We Welcome You to EMMC.

Health Assessment
A Comprehensive Metabolic Approach with Principles of Integrative Medicine

A metabolic perspective on Cardiovascular Disease, Diabetes, Thyroid Dysfunction, Osteoporosis, Peripheral Neuropathy, Autonomic Neuropathy, Chronic Pain, and more.

ENDOCRINE METABOLIC MEDICAL CENTER
Making Medicine Better

350 Cambridge Avenue, Suite 250, Palo Alto, CA 94306
650-566-9810 | www.endocrinemetabolic.com
What sets our center apart?
We are a clinic that approaches patient care with principles of integrative medicine and a focus on disease prevention. This unique perspective combines conventional forms of medicine with natural treatment options. It is an approach designed to promote well-being through non-invasive forms of treatment, but most importantly, it is an approach designed to locate disease before you ever have symptoms. At EMMC, patients are trained, empowered, and encouraged to take control of their own health in cooperation with the latest technology, treatment, and education. We help patients who are diabetics, who have weight control issues, hypertension, inflammatory conditions, or who are seeking non-surgical alternatives.

What is metabolism?
Metabolism is the process of chemical changes in living cells by which energy is provided for vital processes. The endocrinologist as metabolic specialist looks at all systems and looks at the interplay of all vital body processes.

Aging is the incomplete transfer of DNA from a mature cell to the new cell offspring. Aging cells have slower activities and are poor at making new material. When metabolism in each system slows, the process has an accumulative impact.

There are three metabolisms that we can influence through treatment. The Krebs Cycle, The Homocysteine Pathway, and The Nitric Oxide Pathway.

• The Krebs Cycle ~ intracellular metabolism runs energy production through glucose utilization.
  Most active in the liver, it is the first well-described pathway for energy production where insulin plays a major role.

• The Homocysteine Pathway ~ This pathway reacts to illness and genetics with increasing amounts of blood levels of homocysteine. It is best known for adverse reactions on the cardiovascular system. Vitamin B6, B12, and folic acid are major influences in keeping homocysteine levels normal.

• The Nitric Oxide Pathway ~ This pathway works in many tissues but when its description won the Nobel Prize in Medicine in 1998 for its effect on the lining of the blood vessels, it turned the whole concept of the origins of cardiovascular disease upside down. Improved vascular tone, decreased general and local blood pressure, and the reversal of features of arteriosclerosis and atherosclerosis with oral ingestion of L-arginine has made the management of vascular disease quite simple and very inexpensive.

When these metabolisms are not working properly or are declining, they can manifest through many conditions.

**Diabetes / Accelerated Aging**
- Type I
- Type II
  - Cardiovascular complications
  - Circulatory complications
  - Gastrointestinal complications
  - Erectile dysfunction
  - Neuropathies (peripheral & autonomic)
  - Metabolic syndrome
  - Polycystic ovarian syndrome “PCOS”
  - Delayed wound healing

**Thyroid Conditions**
- Hashimoto’s
- Hyperthyroidism
- Thyroid dysfunction
- Fatigue / low energy

**Bone Disorders**
- Osteoporosis
- Osteomalacia
- Osteopenia

**Primary Care**
Although Dr. Prendergast’s practice is a specialty practice, he also tends to what we normally think of as “primary care responsibilities”.
- Vague generalized symptoms
- Infections
- Flu/cold

**Metabolic Syndrome**
- Syndrome “X” (pre-diabetes)
  - Increased weight
  - Increased blood pressure
  - Increased glucose readings “IGT” or “IFG”
  - Insulin resistance
  - Polycystic Ovarian Syndrome “PCOS” ~ obese / 25-40 years of age
Dr. Joe's Metabolic Workup:
Below are the tests that help us evaluate all contributing factors to disorders of abnormal metabolism.

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<th>Laboratory Procedures</th>
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<td>Plaque test</td>
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<td>Testosterone, estrogen</td>
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<td>Celiac Disease antibodies</td>
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Your first experience as a new patient
“Patient empowerment is probably the most philosophically exciting idea to emerge in medicine in recent years. Patients can, and must, be educated to play the primary role in maintaining their own health. I have seen it work and have had the great satisfaction over the past 30 years of helping thousands of individuals live full and active lives.”

~ J. Joseph Prendergast, MD, FACP, FACE, and Founder of EMMC.

Our philosophy at Endocrine Metabolic Medical Center (“EMMC”) is to serve and empower our community through excellent patient care, education, and the latest advances in technology.

Many components come into play when providing an outstanding standard of care. We ask that you help us give you the value you deserve.

Before a new patient exam we ask that you bring with you the following information:

- Family medical history
- Personal medical history
- Current testing results
- List of current medications or the meds themselves
- What you want to gain from this experience

Financial Policy
We ask that patients pay for services at the time they are rendered. Our office does not accept Medicare. The decision to stop accepting Medicare and insurance was a difficult one, but one we were forced to make to allow us to give patients the best, most advanced care without interference from non clinical personnel or people whose motives were financial and not in the best medical interests of our patients.

Lynn Camacho is our clinic director and our financial expert. If you have any questions or concerns regarding the cost of your treatment, please request to speak with Lynn. She can also be reached via e-mail at

lynn@endocrinemetabolic.com

What can you expect from your first visit?
On your first visit a patient can expect to meet with Dr. Prendergast for a 1 hour consultation to discuss your history, why you have come to EMMC, symptoms, concerns, and current medications. If necessary, medication may be prescribed for you during the initial visit.

Meet EMMC’s Team:

J. Joseph Prendergast, M.D., FACP, FACE, Medical Director; Lynn Camacho, Clinic Director; Raquel Pryszczuk, Medical Assistant; Manuel Sanchez, Medical Assistant; Ivonne Gamez, Front office administrator; Penelope Mayes, RN and Diabetes Educator; Evelyn D. Castillo-Profeta, RN and Diabetes Educator; Galdina Miranda, Medical Assistant.
Medication Protocol

Different protocols will use different combination of medications. Your specific protocol will be determined by Dr. Prendergast. Your age, history, and what you hope to gain from your treatment will also be evaluated before determining a medication protocol.

Medication detail such as how it works, side effects, success rates, recommendations, proper transition (if you are beginning a new medication), and medication costs will be reviewed with you by the EMMC team. These are all important components of excellent care, and we encourage you to ask questions to ensure that you are clear and comfortable with your medication regimen.

You are encouraged to call or e-mail EMMC and ask to speak to Penelope Mayes, RN, Evelyn D. Castillo-Profeta, RN, or Dr. Prendergast with medication concerns.

Evelyn, Penelope, and Dr. Prendergast can be reached through the general office phone line or via email:

evelyn@endocrinemetabolic.com  
penelope@endocrinemetabolic.com  
drp@endocrinemetabolic.com

What is a full metabolic assessment?

At EMMC a metabolic assessment is considered a foundational element in a comprehensive health evaluation. Due to many factors, such as genetics, aging, lifestyle, smoking, and diet, your metabolic functions can become compromised.

Based on the information we gather during your consultation, Dr. Prendergast will recommend the proper non-invasive testing to assess the status of your metabolism. Testing may involve going to a lab to give a urine sample or have blood work, or it may mean special types of testing that may be done at EMMC and can vary per individual.

Why is this important to you?

Without treatment and proper function of our organs, it is impossible to have optimal health.

The direct measurements of testing can reveal the existence and extent of compromised organ function and can detect early warning signs of a multitude of health disorders. Note that we say warning signs. We now have tools to assess the risk or presence of warning signs for our most feared complications such as heart attack and stroke. Not only can we know the risk through painless testing, we can take action to help us reverse, delay, and slow down conditions.

If you are concerned with any of the following conditions, we can help.
There can be overlap in the 3 metabolisms that we can influence with treatment. This overlap can occur with symptoms and conditions and increases the complexity of the condition and alters the regimen of each patient.

Cardiovascular Disease

Who should be tested?

• Those experiencing unexplained fatigue and/or shortness of breath
• Those who have a family history of diabetes, high blood pressure, strokes, kidney failure, or cardiovascular disease
• Those with risk factors such as smoking, diabetes, obesity, high cholesterol, and lack of exercise
Diabetes

Who should be tested for diabetes?
- If you are overweight and are age 45 or older
- Adults younger than 45 and overweight who have any of the risk factors
  - Risk factors: high blood pressure, low HDL cholesterol and high triglycerides, a family history of diabetes, a history of gestational diabetes or giving birth to a baby weighing more than 9 pounds, belonging to an ethnic or minority group at high risk for diabetes
- If you are experiencing any of the following symptoms: unusual thirst, a frequent desire to urinate, blurred vision, or and a feeling of being tired most of the time for no apparent reason

Should children be screened for diabetes?

In March of 2002, the New England Journal of Medicine found 25 percent of very obese children and 21 percent of very obese adolescents had pre-diabetes. If your children are overweight, you may want to consult your physician who may make the recommendation.

Hashimoto’s Thyroditis

Hypothyroidism

Who should be tested?
Patients who don’t feel like themselves and who are experiencing:
- Chronic fatigue
- Weight fluctuations
- Depression
- Fibromyalgia symptoms (widespread musculoskeletal pain and fatigue disorder affecting up to 5% of the population, and for which the exact cause is still unknown)

Osteoporosis

Who should be tested?
- Men and postmenopausal women
- Women at high risk of having fractures
- Women who have gone through menopause
- People who have had a broken bone (fracture) in adult life
- People with limited movement, such as using a wheelchair
- People age 60 or over
- Medical conditions likely to cause bone loss, such as seizure medicines, thyroid, no HRT, anticonvulsants, cortisone, or chronic disease

Peripheral Neuropathy

Neuropathy is a nerve condition that affects the extremities. It usually begins in the longest nerves, particularly those in the legs, feet, and hands. The challenge that healthcare professionals have in helping people with neuropathy is that most of the time people have no idea that they have neuropathy because they can’t feel their feet or hands. Their nerves are damaged and so they have lost sensation; hence, are not able to feel the symptoms.

How can you then recognize the problem?

Unfortunately, it will not likely be recognized until the condition worsens and the once subtle numbness becomes apparent as it progresses to pain. Pain or a burning sensation may be felt in the feet (especially when walking). Falls can become frequent, foot wounds present, delayed healing, or worse yet, those affected may become at risk of an amputation. It is possible that those patients undergoing chemotherapy may also be at risk of developing neuropathy.
Who should be tested?
If you experience any of the following:
• Tingling or burning sensation in hands or feet
• Pain in your extremities
• Wounds that are not healing
• Gait and balance problems
• Frequent falls

Chronic Pain & Poor Circulation
Conditions distinguished by pain and inflammation tend to be characterized by poor circulation. EMMC offers an innovative treatment called Anodyne, which provides a painless, non–invasive treatment option for you. If you suffer from any of the following conditions, ask to be evaluated for treatment with Anodyne:

✓ Arthritis
✓ Tendonitis
✓ Carpal tunnel syndrome
✓ Sprains
✓ Diabetic peripheral neuropathy (loss of sensation or feeling typically in the hands or feet)
✓ Bursitis
✓ Temporal Mandibular Joint Disorders (“TMJ”)”
✓ Slow healing wounds
✓ Diabetic ulcers
✓ Stress fractures

Autonomic Neuropathy
Many of us are familiar with peripheral neuropathy, but burning feet or numbness in the extremities only tells half the story. Autonomic neuropathy is another less mentioned form of neuropathy. It is considered more deadly than its more familiar cousin; however, awareness of the condition and its dangers is only beginning to grow among doctors and patients alike.

What symptoms may patients experience and who should be tested?
Impairment of the nerves serving the bladder or genitalia may cause urinary inconsistencies or erectile dysfunction. Sweat gland function may be affected, leading to uncontrolled perspiration, or lack of it, resulting in overheating and dry skin. Blood pressure that is too high or too low may also be experienced. Gastroparesis, a dysfunction of the stomach’s autonomic nerves, may lead to slowed digestion, bloating, constipation, diarrhea, nausea, and vomiting.
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Contact Us

Clinical Team ~ Nurses

Evelyn D. Castillo – Profeta
Registered Nurse; Diabetes Educator.

Penelope Mayes
Registered Nurse; Bachelors Degree in Nursing;
Public Health Nurse; Certified Diabetes Educator;
Associate Degree in Physical Sciences and Chemistry.

Clinical Team ~ Medical Assistants

Galdina Miranda
Medical Assistant

Raquel Pryszczuk
Medical Assistant

Manuel Sanchez
Medical Assistant

Appointments

Ivonne Gamez
Front Office Administrator

Finance

Lynn Camacho
Clinic Director

Ashley Soares
Billing Office Administrator