

## New shockwave therapy is effective in pain treatment

The Bristol Hospital Center for Orthopedic and Spine Health is now offering, non-invasive treatment for musculoskeletal pain. This new shockwave therapy technology utilizes pressure waves and is specifically known as Extracorporeal Pulse Activation Technology (EPAT).

This is a very effective treatment in which pressure waves stimulate metabolism, enhance blood circulation and accelerate the healing process. These pressure waves help regenerate and heal damaged tissue.

Shockwave therapy is for those who are experiencing chronic musculoskeletal pain that impairs mobility or quality of life. We use it to treat pain of the:

- Neck
- Shoulder
- Back and chest
- Upper extremity
- Lower extremity
- Foot and ankle
- Myofascial trigger points

The benefits of a therapy like this are often experienced after three treatments. Each treatment takes about five or 10 minutes depending on the pain disorder that we are treating. I have had patients report immediate pain relief after the treatment although it usually takes up to four weeks for the pain relief to actually begin.

Shock wave therapy reduces pain and restores full mobility. It also can improve a patient's quality of life and 80 percent of those treated report to be pain free and/or have experienced significant pain reduction. It also is cleared by the Food and Drug Administration and there are virtually no risks or side effects. Some of the other benefits of include:

- Non-invasive
- No anesthesia
- No risk of infection
- No scaring

- Now downtime
- Faster, easier healing

As part of this treatment, I apply a coupling gel to the specific treatment area and then the waves are released via the EPAT device and applicator which I move over the treatment area in a circular motion. This treatment takes place in the office and is more effective than many traditional methods including surgery which can include complications and a lengthy recovery time. It's been my

experience that patients can immediately bear weight and return to normal activity right after the procedure. Taking time off is not necessary. There is no downtime for recovery from these treatments.

Insurance typically does not cover shockwave therapy. However, there can be significant savings when compared to paying deductibles, multiple co-pays and other non-insurance covered surgery and rehabilitation. But this non-invasive option will help those who are eager to return to work or normal activities in only a few days. For more information on this procedure and the associated costs, please call the Bristol Hospital Center for Orthopedic and Spine Health, 860-585-3333.

*Podiatrist Peter A. Bellezza, DPM, MS, is a member of the medical staff of the Bristol Hospital Multi-Specialty Group and Bristol Hospital's Center for Orthopedic and Spine Health. Dr. Bellezza has a special interest in general podiatry, foot and ankle reconstruction, total ankle replacement, and sports medicine. He is accepting new patients and is located conveniently at offices in Bristol, New Britain, and Southington. To schedule an appointment, please call 860.585.3333 or visit [bristol-hospital.org](http://bristol-hospital.org).*

### HEALTHY LIVING



Dr. Peter A. Bellezza

# Aspirin disappoints for avoiding first heart attack, stroke

By **MARILYNN MARCHIONE**  
ASSOCIATED PRESS

Taking a low-dose aspirin every day has long been known to cut the chances of another heart attack, stroke or other heart problem in people who already have had one, but the risks don't outweigh the benefits for most other folks, major new research finds.

Although it's been used for more than a century, aspirin's value in many situations is still unclear. The latest studies are some of the largest and longest to test this pennies-a-day blood thinner in people who don't yet have heart disease or a blood vessel-related problem.

One found that aspirin did not help prevent first strokes or heart attacks in people at moderate risk for one because they had several health threats such as smoking, high blood pressure or high cholesterol.

Another tested aspirin in people with diabetes, who are more likely to develop or die from heart problems, and found that the modest benefit it gave was offset by a greater risk of serious bleeding.

Aspirin did not help prevent cancer as had been hoped.

And fish oil supplements, also tested in the study of people with diabetes, failed to help.

"There's been a lot of uncertainty among doctors around the world about prescribing aspirin" beyond those for whom it's now recommended, said one study leader, Dr. Jane Armitage of the University of Oxford in England. "If you're healthy, it's probably not worth taking it."

The research was discussed Sunday at the European Society of Cardiology meeting in Munich. The aspirin studies used 100 milligrams a day, more than the 81-milligram pills commonly sold in the United States but still considered low dose. Adult strength is 325 milligrams.

### Who's really at risk?

A Boston-led study gave aspirin or dummy pills to 12,546

people who were thought to have a moderate risk of suffering a heart attack or stroke within a decade because of other health issues.

After five years, 4 percent of each group had suffered a heart problem — far fewer than expected, suggesting these people were actually at low risk, not moderate. Other medicines they were taking

to lower blood pressure and cholesterol may have cut their heart risk so much that aspirin had little chance of helping more, said the study leader, Dr. J. Michael Gaziano of Brigham and Women's Hospital.

**"If you're healthy, it's probably not worth taking it."**

One percent of aspirin takers had stomach or intestinal bleeding, mostly mild— twice as many as those on dummy pills. Aspirin users also had more nosebleeds, indigestion, reflux or belly pain.

Bayer sponsored the study, and many researchers consult for the aspirin maker. Results were published by the journal Lancet.

### Aspirin for people with diabetes?

People with diabetes have a

higher risk of heart problems and strokes from a blood clot, but also a higher risk of bleeding. Guidelines vary on which of them should consider aspirin.

Oxford researchers randomly assigned 15,480 adults with Type 1 or 2 diabetes but otherwise in good health and with no history of heart problems to take either aspirin, 1 gram of fish oil, both substances, or dummy pills every day.

After seven and a half years, there were fewer heart problems among aspirin users but more cases of serious bleeding, so they largely traded one risk for another.

### Fish oil results

The same study also tested omega-3 fatty acids, the good oils found in salmon, tuna and other fish. Supplement takers fared no better than those given dummy capsules — 9 percent of each group suffered a heart problem.

"We feel very confident that there doesn't seem to be a role for fish oil supplements for preventing heart disease," said study leader Dr. Louise Bowman of the University of Oxford.



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