

THE EXPERIENCE YOU NEED. THE COMPASSION YOU DESERVE.

PREMIER *health*

Dr. Mays Al-Shaer
Brings Dermatology
Division to Premier
Medical Group

3

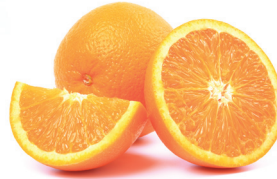


7

Everyone Needs a
Proper Check-up

11

Finding IBS
Relief with the
Low FODMAP Diet



Embracing
Patient-Centered
Medical Home

14



In This Issue

Gastroenterology Division

With offices in...
Poughkeepsie: 845-471-9410
New Windsor: 845-562-0740
Newburgh: 845-562-0740
Fishkill: 845-897-9797
Kingston: 845-471-9410

Sunil K. Khurana, M.D., FACG
Peter M. Varunok, M.D., FACG
Salvatore M. Buffa, M.D.
Robert S. Dean, M.D.
Khurram I. Ashraf, D.O.
Arif M. Muslim, M.D., FACG
Farshad Elmi, M.D., FACG
Zana Nikolla, M.D.
Elizabeth Williams, D.O.
Majed El Zouhairi, M.D.

Allied Professionals

Meggín Sabatino, FNP-BC, CCRC
Thanh-Ho Nguyen, PA-C

Internal Medicine Division

With offices in...
Poughkeepsie (Atrium at
MidHudson Regional Hospital):
845-790-6100
Poughkeepsie (Medical Arts
Building):
Dr. Pavels: 845-454-4600
Dr. Wogalter: 845-454-4055
Fishkill: 845-838-8480
New Windsor: 845-561-8500

Lorraine Nardi, M.D.
Alan H. Gross, M.D., FCCP
Davide Michael DeBellis, M.D.
Carol E. Miyake, M.D.
Andrew J. Chernack, M.D.
Michael J. Gaesser, M.D., FACP
Chinyere E. Ofonagoro, M.D.
Saba Afzal, M.D.
Anita V. Pavels, M.D.
Clement Landanno, M.D.
David F. Wogalter, M.D.

Allied Professionals

Mele Catell, PA
Mark Farrell, PA-C
Linda Heckett-Ruta, RN, MSN, FNP
Kirsten Laux, FNP-BC

Urology Division

With offices in...
Poughkeepsie, Kingston,
Fishkill, Newburgh,
Rhinebeck, and Montgomery
Main phone: 845-437-5000

Evan R. Goldfischer, M.D., MBA,
FACS, CPI, CPE
Daniel Katz, M.D., FPM-RS
Michael Solliday, M.D.
Scott Khan, M.D., FACS
Jason Krumholtz, M.D.
Naeem Rahman, M.D.
Paul K. Pietrow, M.D., FACS
Walter Parker, M.D.
Paul Pomerantz, M.D., FACS
Praneeth Vemulapalli, M.D.
Jaspreet Singh, D.O.
Yu-Kuan Lin, M.D.
Michael C. Young, M.D., FACS

Allied Professionals

Kevin Torrens, PA-C
Frances Traver, ANP-C, CUNP
Marylu Williams, FNP-C, CUNP
David M. Boss, PA-C
Megan M. Wright, FNP-BC
Frank Morales, RN, FNP-BC

Rheumatology Division

Poughkeepsie: 845-454-9500
Farah M. Ashraf, D.O.

Podiatry Division

With offices in...
Poughkeepsie (North Road):
845-471-9410
Poughkeepsie (Fairmont Avenue):
845-454-0630
Fishkill: 845-897-9797

Robert C. Parajon, D.P.M., FACPS
Leonard S. Gerber, D.P.M.
Christopher K. Bromley, D.P.M.
F. Gabrielle Summers, D.P.M.
Audra R. Siegel, D.P.M.
Dany Y. Jabbour, D.P.M.

Dermatology Division

Poughkeepsie: 845-471-9410
Mays Al-Shaer, M.D.

The Physicians of Premier Medical
Group are affiliated with
MidHudson Regional Hospital,
Northern Dutchess Hospital,
St. Luke's Cornwall Hospital, and
Vassar Brothers Medical Center.

3 Announcing our new Dermatology Division

Dr. Mays Al-Shaer introduces medical and aesthetic
dermatology procedures to Premier Medical Group

4 Better News for Patients with Crohn's and Ulcerative Colitis

New drug choices for patients

5 Premier Podiatry Introduces the Lunula Laser

Revolutionary laser therapy for the treatment of nail fungus

6 NeuViva Laser Vaginal Rejuvenation

Restores vaginal health and relieves vaginal pain

7 The Importance of a Proper Check-up

To predict and prevent future problems

8 Premier Urologists Offer Innovative Treatment Options for Prostate Cancer

Cryosurgery and Xofigo® Therapy

10 Diagnosis: Achalasia

Correct diagnosis and treatment enables patients with
Achalasia to eat again

11 Relieve Irritable Bowel Syndrome (IBS) Symptoms with Diet

Avoiding certain foods can relieve IBS symptoms

12 FODMAP Diet Chart

Eating the right foods can reduce gas, bloating,
and discomfort

13 Skin Cancer Screening

Prevention is better than medicine. Learn the ABCDEs
of skin cancer

14 Embracing Patient-Centered Medical Home

How Premier Medical Group unifies care and builds
stronger relationships between patients and providers

Contents of this magazine © 2017, Premier Medical Group of
the Hudson Valley. Reproduction in whole or in part is strictly
prohibited without the prior express written permission of Premier
Medical Group. This publication does not, in any way, substitute for
professional medical care and the articles herein should not be
considered medical advice in any manner. Consult your physician
before undertaking any form of medical treatment or adopting
any dietary program. Premier Medical Group Editor: Dee Volek
(dvolek@premiermedicalhv.com).



Dr. Mays Al-Shaer Brings Dermatology to Premier Medical Group

Premier Medical Group is pleased to announce
that Dr. Mays Al-Shaer has joined our group. She is
board certified in Internal Medicine and specializes
exclusively in medical and cosmetic dermatology,
including dermatologic surgery.

Dr. Al-Shaer attended medical school at the University of Jordan and completed her
residency at the University of Missouri – Columbia School of Medicine. She went on to
complete her Fellowship in dermatology at the Institute for Family Health in Kingston,
New York. After finishing her medical training, Dr. Al-Shaer completed training in laser and light-
based treatment of the skin at the National Laser Institute.

Along with medical dermatology, Dr. Al-Shaer
also specializes in a wide array of aesthetic
dermatologic procedures, with a focus on
injectables such as Botox and soft tissue
fillers, as well as laser and light therapy. She
will be heading Premier's new Dermatology
Division. We are very excited to have
Dr. Al-Shaer joining us. "After six years
of providing skin care for the residents
of the Hudson Valley, I am excited to be
establishing Dermatology as a Premier
Medical Group specialty," says Dr. Al-Shaer. "Joining Premier Medical Group promises to allow me
to go back to how I always thought medicine should be. The group strives to put patient quality
care first and to create an environment in which physicians can thrive and patients can heal."

Dr. Al-Shaer is currently accepting new patients at our Poughkeepsie location – 243 North Road,
Suite 204. For an appointment, please call 845.471.9410 or visit www.premiermedicalhv.com. ■

“After six years of providing skin
care for the residents of the
Hudson Valley, I am excited to be
establishing Dermatology as a
Premier Medical Group specialty,”



PREMIER *medical group*

Better News for Patients with Crohn's and Ulcerative Colitis



Sunil K. Khurana, M.D., FACP
CEO, Premier Medical Group
of the Hudson Valley

Ulcerative Colitis and Crohn's disease belong to a group of conditions called Inflammatory Bowel Disease. While both diseases affect the large intestines, Crohn's affects the small intestine as much as the large intestine. It can also involve the stomach and esophagus. Both diseases are chronic conditions that, in the past, have been difficult to manage.

Patients have traditionally been treated with mesalamine products and steroids, but a large number of patients did not respond to these treatments and needed repeated hospital admissions and surgeries. About 20 years ago, a new class of drugs called

Since the medication works mostly in the GI tract, there was less risk of opportunistic infection and neurological diseases.

Brighter Picture for Crohn's Disease

Recently, a new medication called Stelara® was approved for Crohn's Disease. It had previously been approved for treating psoriatic arthritis about seven years ago. It can be used as a first-line therapy in patients with Crohn's Disease or patients who have failed other medications. At the present time, this medication is also undergoing clinical trials for Ulcerative Colitis. Another relatively new medication being used for Crohn's Disease and Ulcerative Colitis is Uceris®. A few years ago, Uceris® was also approved as Uceris® Foam, which can be administered rectally in people with predominant rectal disease.

The availability of these new medications has made managing patients with Ulcerative Colitis and Crohn's Disease much easier than it was 10-15 years ago. By fine-tuning these drugs, many patients who were not responding to earlier treatment now respond very well and we are able to keep them out of the hospital and, in many cases, help them avoid surgeries.

Gastroenterologist Dr. Sunil K. Khurana, CEO of Premier Medical Group, recommends that patients who have Crohn's Disease and Ulcerative Colitis visit their gastroenterologist and ask if any of these new medications might be of benefit to them. ■

anti-TNF agents came to market. Amongst them were Remicade®, Humira®, Cimzia®, and Symponi®. These medications revolutionized the natural course of disease, but over time, only 50% of patients stayed in remission. For the other 50%, a different solution was needed.

Good News for Ulcerative Colitis Patients

Two years ago, a new medication named Entyvio® came into the market. It was very effective in patients with Ulcerative Colitis and, as a first-line therapy, patient response was about 60%. It was 30-40% effective even in patients who had failed other treatments.

“By fine-tuning these drugs, many patients who were not responding to earlier treatment respond very well and we are able to keep them out of the hospital, and in many cases help them avoid surgeries.”

Premier Podiatry Division Introduces the Lunula Laser



Christopher K. Bromley, D.P.M.
Podiatrist

Christopher K. Bromley, Doctor of Podiatric Medicine with Premier Podiatry, uses the proper medical term for a common foot condition - onychomycosis, pronounced “on-ih-koh-my-KOH-sis.” Most of us know it as “toenail fungus.” It is a disfiguring, somewhat embarrassing, condition that doesn't just bother the person who has it, but it can also be spread from person to person. You've almost certainly seen it; first one toenail becomes discolored and gets thicker, and there may be an odor associated with the infected area. At first, there is no associated pain, but as the nail infection progresses, it may interfere with standing, walking, and exercising.

Dr. Bromley says that many people don't seek treatment because of the embarrassment or live in denial. Having onychomycosis can lead to loss of self-esteem, isolation, and social problems. That's why, at Premier Podiatry, we're really happy to offer a fast and total cure at an affordable price with the unique Lunula Laser system.

Your Feet Can Be Beautiful and Healthy Again

The Lunula Laser is a proven, non-invasive treatment that's approved by the FDA for the treatment of onychomycosis. Dr. Bromley says, “Four low-level laser treatments, each 12 minutes long, can treat an entire foot and helps turn discolored and disfigured nails into clearer-looking nails. As the nail bed grows out over the next 6 months, it will resume a normal, healthy-looking appearance.”

The results are excellent:

- Treatment is touchless and painless
- No aftercare, no downtime, no risk
- No more embarrassment about unsightly toenails

Treat the Whole Foot at Once, Not One Toe at a Time

A significant advantage of the Lunula Laser treatment is its thorough and rapid process. Dr. Bromley describes the benefits: “Unlike other technologies, all five toes can be treated simultaneously during four 12-minute appointments.”

The Lunula Laser is FDA approved and, while not yet covered by insurance, is an excellent value as the cost is comparable to most existing oral medications.

A Revolution in Foot Fungus Treatment

The Lunula Laser has undergone extensive testing and, compared with other forms of treatment, including oral medications and earlier hot laser treatments, it has proven superior.

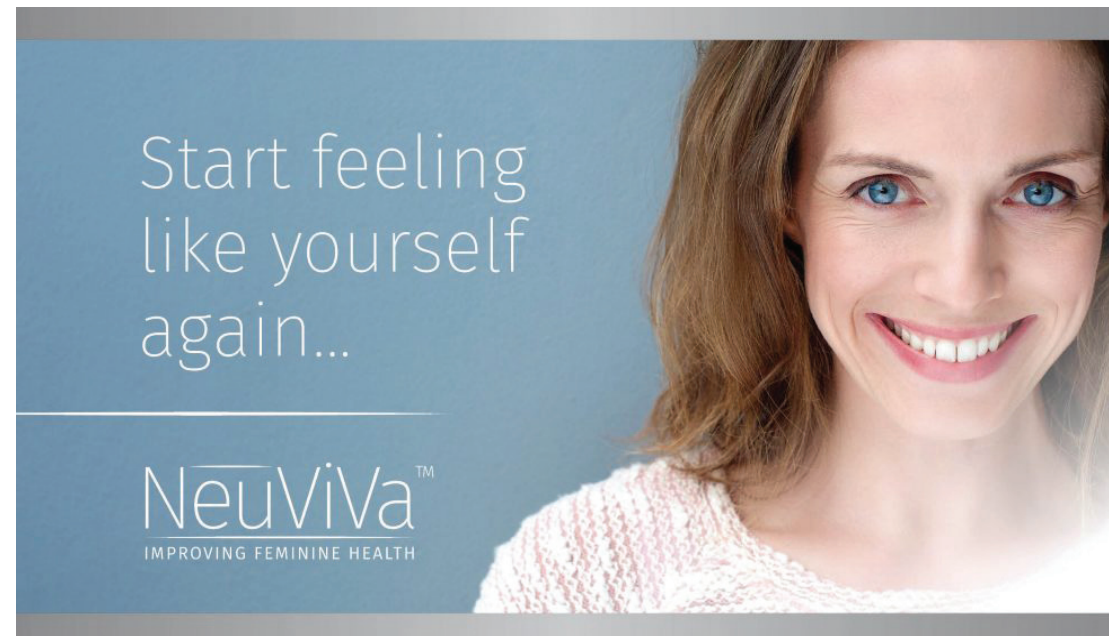
In a recent US study of Lunula treatments, 67% of all treated toenails evaluated met the study individual toenail success criteria. The average clear nail growth was an increase in 5.18 mm. Equally important, the clinical responses observed in all four trials both in Europe and the US were achieved without a single adverse event. Lunula holds many US and international patents, including US Pat. 8,409,264 Fungal Infection Therapy Method with Low Level Laser.

Dr. Bromley comments that the four treatments at weekly intervals “provide a first-of-its-kind success story that effectively target the infections agent, while fortifying the body's natural defense mechanisms. The Lunula Laser gives patients a truly effective, yet safe, treatment for onychomycosis.” ■





Daniel Katz, M.D., FPM-RS
Director of Premier Women's
Center for Continence &
Sexual Health



NeuViva Laser Vaginal Rejuvenation Restores Healthy Tissue

Can a woman's vagina be restored to its healthy youthful state?

Dr. Daniel Katz, director of Premier Women's Center for Continence & Sexual Health, says that because the lining of the vagina, the epithelium, is basically skin, the answer in many cases is, "Yes."

Dr. Katz says that NeuViva laser vaginal rejuvenation works on the same principles as dermatological facial laser treatments and has proven effective for many women.

For women who experience mild stress incontinence when doing aerobics, or at other, often inconvenient times, NeuViva laser treatments are a solution that restores a woman's feeling of health and self-confidence. Dr. Katz says, "There's no need to feel embarrassed about mild stress incontinence. It is a medical issue that NeuViva can treat with minimal discomfort."

In addition to stress incontinence, vaginal health issues such as dryness, burning, or pain are commonly experienced by postmenopausal women, but can also affect

women who have had a hysterectomy or cancer therapy. There are many reasons why this condition can occur and it affects millions of women. Many would rather not use Hormone Replacement Therapy (HRT), due to cancer concerns or uncomfortable side effects, but find that NeuViva provides the benefits of HRT without the worries.

A Five-Minute Treatment Successfully Restores Vaginal Health

NeuViva is a five-minute treatment performed in the doctor's office with no anesthesia required. Typically, a patient

has three treatments in sequence and one additional follow up visit at the end of the year. The patient is awake and the results are often felt within a few weeks and continue improving over six to nine months. From then on, the effects are long lasting.

How different does NeuViva make a woman feel? Because the Fractional CO2 laser technology resurfaces the vaginal epithelium, it restores healthy collagen and revitalizes the tissue to its original moisture, plumpness, buoyancy, and lubrication. For younger women who feel "stretched out" by childbirth, NeuViva gives a sense of comfortable fullness again.

A Positive Side Effect: Better Sex

Dr. Katz describes one patient who said that she "had been in pain for the past 10 years." After her second NeuViva treatment, she only experienced pain "a couple of days over the course of six weeks." Eventually, she had no pain at all. In addition, high-impact aerobics caused her "no pain, no leakage." For her, pain during intercourse became a thing of the past.

If you have seen someone who has had laser facial resurfacing, you know how amazingly good it can look. Patients who have suffered vaginal dryness, pain during intercourse, or mild stress incontinence can often have similar long-lasting results.

Dr. Katz comments, "There is no longer any reason for a woman to suffer in silence. NeuViva can offer relief and a very successful outcome. That's why Premier Women's Center chose to offer this helpful service to our patients." ■



Everyone Needs a Proper Check-up: "The Sooner the Better"

Dr. David Wogalter, has had a long career as an Internal Medicine provider, first in his own practice, and now with Premier Medical Group. Over the years, Dr. Wogalter has dealt with his own diabetes and history of cancer. So he is aware of the importance of blood tests in staying ahead of potential chronic diseases like hypertension, heart disease, cancer, diabetes, and inherited disorders.

Dr. Wogalter stresses to patients the importance of having a baseline blood workup not only to find medical issues but also to predict future health challenges. "When you study a patient's history and their current lab work, you can see the family history playing out," he says.

Dr. Wogalter points out that when healthy young patients transition to their adult providers, they often have not had any significant blood testing, because they appear – and generally are – healthy. However, early blood testing can detect future problems. and make them aware of what to watch for.

"Twenty-one percent of people in the United States have metabolic syndrome," says Dr. Wogalter. "They have hypertension, high cholesterol, thyroid, perhaps they can't lose weight, or they have high sugar levels. It doesn't take a crystal ball to see it coming. What it does take is closer monitoring for high-risk patients." From when you are a teenager on up, a relationship with an internal medicine provider makes sense, comments Wogalter. "Internal Medicine means we look inside you. We can tell your fortune – and what to look out for." ■



David F. Wogalter, M.D.
Internist

Premier Urologists Provide Innovative Treatment Options for Prostate Cancer

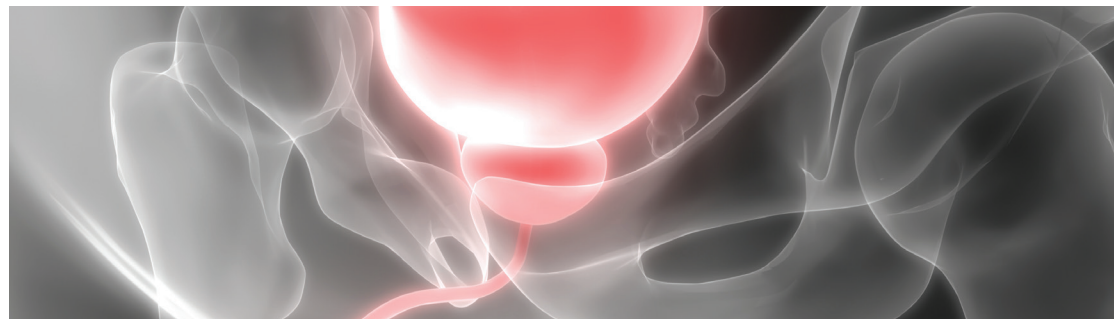


Naeem Rahman, M.D.
Urology Division -
Medical Director

Cryosurgery for Primary Treatment and Recurrent Prostate Cancer

Cryosurgery is a very effective treatment for prostate cancer both when initially diagnosed and for reoccurrence. It is a surgical procedure that freezes benign and malignant tissue. This can be an ideal treatment for an older patient already experiencing erectile dysfunction for whom radical surgery or radiation are not ideal choices. Cryosurgery takes the affected tissue to -20°C , effectively destroying the prostate gland. This procedure avoids the deleterious effects of incontinence seen often in older patients after radical surgery, and avoids the harmful effects of radiation such as inducing secondary cancers, creating urethral scar tissue, and causing hemorrhagic cystitis. It is also an ideal treatment for men when their prostate cancer has returned within the prostate after undergoing radiation treatment, as it allows them to avoid the many risks of radical surgery.

“Compared with other techniques, cryosurgery is amazingly well tolerated. It is a minimally invasive procedure performed in an operating room and generally takes under two hours.”



Cryosurgery is a very well tolerated, minimally invasive procedure performed in the operating room, and typically takes under two hours. Patients are usually able to go home the same day. Small needles are placed symmetrically along the prostate using real-time ultrasound. Argon gas is delivered through these needles, which freezes the prostate, encompassing it within an ice ball. To protect against urinary incontinence and preserve urinary function, a urethral warmer ensures that the bladder neck, inner core of the prostate, and external sphincter remained warm and protected. The temperature near the rectum and urinary sphincter are also observed to ensure these areas are not frozen. Pain from the procedure is minimal, and the patient requires a urinary catheter for 7-10 days. National data show an 85% prostate-specific antigen relapse-free survival at 10 years for primary treatment. ■



When Prostate Cancer Spreads to the Bone, Premier's Xofigo® Therapy Can Enhance Quality of Life

Prostate cancer, although a commonly localized and curable disease, can metastasize to spread into bones. Patients are often treated with chemical castration, which deprives prostate cells of testosterone, a molecule principle for prostate cell sustainment. With time in an advanced disease state, prostate cancer cells will learn to grow and sustain themselves even under castrate conditions. This is referred to as metastatic castrate resistant prostate cancer (mCRPC).

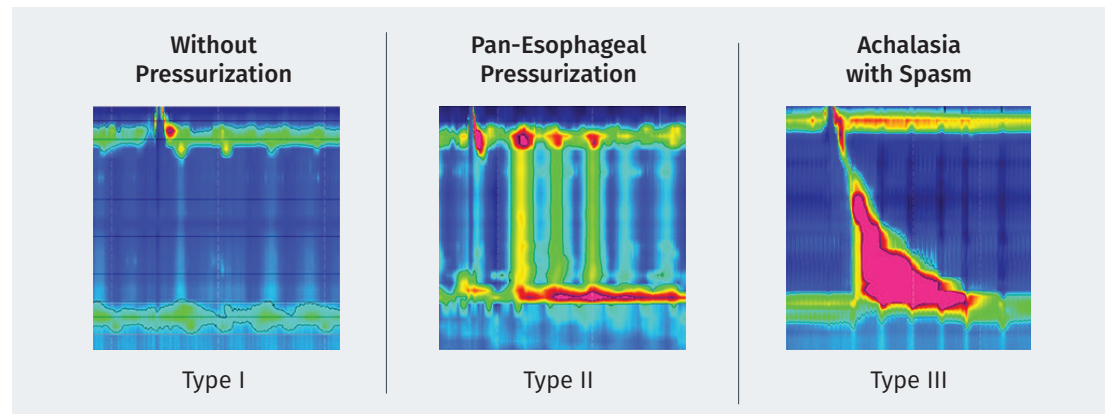
“Studies have shown that Xofigo® can extend life by 30%, and more importantly, can significantly reduce bone pain associated with cancer, enhancing quality of life.”

A burgeoning field with many new therapies, Premier Medical Group now is offering radium 223, or Xofigo®, among its choices for mCRPC patients with disease primarily in the bone associated with pain or loss of quality of life. Xofigo® is an alpha-emitting radiation particle that is infused intravenously. The treatment consists of six infusions given four weeks apart. It has been shown to be very well tolerated with few serious side effects and, due to its short emitting properties, it has no risk of radiation transference. A radiation oncologist will be present during treatment with one of our expert urologists. Studies have shown that Xofigo® can extend life by 30%, and more importantly, can significantly reduce bone pain associated with cancer, enhancing quality of life. ■

Diagnosis: Achalasia



Zana Nikolla, M.D.
Gastroenterologist



Clinical Presentation:

A 35-year-old female presents with difficulty swallowing. Patient reports a long history of digestive issues, including heartburn, chest discomfort, and difficulty swallowing with solid food and liquids. Recently, her symptoms are worse; she regurgitates the food in small amounts. The patient saw her primary care physician, who increased her omeprazole to twice a day but her symptoms did not improve. She reports chest pain at times, which is related to food intake. The patient has lost 15 lbs. over the past year due to her inability to eat. She eats slowly and at times raises her hands above her head after noticing this maneuver can help the food to move down. She has been drinking a lot of carbonated beverages recently as they help with digestion. Patient denies any nausea or vomiting, use of over-the-counter medications, or family history of any major gastrointestinal diseases or cancers. Examination reveals a thin female, not in any distress, and heart, lung, and abdominal exams are normal.

Work Up:

The patient has never seen a gastroenterologist. An upper endoscopy shows a dilated esophagus with mild redness and some food debris at the lower portion. The entrance to the stomach (gastroesophageal junction) was tight and pressure was applied. A pop was felt upon entrance to the stomach. The rest of the examination was normal. Biopsies taken from the esophagus and stomach were normal. Patient underwent an x-ray with barium, which showed again a dilated esophagus with a bird's beak appearance. Clinical presentation and diagnostic tests raised the possibility of Achalasia. An esophageal manometry was performed, which showed inability of the lower esophageal sphincter to relax and no peristaltic waves in the esophagus, which is consistent with the diagnosis of Achalasia.

Treatment:

The patient was started on muscle-relaxing medications for temporary relief. She was referred for endoscopic treatment called Peroral Endoscopic Myotomy (POEM). The muscles of the distal esophagus that are not relaxing properly were cut during endoscopy. The patient was discharged the same day. Upon the follow-up visit, the patient denies any further difficulty swallowing, chest pain, or regurgitation and has gained her weight back.

Achalasia:

Achalasia is a disease of the muscles of the esophagus. The lower esophageal sphincter does not relax properly, so it does not open to allow the food to go down. The cause is unknown but there is degeneration of the muscles and the nerves that control the muscles. A small proportion is caused by esophageal cancer or Chagas disease (an infectious disease common in South America).

Symptoms include difficulty swallowing, chest pain, and regurgitation of food and liquids. Patient can also develop lung problems and can lose weight. Achalasia can also increase the risk of cancer of the esophagus.

Diagnosis is suspected by x-ray and endoscopy but needs to be confirmed by esophageal manometry. Treatment options include medications, injection of muscle relaxing medications in the esophagus, stretching of the esophagus, surgery, and, more recently, an endoscopic procedure called Peroral Endoscopic Myotomy (POEM), in which the non-relaxing muscles are cut endoscopically, making it easier for the food to go down.

At Premier Medical Group, we perform all the necessary diagnostic tests to diagnose this rare but debilitating disease. ■



Elizabeth Williams, D.O.
Gastroenterologist

Relieve Irritable Bowel Syndrome (IBS) with the Low FODMAP Diet

If you suffer from Irritable Bowel Syndrome (IBS), Dr. Elizabeth Williams at Premier Medical Group has some encouraging information for you. She describes the good results that patients have had with the oddly named Low FODMAP diet. When she explains that FODMAP stands for Fermentable Oligosaccharides, Disaccharides, Monosaccharides and Polyols, we're still a little...baffled. But Low FODMAP Foods are very important when it comes to controlling IBS symptoms. So let's deconstruct what FODMAP represents, and how it can help IBS patients find relief.

The FODMAP foods are short-chain carbohydrates that are incompletely absorbed in the gastrointestinal tract and can be easily fermented by gut bacteria. FODMAPs are a complex name for a collection of molecules found in food that can be poorly absorbed by some people.

The result of eating foods high in FODMAPs is that they pull water into the gastrointestinal tract and that feeds the bacteria, resulting in excess gas and bloating. The additional liquid can also cause diarrhea. Dr. Williams says that the Low FODMAP diet means eating fewer high FODMAP foods such as those listed on the following page and concentrating on eating low FODMAP foods – also listed on the following page.

The Science Behind the Name FODMAP

FODMAP foods include oligosaccharides. Some of these are fructans. Fructans are fructose polymers and are the naturally occurring storage carbohydrates of a variety of vegetables, including onions, garlic, fruits, and cereals. Other oligosaccharides are galactans, chains of the sugar galactose. The primary dietary sources of galactans are certain legumes, such as baked beans, kidney beans, chickpeas, soy products, etc. Humans have long recognized these foods as gas producers; now we know why they are producing gas.

Other discomfort-producing foods include those that are monosaccharides (fructose), and polyols (sugar alcohols). Experts have known for some time that lactose can contribute to gas, bloating, and diarrhea in those with hypolactasia.




How Your Premier Gastroenterologist Can Help Establish Symptoms and Causes

Dr. Williams is board certified in both Gastroenterology and Internal Medicine. She suggests that if a patient suspects IBS they should make an appointment. Because food intolerances, bacterial overgrowth, and motility disorders can display similar symptoms, tests can be administered to establish the root cause of a patient's discomfort. In an office-based breath test, a patient is administered lactulose and then their breath is tested for hydrogen every 15 minutes for up to four hours. If it's positive for bacterial overgrowth, a course of specialized antibiotics is prescribed and recurrent antibiotics, if necessary.





Dr. Williams encourages patients who feel they have "tried everything" not to despair and instead to consider using the new testing technologies to solve their problems once and for all. If in discomfort before seeing your gastroenterologist, Dr. Williams says the nonprescription product, IBgard, a derivative of peppermint, will relax the bowel and provide relief. ■

What to Eat, What to Avoid – the Low and High FODMAP FOODS. See Next Page...

Foods suitable on a low-fodmap diet

fruit	vegetables	grain foods	milk products	other
fruit banana, blueberry, boysenberry, canteloupe, cranberry, durian, grape, grapefruit, honeydew melon, kiwifruit, lemon, lime, mandarin, orange, passionfruit, pawpaw, raspberry, rhubarb, rockmelon, star anise, strawberry, tangelo <small>Note: if fruit is dried, eat in small quantities</small> 	vegetables alfalfa, artichoke, bamboo shoots, bean shoots, bok choy, carrot, celery, choko, choy sum, endive, ginger, green beans, lettuce, olives, parsnip, potato, pumpkin, red capsicum (bell pepper), silver beet, spinach, summer squash (yellow), swede, sweet potato, taro, tomato, turnip, yam, zucchini herbs basil, chili, coriander, ginger, lemongrass, marjoram, mint, oregano, parsley, rosemary, thyme	cereals gluten-free bread or cereal products bread 100% spelt bread rice oats polenta other arrowroot, millet, psyllium, quinoa, sorgum, tapioca 	milk lactose-free milk, oat milk*, rice milk, soy milk* <small>*check for additives</small> cheeses hard cheeses, and brie and camembert yoghurt lactose-free varieties ice-cream substitutes gelati, sorbet butter substitutes olive oil	sweeteners sugar* (sucrose), glucose, artificial sweeteners not ending in '-ol' honey substitutes golden syrup*, maple syrup*, molasses, treacle <small>*small quantities</small> 

Eliminate foods containing fodmaps

excess fructose	lactose	fructans	galactans	polyols
fruit apple, mango, nashi, pear, tinned fruit in natural juice, watermelon sweeteners fructose, high fructose corn syrup large total fructose dose concentrated fruit sources, large serves of fruit, dried fruit, fruit juice honey corn syrup, fruisana 	milk milk from cows, goats or sheep, custard, ice cream, yoghurt cheeses soft unripened cheeses eg. cottage, cream, mascarpone, ricotta 	vegetables asparagus, beetroot, broccoli, brussels sprouts, cabbage, eggplant, fennel, garlic, leek, okra, onion (all), shallots, spring onion cereals wheat and rye, in large amounts eg. bread, crackers, cookies, couscous, pasta fruit custard apple, persimmon, watermelon miscellaneous chicory, dandelion, inulin	legumes baked beans, chickpeas, kidney beans, lentils 	fruit apple, apricot, avocado, blackberry, cherry, lychee, nashi, nectarine, peach, pear, plum, prune, watermelon vegetables cauliflower, green capsicum (bell pepper), mushroom, sweet corn sweeteners sorbitol (420) mannitol (421) isomalt (953) maltitol (965) xylitol (967) 

Skin Cancer Screening. A Life Saver!

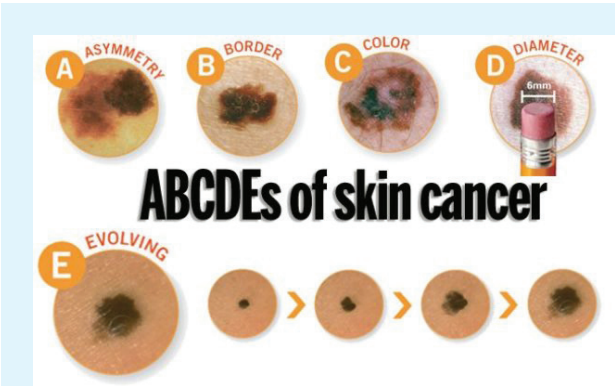


Mays Al-Shaer, M.D.
Dermatologist

Skin cancer is the most common cancer in the United States, with over 2 million Americans diagnosed each year. In fact, one in five Americans will develop skin cancer in their lifetime. It is estimated that nearly 9,500 people in the U.S. are diagnosed with skin cancer every day, including people of all colors and races.

Some people have a higher risk of developing skin cancer than others. Risk factors for skin cancer include light-colored skin, skin that burns or freckles rather than tans, blonde or red hair, blue or green eyes, more than 50 moles, irregular shaped or darker moles, use of indoor tanning devices, and history of sun exposure from outdoor activities.

There are many different types of skin cancer. Basal cell carcinoma (BCC) and squamous cell carcinomas (SCC) are the most common forms, melanoma is the most deadly. With early detection and proper treatment, the cure rate for BCC and SCC is about 95 percent. When melanoma is detected before it spreads, it also has a high cure rate. On average, one American dies from melanoma every hour. Despite all the advances in the treatment of melanoma, early detection and prevention are still our best weapons to save people from this deadly cancer.



Regular self-skin exams and a yearly professional examination help people find early skin cancers. The most important signs to look for: ABCDEs of melanoma.

A: Asymmetry (one half is unlike the other half)

B: Border (irregular, scalloped, or poorly-defined borders)

C: Color (varied from one area to another; has shades of tan, brown, or black, or is sometimes white, red, or blue)

D: Diameter (more than 6 mm or the size of a pencil eraser)

E: Evolving (changing in size, shape, or color)

Any spot that looks different from all the others or that is changing, itching, or bleeding needs to be checked.

Prevention is better than medicine; remember that sun exposure is the most preventable risk factor for all skin cancer, including melanoma. Always seek shade and wear protective clothing (long-sleeved shirt, pants, wide-brim hat, and sunglasses when possible), apply water-resistant, broad spectrum sunscreen with SPF30 or more, reapply the sunscreen every two hours even when cloudy and also after sweating or swimming. In addition, avoid tanning beds.

Our goal is to detect skin cancer in its earliest, most treatable stage and reduce incidence of the disease by raising awareness of effective skin cancer prevention techniques.

Everyone should begin a lifelong routine of regular skin checks. Routine monitoring is the best means to early detection of skin cancer, leading to a great prognosis for successful treatment. Patients should also remember that skin color doesn't give them a free pass. Anyone can get skin cancer.

Premier’s Patient-Centered Medical Home Unifies Your Care for Better Overall Health



Lorraine Nardi, M.D.
Internist and
Nephrology Specialist

For our patients, today’s medical landscape is in many ways the best it has ever been. Premier Medical Group has embraced the model of the Patient-Centered Medical Home and the benefits to patients are great. Dr. Lorraine Nardi, who practices in Internal Medicine and Nephrology with Premier Medical Group, describes it this way: “The Patient-Centered Medical Home (PCMH) is a system that we use to organize and facilitate your care across all levels of care delivery. Using evidence-based guidelines, we can reduce hospital stays and ER visits, build stronger relationships between you and your providers, and improve your overall health outcomes.”

to keep in touch with every aspect of a patient’s health.”

What is Patient-Centered Medical Home?

Patient-Centered Medical Home offers each of our patients in-depth, connected, and comprehensive health care. Your Primary Care provider leads your care team, which can include an associate practitioner, nurses, health educators, and other health care professionals. The care team provides much of your acute care, recommends referrals, coordinates preventive care, and gets to know you, your individual needs, and your lifestyle preferences. Together with the services outlined below, and your essential feedback, your information is all kept immediately accessible so that you can

From young people entering the adult medical system to older patients and those with chronic diseases, the Patient-Centered Medical Home allows the primary care team to keep in touch with every aspect of a patient’s health.”

How Patient-Centered Medical Home Looks at the Big Picture

By tracking and reviewing your ongoing care, coordinating preventative care, and paying attention to your individual needs, results are almost uniformly better. Dr. Nardi says, “We compile information about your past care, your ongoing care, and your own feedback, so that we have a much fuller picture of your total health profile. From young people entering the adult medical system to older patients and those with chronic diseases, the Patient-Centered Medical Home allows the primary care team

have all information about you and your care kept in one place.

The Benefits of the Patient-Centered Medical Home

- **24/7 on-call availability.** Call us any time, day or night, seven days a week at 845-790-6100.
- **Appointments when you need them.** We can also offer same day, evening or weekend appointments.
- **Treating you as an individual.** Your health and wellness is a priority

for Premier Medical Group. When you can communicate with us easily, you make the most of your visits.

- **Coordinating your medical care.** We make sure that all of us on your care team work together to help you understand your condition, take care of yourself, and make good decisions about getting and staying healthy. Even if we are not the ones giving you care, all your information can be accessible to everyone involved.
- **Tracking outcomes and statistics.** The PCMH stores valuable data so that patterns of successful outcomes can be studied and used to benefit other patients. You can be aware of how the lifestyle changes you’ve adopted are helping your overall health over time. Statistical results of preventive care such as blood pressure improvement, successful weight loss programs, and support for other chronic conditions are shared with partner organizations such as Medicare or insurance companies to improve quality of care system-wide. We never share your personal information, just the outcomes of your treatment.
- **Making you aware of community services.** On the Premier Medical Group website, www.premiermedicalhv.com, we list organizations that can make life easier, including dial-a-ride, hospice and palliative care, and resources for reliable health information.
- **Agreements with specialists to share timely information.** Referrals to providers outside of Premier Medical Group can still be highly efficient and information can be shared so that all patient interactions are entered into your electronic medical records.

Technology Brings Everyone Together

Today’s technology gives you and your health care provider a greater connectedness. Your medical records are now electronic and accessible to your other medical providers to prevent medical errors and to ensure we are all on the same page.

Use your Patient Portal to make appointments, ask for prescription renewals, log vital information such as your allergies or medical history, or send a secure message to your health care team. If you forget your login, ask your provider’s office to give you an activation code and you’ll be good to go.

You Are a Vital Part of the Team

To us, “patient-centered” means that you are literally at

the center of everything. Keep us in the loop through the Patient Portal and we’ll do the same for you!

Use Your Patient Portal To:

- **Share information with us.** By updating your medications and dietary supplements, both you and us will have the latest information.
- **Keep track of your appointments.** You can refresh your memory instantly or change your appointment because you can’t make it. We’ll quickly contact you about rescheduling.
- **Ask questions, get answers.** Sometimes you forget to ask all the questions you have, or something occurs to you later. Now, you can send an email message to get an answer that will help you take better care of yourself, clarify how to use your medications, or tell your provider something that’s happening that they need to know about.



- **Have a dialog with your provider; it makes for more effective care.** When you and your provider work together, develop a plan, and provide feedback, we can improve your care.

Premier Medical Group’s Patient-Centered Medical Home, including the Patient Portal, represents the very highest standard of care you can receive. You’ll feel better when you understand and participate in meeting your health goals and we’ll feel better knowing that all of us are working together toward those goals. ■



PREMIER *medical group*

243 North Road, Suite 304
Poughkeepsie, NY 12601

Visit us online: www.premiermedicalhv.com

Premier Cares Foundation Upcoming Events

The 8th Annual Prostate Cancer Walk



Saturday, September 23, 2017

9:00 am – 12 pm

Walkway Over the Hudson

New Starting Point: Poughkeepsie side of the bridge

We hope you will join us for the magnificent views of the Hudson Valley as you walk 1.2 miles each way, 212 feet above the river on the Walkway Over the Hudson. Spend an exhilarating morning with the entire family, friends, and neighbors, enjoying refreshments, entertainment, and great prizes. At the same time, you'll be helping to provide support, awareness, education, and treatment to individuals in the community with urologic and digestive diseases. Money raised by the walk supports local charities and prostate cancer programs in offering free screenings and other supportive services. Come walk in honor and in memory of a loved one.

The 7th Annual Premier Dinner



Saturday, December 9, 2017

6:00 – 10:00 pm

Locust Grove, Poughkeepsie

Join us on December 9, 2017 at Locust Grove for the 7th Annual Premier Dinner with a special beer-pairing dinner featuring CIA Head Brewmaster Hutch Kugeman! This will be a spectacular evening you will not want to miss.



PREMIER CARES
FOUNDATION

To register in advance for these events, please visit: www.premiercaresfoundation.org