

Zipper Urogynecology set to open showcase medical facility in area

By Ken Datzman

Almost single-handedly, Ralph Zipper is reshaping and beautifying a sizable section of property along U.S. 1 in Melbourne that has long been neglected. The rundown property was creating a blighting influence in the area.

Through his redevelopment efforts, the longtime physician, businessman and inventor is changing the face of the community in and around the neighborhood of 1200 S. Harbor City Blvd., once an uninviting business corridor dotted with deteriorating structures.

He is energizing aging commercial-building stock and doing so with a lot of creativity. "Landowners have to take pride in their communities," said Dr. Zipper, whose medical practice has been housed in that area for years. "We're very proud of the work we're doing to help clean up U.S. 1.

"I love Melbourne. It's such a beautiful place. I can look out my office window and see this pretty body of water."

A Johns Hopkins-trained urogynecolo-

gist and founder of Zipper Urogynecology Associates, Dr. Zipper first bought an old building at 1208 S. Harbor City Blvd. and turned the single-story facility into an attractive medical practice with a Key West-style look.

But he didn't stop there. Dr. Zipper later purchased a four-acre site a short walk north of his practice and began planning for the construction of a new medical campus for Zipper Urogynecology Associates.

The previously unoccupied property at 1130 S. Harbor City Blvd., where trees were growing in the structure, was another eyesore in the area. Its transformation is a cutting-edge example of revitalization in the community by smartly maximizing the opportunities of existing buildings.

Now, Dr. Zipper is set to unveil what he believes, and what his research tells him, is the largest freestanding urogynecology center of its kind. The 18,000-square-foot facility, with soaring ceilings and showcasing a Key West-style design in striking colors, is just a couple of weeks from

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BBN photo — Adrienne B. Roth

Dr. Ralph Zipper, a Johns Hopkins-trained urogynecologist, is founder of Zipper Urogynecology Associates in Melbourne. He has played a role in reshaping a section of U.S. 1. Soon, his practice will open its new 18,000-square-foot facility on South Harbor City Boulevard. Dr. Zipper believes it will be the largest freestanding facility of its kind.

Deadline nears for first-time homebuyer credit, other tax breaks

By Kathleen Pender
Scripps Howard Service

Time could be running out for some key tax and spending provisions in the federal stimulus act that are set to expire by Dec. 31.

These include beefed-up unemployment benefits, a sales tax deduction for new-vehicle purchases, a federal subsidy for Cobra health-insurance premiums and an \$8,000 first-time home-buyer credit.

Although these provisions were meant to be temporary, Congress has a hard time saying goodbye to any goodies and an even

harder time paying for them. Lawmakers will have to decide whether to extend a raft of other tax breaks that were supposed to die years ago but keep getting renewed one year at a time.

Congress could renew the expiring stimulus provisions, but not without "real macroeconomic risks," says Maya MacGuineas, president of the Committee for a Responsible Federal Budget. "The stimulus was crafted to be a temporary jolt to get the economy going again. The bargain at the time was, you don't pay for stimulus. But if you want to extend those policies, you have to find a way to pay for them, particularly because of the massive

challenges we already face."

Here's a look at some expiring provisions and their prospects for renewal:

- Cobra subsidy: Workers terminated between Sept. 1, 2008, and Dec. 31, 2009, who are eligible to stay in their group health plan at their own expense under the

law known as Cobra can get the government to pay 65 percent of their premium for up to nine months, as long as they are not eligible for Medicare or any other group health plan.

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A Zipper Urogynecology Associates

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opening, he said.

In addition to housing his practice, the facility is set up for teaching urogynecologists around the nation new procedures. The complex contains a full operating room and examination rooms. Each examination room has a 24-inch Apple iMac computer and a 40-inch plasma screen television so patients can watch educational TV. Key West-style street signs point patients to various areas of the building.

"Technologically, we think it will be the most advanced urogynecology center in the nation," said Dr. Zipper, who is recognized nationally for pioneering urogynecology methods and procedures. "Everything is linked with high-definition video and set up for teaching over the Internet. So we will be streaming video over the Internet and streaming video throughout the office in order to teach in our conference rooms."

The complex was designed by local architect Dave Nagrodsky of DNA Architects. The project team included the Construction Engineering Group, MBV Engineering Inc., interior decorator Lottie Banner, and Kevin Troy of Kevin's Landscaping.

Within the building is a reception area designed to resemble a downtown Key West courtyard. And there is a covered deck that can be used to host small seminars. The facility shows off high-end finishes and custom details, including the use of granite, HardiPlank, stamped concrete and sculpted plaster.

Dr. Zipper said his practice touts a "laid-back Jimmy Buffett, Bob Marley-type atmosphere," in its building, décor, and attitude. "No one enjoys going to a doctor's office. So we try to do everything we can to create a relaxed atmosphere for the patients."

His practice is solely dedicated to urogynecology, which is a subspecialty of gynecology and urology. A urogynecologist specializes in the care of women with pelvic-floor dysfunction.

The pelvic floor is the muscles, ligaments, connective tissue, and nerves that help support and control the rectum, vagina, and bladder. The pelvic floor can be damaged by childbirth, repeated heavy lifting, chronic disease or surgery. "We do not practice any general gynecology or general urology. We only treat this very defined, discreet area of urology and gynecology," Dr. Zipper said.

The Zipper Urogynecology Associates team includes Dr. Marja Sprock, a fellowship-trained urogynecologist who completed postdoctoral training in urogynecology at Henry Ford Hospital in Detroit, and Jennifer Lang, a physician assistant experienced in urogynecology.

They treat women with incontinence, prolapse (descent of pelvic organs), pelvic pain and overactive bladder. Dr. Zipper said his practice sees thousands of patients a year. Most of the treatments Zipper Urogynecology performs are non-surgical, he said. "The first step in providing the right treatment is making the right diagnosis."

One of the most common procedures his practice performs is the "sling." Advances in female stress incontinence are resulting in further refinement of slings for women. Physicians say the standard care in the surgical treatment of stress incontinence is the sling. During the short outpatient procedure, the doctor places a sling under the urethra.

Drs. Zipper and Sprock say they have performed nearly 4,000 of these procedures, while demonstrating success rates that are among the highest in the nation. They have also trained more than 1,000 urologists and gynecologists in the treatment of stress incontinence.

One-third of all U.S. women will be affected by one or more pelvic-floor disorders in their lifetimes, according to the National Institutes of Health. Because of the nature of pelvic-floor disorders, many women are reluctant to talk about or seek treatment for their conditions.

"Many women remember that their grandmothers had these problems," said Dr. Zipper, who has practiced in Brevard for more than a decade and is a graduate of Mount Sinai School of Medicine in New York City. "They think it is a normal part of the aging process and they are going to live with it. But when they understand that it's a treatable, definable disorder, a disease, they want to be treated. That's why educating the public about this disorder is so important."

Results from a new nationwide survey of women ages 40 to 65 show that the systems of overactive bladder are compromising their "sense of normality" and making their complicated lives "even more difficult to manage."

The survey was conducted for The National Association for Continence by Kelton Research. It compared women ages 40 to 65 who have experienced symptoms of overactive bladder, which affect as many as 33 million Americans, to women in the same age group overall.

Survey results were revealed during the 2009 American Urological Association's annual meeting in Chicago. According to the study, three in five women with overactive bladder admit they'd be more comfortable discussing menopause with their physician than talking about their bladder problems.

"When I first started practicing urogynecology 15 years ago, the group I was with would run an advertisement headlined 'What Women Won't Talk About.' Over the

years, my colleagues and I have endeavored to educate the country about incontinence, bladder dysfunction, and prolapse. We have brought these topics into the mainstream. Yes, women are still a little reluctant to talk about it, but less so than they were 15 years, 10 years ago, or even one year ago," Dr. Zipper said.

As women more openly discuss their discreet medical problems with physicians, including sexual dysfunction, Dr. Zipper is looking to tap what appears to be a new, emerging market segment, "vaginal rejuvenation," or vaginoplasty. This is the surgical tightening of the vaginal canal. New techniques for reconstructive surgeries include aesthetic vaginal surgery, though this area is uncharted territory for surgeons. There is no current hard data to support the number of cases performed in the U.S. and their effectiveness.

Birth trauma, tissue stretching, and improper surgical healing are some of the reasons why women request vaginal rejuvenation. "This is about a woman's self-image and feeling good. We have created some really great techniques. Our vaginal-rejuvenation surgery is incisionless," he said.

Dr. Zipper said he has spent thousands of dollars over the last three years developing surgical methodology and technology for aesthetic gynecology procedures. "The first challenge was creating the methods. I wanted to create legitimate, scientific, data-based surgical methods that made sense from a scientific standpoint, and had reproducible outcomes."

He said it took him about one year to create the technology and develop the software. Dr. Zipper said he experimented with different types of energy, including radiofrequency, before finding the right system. His next challenge was finding a manufacturer to shape the lasers. "We found great partners who were willing to manufacture the lasers according to our specifications. We have submitted no less than 10 patent applications and the business has become a reality."

GyneShape LLC markets the technology. His Laser Gyn Institute will be headquartered in Zipper Urogynecology Associates' new facility. Dr. Zipper, president of Laser Gyn Institute, has pioneered the GyneShape GynePulse VRL Laser Vaginal Rejuvenation, and Diamond VRL Laser Labiaplasty procedures. He will be training and educating surgeons on the technology and procedures.

"We are putting a great deal of time into creating nomenclature and broadcasting our message," he said, adding that his practice has launched a dedicated Web site (www.gyneshape.com) for consumers and physicians.

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