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in pain management at the Naval Hospital, Portsmouth, VA. He also received fellowship training in anesthesia at Bowman-Gray Medical Center, Wake Forest University, Winston-Salem, NC. He is a member of the American Association of Electrodiagnostic Medicine, American Association of Physical Medicine and Rehabilitation, American Society of Anesthesiology, Florida Medical Society, Florida Society of Anesthesiology, International Association for the Study of Pain, and International Spinal Injection Society. He has published extensively in his areas of expertise.



Peter S. Schreiber, DO, is board certified in physical medicine and rehabilitation. He completed his undergraduate studies in microbiology at the University of Florida, Gainesville, and received his medical degree from Nova Southeastern University College of Osteopathic Medicine, Davie,

FL. He served his internship and a combined residency in internal medicine and physical medicine and rehabilitation at Case Western Reserve University/MetroHealth Medical Center, Cleveland, OH. Dr. Schreiber is a member of the American Medical Association, American Osteopathic Association, and American Academy of Physical Medicine and Rehabilitation.



Keith S. Susko, MD, completed his undergraduate studies, with an emphasis in biomedical engineering, at the University of Arizona College of Engineering. He earned his medical degree and completed his medical internship and his residency in physical medicine, serving as chief resident, at Eastern

Virginia Medical School, Norfolk. While in Virginia, Dr. Susko founded the medical school's Habitat for Humanity student volunteer group, organizing workdays for volunteer labor and assisting in the construction of homes for the needy. He has developed numerous presentations and lectures concerning myofascial trigger point evaluations, osteoporosis, electromyography, cerebral palsy, and low back pain. Dr. Susko is a member of the American Academy of Physical Medicine and Rehabilitation, Association of Academic Physiatrists, American Academy of Pain Management, American Medical Association, and American Academy of Electrodiagnostic Medicine.



Robert D. Mehrberg, MD, is a board-certified physiatrist, certified in physical medicine and rehabilitation, as well as in electrodiagnostic medicine. He completed his undergraduate studies and earned his medical degree at Tulane University, New Orleans, LA. He served his internship and his residency in

physical medicine and rehabilitation at Eastern Virginia Medical School, Norfolk, where he was appointed chief resident. Dr. Mehrberg has lectured on, written, or coauthored numerous articles, abstracts, presentations, and publications concerned with the treatment and well-being of rehabilitation patients. Dr. Mehrberg is a member of the American Association of Electrodiagnostic Medicine, American Academy of Physical Medicine and Rehabilitation, and Association of Academic Physiatrists.

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## Electrodiagnostic test showed the real problem

erry Abbott has no trouble remembering the day his legs quit doing their job.

"It was January 11, 2006," he states with certainty. "I got up in the morning, and my legs went right out from underneath me. I tried to get up, but I couldn't sup-

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port myself. I had to use a walker to get around while I tried to find out what

thing." For more than three weeks, Jerry consulted physicians and scheduled tests without finding answers.

was wrong. It was a frightening

Then a neurosurgeon suggested that Jerry consult Robert D. Mehrberg, MD, with South-

west Florida Rehab & Pain Management Associates. Dr. Mehrberg is board certified in physical medicine and rehabilitation and in electrodiagnostic medicine.

Dr. Mehrberg's training and experience were just what Jerry needed.

## **Rare disorder**

"I suspected a rare condition called Guillain-Barre Syndrome," says Dr. Mehrberg. "It affects only 1 in 100,000 people, and its effects can be devastating.'

"Dr. Mehrberg impressed me right away," says Jerry, "because nobody else seemed to have any idea what was wrong."

Guillain-Barre Syndrome causes the body's immune system to attack portions of the peripheral nervous system, interrupting signals to and from the brain. It sometimes follows a viral or bacterial infection, and Jerry remembers battling the herpes zoster virus not long before his legs became so weak.

Initial signs of Guillain-Barre may develop over several hours or days, beginning with sensations of tingling or weakness in the lower extremities, and an acute onset such as Jerry experienced is not uncommon.

If the condition is left untreated, symptoms can affect the arms and upper body, causing near-total paralysis.

Although the condition can become life threatening, patients who are identified and treated can make marked recoveries. After Guillain-Barre is treated, only about 3% of patients ever suffer a relapse.

Because the symptoms of Guillain-Barre can also be due to other causes, Dr. Mehrberg scheduled electrodiagnostic tests to determine the health and function of Jerry's muscles and peripheral nerves.

"Dr. Mehrberg was careful to tell me everything he was doing during tests and everything that would happen as a result of his findings," says Jerry. "After testing, he referred me to a neurologist who met me at the hospital to begin treatment with intravenous immunoglobulin and who even visited me while I was in the hospital.

"Less than a month later, I was walking without assistance. Dr. Mehrberg's open attitude and desire to keep me informed made this difficult situation much easier to take.

"I'd recommend him to anybody." FHCN-Billie S. Noakes

## **Relief at last!**

The staff at Southwest Florida Rehab & Pain Management Associates welcomes your questions and comments regarding this article. For additional information or to schedule a consultation, please call (239) 432-0774. Southwest Florida Rehab & Pain Management Associates is located at 12700 Creekside Ln., Suite 301, in Fort Myers.



## **Specialized tests**

"I was confident that nerve conduction and electromyography (EMG) would provide sufficient clues to confirm or rule out Guillain-Barre Syndrome for Jerry," says Dr. Mehrberg. Together, the two parts of the test take about an hour to complete. They can help determine the cause of such diverse symptoms as numbness; tingling; muscle weakness; neck, back, and limb pain; muscle atrophy; and walking problems.

Nerve conduction makes use of carefully calibrated electrical impulses to test nerve response.

Small electrodes placed on the skin over the targeted muscles carry a very weak electrical charge to stimulate nerve and muscle response. As the nerves and muscles react to the stimulation, their activity is transmitted to a computer for physician evaluation.

EMG allows the skilled physician to see and even hear how the muscles and nerves function. Tiny needles, similar to those used in acupuncture, are placed into the muscle tissue to conduct information to a computer. The computer records the data while a monitor and speaker help Dr. Mehrberg visualize and listen to muscle and nerve reactions.

**BACK IN STEP.** Jerry is again walking without assistance, following treatment for Guillain-Barre Syndrome, accurately diagnosed by Dr. Mehrberg.

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