



Three “hands-on” ways to get immediate relief from back pain

And which of modern medicine's go-to treatments just don't work

As far as I'm concerned, the science couldn't be clearer—the right treatment for back pain is a settled question. And it has nothing to do with drugs or surgery!

In fact, I was even invited to write an editorial about it that was published in the esteemed *Annals of Internal Medicine* nearly 15 years ago.

And from 2002 through 2007, I was principal co-investigator on one of the biggest studies on back pain ever conducted. It was funded by the U.S. Health Resources and Services Administration (HRSA). We gathered data from over 700 studies from around the world. We organized a consortium of over a dozen accredited chiropractic colleges and medical schools, such as Harvard Medical School and Jefferson University Hospital, and had committees of dozens of clinical researchers to review the results. And we concluded the same thing that “hands-on” healers had concluded a century ago, and that modern research had even concluded a decade before:

Drugs and surgery should be your last resort!

There are much more effective strategies for relieving both acute and chronic back pain—no matter what the cause. So, please, before you reach for that bottle of pain pills... before you subject yourself to an

endless cycle of x-rays and MRIs... and certainly before you sign that consent to surgery—please, consider the “alternatives” FIRST.

I'll tell you more about them in just a moment. But first, it's helpful to know why back pain is such a common problem. And believe it or not, it's a problem that has evolved right along with mankind.

The great evolutionary trade-off

Last month I told you about the importance of your gait (or how well you walk) as a key to health and longevity, especially as you get older. But it's not about *how much* you walk. It's about *how well* you walk. And indeed, it's the ability to walk upright that sets humans apart—but it's also what sets us up for a lot of pain as well.

Walking has been a key factor in the ability of humans to survive. In fact, the ability to walk upright on two legs is a distinctly human trait. And throughout human history, this trait has freed the hands so that, together with larger brains, humans could express their creativity and productivity to build our modern, “man-made” world.

One important trade-off is that in order to walk (and run) more effectively, the legs needed to be placed more narrowly together than they are on other, four-footed

mammals. This effect results in a narrower pelvis, especially at the hips.

However, humans have developed very large brains. So women need to have wider hips to allow infants to pass safely through the birth canal. (*Interesting side note:* Humans are the only animals who have such potentially difficult delivery, which is why we call it “labor.”)

But since you can't walk effectively if the hips are too wide, human infants were born at earlier and earlier stages of development, while the brain is still immature. So

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human young are the most immature creatures in the universe, and require a prolonged period of dependency—with implications for nuclear family, extended family, and human social organization as a whole.

Consider it a grand evolutionary biological compromise between upright posture, freeing the hands, and having bigger brains.

But there's another tremendous impact that walking upright has had on humans. One that millions of people struggle with every day—back pain.

From discomfort to disability

The spine provides structure to the entire body and helps protect the vital organs. It also provides the protective conduit for the “wiring” that runs to all the parts of the body—the spinal cord and the spinal nerves.

In animals that walk on all fours, the natural design of the spine is like a simple suspension bridge. But over time (millions of years, probably), humans began to stand erect. And the shape of the spine converted from a suspension bridge to a shallow S-shaped (or sigmoid) curve...to provide balance, structural support, and some “suspension” as well as “shock absorption.”

But as you can imagine, pounding away against hard surfaces while walking not only affects the joints of the legs, but the shock waves work their way up through the pelvis to the spinal column and the individual vertebrae. The result is degenerative arthritis, or osteoarthritis in the spine.

And just like in other joints, osteoarthritis of the spinal vertebrae can lead to stiffness. As well as contribute to bony outgrowths that can impact and irritate the spinal nerves that branch out from the spinal cord. These kinds of irritations are common in the arms and the legs

(“pinched nerves”). And on a chronic basis, they can cause the familiar condition of sciatica.

In the spine itself, the middle 12 vertebra are held relatively rigid by the ribs, but the seven cervical vertebrae in the neck, and the five lumbar vertebrae of the lower back have more degrees of freedom, and less support. Which is why lower back pain is such a universal source of discomfort in humans.

Of course, when there is a sudden rupture of a spinal disc (or cushion), or even a traumatic fracture of a portion of a vertebra, there can be sudden debilitating pain.

However, even without a sudden rupture or traumatic fracture, low back pain can be disabling. In fact, it's the most common cause of disability in working Americans (those who still have work).

But regardless of the origin of your pain, the treatments are the same.

The best ways to beat lower back pain, naturally

While it may seem counter-intuitive...one of the most important and simplest things to do when your back is sore is to actually keep moving! Gentle exercising, such as walking and swimming, are good for your lower back, provided you have not developed a disabling condition. In fact, not moving *enough* contributes to developing the discomfort in the first place.

And a new study conducted at the University of Tel-Aviv in Israel shows that walking is as effective as clinic-run rehabilitation programs for back pain.¹ And it only takes as little as 20 minutes twice a week.

In addition to walking, acupuncture (as featured in last month's issue of *Insiders' Cures*) is another extremely successful treatment for relieving low

back pain. Sir William Osler, who was a leading physician at the University of Pennsylvania, Johns Hopkins, and then Oxford, during the late 19th and turn of the 20th century recommended acupuncture for the treatment of lumbago (lower back pain) through the 3rd edition of his classic textbook of medicine in 1910. (Unfortunately, all mention of acupuncture disappeared in subsequent editions of his textbook issued after his death.)

But the No. 1, proven treatment for relieving back pain and restoring function, based on decades of indisputable science and data is...

Spinal manual therapy—or an “adjustment” carried out by a chiropractor or a physical therapist.

The original “bone setters” helped pave the way for “drugless healing”

The problem of low back pain was primarily responsible for the success of two entirely new medical systems that arose in the American mid-west during the late 19th century. First osteopathic medicine and then chiropractic medicine sprang up in regions where there were fewer doctors practicing.

There had been a tradition in both European and Asian societies (whose members emigrated to the American west) of folk healers and “bone setters” that offered “adjustments.” So osteopaths’ and chiropractors’ ability to “lay on hands” and physically manipulate the back and the body back into shape—and health—was a big attraction to suffering patients.

Another big attraction of these hands-on healers was that they promoted “drugless healing.” Which allowed people to avoid taking the drugs of the time. Some of which contained toxic compounds like arsenic, lead, and mercury. So, seeing

a chiropractor or osteopath wasn’t just about getting effective physical treatments. Opting for osteopathic or chiropractic therapy saved people from dangerous, unpleasant, and less effective (or completely ineffective and even toxic) regular medical treatments. A good plan for our present day as well.

Unfortunately, despite the evidence, the benefits of chiropractic therapy got overshadowed by the supposed “breakthrough” of back surgery. Meantime, back surgeons got into a crisis of their own...

Don’t wait until it’s too late

About 10 years ago, the problem of “failed back” surgery had become so common that in some states, insurers were refusing to provide malpractice insurance to doctors who perform back surgery.

I attended Congressional field hearings in Pennsylvania to determine whether or not patients should be able to obtain back surgery in the state at all. Gov. Ed Rendell testified in these hearings. We had met before, when I opened the C. Everett Koop Community Health Education Center in Philadelphia in 1996, and we spoke afterward. He was quite open to the idea that most patients with back pain do not require surgery, and should not get back surgery. If only the medical community was as open-minded.

Of course, it wasn’t a secret. In fact, it was known for a long time in the U.S. that acupuncturists, massage therapists, spinal manual therapists (chiropractors), and even herbalists were helping people with back pain.

Granted, it was usually after a patient had received an ineffective medical therapy. At which point it was often too late to be able to heal naturally.


And since the interpretation of

all research tends to be that we still need more research, the problem of low back pain has continued to be studied. Long after the average doctor and patient should have had the results they needed to guide sensible and safe treatment.

Even today, large hospitals are still doing studies proving that patients with low back pain can be sent directly for physical therapy the same day for successful relief—without even waiting to do an x-ray or MRI. (See the news brief “Back Pain? Skip the MRI!” that appeared in the December 2012 issue of *Insiders’ Cures* for more details.)

Having to wait for more studies just prolongs the agony.

So if you suffer from low back pain, skip the expensive medical tests and surgery. And stay as far away from steroid injections as you can! (For more on this topic, refer back to the *Daily Dispatch* from May 10th, titled “A shot in the dark.” You can view it on my website, www.drnicozzi.com).

You can get rapid relief from a licensed chiropractor, physical therapist, acupuncturist, or qualified massage therapist. And if you can, keep moving. 

Citations available online at www.DrMicozzi.com

Three herbal pain soothers worth a try

While they’re not a substitute for effective spinal manual therapies, there are several herbs that can help relieve pain. They include:

Boswellia serratta extract (gum)—400 -500 mg/day

Curcuma longa (root) (Turmeric)—200 mg/day

Withania somnifera (root extract) (Ashwaganda)—500 mg/day

Rheumatoid arthritis: One of medicine's most agonizing mysteries—UNRAVELED!

Plus 5 true complementary therapies that can help soothe your pain, starting today

Modern medicine botches a lot of things. But the way it treats rheumatoid arthritis may be one of the worst examples.

For centuries, rheumatoid arthritis (RA) has largely been a mystery. A very painful one at that.

The problem is, once again, that western medicine only focuses on ONE aspect of the disease.

Modern medicine has classified RA as an auto-immune disease. Of course, when I was in training during the 1970s, that's what the experts ended up calling a lot of diseases they simply didn't understand.

Today, we know there is indeed an immune component involved in

rheumatoid arthritis (RA). But, as is the case in many other auto-immune disorders, there's also a strong mind-body connection. And, more recently, yet another factor has come to light—the nervous system connection.

Finding real relief from this mysterious chronic condition requires treating all three aspects. Unfortunately, most doctors simply aren't.

That said, make no mistake: RA is a dangerous systemic condition that requires management by a competent rheumatologist. And the good news is, more and more doctors are recognizing that there are also complementary approaches that can help soothe RA. More on that in

just a minute. First, it's important to understand how it all ties together.

It's all connected

I've talked a lot about the mind-body connection here in *Insiders' Cures*. But I have to—because western science separated the two long ago. And that was—and is—a huge mistake. Other ethno-medical traditions in Asia and around the world never separated them. This is one reason these other medical traditions appear more “wholistic” to us today.

But even based on modern science, growing evidence shows the mind and body *are* linked—or “married.” For better or worse, in sickness and in health.

The heart of the matter

Rheumatic fever was relatively common through the mid-20th century. It's less common now...but it has left some lasting damage. You see, when a child came down with rheumatic fever, their immune system made antibodies to fight it. Unfortunately, these antibodies also attacked the heart valves. So the children would recover from the infection, but they would grow up with damaged heart valves (“leaky” valves) that didn't work.

When open heart surgery was first developed it was a blessing for adults who suffered from rheumatic heart disease. They could have their damaged heart valves replaced, either with valves harvested from pigs (as they seemed to provide the best match from nature), or mechanical valves.

Heart valve replacement was a very effective use of open heart surgery. However, by the 1970s only about 20 percent of open heart operations were being done for heart valve replacement. What kept the heart-lung bypass machines pumping was the new technique of coronary-artery-bypass grafts, whereby blood vessels are cut out of the legs to sew into the heart to bypass blockages of coronary arteries.

More recently, there are approaches where blocked coronary arteries are opened from within with stents and balloons, introduced through the blood vessels of the legs.

Unfortunately, as I described in *Daily Dispatches* last summer, there remain a lot of questions as to whether these dramatic but dangerous, expensive, uncomfortable procedures, actually have any real benefits in terms of reducing heart disease and mortality. But don't count on surgeons and “invasive” cardiologists to give them up any time soon.

It boils down to three interconnected components:

1. “Psycho”—the mind/brain connection
2. “Neuro”—the nervous system connection
3. “Immunology”—the immune system connection

In fact, today there’s an entire field of medicine called “psycho-neuro-immunology.” Which provides a tangible scientific approach, a physiologic model, and a growing body of data proving the mind-body connections.

Here’s how each component works...

For the “psycho” component, we know that the mind-brain is connected through thoughts, emotional feelings, and levels of consciousness to influence the body. But it’s not just a one-way street. The biochemicals, called neuro-peptides, that we associate as being in the brain, such as neurotransmitters, are actually present *throughout* the body. In fact, neurotransmitters are found in even greater quantities in the gut, for example, than they are in the nervous system.

Further, the production of specific hormones (which occurs throughout the body in the thyroid, pancreas, adrenal glands, and ovaries or testes) is controlled by specific neuro-peptides released by the pituitary gland of the brain. These hormones are released into the circulatory system and carried to all parts of the body in the blood.

For the “neuro” part of the equation, the nervous system originates in the brain and spinal cord as well. Nerves also travel to all parts of the body, both sensing and influencing all tissues at both voluntary (conscious) and involuntary (unconscious) levels.

But now there’s a third piece being added to the puzzle—“immunology.”

Like neuro-peptides and nerves, the immune system is also present throughout the body. Immune cells (white blood cells) travel throughout the blood. And there are specialized concentrations of these cells in the adenoids, tonsils, spleen, appendix, and throughout the gastrointestinal tract (without fully understanding their role, 20th century surgeons considered them all to be expendable). They are also concentrated in the thymus gland during childhood.

When you look at how each of these three components impacts the body from head-to-toe on their own...it’s not hard to see how they are all inter-related as well. The psycho-neuro-immunology-connection becomes quite apparent.

So what causes rheumatoid arthritis?

One way the immune system works is by making antibodies that match to antigens on invading bacteria and viruses. Antigens are foreign substances that stimulate the immune system. The antibodies attack the antigens and then white blood cells can destroy the microbes.

These microbial antigens are often made up of proteins and/or polysaccharides that are commonly found in nature. These are some of the same proteins and polysaccharides that exist in normal, healthy biological substances as well. Unfortunately, when the immune system can get out of synch, some of the antibodies it makes against microbes get confused and cross-react with certain normal tissues. Thus, the immune system can attack our own bodies—causing an “auto” immune disease.

RA is the result of your immune system attacking the cartilage in your joints. This confusion can stem from a true bacterial infection, like “rheumatic fever” (see sidebar on page 4). Or it can appear more mysteriously from a stress-related immune imbalance—this is the mind-body-immune connection.

While there is accordingly a mind-body component, caution must be exercised with rheumatoid arthritis. It causes real, physical damage with serious complications that require experienced medical management. The best thing you can do is to consult a rheumatologist who can help determine which of the drugs for RA appear to be safe, effective, and appropriate for you. And whether there older ones that are more reliable (as in the case with blood pressure medications).

That said, doctors and patients alike are realizing that there are also natural approaches you can take to help alleviate RA. Especially when it comes to addressing the mind-body connection.

True “complements” to RA treatment

A wide range of “mind-body” approaches can reduce the stress that inevitably accompanies the pain with which RA patients struggle on a daily basis. For those best suited to your emotional type take the short quiz featured on www.drnicozzi.com, or in my book with Michael Jawer *Your Emotional Type*.

Gentle movements—as in traditional yoga or tai chi—can also be helpful. Likewise, swimming can provide just the right kind of low-stress movement and physical exercise. Light massage, low-impact exercise, and just getting outdoors


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(walking, riding a bike, or light gardening) can also be good.

For the pain itself, acupuncture can often work wonders.

In China and India, rheumatic conditions are associated with “cold and damp.” So while the inflammation may seem hot, it actually helps to seek warmth and avoid cold and damp circumstances and climates. In fact, one ancient Ayurvedic treatment involves

immersing the joints in warm sand. This can easily be accomplished on a sunny beach (while also providing you, and your bones and joints, with some much-needed vitamin D).

Whatever complementary therapy you decide to try, don't go it alone. The best way to ensure you get the most relief is to work with a rheumatologist who can recommend the best complementary therapies for your particular needs. 

RA strikes rich and poor alike

During ancient and historic periods, many infectious and inflammatory diseases were associated with lower socio-economic status. But it was noted that even members of the elite came down with “rheumatic” conditions—showing there's “rheum at the top.”

NEWS BRIEF

Green tea and Alzheimer's disease:

Knowing when to hold them, and when to fold them

You've probably heard about EGCG (or epi-gallo-catechin-3-gallate) before. It's the chemical that gives green tea it's impressive health benefits. In fact, a recent study in Egypt found that EGCG can cause remission of cancer (see “Egyptian researchers cure cancer with the help of two herbal remedies” in the September 2012 issue of *Insiders' Cures*). Now another new study shows EGCG may also help fight Alzheimer's dementia.

Researchers found EGCG prevents the abnormal folding of specific proteins in the brain.¹ The grouping of these proteins, called “metal-associated amyloids,” is thought to play a role in the development of Alzheimer's dementia and other degenerative diseases of the nervous system.

All proteins are made up of chains of amino acids. In a longer protein, the amino acids in the chain interact with each other so the protein is *folded* into a certain shape.

The folded shape of a protein is critical to how it works in the body. Consider the protein hemoglobin, for example. It has the important role in binding the metal iron, and carrying oxygen in the blood. That function, the ability to carry iron, is based on its folding, and resulting shape (not just its chemical composition). In fact, Linus Pauling received his first Nobel Prize for discovering how protein folding occurs to create the correct shape of hemoglobin.

When genetic variations of the hemoglobin molecule substitute specific amino acids in the chain, it causes the protein to fold into different shapes. These changes cause diseases such as sickle cell anemia, Thalassemia, and others.

So, as I've said before, just understanding a molecule's chemical content is not enough. You have to understand its folding and shape to understand its role in the body. And it's not enough to measure the quantity of biochemical in the blood; we also need to know their quality—literally what *shape* they are in.

In this study, EGCG prevented formation of amyloid groupings and even broke down existing groups in proteins that contain metals (specifically copper, iron, and zinc). As with the folding of the hemoglobin protein, the folding of these amyloid proteins to contain metals appears critical to whether or not they cause disease.

The researchers pointed out that many studies are investigating small molecules and metal-associated amyloid proteins in Alzheimer's dementia—but most are looking from a limited perspective. And most are also overlooking the dementia-fighting abilities of natural products like green tea.

By remembering some biochemistry 101, it looks like these chemists, biochemists, and biophysicists have found a new and promising approach.

Citations available online at www.DrMicozzi.com

The Great Coconut Craze

Everything you need to know about what coconuts can—and CAN'T—do for you

I received a question from a reader recently regarding the health benefits of coconut oil. Indeed, coconut oil and, more recently, coconut water are taking their turn in the spotlight of the natural product industry.

And like any new industry darling, there are all sorts of wild claims about what coconut can do for you. Some of them more accurate than others. Will coconut help you shed 50 pounds by summer? Probably not. But coconuts do have some impressive—and surprising—health benefits.

Nature's perfect IV solution

During the late 1970's on the southern island of Mindanao, while tracking down the origins of a parasitic tropical disease, I met with an insurgent group known as the "New Peoples' Army." They had built "bamboo hospitals" in the jungle and were using coconuts as intravenous drips. Which isn't as crazy as it sounds. This use was also known in the South Pacific during WWII.

You see, the water naturally present inside coconuts contains sugar and electrolytes and mixes easily with human blood. And the hard shell surrounding the water keeps it sterile until it's opened.

Coconut water's electrolyte content is one of the attributes that has propelled it to recent fame as well. There are dozens of different coconut water beverages on the market now. They're being touted as a healthier "sports drink" for athletes. (Of course, I still believe red bush tea is the best beverage to give your body the hydration it needs for peak performance—whether you're an

athlete or an average Joe. To read more about it, refer back to my report *Miracle at Red Bush*, which you received when you subscribed to *Insiders' Cures*. I recommend RedJoe brand water-soluble red bush powder from ELEV8. Call 941-623-8811 or 941-487-8008 to order.)

Of course, long before coconut water was trendy, **coconut "milk"** was a common ingredient in Indian, Southern Chinese, Thai, Burmese and Vietnamese cuisines. Coconut milk is made by soaking shredded, dried coconut "meat" (or copra) in water.

Asian cultures use it to add healthy essential fats and some protein to their carbohydrate-rich diets. Coconut milk also neutralizes the bitterness of the fresh herbs and vegetables that are staples of these cuisines.

The reason that the interior of the coconut has all these nutrients (electrolytes, essential fats, protein) is to support the growth of a new coconut palm when it washes ashore on sandy soil after an ocean journey of potentially thousands of miles (see the sidebar at right).

But the real coconut "superstar" these days is **coconut oil**.

The controversial coconut cure-all

Of course, as you might remember, back in the 1990s there were all sorts of warnings against coconut oil.

In the early research studies, coconut oil raised the cholesterol levels of laboratory animals. Of course, the medial research complex and consumer "watch dog" groups were quick to pounce on this detail.

And to point to coconut oil's high saturated fat content as the culprit. But these alarms were based on misunderstanding of natural products and nutrition, as well as the actual studies that were done.

Those early studies used chemically altered, partially hydrogenated coconut oil. Partial hydrogenation creates the toxic trans fats that we now know are the real killers. It also destroys many of the beneficial natural essential fatty acids, antioxidants and other components in virgin coconut oil.

Most of the fats in virgin coconut oil are saturated. But as I've pointed out before, science shows that

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Coconuts' early sea voyage

The first record of the coconut palm in the west was by an Egyptian writer Cosmos, who reported seeing them in India and Sri Lanka. Marco Polo saw them in Indonesia in 1280. When Portuguese maritime explorer Vasco da Gama sailed around the Cape of Good Hope in South Africa in the 15th century he brought back what would be the first coconuts in the Atlantic. Eventually, coconuts made it from Cape Verde in South Africa to Puerto Rico in 1549.

Botanists have concluded that coconuts originated in the Malay-Indonesian region of southeast Asia and probably floated on their own to the Pacific coast of Central America before the Spanish got there.

saturated fats are not the villains they were once made out to be.

Plus, it turns out, not all saturated fats are created equal. Different types of saturated fats behave differently.

The secret to coconut oil's success

The main saturated fat in coconut oil is called lauric acid. Lauric acid does increase cholesterol levels in the blood. But it increases levels of both “good” HDL, or high-density lipoprotein, and “bad” LDL, or low-density lipoprotein. So it doesn't negatively affect the overall ratio of the two. And the role of cholesterol

in heart disease and mortality is questionable at best anyway.

But aside from its effects on cholesterol, a number of additional health claims are being made for lauric acid. According to proponents, it's yet another wonder substance with possible antibacterial, antimicrobial, and antiviral properties. Which could (they claim) combat H.I.V., clear up acne, and speed up your metabolism. However, most researchers—myself included—remain skeptical.

While debate continues about the internal benefits of coconut oil, it

does have healthy effects on skin and hair. In fact, lauric acid is already an ingredient in many hair products. It helps protect keratin, the protein found in hair.

And applying coconut oil to the skin helps keep it moist, but doesn't interfere with absorption of sunlight for vitamin D.

The bottom line? Coconut oil certainly isn't harmful (in moderation). And it does have some nice cosmetic benefits. But it remains uncertain whether coconut oil is actively beneficial in the way that olive oil, for example, is proven to be. **TC**

NEWS BRIEF

Urgent warning for men: Beware “long-acting” chronic pain medications

An estimated 4.3 million Americans use opioids on a daily basis for pain. Of course, there are a number of natural alternatives for managing pain (as I've discussed both in this issue and in previous editions of *Insiders' Cures*). But if you do take an opioid-based pain reliever (Oxycontin or Vicodin, for example), at the very least, opt for a short-acting version (taken every 4-6 hours) instead of a long-acting one that you take every 8-12 hours.

This may sound like a strange recommendation. And, in theory, long-acting pain medications seem like a good idea: longer relief, less medication.

Indeed, doctors were told for years that these longer-acting opioids would be somehow safer, more effective, and less subject to abuse. Yet no study has been able to show such benefits. However, new research has found a substantial difference between the short-acting forms and the long-acting versions. And the results are, well...painful.

A large study of 1,500 men who are taking pain pills is currently underway. And researchers have already determined that the long-acting medications are causing five times the rate of low testosterone.¹

Fully three-quarters of the men on long-acting pain medications had low-T compared with only one-third using short-acting. After controlling for body mass index, the risk of low-T was 4.8 times greater for the men taking long-acting medications. The researchers didn't attempt to explain why pain medications could cause low-T.

But Dr. Andrea Rubinstein, lead study author, said that “We are now finding that long-term use of opioids may have important unintended health consequences.”

Unfortunately the unintended consequences of “low-T” can snowball. Low-T in turn causes decreased muscle mass, bone density (osteoporosis), cognition (dementia), mood (depression), libido and generally poor quality of life. All of these are in turn associated with chronic pain as well, leading to a greater need for pain medications—a vicious cycle.

We have commented before on the generally poor quality and status of politically-based (rather than science-based) pain medicine (See the Premier issue of *Insiders' Cures* for more on that topic).

These latest results regarding what should be nature's most effective form of relief are painful indeed. But for many conditions you can skip the opioids and go with one of the other natural remedies I discussed a few months ago in the March 2013 issue. If you don't still have your copy, you can download and view it for free by visiting the Subscriber section of my website, www.drnicozzi.com.

Citations available online at www.DrMicozzi.com