

We continue to appreciate all your kind comments regarding Synergy's online newsletter. A number of you have asked how to sign up others for this e-newsletter. You can either forward them this link -- <http://synergyhealthmedical.com/signup/> -- or simply sign them up yourself and consider it a gift of health and wellness.

Skin Cancer Facts:

- One in 5 Americans and one in 3 Caucasians will develop skin cancer
- One blistering sunburn as a child more than doubles your chances of being diagnosed with melanoma later in life
- Use of tanning beds before age 35 increases melanoma risk by 75%, and general tanning bed use increases risk of squamous cell carcinoma by 2.5 times and basal cell carcinoma by 1.5 times
- Occasional use of tanning beds almost triples your chances of developing melanoma
- Every 30 seconds someone is diagnosed with skin cancer that could have been prevented, and every 1.2 hours someone dies from it
- The 5-year relative survival rate for melanoma is around 92%, 98% for localized lesions and 64% and 16% for regional and distant stages of the disease, respectively

SOURCE: The Skin Cancer Foundation, <http://www.skincancer.org>

SKIN CANCER PREVENTION

Tina Schwager PTA, ATC and Carole Hazan, MD, New York University Medical Center

As one season flows into another, the amount of skin we expose to the sun changes, too. Summer, for example, spells skimpy clothing and lots of outdoor activity; between swimming, beach outings, picnics, barbecues and vacations, we're talking prime solar exposure. Of course, it's easy to remember how damaging the sun can be when it's beating down on your bare skin. Your skin is the largest organ in your body, and protecting it from the ravages of the sun is critical not just when it's hot and sunny, but year-round.

Skin cancer accounts for "nearly half of all cancers in the United States (2)." Melanoma, the most serious form, is responsible for almost 8,000 of the approximately 10,700 deaths due to skin cancer each year (2). Of the over 250,000 cases diagnosed annually, the highest rate of occurrence is in Caucasian men over age 50. However, skin cancer incidence in young adults is on the rise, as is the number of women being diagnosed; according to the Skin Cancer Foundation, the number of cases among women has more than tripled in the last thirty years (1).



Since early detection is essential to successful treatment, understanding the structure of the skin and the etiology of skin cancer is as vital a form of protection as sunscreen and protective clothing. There are two categories of skin cancer: non-melanoma and melanoma. Squamous cell and basal cell carcinoma are the two types of non-melanoma skin cancers. They are each distinct tumors with different cells of origin and overall prognoses. Basal cell carcinomas, the most common type of skin cancer, account for 80% of non-melanoma lesions. They arise from the basal cell layer of the epidermis, usually in sun-exposed areas (the nose is a frequent site for this). If left untreated, these tumors cause local invasion of surrounding structures but typically do not metastasize. Squamous cell carcinoma, the second most common type of skin cancer, arises from more superficial layers of the epidermis (keratinocytes). Its precursor lesions, actinic keratoses, tend to arise on sun-exposed areas as well, such as the hands, head and neck region. Though only locally invasive, untreated squamous cell tumors metastasize in about 5% of cases. The involved cells are superficial so non-melanoma skin cancer treatment is generally successful with early detection.

Melanoma, on the other hand, is less common but much more dangerous. It begins in the skin cells (melanocytes) that produce coloration or pigment, known as melanin, and can quickly spread to other parts of the body. It can occur anywhere but is most common on the trunk in men and the legs in women (2). The American Cancer Society estimates that "about 62,190 new melanomas will be diagnosed in the United States in 2006 (1)." Despite the relative danger, however, melanoma is quite treatable...when detected early.

Since June is Men's Health Awareness Month, it must be pointed out that skin cancer "is the #1 cancer in men over 50, ahead of prostate, lung and colon cancer," with over 5,000 males a year dying from melanoma (1). Notes Perry Robins, MD, President of the Skin Cancer Foundation, "While clearly melanoma is a concern for all demographics,

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Tips for protecting your skin:

1. Seek the shade, especially between 10AM and 4PM
2. Avoid getting sunburned
3. Stay away from tanning beds
4. Use sunscreen with an SPF of 15 or higher every day, even on rainy days; remember, the sun's rays penetrate clouds. Generously apply sunscreen 30 minutes before going out, and re-apply every 2 hours
5. Cover up as much of your skin as you can by wearing long sleeves, a wide-brimmed hat, and sunglasses with UV protection
6. Keep babies out of the sun; sunscreen is Ok to use after 6 months of age
7. Do a full body check for potential problem spots every month
8. Get a total body skin exam with a dermatologist annually

SOURCE: The Skin Cancer Foundation, <http://www.skincancer.org>.

it is at a crisis level for men (1).” Several reasons account for the high risk in men. First, in warmer weather, men expose more skin and are in the sun a greater percentage of the time than women. Hard to reach areas like the shoulders and back often go without all-important sunscreen, and are very difficult to self-check for possible lesions. A recent study by the National Sun Protection Advisory Council found that men, on average, are in the sun 26 hours more per week than women (1) and, according to the Skin Cancer Foundation, those over 40 spend the “most time outdoors and have the highest annual exposure to ultraviolet radiation (1). Then there is the fact that guys make far less of an effort to reduce exposure by sitting in the shade or covering up (1), and tend to shy away from using sunscreen in the first place (“It gets in my eyes when I sweat,” “It’s too greasy,” “I don’t like the way it smells,” or fill in your own excuse!). You get the picture.

According to dermatologist Sean Deram, MD, the biggest misconception people have about skin cancer is assuming that if they’ve stopped tanning or regularly use sunscreen now, they’re no longer at risk of developing skin cancer. “This logic doesn’t take into account the fact that UV radiation damage is cumulative, and that most skin cancer diagnoses are a result of excessive sun exposure from years ago,” he explains. Another misconception is that only people with light skin or moles may get melanoma. Anyone is at risk for skin cancer—period.

Speaking of sunscreen, in a recent poll one third of the people surveyed said “they did not use sunscreen, and 71 percent of the people who used products to protect their skin do not apply them until after going out into the sun (3).” Another interesting statistic is that when sunscreen is applied, most people really only get half the protection they need. This means that if you’re applying an SPF 30 lotion, you’re actually starting with an SPF of 15, which will degrade faster. It should also be noted that if a bottle of sunscreen lasts you all summer, you’re not applying nearly enough; you need at least a shot glass worth to cover your entire body. And despite findings such as those at the Outpatient Clinic of Dermatology in Zurich, Switzerland that “wearing sun-protective clothes and a hat and reducing sun exposure to a minimum should be preferred to sunscreens (6),” we still equate a golden tan with good health—which couldn’t be further from the truth. As Dr. Craig Eicher, a skin cancer specialist, points out: “Although a tan is thought to be beautiful, it is damage to the skin cells that induces a tan (3).”

The interesting thing about skin cancer is that, as cancers go, prevention is relatively easy. The hard part is convincing people to take prevention seriously. Neglecting your skin when you’re young or shrugging off the use of sunscreen when you’re just going outside for a “little while” can lead to a positive diagnosis later in life...one that could have easily been avoided, with very little effort.

Performing regular self-examination is the number one means of ensuring early detection of potentially cancerous lesions. Get to know your body and all its marks, moles and flaws; that way, when you do your body check you’ll know if something has changed. If you find anything questionable or notice changes that persist over one or two months, see a dermatologist right away. Dr. Deram feels that, while self examination is important, “there is a substantial amount of skin surface that is difficult to visually inspect yourself, such as the crown of the scalp, behind the ears, most of the back, backs of the thighs and some parts of our feet.” He suggests having someone do the check for you. Other body sites at risk that are often neglected include the iris of the eyes, the eyelids, nail beds, genital areas, webs of fingers and toes, mucus membranes and lips.

Finally, if you still desire that “healthy glow,” opt for an alternative means of getting it—like a nutritious diet and regular exercise. Your Synergy trainer can devise a program to get your whole body glowing. And stay on top of early detection, too. If you need assistance, see a Synergy staff member for a referral to a dermatologist or skin cancer specialist in your area. Let’s face it—the sun is as important to our well being as the air we breathe, but get too close and you might get burned. If you do, it’s a problem that just can’t be ignored.

For more useful information about skin cancer, log onto the Skin Cancer Foundation website, <http://www.skincancer.org>.

Dr. Carole Hazan is a dermatologic surgeon at NYU who primarily treats skin cancer. She has researched and published numerous articles on this subject.

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REFERENCES: 1. <http://www.skincancer.org>. The Skin Cancer Foundation website. 2. <http://www.cancer.org>. American Cancer Society. 3. People still ignore skin cancer warnings. <http://www.nlm.nih.gov>. Medline Plus, 5/10/07. 4. Skin Cancer Foundation newsletter, May 2007. 5. <http://www.aad.org>. American Academy of Dermatology. 6. <http://www.cancer.gov>. National Cancer Institute. 7. Less Sun a Better Bet Than Sunscreens. <http://www.nlm.nih.gov>. Medline Plus, 5/3/07.

LINKS:

GOLFERS AND SKIN CANCER- Golfers are notorious for flashy outfits and an obsession with their sport. What they may also be notorious for is a rather high risk of skin cancer. Consider the hours spent in the sun, the time of day the best rounds are played, and the amount of skin exposed on the links, and it spells trouble

TROUBLE IN THE SADDLE?

June is Men's Health Awareness Month, and while many issues affect men, there is one particular topic that hits very close to home—erectile dysfunction. Despite the public onslaught of medications, magazine ads and commercials about the subject, it's actually a very delicate subject. According to Health24.com, ED affects approximately "52% of men over 40 worldwide, but less than 15% of these men seek or receive treatment..." Causes vary, from common medical problems such as coronary artery disease, hypertension and hyperlipidemia, to cancer treatment, prostate surgery and diabetes (which affects vascular function in the extremities). Drugs prescribed for the treatment of common conditions, like high blood pressure or depression, often cause ED as a side-effect. Another potential cause currently under scrutiny, though, is cycling and the pressure placed on blood vessels and nerves in, let's just say, a very delicate area. In a recent LA Times article ("Cycling in the Hot Seat," 4/9/07) Bill Becher explores the link between bike seats and compromised sexual performance.

The controversy over this subject is based on the design of bike seats, with critics suggesting that the pressure to the perineum (the region between the anus and the external genitalia) combined with the body position cyclists adopt in order to become more aerodynamic may damage the arteries and nerves supplying the penis. The amount of time spent in the saddle has a lot to do with the risk involved, too. According to studies, sitting on a stationary bike for a regular workout isn't much of an issue, but older bicyclists, those riding long distances, and riders who log more than three hours per week have an increased risk.

Medical research studies have found a reduced blood flow caused by pressure to the area holding a cyclist's body weight while riding. Efforts are being made by manufacturers to determine if altering the seat design itself could alleviate this problem. Some design modifications thus far have included holes and grooves, cutouts, alternative pressure points, gel cushioning, and saddles without a "nose" (the protruding front portion). While some cyclists don't like the noseless seat, saying it reduces control while riding, testing in a German laboratory indicated that the modified saddle allowed

for the skin. The American Cancer Society explores this idea and encourages precautions for these athletes on their website. Click on these links for both stories:

http://www.cancer.org/docroot/NWS/content/NWS_2_1x_Golfers_and_Skin_Cancer.asp.
http://www.cancer.org/docroot/NWS/content/NWS_2_1x_Golfers_Bask_in_the_Warmth_of_the_Season.asp.

SENIOR FITNESS – Supplements to Counter the Aging Process. In this month's installment, Frank Wilhelmi explores supplementation to deter the aging process. As he states, "we have to admit that we will eventually wear down, wear out and die..." Gloomy, but true. However, the digestive deficiencies that can occur and contribute to age-related functional decline may be reversed or overcome through the use of well chosen nutritional supplements. Here is the link to Part One of Frank's article on this timely topic: http://www.seniorfitness.com/tutorials/Supplements_to_Counter_the_Aging_Pr_249343_Supplements_article.html

"blood flow up to about 70% of normal in an upright position, and 60% in a forward position." A 2005 study in the Journal of Sexual Medicine also found that "straddling a bike seat with a nose... reduced blood velocity in the arteries to the penis by more than 95%, but sitting on a 'two cheek' noseless saddle had virtually no effect."

Manufacturers continue to come up with possible alternatives, all in an effort to offset the potentially detrimental effects of long range biking. "This whole saddle thing is very tricky for the bike industry," says Matt Phillips, test director for Bicycling and Mountain Bike magazine. "We want people to be healthy and comfortable while riding, but we don't want to scare people away from riding."

Until the medical community and bike manufacturers can reach a consensus, it's important for cyclists, both male and female, to be aware of any sensory or functional difficulties they notice, particularly when they finish a ride. While many advocates feel the cardiovascular benefits of biking far outweigh any potential problems, it remains to be seen whether there is a direct—or permanent—link between pressure from the saddle and sexual performance problems.

The CDC's 2003 statistics indicate the top ten threats to the health and longevity of men as: heart disease, cancer, stroke, chronic obstructive pulmonary disease, diabetes, influenza and pneumonia, suicide, kidney disease, Alzheimer's disease and unintentional injuries, such as car accidents, poisoning and work related injuries. The good news is that the vast majority of these problems are preventable. Lifestyle changes such as regular exercise, a healthy diet, and avoiding risky behaviors such as smoking, excessive drinking and drug use, can alleviate many of these health threats. Another key factor in improving men's health status is getting them to the doctor for regular checkups, or when something is bothering them. It's an ongoing battle, but one that must be waged if headway is to be made in improving the well being of men.

QUICK BITES

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GETTING FIT FOR SUMMER

QUICK BITES: GETTING FIT FOR SUMMER

Hot summer months are upon us and you might be thinking, "Yikes! I've got to get my body ready for bathing suit season!" Well, sorry to break it to you, but the preparation really needed to start a long time ago. You can't spot tone or reduce a specific area, no matter how hard you try. Don't forget that from day one, a sound, effective fitness regimen should include:

1. high intensity cardio to burn body fat and jump-start your metabolism
2. a balanced strength program to improve your muscle contours
3. a nutritious eating plan to reduce your body-fat percentage and give you the energy necessary to perform vigorous workouts

Your Synergy fitness coach has surely drilled all this into your head and body by now. That being said, you can still fine tune your program and add some moves to increase the workload on those body parts most visible during the summer:

ABDOMINALS:

Your core is the center of everything—the power source for sport movements and the focal point in a bathing suit. Incorporating the core into every toning and strengthening exercise gives it a continual workout, but here's a move to give that all-important area direct focus:

Kneel in front of an exercise ball with your stomach against it. Roll over the top until your hands can touch the floor. Push off with your feet and walk your hands forward as the ball works its way down your body. Stop when it reaches your knees. Keep your body straight, legs together, stomach tight, elbows locked. Bend your knees and pull them underneath your body as you round your back. Your butt will go up in the air as you perform a prone "crunch." Pause, then extend your legs until your body is straight. Repeat 5 times, walk your hands back, bend your knees and squat or kneel as you reach the ground.

Beginner—do 3 sets of 5; Intermediate—increase to 5 sets; Advanced—perform a push up when your body is in the extended position, either before, after or in-between your "crunch."

UPPER BACK AND ARMS:

Nicely sculpted shoulders and arms are highlighted by tank tops and sundresses, so step up the toning efforts for your triceps and upper back. Here's a great move to help achieve optimal sculpting:

Find a surface that is between chest and waist height. Good choices are a railing, counter or bench press bar securely on the rack. Place your hands shoulder width apart, elbows straight,

and stand on your tip-toes with your feet about three feet back from the surface. Bend your elbows and bring your chest toward the surface you're leaning against. When your arms bend, the surface should line up with the middle of your chest. If not, adjust the position of your feet as needed. Squeeze your shoulder blades together as you come forward and tighten your upper back muscles. Keep your back straight, stomach tight, shoulders down. Pause, then exhale and push away, rounding the upper back/shoulder blades as your arms extend.

Beginner—do 3 sets of 10; Intermediate—increase to sets of 15 or 20; Advanced—have your trainer or workout partner press against your upper back during both phases of the movement.

THIGHS:

Summer gives your legs more visibility, and sleek, shapely thighs look great in shorts. Try adding this move for total leg toning with a twist:

Hold a medicine ball with both hands, and reach diagonally up to your left. As you reach, turn as if you're looking behind you, and allow your right foot to pivot, reaching up as high as you can, but keep your left foot planted. In a sweeping motion, bring the ball down and across to the outside of your right ankle, kneeling as you do this and pivoting the left foot as the right foot stays planted. Then stand up as you bring the ball diagonally back up and across reaching as high as you can to the upper left. Repeat ten times. Now do the same motion, starting from the upper right and going to the lower left. Repeat ten times as well.

Beginner—start with a 4-6 pound ball and instead of coming down to your ankle, sweep the ball to the outside of your knee; Intermediate—do 10 – 15 reps each way, 2 sets, sweeping down to your ankle; Advanced—increase the weight of the ball and the speed of your motion for more intensity.

Paul DeBellis, one of Synergy's top trainers, offers these suggestions:

- Mix it up – whether it's free weights, cables or machines, try the exercise standing, in a squat or lunge position, or even on one leg. This ups the workload, makes your motions truly functional and burns more calories.
- Try super-sets – pick two exercises that can be done near each other, and go back and forth between them without resting. You'll get more done in less time and increase your intensity with this type of interval training.

To schedule an appointment with Paul in Woodland Hills, call (818)444-5100.

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