



The Concierge Medical Practices of

*Lenholt & Schlossberg*

A New Direction in Health Care

# News

VOLUME 2 • ISSUE NO. 4

A NEW DIRECTION IN HEALTH CARE

Dear \_\_\_\_\_,



Once again, we have cycled around to the busy season. To those of you returning to Naples, welcome back! We have luckily dodged the hurricanes so far this year, despite multiple close calls. It should begin to dry out and cool off over the next few months.

We are approaching the completion of the second year in our new practice. We have been fortunate in the success we have had. In gratitude to you, our members, we will be hosting “An Evening of Appreciation” at our office on Nov. 12 from 6-9 p.m. We will celebrate with exquisite hors d’oeuvres, boutique wines, and lovely Naples fall weather. Please feel free to bring a friend or family member. We look forward to seeing you there!

Remember that we have flu shots available at no cost to members. We recommend flu shots for all people over 50 and anyone else who wishes to avoid influenza. Please call to schedule an appointment.

Thank you for returning your membership surveys. We again have had an overwhelmingly positive response. Your comments help us know what we are doing well and how we might improve. Our goal is to provide the best health care with exceptional service. As always, please call if we can do anything to help.

*Jana Lenholt MD*      *Leon Schlossberg MD*

## YOUR MEMBERSHIP BENEFITS

- All the time you need with your physician
- Comprehensive annual review of your medical status
- Individualized wellness and preventative medical advice
- 24/7 access to your physician
- Facilitation and coordination of specialty care locally, regionally and nationally
- Hospital care provided by your personal physician
- Assistance in planning for medical needs while traveling
- Appointments for out-of-town guests in need of unexpected care

# Vitamin D: What's the buzz?

It seems like every time you pick up a newspaper or magazine these days there is an article about vitamin D. "Live longer." "Live better." It sounds like a wonder drug! In this article I will attempt to discriminate fact from fiction, and hype from hope.

As with all vitamins, vitamin D is necessary for good health. The most obvious manifestation of severe deficiency of vitamin D is rickets. Rickets is a childhood disease where the bones are softened due to inadequate mineralization, causing deformity and a propensity to fracture. It is rare in developed nations where foods are frequently fortified with vitamin D.

Though we rarely see signs of severe deficiency in this country, insufficiency of vitamin D has come to be associated with many diseases including osteoporosis, heart disease, cancer and hypertension.

Vitamin D comes into the body in two ways. In the skin, it is manufactured from precursors by the action of ultraviolet B radiation. It is also absorbed through the gut. Although it has long been known that in the kidney vitamin D is converted to its active form, which then circulates in the blood, new evidence is revealing that other cells in the body also may be able to affect this conversion for local use.

Because of the effects of UVB radiation on vitamin D levels, people in tropical and subtropical regions have been considered to be at little risk of developing deficiency. In recent years, however, studies that have measured blood levels of people in these areas reveal that fully one quarter to one third are deficient. Given this level of problem, can we make a difference by having people take vitamin D supplements?

It is accepted that vitamin D is necessary for healthy bones. Vitamin D supplementation can increase bone density and, although reports vary, many agree that it can decrease the risk of hip fracture. It has been associated with decreased falls in the elderly through its effect on improving muscle strength.

Recently, interest in vitamin D has focused on the possibility that it can decrease the risk of cancer and heart disease. One portion of the Health Professionals Follow-Up Study from the Harvard School of Public Health is an observational study evaluating whether blood levels of vitamin D can predict the risk of coronary artery disease. After controlling for known risk factors, they found that the group with the lowest level of vitamin D had two times the risk

of heart attacks as the group with the highest levels. This was not a trial of vitamin D treatment, but suggests that such trials should be done to determine if vitamin D can indeed decrease the risk of heart attack.

One aspect of the Women's Health Initiative (WHI) trial evaluated the effect of calcium and vitamin D supplementation on cardiovascular risk in a randomized fashion. This trial showed no significant difference in the risk of heart attack or cardiac death between the women who received the supplements vs. those in the placebo group.

Though this trial seems to dispute the theory that vitamin D can be helpful, there were some problems with the trial that call its findings into question. Compliance was a problem in this trial, with only 60% of participants taking the medication as prescribed. No effort was made to keep participants from taking supplements on their own, so people in the placebo group may in fact have been taking these supplements. The dose of vitamin D was below the currently recommended dose and blood levels were not checked. Given these problems, it is difficult to use these results to refute the hypothesis that vitamin D may have an effect, and further studies are needed.

Another hope for vitamin D is that it can decrease the risk of cancer. Some observational studies have suggested that lower vitamin D levels are associated with higher levels of colon, breast and prostate cancers. In a review of 63 studies, over 60% of them found an association of low levels of vitamin D with higher levels of cancers. This is an intriguing observation and needs further study in order to prove that treatment with vitamin D protects against cancer.

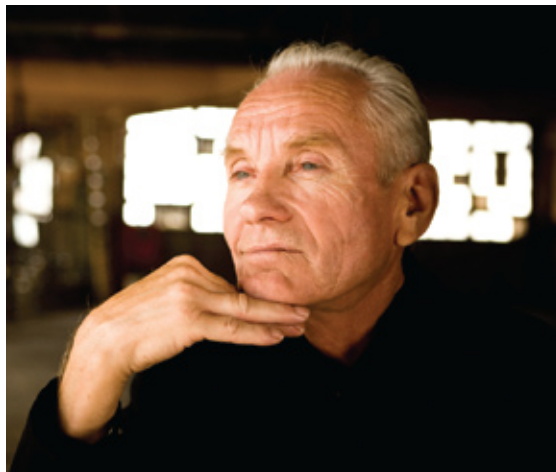
In the diet, vitamin D is found in fortified foods including milk, cheese and cereals. It is naturally found in fatty fish such as salmon, mackerel and tuna. The current accepted level of intake is 800 to 1000 iu daily. This level does improve bone health. Though there is much to suggest further benefits from vitamin D supplementation, much still remains to be proven. This is a hot topic in research and further studies will be forthcoming.

– *Laura Lenholt, M.D.*



# PSA Testing – Controversial Again?

The PSA blood test for detecting early prostate cancer is in the news again. The United States Preventive Services Task Force, a respected agency funded largely by the federal government, has recommended against use of this test in persons older than 75. While quite controversial, the recommendations reflect long known uncertainties about whether treatment, with many known adverse effects, leads to better outcomes in older patients with prostate cancer, who often die of other causes before the cancer causes serious symptoms.



on biopsy. Still, these predictors are imperfect. Other types of cancer for which we commonly screen, such as breast, colon and cervical cancers, are more likely than prostate cancer to be lethal if not treated aggressively.

The available treatments for prostate cancer – radiation, surgery or hormones – can cause side effects such as impotence, incontinence, and bowel problems. These problems can persist long-term and can adversely affect quality of life. While treatments are evolving and improving, it is difficult to

The case for PSA screening is fairly straightforward. Prostate cancer is the second leading cause of cancer deaths in men. Detection at an early stage offers a high likelihood of cure. Most cancers diagnosed by PSA testing are found at a curable stage. Indeed, the death rate from prostate cancer has diminished in recent years. While not proven, it is quite likely that PSA testing has played an important role in this improved survival.

The argument against PSA screening is more subtle, and largely reflects the unique nature of prostate cancer biology. Many patients who have prostate cancer, especially diagnosed after age 70, will die of other causes, even if the prostate tumor is not treated. In many cases, we cannot determine if a particular prostate cancer will progress rapidly. The Gleason score, which predicts tumor aggressiveness based on microscopic examination of a biopsy specimen, often falls in a mid-range that is not very useful in decision-making. Other markers of less aggressive disease include a slowly rising PSA score prior to diagnosis (less than 1 ng/year) and a small volume of cancer

know which treatment is best and which treatment is truly life-saving. Studies that would properly compare new treatment modalities with older ones are lacking. Decisions about prostate cancer testing and treatment must reflect a calculus of benefit and risk. For men in their 50s or 60s who have a life expectancy of 20 to 30 years, it makes sense to detect and treat prostate cancer as it is likely that these tumors would cause illness over that timeframe.

The decision making is more difficult in older persons who are less likely to die from a newly diagnosed prostate cancer. In our experience, patients differ in their desire to have prostate cancer detected in their later years. This variance in opinion reflects the real dilemma that patients and physicians face in considering this condition. Ultimately, decisions about PSA testing and prostate cancer treatment must be individualized, and underscore the importance of a collaborative doctor-patient relationship.

– Leonard A. Schlossberg, M.D.

## An Evening of Appreciation for our Members

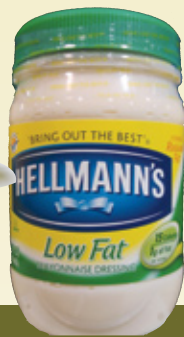
With gratitude to our patients for making our practice successful, Dr. Laura Lenholt and Dr. Leonard Schlossberg invite you to an Evening of Appreciation for our members.

Join us for gourmet hors d'oeuvres and boutique wines  
Wednesday, November 12th • 6:00 p.m. – 9:00 p.m.  
2230 Venetian Court, Suite 2 • Naples, Florida

Please feel free to bring a friend or family member. If you haven't yet confirmed your attendance please call us at (239) 566-3100 by November 5th. We look forward to seeing you there!

# CONDIMENT NUTRITION INFORMATION

*to help you make healthy food choices*



DRESSING	INGELHOFFER MUSTARD	HELLMAN'S LOW FAT MAYO	HELLMAN'S LITE MAYO	HELLMAN'S REAL MAYO	HEINZ KETCHUP	VLASSIC SWEET RELISH
serving size	1 tbsp	1 tbsp	1 tbsp	1 tbsp	1 tbsp	1 tbsp
calories	30	15	35	90	15	15
total fat	0	1 gram	3.5 grams	10 grams	0	0
sat fat	0	0	0.5mg	1.5mg	0	0
protein	0	0	0	0	0	0
sodium	225mg	130mg	130mg	90mg	190mg	140mg
carbs	1 gram	2 grams	1 gram	0	4 grams	4 grams



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