sunscreen is outside of your budget or difficult to acquire where you do your shopping, there's no need to despair. That said, an incremental increase in protection factor could plausibly be the difference between burning and bronzing – particularly if you're very fair skinned and/or spend much of your life out in the hot sun. Why not play it safe?

*How often should I apply it?*

If you're spending a full day out in the sun, your best bet is to reapply every two to four hours. When in doubt, err on the side of more frequently.

*And when?*

Aim to apply sunscreen 15 minutes before sun exposure.

*When is the sun at its worst?*

You're in the greatest danger between 10am and 2pm. While it's unrealistic to insist that you stay out of the sun entirely during these ultra-hot hours, please keep in mind the risk you are taking and react accordingly. Try to cover up at least a little bit.

*Am I really getting as much protection as my sunscreen says I am?*

This is a good and important question. Unfortunately, if you're not applying it perfectly, a sunscreen's stated SPF does not accurately represent the level of sun protection it gives you in real-world practice. Commercial SPF ratings start from the assumption that the sunscreen user is squirting out a full 30 millilitres – about one fluid ounce or a full shot glass worth – and applying it liberally over the entire body. The idea is to provide your skin with 2 milligrams per square centimetre of coverage.

If you're not doing at least this much, though, then you're simply not getting the advertised benefits of the particular sunscreen you're using. Statistical data from the Environmental Working Group suggests that most of us use significantly less sunscreen than we ought to. It's not uncommon to apply as little as a quarter of the recommended

amount and call it a day. In real-world tests, this means SPF 15 users might only really receive the benefits of, say, SPF 2.

*Do I need to worry if I'm "naturally tan"?*

Well, yes. With sufficient exposure, all skin will burn. If your skin trends naturally toward the darker side of the spectrum, you do have a slightly higher "baseline" threshold of protection, but it's never a good idea to assume immunity.

*What about a "base tan"?*

As a defence against sun damage, a base tan isn't *nothing*, but it's not that much either. What we typically understand as a base tan will net you a protection factor equivalent to something like SPF 4. While four times the body's natural protection is nothing to scoff at, imagine you eschewed the time and logistical effort it took to acquire that base tan in the first place and just slapped on some of the weakest sunscreen you can buy. You'd be four times better off.

What's more, a preexisting tan will only protect you against UVB rays – the ones that cause sunburn. What it won't do is guard against UVA rays, which are the ones that lead to leathery, wrinkled skin after years of exposure. Both wavelengths are understood to cause cancer. Apply a broad-spectrum sunscreen, and both your bases are really covered.

*What else can you tell me?*

Well, nothing on this page, but there's plenty of help out there. Trust governmental agencies and established, credible organizations that hire real, accredited healthcare professionals. The Canadian Cancer Society, Health Canada, the American Academy of Dermatology, and the Government of Canada's Department of Travel and Tourism are all useful sources insofar as they're not directly trying to sell you anything and they're staffed by real professionals with real credentials and something to lose if they get it wrong.



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**Life's brighter under the sun**





by Jesse Ziter

# STRETCH OF THE IMAGINATION

**Does Stretching  
Before Exercise  
Really Prevent  
Injuries, or Is It  
All in Our Heads?**

# Did you remember to stretch before you started reading this article?

If you didn't, there's no need to despair. As it turns out, getting a good stretch in before a brisk bout of reading is exactly as important as taking time for a stretching session before a run, soccer game, or hour in the weight room: Not very.

If you're played team sports or worked out in any sort of structured environment, you're probably already well familiar with the ritualistic role of stretching before exercise. By "stretching," we should say, we mean slowly moving muscles until they just start to hurt, then holding the pose briefly. I have to imagine many of you can feel the familiar sensation just by reading this. The rationale behind the practice in almost all cases is to preventatively reduce the risk of injury before your exercise session begins in earnest.

As a lapsed competitive athlete with what we'll call an off-peak silhouette and no postsecondary background in the sciences, I have a few personal theories about the efficacy of stretching before getting physical. I'm not going to share them with you, because that would be a ludicrous thing to do.

Instead, we'll turn to people to whom we ought to listen. Here's the thing: Somewhat surprisingly, there's a swelling body of credible research suggesting that stretching does not do what we've always assumed it does. Experts are increasingly telling us that pre-exercise stressing is probably, at best, unnecessary. At worst, it may actually be counterproductive for serious competitive athletes.

The investigation into the usefulness of stretching has been going on for some time. *Runner's World* took up the topic in 2004 – over a decade ago! While stretching may have some benefits for flexibility, the magazine argued at the time, few athletes outside of competitive gymnastics truly need extreme flexibility to perform.

*Runner's World* identified Dr. Ian Shrier, a past president of the Canadian Society of Sports Medicine, as one of the running community's foremost authorities on the practice. His 1999 paper "Stretching Before Exercise Does Not Reduce the Risk of Local Muscle Injury" certainly does not bury the lede.

According to Shrier, many muscular injuries come from what is called "eccentric muscle activity" (the simultaneous contraction and elongation of a single muscle), which stretching does nothing to prevent. Stretching may also have the effect of masking muscle pain, which we might

interpret as the body attempting to signal that something isn't quite right. Finally, Shier argues that overzealous stretching can even damage the body at the skeletal level.

Much more recently, *Well*, a blog from the *New York Times*, argues that "static stretching" (holding a series of extended positions while sitting, standing, or crouching in place) can actually blunt your effectiveness as an athlete. In real-world terms, that means lower jumps and slower split times.

Intriguingly, stretching before lifting weights might even result in feelings of weakness and unsteadiness. A paper out of Texas published in the *Journal of Strength and Conditioning Research* looked closely at fit male athletes who were asked to perform straightforward barbell squats. The subjects performed an assigned test both after pre-exercise stretching and without any warm-up whatsoever. Perhaps surprisingly, the lifters who had stretched were able to handle over eight percent *less* weight compared to those who hadn't. Just as significantly, the stretched group reported feeling less stable and more unbalanced.

The *Well* post also points to an incredibly comprehensive 2013 University of Zagreb paper, which was published in the *Scandinavian Journal of Medicine and Science in Sports*. The kinesiology professor Goran Markovic led the research as a team of Croatian scientists combed through years of data to isolate 104 past studies in which participants exclusively used static stretching. That means no light running or other active warm-ups. According to their calculations, in the words of *Well* author Gretchen Reynolds, "[t]he numbers, especially for competitive athletes, are sobering ... stretched muscles are, in general, substantially less strong."

How much less? This study concluded that pre-exercise static stretching, performed in isolation, has the effect of reducing muscle strength by more than five percent. It also associated stretching with a two-percent reduction in muscle power, or a muscle's ability to generate force while contracting.

Together, these effects naturally led to a significant reduction in explosive muscular performance.

Why does stretching seem to sap muscular force? Good question. In simple terms, stretching muscles loosens them and their associated tendons. This loosening process, though, reduces their ability to store energy and snap back to an active state in the short term. Reynolds compares the effect to "lax elastic waistbands in old shorts." We like that way of putting it.

A recent *BodyBuilding.com* literature review (that sounds weird to us, too) backs up many of the claims made from the aforementioned sources. It notes that immobilization stretching can cause tissue to rupture more easily. It also argues that pre-exercise stretching has no effect whatsoever for most forms of light to moderate exercise, for which "muscle length" is not a significant contributor to performance. Moreover, stretching seems to mask significant muscle pain.



**“Dynamic stretching, which is still recommended, involves moving the body through exaggerated versions of the sorts of motions you plan on performing”**



While pre-exercise static stretching is often intended to ward off muscle soreness, it does not seem to actually produce this effect. Worse, it can also weaken the connection between tendons and muscles. A 2011 meta-analysis published in the *British Journal of Sports Medicine* by University of Sydney researchers pored over several earlier studies over the past quarter-century on the subject of pre-exercise stretching. The paper concludes that it does little or nothing to ward off muscle soreness in the hours and days afterwards.

In 2009, a relatively small study out of Nebraska Wesleyan University actually associated high flexibility in runners with lower running economy. In plain language, runners with “looser,” more flexible muscles “wasted” oxygen to a greater degree than their less flexible peers, resulting in slower times.

USA Track and Field commissioned a major study of 1,400 runners between the ages of 13 and 60, which it published in 2010. It concludes that pre-exercise static stretching, in isolation, does nothing to prevent or increase one’s chance of picking up a common running-related injury. That’s one more to add to the pile.

With this increasingly overwhelming body of anti-stretching evidence, one wonders why we remain so committed to sitting down for a good stretch. We might argue that, for many of us, pre-exercise stretching is ingrained as a best practice in childhood. For youth team sports, stretching would seem to have several benefits, even knowing what we now know. It imbues practices and pre-game rituals with a certain level of structure, congregates athletes in a way that makes delivering instructions possible, and maybe even help to aid concentration and contribute to team bonding. There’s also the not-valueless fact that stretching often feels good. But these are just ideas.

According to work published in the *Clinical Journal of Sports Medicine*, any evidence that did associate pre-exercise stretching with injury prevention almost always came from trials that also included a warm-up routine before the stretching session. This is important to note.

Our brightest minds now seem to agree that proper preparation for physical exertion still involves warming up. Whole-body pre-exercise movements should get your blood flowing so as to (literally) raise the temperature of your muscle tissue. “Dynamic stretching,” which is still recommended, involves moving the body through exaggerated versions of the sorts of motions you plan on performing during the more strenuous physical activity to follow. Picture a soccer team jogging across the pitch, occasionally altering their stride to elevate their knees, perform extended air-kicks, or swivel their hips, and you’re on the right track. What our imaginary test subjects are not doing is sitting, isolating individual muscles, and holding static positions for 30 seconds at a time.

So where are we? Stretching probably doesn’t help to prevent or ameliorate muscle soreness. It doesn’t prevent injuries. It doesn’t provide pain relief in the long term. In the short term, there’s a good chance it actually weakens performance. It’s still important to warm up appropriately before vigorous exercise, but proper preparation probably doesn’t include sitting down to stretch out individual muscles.


Who knew?

As always, this magazine’s health, wellness, and fitness advice is provided in good faith but is ultimately offered for general information and entertainment purposes only. If you have serious concerns about your health, we encourage you to seek the counsel of a credible medical and/or fitness professional in a recognized field.



# Buying or Selling a High-End Home? Qualified Professional Service Shouldn't Be a Luxury

With Tina Roy, Broker, Re/Max Preferred Realty Ltd.



tina

If you're about to make a significant investment in a high-end home – and the luxurious lifestyle that comes with it – it's important that you don't trust your family's future to just any agent. If you're interested in selling your existing home for a seven-figure sum, securing the right representation is arguably even more important.

Like most professionals, individual real estate agents have unique, special competencies. In some situations, it's possible to represent cookie-cutter homes with similarly prefabricated marketing strategies. But your property is no cookie-cutter home. Marketing a luxury home or property, if you're to do it right, demands levels of experience and expertise that far exceed the baseline. The plain truth is: selling a luxury home is a unique proposition.

Windsor's Tina Roy, a real estate Broker with Re/Max Preferred Realty Ltd., recently completed a special certificate program in luxury home marketing, which makes her a Certified Luxury Home Marketing Specialist® (CLHMS). In order to achieve the prized designation, Tina was required to successfully prove that her past performance placed her in the top 10 percent of the Windsor-Essex market. She comfortably cleared that bar.

A certified leader in her area of real estate, Tina boasts a similar skillset to a professional business consultant. She has been lauded within her industry for her negotiating, marketing, and sales abilities. Like other CLHMS agents, Tina possess purpose-suited skills, documented top-of-market performance, concierge-level personal service, an informed appreciation of the nature of an affluent lifestyle, and access to a network of other top luxury real estate professionals.

The CLHMS program covers important topics like demographics, lifestyle segmentation, trends, and amenities as they relate to modern luxury residences and the people who own them. Specifically, the course is designed to help ambitious real estate professionals create effective marketing plans for multimillion-dollar properties. An internationally recognized designation, it was developed by Laurie Moore-Moore, Founder of the Dallas-based Institute for Luxury Home Marketing and a successful author on the subject of luxury real estate.

The CLHMS designation exists in the first place because buying and selling luxury residences for an appropriate price comes with a high degree of difficulty. They typically require a customized lifestyle-marketing plan, a full suite of creative promotional tools, and an extensive array of resources for finding prospective buyers. Certified specialists like Tina enjoy access to proprietary high-quality property brochures and purpose-designed printed pieces that target affluent buyers. They also offer their clients enhanced online marketing exposure, including an international listing service, and unique advertising opportunities in luxury home magazines and websites. CLHMS agents also have privileged access to WealthEngine screening and marketing tools. They can reliably determine the financial credibility of prospective buyers in seconds by accessing data from the country's largest aggregator of information about the wealthy.

Ultimately, the CLHMS designation assures affluent buyers and sellers that an agent has the knowledge, experience, competence, and confidence they require. It's awarded only to savvy sales professionals who've met specific performance standards in the upper-tier residential market. If that's the market in which you live and conduct business, why take the chance with anyone else?

## ABOUT THE MARKET:

Last year, luxury home sales were strong in Windsor and Essex County. Between January and October 2015, 25 total properties sold for over \$1 million. Beyond this quarter-century of high-end homes, the Windsor-Essex real estate market demonstrated five percent overall growth in 2015. This figure represents the average residential sale price.

Buoyed by historically low interest rates and emboldened by confidence-encouraging market conditions, "move-up" buyers are increasingly trending towards larger, newer homes. Some young professional couples were even able to enter the market as first-time buyers by acquiring homes above the \$500,000 price point.

According to the 2016 Re/Max Housing Market Outlook, Realtors expect significant long-term infrastructure projects like the Gordie Howe International Bridge to instill further confidence in our local market. Going forward, we should see further influxes of retirees populating the area, due in large part to Essex County's affordable cost of living and proximity to the United States border.

In 2016, buyers are flocking to Windsor-Essex from virtually every corner of the globe. CLHMS-certified agents have access to an international network of experts in luxury real estate – and, more importantly, their clients. Because the pool of potential buyers for seven-figure homes is, understandably, relatively shallow, this ability to make connections in international markets is invaluable.

## ABOUT TINA ROY:

Tina has been working in Windsor and Essex County's real estate market for over a decade. Since 2005, she has gained recognition and won multiple industry awards as she's watched Windsor-Essex develop into a desirable region that's now garnering attention from homebuyers and investors throughout Canada and beyond. Today, in addition to her professional real estate practice, Tina sits as a Director of the Windsor-Essex County Association of Realtors. Her everyday aim is to elevate the standard for real estate professionals by emphasizing integrity, long-term relationships, and what she calls "a desirably different real estate experience."

If you are considering a move in 2016 or '17, now is the ideal time to starting planning if you want to gain an upper hand. For up-to-date information on the luxury market, contact Tina Roy today at Re/Max Preferred Realty Ltd., or email her directly at [info@tinaroy.com](mailto:info@tinaroy.com).



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The Venus Legacy was targeting the cellulite and loss of elasticity and collagen in my skin. I couldn't have asked for a better solution! I have much less cellulite and the skin is so much firmer. In fact, I've had friends and family tell me that I look much younger, more refreshed and have smoother skin!

Would I do it all over again? Oh yes! Between the Zerona and the Venus Legacy I got rid of those stubborn extra inches that were hard to target, the skin is rejuvenated, and it brought back the elasticity and collagen!

Finally, a bonus to the treatments was the excellent staff that work at Tecumseh Laser Centre. Not only do they show professionalism and excellent knowledge in what they do, they each have their own unique great personality. Thank you Joanne, Samantha and Amy... you gals are awesome!! - Vilma



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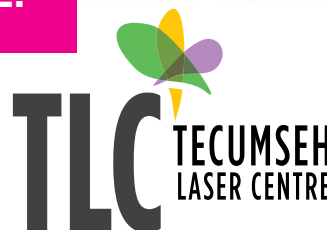
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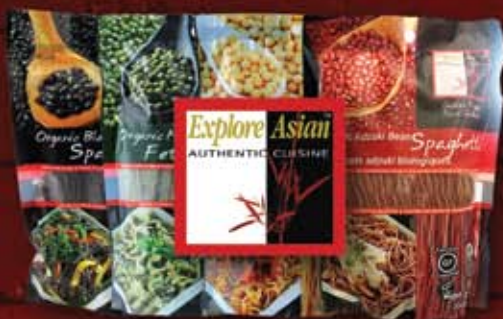


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by Frank Murgic,  
President & Pharmacist,  
I.D.A. Pharmacy

# ASK THE Pharmacist



## WHAT'S NEW WITH BLOOD PRESSURE: MANAGING HYPERTENSION IN 2016

"What's New" is the title page of Hypertension Canada's 2016 CHEP guidelines booklet for the management of Hypertension. CHEP stands for Canadian Hypertension Education Program. The dedicated men and women who compose this important document are unpaid volunteers comprising clinical and scientific healthcare professionals. They selflessly contribute their time and expertise to the annual development and dissemination of the CHEP guidelines, which helps keep healthcare professionals informed of best practices in hypertension management.

### WHAT IS HYPERTENSION?

Usually, when your blood pressure (BP) is above the healthy range, you have "high BP" or hypertension. Most people can't tell whether their BP is high; they call it the silent killer.

### WHAT SHOULD MY BP BE?

A healthy BP, measured at your doctor's office, should be less than 140/90 mmHg. At home, it should be less than 135/85 mmHg. For people over 80 years of age, it should be less than 150/90 mmHg. Finally, for diabetics, it should be less than 130/80 mmHg. Ideally, your normal BP should be 120/80 mmHg.

### WHAT DOES THAT MEAN?

The figure 120 is a representation of your *systolic pressure*, the pressure in your blood vessels when your heart beats. Next, 80 describes your *diastolic pressure*, the pressure in your blood vessels when your heart is at rest between beats.

### WHY DOES BP INCREASE?

BP increases with age because blood vessels narrow as we get older. As a result, your heart works harder to pump blood through your blood vessels, which causes the pressure in your blood vessels to increase.

### HOW DOES HIGH BP HARM THE BODY?

It can lead to numerous debilitating diseases such as memory loss, stroke, impaired vision or blindness, angina, heart pain or heart attack, and kidney damage as well as decreased sexual ability.

### WHAT CAUSES HIGH BLOOD PRESSURE?

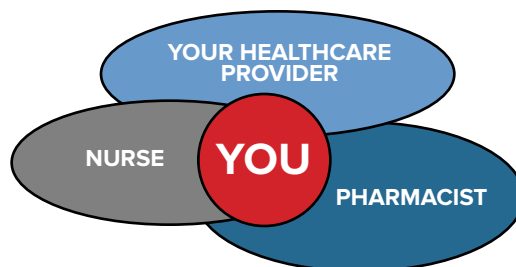
#### FACTORS YOU CAN CONTROL

- DIET
- SMOKING
- EXCESSIVE ALCOHOL CONSUMPTION
- LACK OF EXERCISE
- OBESITY
- STRESS
- SLEEP APNEA
- DIABETES
- KIDNEY DISEASE

#### FACTORS YOU CANNOT CONTROL

- AGE
- SEX
- FAMILY HISTORY

### WHO CAN CHECK YOUR BLOOD PRESSURE?



### HOW CAN I PURCHASE A BP MONITOR FOR HOME USE?

Talk to your pharmacist about which home BP monitor is best for you. Make sure your arm is measured for the right cuff size.

### HOW CAN I MEASURE MY BP AT HOME?

Go to YouTube and watch the video "Hypertension - Home BP Management" on the Hypertension Canada Channel.



## WHY TREAT HIGH BP?

Treatment, in the form of medication and healthy lifestyle choices, can significantly help persons with hypertension. A decrease of 10/5 mmHg (achievable by taking one medication or introducing one change in lifestyle) reduces your risk of developing heart failure by 50 percent, stroke by 38 percent, heart attack by 15 percent and death by 10 percent.

## HOW CAN I TREAT HIGH BP WITH MEDICATION?

It's important to remember that medications only work if you take them. Most people need two or more medications to control their BP and, for the most part, need to stay on them for life. Lifestyle changes are also needed. Most medications take up to six weeks to show their full effect; be patient. What's more, because medications have controlled the BP does not mean that one's hypertension has been completely cured. Stopping a treatment when BP returns to normal can cause your BP to rise again to dangerous levels. Fortunately, many drugs that lower BP also prevent heart attacks and strokes.

## HOW CAN I DO A BETTER JOB OF TAKING MY MEDICATION PROPERLY?

Work with your healthcare provider and pharmacist to help improve medication adherence. They can help assist you at every visit using a multi-pronged approach that includes tailoring and simplifying pill taking to fit your daily habits. They can utilize single pill combinations as well as recommend unit of use packaging (myOnePac).

They can also help assist you in getting more involved in the treatment by encouraging you to have more responsibility and autonomy in monitoring your own BP and reporting the results so your healthcare provider can adjust your prescriptions as needed. They can also help educate you and your family about hypertension and its treatment.

## WHAT ARE SOME FURTHER DOS AND DON'TS OF BP MONITORING?

### DO:

- Carefully read instructions for your BP monitor
- Go to the bathroom before taking your pressure
- Sit comfortably: feet flat on floor, back supported, arm at heart level
- A bare arm is the preferred method (or a thin layer of clothing on your upperarm)
- Put cuff on and wait for five minutes. Take two readings – wait one to two minutes between readings
- Record date and time with measurement
- Show your readings to your healthcare provider

### DON'T:

- Cross your legs
- Take your pressure if you're in a hurry
- Smoke 30 minutes before measuring
- Drink caffeine 30 minutes before measuring
- Eat a big meal for two hours before measuring
- Wear tight clothing
- Talk or watch TV during a measurement
- Measure your pressure if you are cold, nervous, uncomfortable, or in pain.

To lower your blood pressure, integrate the acronym **PRESSURE** into your day-to-day life:

**Get regular Physical activity:** Aim to get 30 to 60 minutes of exercise per day.

**Reduce your weight and Eat a healthy diet:** Integrate into your diet fresh fruits and vegetables, low-fat dairy, whole grains, and lean meats like fish and poultry.

**Stop smoking:** Avoiding smoking will lower your risk of organ damage. Ask your pharmacist or primary healthcare provider about proven methods that can help you quit forever.

### Eat less Sodium:

Fully 13 percent of cardiovascular events in Canada are attributed to excess dietary sodium. Processed and fast foods contain high amounts of salt. Choose foods with five percent or less of the daily value of sodium.

### You can control blood pressure:

Aiming to live a less stressful life can significantly affect your fight against hypertension. Individualized cognitive behaviour interventions are more likely to be effective when relaxation techniques are employed.

**Take your medications:** If you are on medications, take them as directed by your healthcare provider.

**Avoid Excess alcohol:** Limit alcohol consumption to less than two drinks per day for men and one drink per day for women

For additional information and resources, visit [www.sunshinedrugs.com](http://www.sunshinedrugs.com).



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# RUNNING BETTER WITH COMPRESSION SOCKS: SCIENCE OR PERCEPTION?



by Robert Pula  
Owner of Kinetic Konnection  
Bachelor of Human Kinetics,  
Honours Applied Kinesiology

Compression socks are medical garments designed to help treat and prevent vein disorders. Their applications range from tired, heavy, and achy legs to varicosities, deep vein thrombosis, and other chronic venous insufficiencies. If you suffer from a vein disorder, compression socks can truly help lighten the load.

In the past, compression socks were seen as ugly, uncomfortable, and hard to put on. Now, with today's technology and a new group of fashion-minded manufactures, there is a sock out there for everyone. Significant advances like better materials, colours, styles, and sizes have made compression socks as fashionable as they are good for your health.

What's more, serious athletes and active-minded people who don't suffer from recognized vein disorders have also caught on to wearing compression socks. In the minds of many, compression socks deliver real results for runners, cyclists, triathletes, CrossFit enthusiasts, and even walkers. Every time we look, we notice more and more people wearing them.

According to advocates, compression socks can help:

1. Improve circulation
2. Reduce lactic acid build-up
3. Aid recovery
4. Reduce muscle damage and fatigue, allowing one to train better

## **"While compression socks can provide benefits during running and between runs, they are a necessity for an eight-hour workday."**

But do they really work? Can we use real science to determine that compression socks offer performance benefits, or does their worth come from the athlete's perception of the compression?

As far as our best science can tell, many of the claims associated with compression socks are somewhat up in the air. Of course, that doesn't mean they won't work for you.

Confused? I was. Let's break this down:

### **Benefits while running:**

As we run, our bodies force blood from our legs up to the heart. The calf, acting as a natural pump, creates a strong circulating force. Wearing compression socks while running can be beneficial for this process.

The soreness runners often experience can be attributed to tiny muscular tears. Compression socks can reduce muscle damage by physically holding the calf muscle in place, thereby preventing it from shaking back and forth with every stride.

### **Benefits while resting and recovering:**

Compression socks are arguably the most beneficial to runners when they are stuck in a chair. In this resting position, the legs do not have a natural pump to help circulate blood. As a result, blood tends to pool in the legs. Wearing compression socks can apply a gentle pressure to the blood vessels in the calf, meaning blood cannot pool in the lower legs.

For recovery, daily use of compression socks has been proven to help runners recover faster. For competitive athletes, quicker recovery means more training – and possibly more personal bests!

Ultimately, so as long as your compression socks are not too tight and neither irritate your skin nor cause blisters, they do no harm. With this in mind, does it really matter whether their benefits are in your head or not?

**For athletes (or anyone) to reap the full benefits of compression socks, the socks themselves must:**

1. Be graduated (tightest at the ankle and tapering inversely up the leg).
2. Fit properly according to accurate individual measurements.
3. Have at least 20 to 30 mmHg of pressure.
4. Be properly fitted, worn, and cared for.

Kinetic Konnection offers an amazing selection of compression socks. Regardless of your occupation or sport, we have socks that will suit you. Our three accommodating locations are staffed by friendly Human Kinetics graduates who promise to assist you with all your compression sock needs. No appointments are necessary. Best of all, if you have health insurance, we will assist with any reimbursement policy.

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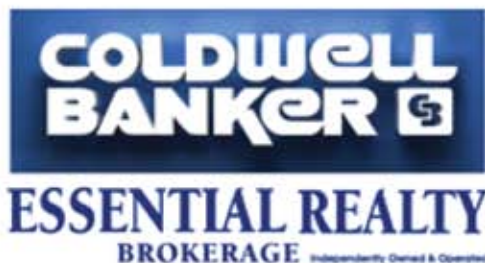


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# MAKING YOUR FITNESS PLAN WORK FOR YOU

FITNESS



by Windsor Body Staff

*It may seem easy to begin a new workout plan. Most of those who have tried to significantly increase their fitness levels will tell you that this is very much not the case. That's okay.*

In order to eventually get where you want to go, it is important to create a purpose-designed plan based on real, meaningful, and achievable targets that will keep you motivated to keep going.

The first thing you need to do is to make a list of some fitness goals. For most people, this is the easiest part of the overall process. Virtually everybody has an idea of physical things they would love to be able to do, ways they want to change their body, or an ideal weight. Think about it for a bit, ask yourself the right questions, and then write down all your answers.

Next, you are going to set that list aside. Those are the long-term goals for which you will continue to aim. In the meantime, you need to determine what you are willing and prepared to change right now.

Start a new list, keeping in mind that you're about to take a first step. This one should help to build a bridge towards your larger, eventual goals. Your initial foray into the fitness world should be a measured, reasonable, and responsible one. Take into consideration your current level of fitness.

For example, if you currently don't exercise at all, you might try to go for a walk around the block three days a week. If you already live a more active lifestyle, perhaps you might decide that you are ready to commit to going to the gym twice a week. Whatever the case may be, it is important that the goal you set doesn't seem like a huge leap for you.

If you start out with too much too soon, not only are you more likely to quit altogether out of frustration, but you could also injure yourself.

Always pause before jumping into vigorous activities you haven't attempted for a long time – if ever.

As time goes on, it's perfectly normal to set your goals progressively higher and higher. Each time you adjust them, you will be one step closer to the finally flirting with the long-term goals that you recorded at the beginning of your journey.

Periodically, look over those long-term goals so that you can remember why you are doing what you are doing. What is the eventual endpoint of this new routine? What you are aiming for? Progress will seem slow at times, and you will almost certainly become frustrated that your body isn't changing overnight. Keep going.

In general, it is a good idea to record each new set of goals alongside the measurable progress you've already made. By keeping what you might call a fitness journal, you can look back when you are feeling down and see how far you have already come. In addition, recording your goals will help keep you accountable. It is hard to establish a new lifestyle, and changing from a mainly sedentary lifestyle to a more active one is no exception.

Sometimes, being fit can seem like an impossible task, fraught with difficulty, inconvenience, and far too much personal sacrifice. This reaction is understandable, but it doesn't need to reflect the truth for your unique circumstances. You can always achieve an incrementally higher level of fitness if you put your mind to it. If you start slow and pick off small, achievable goals, you will see real change over time.

Even if the transformation seems slow at first, you deserve some measure of congratulations. Give yourself the credit you deserve for taking the first steps in the right direction. You can make the change.





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# THE RIGHT FIT: LASALLE FITNESS GETS A FULL-BODY MAKEOVER

LaSalle Fitness is more than just LaSalle's premier fitness facility.

As no-frills big-box gyms continue to unpack themselves across Essex County, LaSalle Fitness keeps carving out a niche for itself as an independent neighbourhood fitness facility with a personality all its own. A fixture in the community for well over a decade, the family-friendly gym is looking better than ever in 2016. If you live in South or West Windsor, there's a good chance you're only five to ten minutes away.

Located in the heart of LaSalle's Malden Square Plaza, LaSalle Fitness is open 24 hours a day Monday through Friday and starting at 7am on weekends. A proudly inclusive facility, the clean, safe, and friendly gym features convenient elevator access and accessible washroom facilities.

Starting with a fresh coat of paint throughout, the new LaSalle Fitness team put in the work necessary to get the familiar facility in the best shape of its life. Most impressively, the gym's fully renovated men's and women's locker rooms now feature brand new flooring throughout and luxurious quartz countertops that pair perfectly with attractive mosaic-tile backsplashes. Both rooms also include updated private showers and ensuite saunas.

The gym also recently debuted an overhauled free-weight area. It features newly installed soundproof, shock-absorbent flooring made in Canada from recycled materials. Elsewhere, equipment across the gym floor was updated where necessary.

Soon, LaSalle Fitness' lower level women-only workout room will receive an even greater helping of TLC. Its "extreme renovation" begins this spring. The judgment-free space already features a separate entrance and is well stocked with Nautilus Equipment weight machines specially designed and calibrated for female bodies. It also includes a women-only cardio theatre and free weight area.

Some things never change: LaSalle Fitness' experienced, professional team still includes two staff personal trainers dedicated to improving people's lives through health and fitness. Tommy and Colleen welcome both nervous newcomers and full-time fitness buffs. In either case, your trainer will help you decide an appropriate personal fitness goal, then help you do what you need to do to achieve it.

LaSalle Fitness' well-stocked gym floor gives you plenty of options for getting where you're going. The main co-ed workout area features everything you need for a full-body workout, from free weights to

TRX suspension training equipment to a dedicated ab area. Impressively, LaSalle Fitness is well stocked with specialized Italian-designed rehabilitation equipment from TECA Fitness, high-impact performance training equipment from Hammer Strength, and two fully featured Universal machines. Nearby, the gym's cardio annex features plenty of treadmills, EFX machines, StairMasters, exercise bikes, and low-impact Jacobs Ladder machines.

LaSalle Fitness also features a dedicated aerobics room, which has recently been overhauled with fresh aesthetics and all-new parquet flooring. This beginners-welcome space hosts a regular series of communal workshops and classes for members of all ages, including Zumba, yoga, Pilates, group body sculpt sessions, kettle bell circuit training, and boot camps. Zumba is even open to non-members!

Downstairs, you'll find a hot tub and heated saltwater pool, plus a purpose-designed spin studio that houses dozens of bikes. Group spin classes led by certified cycling instructors are included in regular membership fees.

To fuel your workout, LaSalle Fitness' body-friendly nutrition and hydration station offers a full menu of protein shakes, sports drinks, and locally made low-glycemic energy bars by Daryl's Hi-N-R-G Bars. For nutritional aid you take with you, customized meal planning services and nutritional guidance and counselling are available.

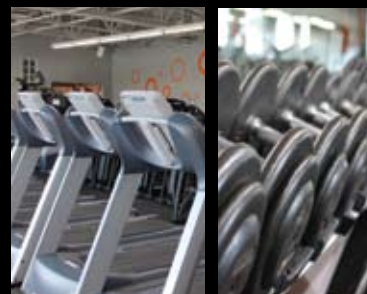
Children six months of age and older are also permitted to participate in the LaSalle Fitness experience. An affordable members-only daycare service provides quality, supervised childcare for up to two hours at a time. The colourful, open-concept, and highly accessible space offers children fun and creative activities in a safe, controlled setting, letting your focus on your workout.

If you need to take care of yourself, Rainbow Massage Therapy and Acupuncture, located within LaSalle Fitness, performs a number of body healing and rejuvenating procedures for gym members.

If you're thinking about becoming a member, know that guests are always welcome. LaSalle Fitness will even offer you a guided facility tour and a complimentary workout. Be sure to check online or call the gym today to learn about ongoing promotions. Special corporate rates and discounts for students and seniors are always available. If you're an existing member, ask about the ongoing referral program.

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# **LASALLE** **FITNESS**







By: Dr. Christopher Cole, MD, MPH,  
Medical Director of The Cole Clinic  
of London and Windsor



# COLE'S corner

## Introducing the ARTAS Robotic Hair Transplant

*Throughout my 20 years performing hair transplant surgeries, I've noticed that many of my patients have a few things in common. While some men start to lose their hair at an advanced age and others experience premature hair loss, thinning and receding heads of hair almost always come with an associated loss in confidence. Across the board, the most common element I find associated with hair loss in patients is low self-esteem. I've seen firsthand how it can impact work, social life, and family relationships. Thankfully, the follicularly challenged aren't without help. From the latest in growth technology to supplements to camouflaging products, I've learned how best to handle all manner of hair scarcity.*

To perform the newest method for restoring hair and restoring confidence, I need a little help from a special assistant. It happens to be a robot.

The ARTAS Robotic Hair Transplant system is a state-of-the-art image-guided robotic method used to perform follicular unit extraction (FUE) hair transplant surgery. A doctor-assisted system, it involves precisely dissecting thousands of follicular units in a single session and redistributing them to balding and thinning areas of the scalp. The process produces healthy, robust results, all the while maintaining the natural look of the donor area. If you do what I do for a living, or if you're losing your hair, it's a big deal.

### A Brief History of Hair Restoration

I'm sure many of our fathers and grandfathers would have loved to have the ARTAS option. Allow me for a moment to turn back the clock.

Once upon a time, the only way to deal with hair loss was to struggle with wigs and hairpieces. The first procedures resembling modern-day hair transplants began in the 1960s. They involved obvious, plug-looking "punch grafts" and painful scalp reductions, through which large areas of bald scalp skin were removed so that the hair-bearing portion of the scalp could be advanced to cover it. The primitive hair plugs used during the first few decades of hair restoration procedures were as unconvincing as they were painful to receive. While some patients experience positive results, the implants were noticeably discrete units, and many likened the appearance of the finished product to rows of corn on the scalp.

In the 1990s and 2000s, significant advances in hair transplant technology allowed patients to achieve functional and "natural-looking" hair, hairlines, and overall fullness. These gains came with the introduction of smaller mini- and micro-grafts, the strip method of hair transplantation, and the development of the follicular unit extraction (FUE) hair restoration procedure, all of which are used to great effect today.

At this time, surgeons began to transplant their patients' own permanent, growing hair. Normally, it was harvested from the back of their heads; doctors would cut a large band of tissue from the rear of the head and relocate its hair follicles to areas of the scalp in need of coverage in what became known as the strip transplant procedure.

In the early 2000s, this methodology advanced and grafts became even smaller. They were dubbed "follicular units," and they could be more densely packed into balding areas. This resulted in an even more natural-appearing hair restoration procedure. Today, physicians who perform strip method transplants are even able to implant delicate follicular units in balding frontal areas to create a convincing natural hairline.

Currently, both the strip transplant and the FUE procedure are viable, widely used hair restoration options. Unlike most practitioners of hair transplants, Dr. Cole is a licensed surgeon who regularly performs both. Today, the two options are roughly equal in popularity. In terms of results, the major difference between them is the resultant linear scar that comes with the strip transplant. Depending on a patient's age, normal hairstyle, and personal preference, this may or may not be a significant factor in the decision-making process. The ARTAS procedure is an example of an FUE hair restoration method.

**The ARTAS Innovation: Hair Restoration Goes Robotic:** Today, we have ARTAS, a breakthrough, minimally invasive method that uses digital imaging and precision robotics to select permanent hairs from the back of a patient's head, which don't have the genetic instruction to fall out with age, and implant them in thinning areas of the scalp.

At a rate of 900 to 1,000 hair grafts per hour, the ARTAS robot is a superior hair restoration option for most patients that provides safe and consistent results. To get to this point, both robotic engineers and practising hair transplant surgeons featured prominently in the research and development phase.



Because the robotic ARTAS device minimizes the strain on a doctor's hands, arms, shoulders, and neck, the procedure allows for more grafts in a single session than was ever possible in the past. Now, the same amount of grafts (or more!) can be performed in one eight-to-10-hour session as would have previously required multiple sessions over a two- or three-day period.

**Here's how it all works:** The ARTAS system begins the follicular unit extraction by digitally mapping your scalp. Using sophisticated imaging technology, it identifies thousands of individual follicular units. Next, a robotic arm quickly and carefully gets to work "harvesting" them and then implanting them into recipient sites in targeted balding or thinning areas of the scalp. Perhaps most intriguingly, the ARTAS system uses an intelligent computer algorithm to select the best hairs for harvesting. The end result is real, natural-looking hair growth.

## THE DETAILS

**Cost:** The ARTAS Hair Transplant costs starting around \$7,000 depending on the patient.

**Side effects and downtime:** Based on the extent of a patient's hair loss, two to three sessions may be necessary to achieve desired fullness.

**Results:** Patients will see new hairs growing within approximately three months, and growth will continue over the duration of a year.

**Ideal candidates:** The majority of men experiencing male pattern baldness can benefit from this procedure, but patients need to have a sufficient amount of "staying" hair for surgeons to use as contributor grafts in areas requiring coverage. A patient's age and severity of baldness are also considerations.

More information: Call the Cole Clinic at 877.gro.hair or visit [www.coleclinic.com](http://www.coleclinic.com).

Importantly, the ARTAS Hair Transplant is a virtually painless outpatient procedure that requires only local anesthetic. You may experience some minor discomfort and swelling post-procedure, but it should subside in one to three days. Since there are no scalp incisions or stitches required with this procedure, healing time is short; you can resume normal activities after a day or two in most cases.

Even better, the ARTAS Robotic Hair Transplant procedure is virtually undetectable. After a week, it will leave behind no linear scar. Instead, most patients experience multiple small, easily hidden scars rather than one fine linear scar across the back of the head. This benefit is particularly important for men wanting to wear their hair very short at the back and sides.

Within six to nine months after an ARTAS Hair Transplant, you'll really begin to see a dramatic, noticeable improvement. Because your new hair is your own, you can feel confident growing it out and wearing it in any style.



### About Dr. Christopher Cole:

*Dr. Cole is a practising medical doctor certified by the Ontario College of Surgeons & Physicians who has been working in hair restoration and cosmetic medicine for over 20 years. Founder of the Cole Clinic for Hair Restoration and Cole Clinic Medi Spa which operates locations in both Windsor and London. While hair transplants have always been Dr. Cole's claim to fame, he also performs and oversees a full suite of world-class aesthetic and cosmetic procedures, including skin rejuvenation, Botox and other injectable fillers plus Advanced Laser Therapies including laser hair removal.*

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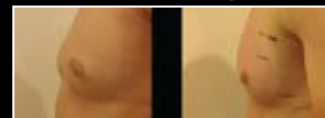
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# A BUILDING FOR RECOVERY:

## HOUSE OF SOPHROSYPNE RETOOLS TO HEAL MORE WINDSOR WOMEN

by Jesse Ziter

*Essex County women who suffer from addiction will soon have a new “home away from home.” All they need is a few helping hands from the community.*

Windsor's House of Sophrosyne is a unique shelter for women with substance abuse and misuse problems. Since 1978, the inpatient addiction recovery organization has provided priceless care for women from our region and across the province in an effort to arrest the cycle of addiction. Specifically, the House of Sophrosyne delivers a 35-day, gender-specific program built around an empowering harm-reduction philosophy.

Although the House of Sophrosyne is a provincial leader in addiction recovery, its current building is bursting at the seams in a very real sense. Staff, administrators, and clients have grown frustrated with the facility's lack of space and obvious material failings.

Thankfully, after 37 years at its current West Windsor location, the facility is in the process of relocating across the city to the expansive space vacated by St. Alexander Elementary School. Located at 5305 Adstoll Avenue, it's tucked behind the intersection of Tecumseh Road East and Buckingham Drive in East Windsor. The expansion is the culmination of several years of strategic planning, fundraising, and optimistic community building.

With sufficient support from the wider community, the new House of Sophrosyne will constitute a leading-edge facility that will raise the bar for women who desperately require immediate help.

There are many of them. The Health Officers Council of British Columbia links substance abuse to 47,000 deaths in Canada each year, and Essex County certainly accounts for its fair share. In recent years, due in large part to our region's precarious economic climate, the local healthcare sector has witnessed an unusually high demand for addiction and mental health services. For obvious reasons, it's important to respond quickly in cases of addiction.

The House of Sophrosyne's state-of-the-art new home will deliver a broader spectrum of services, including programs for family members and children, across expanded, flexible hours. The new shelter will nearly double its present footprint, adding 13 beds for a total of 30. Importantly, the new facility will house women two per room, which is established best practice. The current facility's rooms are twice as crowded. Critically, the organization will also add day, evening, and weekend counselling support for those who do not require residential services.

By increasing capacity, the expansion will occasion significantly shorter wait times for women seeking treatment. Presently, women interested in entering the program can face delays of up to four months.

As an ancillary benefit, the move will also rehabilitate a shuttered community school into a modern, eminently useful healthcare facility. It should also create up to 10 new jobs. What's more, in addition to providing a safe therapeutic environment for women with addictions, the House of Sophrosyne also ameliorates unnecessary strains on local emergency rooms.

*Windsor Body* was present as the House of Sophrosyne held a kickoff event at its future location on Monday, May 16. We spoke to Lisa Tayfour, Chair of the organization's Women's Committee, who has spearheaded the House of Sophrosyne's "Building for Recovery" fundraising campaign.

What does addiction look like? In Tayfour's words, probably not what you think. While we typically picture addicts as homeless, irresponsible adolescents or irreversibly scarred people from broken homes,



the reality is that many women with addictions are able to maintain superficially functional, normal lives. The House of Sophrosyne waitlist presently includes vulnerable women from all segments of society.

"It's Windsor's best-kept secret," says Tayfour solemnly. "Lots of people don't like to talk about addiction, but it affects a lot of women. We've all seen over the past couple years how awareness of mental illness has come a little bit more to the forefront, and we hope that we can grow our collective understanding of addiction in a similar way."

One of only four facilities of its kind in the province, the House of Sophrosyne aims to become the first shelter in all of Ontario with a residence for mothers with existing children. For many women with addiction, existing young children constitute a significant barrier to effective treatment. Tayfour expects this sort of unprecedented access to children during treatment to be a significant motivator. "Just because somebody's an addict doesn't stop them from loving their children," she stresses. "Presently, many of our women just can't stand the pain of being away from their kids; they often run. If we can't get them healthy, it affects us as a society."

The "Building for Recovery" capital campaign aims to generate the funds necessary to position the House of Sophrosyne as a sustainable force for good in our community. Although the campaign has currently raised the better part of \$600,000, it has a long way to go. The House of Sophrosyne is targeting an eventual goal of \$3.5 million, which will fund the acquisition and renovation of the organization's new home. Significantly, each Director of the philanthropic organization has made a direct donation to the capital campaign, thereby investing him or herself in the project on a personal financial level.

"We are tremendously grateful to have the support of so many significant donors," says Tayfour, who names the Solcz family and Riverview Steel Co. Ltd. as major community benefactors to this point. "We have pillars of the community that are supporting this cause, and we hope that will set the precedent for others to follow. We need more likeminded community leaders to contribute."

To this end, Tayfour and her team have been readying information packages and arranging tours of the emergent new facility for prospective community partners. As a gesture of recognition for her tireless work, the House of Sophrosyne Board of Directors has presented Tayfour with the opportunity to name the facility. The details are still being worked out.

"We want people to understand that my commitment to the campaign is personal," says Tayfour. "I have witnessed firsthand how addiction can tear a family apart, but I have also witnessed how recovery can bring one back together. As the chair of the campaign, I think it's important to represent that there is somebody in the community who has taken this project on and is taking it seriously. Empowering women with hope, help, and healing is essential so they can move forward to raise the next generation. That benefits us all."

"The expansion will help us to change even more lives – the lives of our women and their families and children," said Karen Waddell, Executive Director, at the kickoff event. "We will improve access to services for those women who are desperate for help now, when they need it most . . . Lack of space has been frustrating for clients and staff.

"We have to do better, and we will."

*House of Sophrosyne is supported by the Erie-St. Clair Local Health Integration Network (LHIN), which funds a large portion of its ongoing operating costs. It also receives some funding from the Province of Ontario.*

For more information, or to make a direct donation, visit [www.sophrosyne.ca](http://www.sophrosyne.ca) or call (519) 252-2711. You can also find House of Sophrosyne on Facebook.



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