

ASK THE PROFESSIONALS

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Q: My husband and I are divorcing. He says he wants the kids half time but I think it is only so he won't have to pay child support. Should I consider it or should I fight him for sole custody?

A: Children are always better off with two parents as long as both parents are able to do an adequate job of parenting. Assuming that you both love your children, you do not both have to agree with everything the other party does. Children can understand that there are slightly different rules at each parent's house. When parents fight it is the children who suffer because they lose out on the loving relationships with both parents.

The key to a good divorce that minimizes any damage to the children is parents who treat each other with respect and dignity. Children suffer from reduced contact with either parent and so although you may not be able to negotiate with each other in order to save the marriage, you have an obligation to work together as parents. The court system is slow, overburdened, expensive and not always responsive. It is unfair in most cases to think that fathers do not love their children and cannot parent. Most fathers who want a shared custody plan that gives them approximately equal time with their children are not really only wanting control or to avoid paying support. They want to love and parent their children in a meaningful way. It is better, in my mind, to spend your efforts working out a good parenting plan that includes how you will parent together so that the children experience the love and consistency of both parents, than to spend the efforts and money fighting about it. I have often helped parents mediate good forward thinking parenting plans that I am confident benefit the children and allow them to grow into confident, secure adults. If you and your husband would like to, I am confident that together we can accomplish the same for your children.

"HELPING YOU HELP YOURSELF"



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Q. What causes an ingrown toenail, and how can it be treated?

A. Ingrown toenails are caused by impingement of the skin along the margins of the nail by the nail plate. Some ingrown toenails are chronic, with repeated episodes of pain and infection. Pain can be present without infection, and occasionally infection is present without pain. The usual signs of infection include: redness (erythema), swelling (edema), increased warmth (calor) and pain (dolor).

Causes:

- Improper trimming of toenails.
- Tight fitting shoes which compress the toes together.
- Abnormally shaped nail plate.
- Other toenail deformities (e.g. excessively thick nail plate)
- Trauma to the nail plate or toe.

What the Chiropractor May Do:

Ingrown toenail treatment may need to be done on a routine basis. Your chiropractor may perform any one or combination of the following procedures:

- Elevate the end of the nail plate to prevent impingement on the soft tissues.
- Prescribe antibiotics or special foot soaks.
- Surgically correct a chronic ingrown toenail.

What You Can Do:

- Cut the toenail straight across, and leave slightly longer than the end of the toe.
- Avoid tight fitting footwear.
- If discomfort develops, try soaking the foot in a basin of warm water 2-3 times a day.
- If you are diabetic or have poor circulation, the water should never be more than 95 degrees Fahrenheit.
- An infected ingrown nail requires prompt professional attention. Contact your chiropractor or physician immediately.



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WHAT YOU DON'T KNOW ABOUT THE FLU SHOT COULD HURT YOU

Before the holiday season, this time has come to be known as the "flu season". People of all ages have been told to make sure they get their flu shot.

While there is no question that the flu is a substantial health risk, many questions have risen in regards to the flu shot. Recently study after study is coming out revealing serious concerns over the safety of these flu vaccinations, the lack of any long term safety studies and whether or not these shots are even helpful or not.

Here is what you should know.

Flu shots contain toxic agents.

Flu shots contain ingredients from aluminum, formaldehyde, thimerosal (mercury), ethylene glycol and other toxic substances that are dangerous at any dose and deadly if at high doses.

In addition to these substances, the flu vaccine is prepared from the fluids of chicken embryos inoculated with the specific type(s) of influenza virus that supposedly protects against the strains believed to be the most likely to be prevalent during that particular flu season. Reports over the last few years, however, have uncovered that the strains in the vaccine are typically not the strains present for that season. Not very encouraging considering the potential health dangers you are opening yourself and your children to from these toxic chemicals.

The flu can be deadly. In fact, building and maintaining immunity to unwanted infection, flu, cancer, and other infectious diseases is always a critical matter in all seasons. Yet, the human body can not build healthy immunity by being exposed to neurotoxic poisons like mercury, aluminum, formaldehyde and DNA from animals.

Additional reasoning for flu shot hazards and their ineffectiveness is that vaccines bypass the natural defensive capabilities of the liver, kidneys, colon, lymphatic system and the immune system and deliver toxic waste directly into the body. Your body does not know what to do with mercury, aluminum, formaldehyde and chicken embryos when they are dropped right into the blood stream. Guillian-Barre, autism, temporary Multiple Sclerosis-like illness, breathing problems, hoarseness and death have all been reported as side effects from the flu shot. Not to mention that many people who receive the flu shot immediately get the flu.

Alternative to the Flu Shot

This short article is not designed to give you medical advice on whether or not to get a flu shot. But know this: your immune system is the only thing that prevents you from being overcome by infection and a host of other chronic illnesses. Therefore supporting and enhancing it - not manipulating it - is extremely important.

To find out more on this topic and the alternatives to the flu shot, email me at drabarow@symptico.ca and I can send you the rest of the information that could not fit in this month's Ask the Pros.

Halton Hills Speech Centre

Division of M. Karen MacKenzie Steiner Speech Language Pathology Professional Corporation

"Your Caring Partners..."

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Q: My child is having difficulty with his school work. A teacher suggested that he may have a speech and/or language difficulty. What types of speech and language difficulties affect school-aged children and who can help?

A: Learning in school takes place through communication. Speech and language skills are essential to learning. 8 - 12% of school-age children have some kind of speech or language difficulty. The following are some of the speech and language difficulties that may affect a school-age child: Speech sound disorders are difficulties in saying sounds in speech. Language disorders may include understanding what they hear as well as expressing themselves using words and sentences. Cognitive communication disorders are difficulties with thinking skills. This may include memory, reasoning, perception, judgement, imagination and awareness. Stuttering or fluency is a disruption in the flow of speech. This may include hesitation and prolongation and repetition of sounds and words. Voice disorders are concerned with the quality of one's voice which may include hoarseness, volume difficulties (too high or too low) and nasality. Children with communication disorders often do not perform at grade level. They struggle with reading as well as understanding and expressing themselves using language. They may avoid going to school, perform poorly on tests and show poor judgement. A qualified Speech-Language Pathologist can help identify if and what type of speech and language difficulty you child is having. Early identification and intervention are key to helping your child. If you suspect your child may have a speech and/or language difficulty contact your local Speech-Language Pathologist.



E.C.C.
Laser & Cosmetic Centre
Judith E. Finn - Director



25 Years
Experience

HOW TO GET AN INSTANT FACELIFT

A recent advance in technology delivers the next best thing to a facelift with no downtime and no discomfort.

The original Thermage procedure that has been used in the industry for years has now been improved. The improvement, according to Judith Finn, Director of E.C.C., is the cooling burst delivered by the redesigned Thermage ThermoCool NXT System. The client is kept comfortable while the heat that facilitates collagen remodeling can penetrate more deeply, with longer lasting and noticeable results.

Clients get a chance to see the transformation during the Thermage procedure by the Dermal Therapist.

It takes from three to six months for the collagen to rebuild and the optimum results to become apparent. Each month during that time, the client visits the centre for follow-up assessments and a photograph to document the progress.

Before any treatment is offered at the Milton clinic, clients are assessed during a consultation and then the appropriate procedure is recommended.

E.C.C. Cosmetic and Laser Centre will be spreading the word about the ThermoCool NXT System with a special evening at the clinic on **Thursday, October 29 from 6 to 8 p.m.** A clinical representative will be on hand to talk about the system. Contact the clinic at 905-864-0000 to register for this event.

For more expert advice and information about the services at E.C.C. Cosmetic and Laser Centre, visit www.dailywebtv.com and click on Judith Finn in the Meet the Experts feature. Learn something new every day at DailyWebTV.com with expert trips and ideas in four-minute videos.

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OCTOBER IS VISION AWARENESS MONTH - THE INFLUENCE OF HEALTH ON VISION

WHAT IS PERCEPTION AND THE INFLUENCE ON VISION AND HEALTH?

Vision is a perceptual process which does not come from just the eyes, but from an interpretive process of all methods of sensing the environment and therefore an interpretive psychological experience. The reception is equally projected and interpreted by the brain and body. Vision is a sense which is a very narrow band of "seeing" in the entire spectrum of vibration detection (electromagnetic spectrum of light), and is therefore not by itself influenced by what you see. Vision, and what is interpreted is influenced by the other senses, and the energy of the emotional response can influence the person's sensory experience, and interpretation of what they thought they saw. For reception, and perception to occur, the brain and body (body brain) must interpret through experience, inference, and deduction in order to react with action. In order to receive the brain must also project, and thus the perception is vulnerable to a possibility of illusion, and distortion. The distortion can exist for a lengthy enough period of time to be charged up with emotion (which is energy in motion) to actually produce physical responses with energetic charge which can change the form of the body. This is the memory engram stored as a holographic experience in the muscles, and tissues of the body. Thus the perception and reception of an interpreted experience can influence the body physiology to produce an imbalanced condition or disease. This explains the development of vision conditions such as near sightedness, astigmatism, strabismus (crossing eyes) and other functional development disorders. Glaucoma, which I have discussed in previous articles, is as well a product of perceptual aspects which involves psychology, perception, and physical form. Aspects of body chemistry are affected, as well as human behavior. This explains the functional development of refractive errors, or vision errors such as nearsightedness, or myopia.

Statistically, if no parents have a vision disorder requiring glasses, then the chances of a child wearing glasses is only 10%. If there is one parent who is near sighted, then the chances of the child being near sighted is 20-25%; if both parents are nearsighted, then the chances of the child being nearsighted is 30-40%. So the genetic variation is small. In fact most nearsighted development is a functional development which becomes a learned behavior. Such individuals react with uncertainty in seeing, and are in a way 'energetically charged' to become physically nearsighted. In other words the inability to see at a distance is developed from a way of thinking which involves the emotional energy associated with a memory of a perceived negative experience. (negative memory engram).