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The gym was jam-packed last night. It's January. The crowd will thin in a few weeks if this year's rhythm follows norms. But I'll still be there, in late February and throughout 2026, almost every day.

There are other things on my daily to-do lists that I fail to tackle, but exercise is not negotiable. It's mandatory. It's a good habit that has imprinted itself indelibly on my description of who I am.

When I was a boy – maybe 9 or 10 – my dad gave me a weightlifting (now called “training”) book, written by Bob Hoffman, a muscleman of the era with niche fame. Hoffman, a Tifton, Georgia native, incidentally, was dubbed the “Father of World Weightlifting” by the International Weightlifting Federation, which remains the sport's governing authority today. Hoffman, a bodybuilding champ, owned York Barbell, a manufacturer of fitness equipment that he bought in 1932, the company's 30th year. York (Pennsylvania) was close-ish to my childhood hometown, and my mother's twin lived there, so the whole thing felt like a brush with something exotic and important and worldly, and I was somehow inside an exclusive domain that made me cool.

The Simplified System of Barbell Training was a thin paperback, bound like a stapled magazine (this one) rather than a square-spine tome. It provided its reader with two 10-part routines, each starting with three exercises, followed by four with more weight than the first three, and finishing with three that incorporate another bump up in weight. Routine (“Course” in Hoffman-speak) number one was presented as foundational, while number two was considered advanced. For example, the foundational series featured regular bicep curls during the mid-weight, four-exercise segment, while the advanced series required followers to reverse the grip. Each exercise was explained using extended, detailed narrative prose, accompanied by an elaborate hand-drawn illustration of an idealized man doing the thing as described. Absent animation or video, Hoffman's pencil man simultaneously existed in dashed-outlined positions numbered one through as many necessary to convey the range-of-motion the exercise required.

Hoffman was ahead of his time. As he wrote in his intro in a linguistic style consistent with his era, “You obtain from exercise what you put into it.” An early iteration of “no pain – no gain.” Even if he didn't realize it, he had a whole-person perspective on wellness that extended beyond the building-big-muscles goal:

“If your wish is only to keep superlatively fit, strong both inside and out, following this course will bring you the results you desire.”

Humans have been physically exerting themselves since the beginning of time. First, driven by necessity, later by the realization that activity improves quality-of-life. From Hoffman's 1930s he-man point-of-view, we have continued to evolve. As the sock-hop '50s morphed into the flower-power '60s, Dr. Halbert L. Dunn coined “high-level wellness,” shifting focus from preventing disease to active, holistic health. In the go-go '80s, Fitness was commercialized, integrating lifestyle, diet, and mental health. Celebrity aerobics instructors were the first global multimedia fitness stars.

Today, The Global Wellness Institute defines its namesake term – wellness – thusly: The active pursuit of activities, choices, and lifestyles that lead to a state of holistic health. The GWE (Global Wellness Economy) was estimated at \$6.8 trillion in 2025. My own daughter founded an online exercise and wellness brand centered around a subscription-based app, GGStudio. She has tapped into something in the zeitgeist with her viral “Bridal Arms” series and personal brand.

For my family, wellness has always been a thing, even if we didn't have a name for it. In our practice, it revolves around eating right (and loving to cook) and exercise. I've been into it since my mom took me to the farmers' market every Friday when I was a little boy and my dad bought me a barbell and my Bob Hoffman book. Life-changing gifts that keep giving that I can't imagine what my life would be without.

Scott A. Lauretti



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on the cover:
Our annual Health and
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EDITOR AND PUBLISHER

Scott Lauretti
slauretti@theskinnie.com

CREATIVE DIRECTOR

Philip Schweier
pschweier@theskinnie.com

ADVERTISING | CONTENT

Jenna Treat Lauretti
jtreat@theskinnie.com

CONTRIBUTING WRITERS

Abby L. Dew, Ron Lauretti,
Amy Pierce, Philip Schweier,
Dr. Susan Timna

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Skinnie Media, LLC
15 Lake Street, Suite 280
Savannah, GA 31411
912-598-9715

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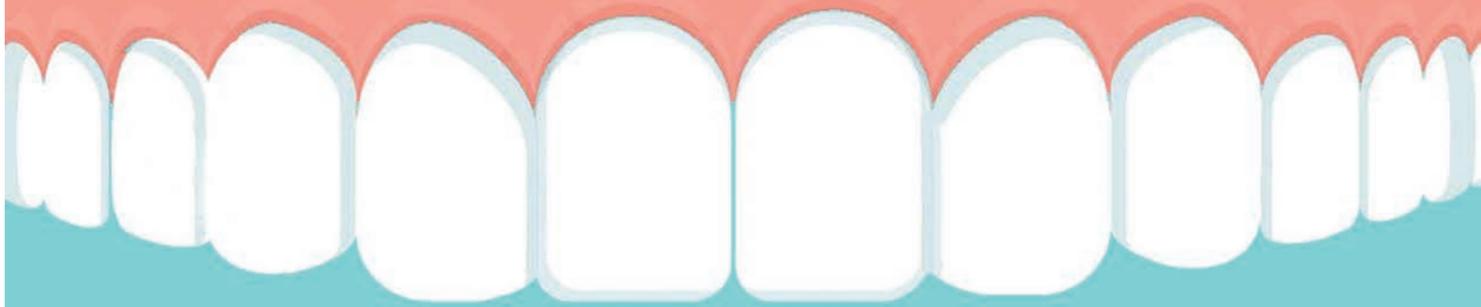
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Thoughtful DENTISTRY

A More Intentional Approach to Care

In today's world, healthcare often feels rushed, transactional, and dictated by insurance rather than individual needs. As my career as a dentist has progressed, I've found myself increasingly drawn away from that model.

When practiced well, dentistry is inherently personal. It affects how people eat, speak, smile, and carry themselves. It influences confidence, comfort, and overall well-being in ways that reach far beyond teeth. That kind of impact deserves care that is deliberate, calm, and thoughtfully delivered – thoughtful dentistry.

It is not a technique or a trend, but a philosophy defined in my practice, rooted in intention. It prioritizes listening over rushing, precision over volume, and outcomes over impersonal efficiency. For many patients, it feels like a return to care that is personal and grounded. For me, it is the only way practicing dentistry makes sense, whether someone is considering a full smile makeover or simply addressing a single tooth that has been bothering them. Even small treatments benefit from thoughtful planning.

CARE THAT IS CONSIDERED, NOT RUSHED

One of the most important elements of thoughtful dentistry is time. I intentionally pace appointments to allow room for evaluation, conversation, and clarity. Patients are encouraged to discuss what they are hoping to improve, what they are concerned about, and what they may have experienced elsewhere. When patients feel heard and understood, decisions come with confidence, and when care is unhurried, it's simply better. The best dental outcomes are rarely the result of speed. They come from skill, attention, and discernment.

CALM AS A CLINICAL TOOL

In dentistry, as in life, how care is delivered often matters just as much as what is delivered. Quality of care is highly influenced by how patients feel while receiving treatment. Anxiety, tension, and sensory overload can affect comfort, communication, and results. We are intentional about creating an environment that feels calm and quietly elevated. Warm towels are offered after appointments. Noise-canceling headphones allow patients to watch their favorite shows or movies during treatment without distraction. Simple details make a meaning-



BY ABBY L. DEW, DDS

THREE STEPS TO PLANNING A PERFECT SMILE MAKEOVER

1. Know What You Want

Start by identifying what you love about your smile and what you would like to change. Maybe it is crowding, discoloration, missing teeth, or older dental work that no longer blends naturally. Sharing photos can be incredibly helpful. Images of smiles you admire or photos of your younger self allow your dentist to understand what a perfect smile means to you.

2. Interview More Than One Dentist

A smile makeover is an investment, and it's worth taking the time to find the right fit. Look for a dentist whose philosophy aligns with your desired outcome, whether that is subtle and natural or bright-er and more dramatic. Ask friends and colleagues for recommendations. Request to speak with past patients who have completed similar treatment. Consider budget, timeline, and how the dentist and team make you feel.

3. Take Your Time

Great dentistry rarely needs to be rushed. In most cases, smile makeovers can be completed in phases. This allows for healing, thoughtful refinement, and a more manageable investment of time and resources. A skilled dentist will provide a clear, prioritized plan that shows how each step builds toward your final result at a pace that feels comfortable.

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Some dental suites allow patients to watch their favorite shows or movies during treatment without distraction.

ful difference before stepping back into the day. These touches are not indulgence. They are about easing the nervous system, because comfort is not separate from outcomes. It supports them. When patients are relaxed, dentistry becomes more precise. Conversations are clearer, and care feels collaborative rather than something to endure.

TREATMENTS GUIDED BY PURPOSE, NOT PRESSURE

Thoughtful dentistry is rooted in evidence-based care and long-term thinking. Every patient arrives with different priorities. Some are focused on aesthetics; others are concerned about function, comfort, or preserving what they already have. Many are balancing all three.

There is rarely only one correct path forward. My role, and that of my team, is to educate, outline options, and help patients understand the implications of each choice. Options are discussed openly so patients can decide what aligns best with their goals. For some, that might mean a comprehensive smile makeover that improves balance, color, and harmony across the entire smile. These transformations are never rushed and are often completed in phases, allowing time for healing and refinement. For others, the goal may be much more targeted. A single tooth that stands out. Alignment concerns addressed with Invisalign. Relief from jaw tension, clenching, or facial discomfort through therapeutic Botox. Cosmetic Botox may also be part of a broader plan to soften expressions or restore balance in a subtle, natural way. Thoughtful dentistry applies equally in all these treatments. The scale may change, but the intention does not. Restraint is part of expertise, and care is never driven by urgency or pressure.

RELATIONSHIPS SHAPE BETTER OUTCOMES

Thoughtful dentistry is not about a single visit or procedure. It's about continuity and relationships over time. When we know a patient's history, preferences, and long-term goals, we can plan more intelligently and intervene at the right moment, supporting proactive care rather than reactive treatment. It allows for small adjustments before problems become larger ones. It also provides our patients the

freedom to evolve their goals as their priorities change, whether that means eventually pursuing Invisalign, revisiting cosmetic refinements, or simply preserving what they have worked to enhance.

RESPECT FOR THE WHOLE PERSON

At its core, thoughtful dentistry recognizes that oral health is inseparable from one's overall well-being. Treating someone thoughtfully means respecting all that context. It means asking not only what is possible, but what makes sense for that individual's life, comfort, and goals. A smile affects how people socialize and influences confidence in subtle but powerful ways.

Thoughtful dentistry is about care with purpose. It means slowing down in a field that too often feels rushed. It is about delivering outcomes – whether large or small – with clarity, calm, and intention.

Abby L. Dew, DDS, graduated from the University of Michigan School of Dentistry in 2007. She works as a close advisor to several dental material, technology, and instrumentation companies to advance the art and practice of restorative dentistry. Additionally, Dr. Dew has authored several magazine articles for consumers on topics ranging from choosing the right dentist for advanced cosmetic treatment to social media dental trends. Her boutique practice, Dental Harbor by Abby Dew, DDS, is located on Skidaway Island.




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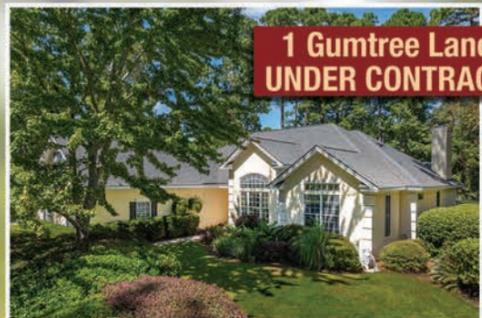
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The Aging Care Blueprint

By Amy Pierce, RN, CMC

Home care works best when it is supported, guided, and connected.

After more than two decades working with older adults and their families, one thing is very clear to me: The best aging care happens when everything works together. This is the foundation of what I call the Aging Care Blueprint – a structured, ethical, and sustainable model built on integrated care.

Most families do not realize how fragmented aging care can be until they live it. Traditionally, services tend to operate in silos. A physician focuses on medical treatment whereas a home care agency focuses on tasks. One provider handles medical appointments while another provides home care. Meanwhile, someone else is trying to manage medications, communicate changes, and make sense of it all – often from a distance and often during a crisis.

Family members are expected to connect the dots, relay information, and notice

changes that may signal bigger issues. Because of this siloed structure, important details are overlooked, often causing a communication breakdown. Care becomes reactive rather than proactive. I have seen families doing their absolute best still feeling like they are constantly one step behind. It doesn't have to be this way.

An integrated approach brings together three essential elements of aging care into one aligned plan, functioning as a connected system guided by clinical oversight and clear communication:

- **Nurse Care Management** is the anchor of this model. Nurses are trained to see the whole picture including medical history, medications, functional changes, safety, cognition, and family dynamics. Nurses anticipate problems before they become emergencies. Nurses translate medical information into clear, actionable guidance, and serve as a

consistent point of contact for families navigating complex decisions.

- **High-Quality Home Care** is most effective when it is supported, guided, and connected. In an integrated model, caregivers are more than task-based support providers. They are part of the care team, and often the first to notice subtle changes such as increased confusion, decreased appetite, changes in mobility, or shifts in mood. When such observations are communicated back to a nurse care manager, adjustments can be made early, often preventing hospitalization or rapid decline.

- **Coordinated Medical Care** does not happen in isolation. Appointments, test results, medication changes, and specialist recommendations all need context. In an integrated model, medical care is coordinated and followed through. Appointments are prepared for, questions are asked, and recommendations are explained. It is important that

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In an integrated model, caregivers are part of the care team, and often the first to notice subtle changes in their clients.

changes are communicated across the entire care team.

THE AGING CARE BLUEPRINT IN PRACTICE

The integrated approach is not theoretical. It has been shaped by real families, real challenges, and real outcomes. It has become a framework for how aging care can work better for everyone involved with an elderly patient. For families, an integrated approach means clarity... no longer wondering, "What happens next?" There is one plan, one team, one place to turn with questions or concerns. Care feels consistent instead of chaotic. Decisions are made thoughtfully with clinical insight and compassion. Most importantly, older adults are supported in a way that honors their dignity, preferences, and quality of life.

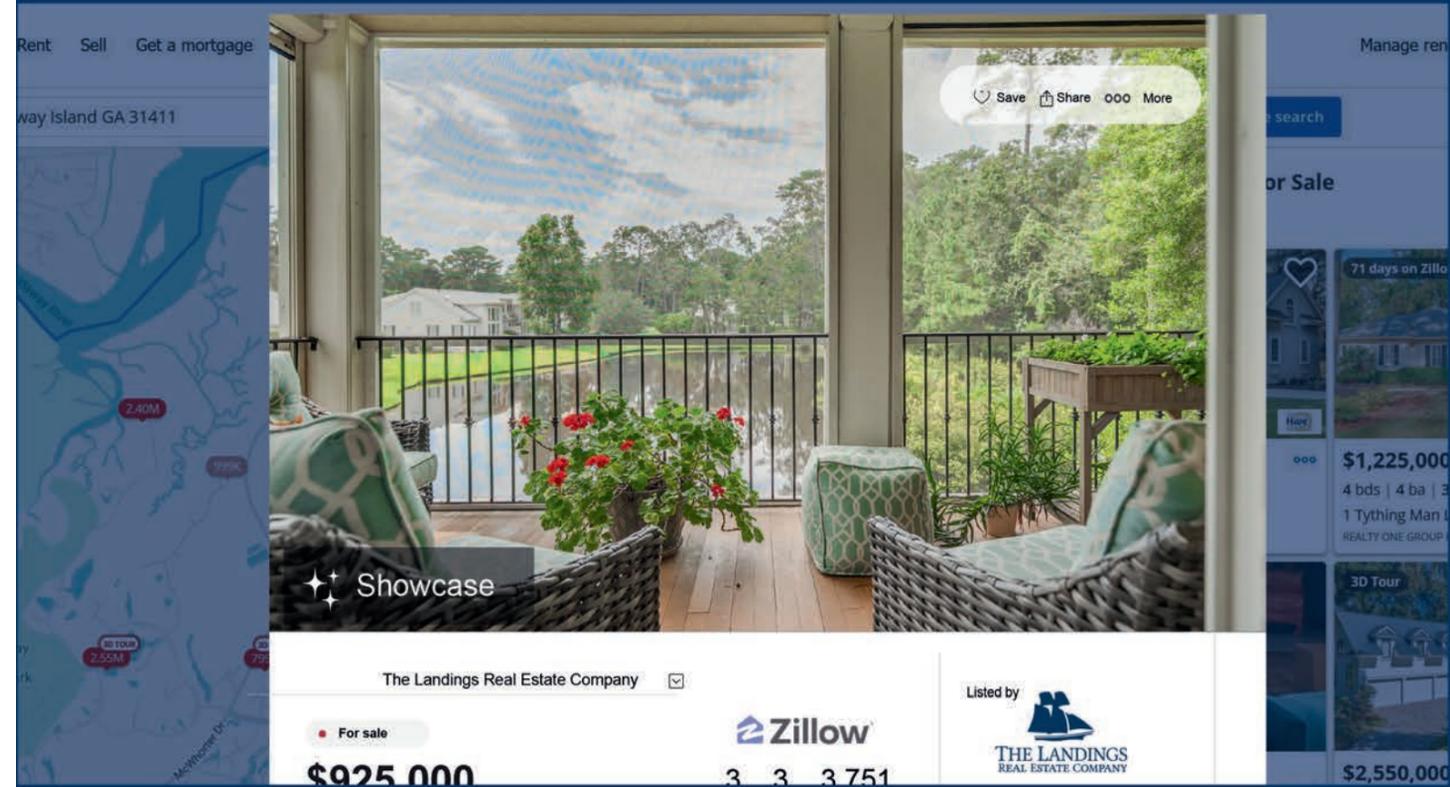
The future of aging care is not about more services. It is about better coordination, stronger leadership, and care that truly works together. As our population ages and care needs become more complex, integration is not optional. It is essential. The best aging care does not happen in pieces. It happens when everything works together.

Amy Pierce is a registered nurse, certified care manager, and co-owner of Coastal Care Partners. With more than 20 years of experience in aging care, she specializes in nurse-led care management and integrated aging care solutions that support older adults and their families through complex seasons of aging. Her work is grounded in clinical expertise, compassion, and cooperation.



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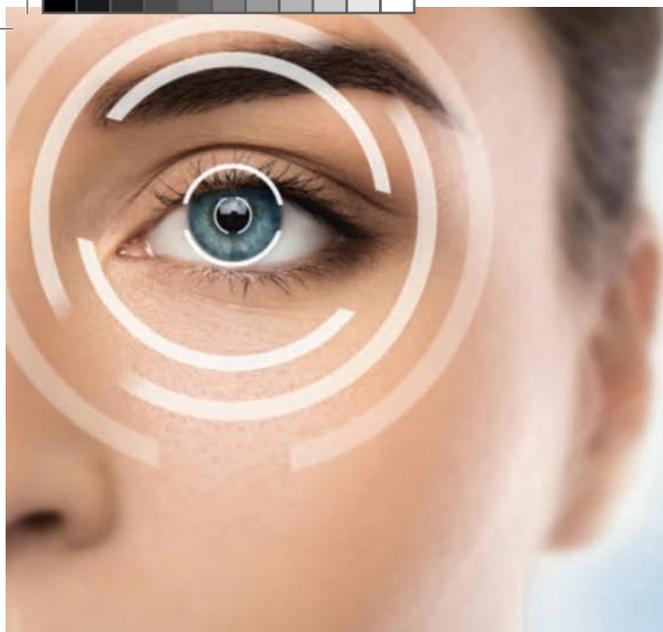
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PERSONAL Detachment

By Philip Schweier

Recognizing the Dangers of a Detached Retina

There is no pain or discomfort associated with a detached retina, so its warning signs are easy to dismiss as a passing peculiarity. Most detachments are gradual and display symptoms; however, it is possible for a retina to detach immediately with no warning. Without prompt medical attention, a detached retina can lead to significant vision loss, possibly blindness. Therefore, recognizing these symptoms is crucial for successful treatment:

- appearance of “floaters” – small dark spots or lines that drift across your vision
- sudden, brief flashes of light in your vision, especially when blinking
- a shadow or curtain descending over the field of vision
- an unexplained blurring of your vision

A detached retina occurs when the retina – a thin layer of tissue at the back of the eye that senses light and sends images to your brain – begins to separate from the rear wall

of the eye. One ophthalmologist equated it to wallpaper rolling off the wall, though it can sometimes be more complicated.

Simplistically speaking, the eye is a ball filled with vitreous gel. As we age, the eye may change; the viscosity of the gel may flux, pulling away from the retina and creating a tear. Or perhaps tiny specs of hardened fluid may form, comparable to meteors orbiting a moon. If they strike the surface of the retina where the flesh is weak, a puncture may develop, causing fluid to leak behind the retina and push it away from the rear wall of the eye.

There might not be any underlying cause, though there are often contributing factors. A blow to the eye, such as a sports injury, can lead to retinal detachment. But the most common factor is age, as most detached retinas are found in people over the age of 50. The frequency of a detached retina appears to be higher in people who are nearsighted.

Complications from diabetes can damage blood vessels in the retina, contributing to retinal detachment, and surgeries such as cataract removal can increase the risk. A family history of retinal detachment or certain genetic conditions can also elevate risk.

If you suspect you may have a detached retina, contact your eye doctor immediately for a thorough examination. An ultrasound imaging of the eye or optical coherence tomography (OCT) can definitively diagnose the nature of the detachment and the best course of treatment. Options include laser surgery or freezing treatment (cryotherapy) to seal the retinal tears and prevent further detachment.

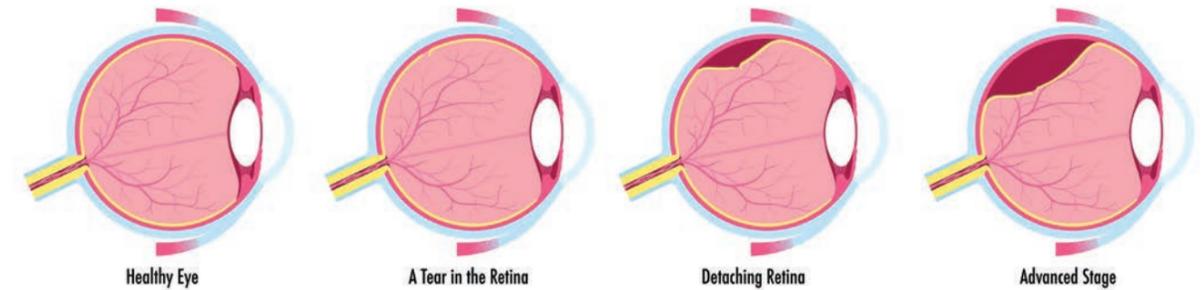
Pneumatic retinopexy is a common procedure when the tear is small and uncomplicated. A small amount of vitreous fluid is drained from the eye, replaced with a gas bubble that is injected. The bubble pushes the retina back into place against the wall of the eye. The effect is immediate, though sometimes disconcerting to the patient. Prior to surgery, the patient might have seen a dark shadow partially obscuring their vision. After treatment, vision is no longer obscured but is blurry. This effect will fade in the weeks to come.

After such a procedure, the patient is usually advised to maintain a specific head position to ensure the gas bubble remains in place to facilitate proper healing. Patients must also avoid air travel, high altitudes, and scuba diving until the gas bubble dissolves, which



When a retina begins to detach, normal vision (above left) is compromised. Areas of the visual field become obscured, and “floaters” appear in fluid within the eye.

RETINAL DETACHMENT



As the retina pulls away from the wall of the eye, vision becomes obscured, and could be severely compromised if not immediately addressed.

may take six to eight weeks or more. Heavy lifting, straining, or high-impact activities should also be avoided for a certain period while the eye heals.

As the gas bubble dissolves, the body refills the void with vitreous fluid. To the patient, it appears as if watching a glass slowly drained of thick, distorting liquid. Once replenished with fresh vitreous fluid, many patients say they see better than before the surgery.

In some cases, the surgeon will use oil instead of a gas bubble. The oil does not dis-

solve like the gas, so it stays in the eye until surgically removed later, requiring a longer healing time.

More extensive surgical procedures such as scleral buckle surgery may also extend recovery time. A surgeon applies a thin silicone belt sewn around the circumference of the sclera of the eye to hold the retina in place. This moves the wall of the eye closer to the detached retina. This alteration in the relationships of the tissues allows the fluid which has formed under the retina to be pumped out, and the retina to re-attach. Buckles are often

placed under the band, creating a dimple on the eye wall.

Retinal surgery can present complications. One side effect might be the formation of a cataract, which can easily be addressed after the retina heals.

While you can't always prevent retinal detachment, regular eye exams can help detect early changes to the retina. Protecting your eyes from injury and managing underlying health conditions can also reduce the risk.

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Michael McNeely, MD, FACP

Have essential questions ready for your physician to optimize your appointment.

When you visit with relatives or friends, it feels like time passes quickly. You also may realize after they've left or hung up that you forgot to ask a certain question, maybe even the very question that made you reach out to them in the first place. The same thing can happen with a doctor visit.

"I want to make my time with both new and established patients as productive as possible," says Michael McNeely, MD, FACP, a primary care physician and member of St. Joseph's/Candler Physician Network. "While I can learn the information I need to know with my own series of questions, I have found that having prepared patients helps us make the most of the time we have together."

Dr. McNeely suggests that patients write

their concerns or questions down and bring the list with them. This helps patients who might tend to talk around a problem or might be uncomfortable initiating a discussion.

"I invite my patients to participate in the process," McNeely says. "This helps me know quickly what their most important concerns are."

Though every patient is different, the average appointment allows for three questions to help direct the discussion. Patients should volunteer any helpful information regarding symptoms. Patients might feel that some questions are too small – or, in their opinion, dumb – to ask. But participation is what helps a physician know what to look for and where to focus. On the other hand, patients won't benefit from bringing in a "laundry

Exercise Prudence: Tell Your Doctor about Your Fitness Plans

A piece of advice that people often hear when they've decided to try a new exercise program (or restart an old one) is to talk to their doctor first. It might sound unnecessary. Wouldn't any doctor be pleased their patient is ready to start working out?

Yes, but doctors must also consider your safety. There are several reasons why you should keep your primary care physician informed of your new goals.

Exercise is designed to put a healthy amount of stress on the body, but it's important to know how much stress your heart and joints can handle. A quick check-up allows your doctor to screen for underlying conditions, such as hypertension or heart irregularities, that might be exacerbated by sudden, intense physical activity. Establishing a baseline of your current health ensures your heart and lungs are ready for the increased demand.

For people managing conditions like asthma or arthritis, exercise is often part of effective management and treatment. But your individual plan may need adjustments based on what your body needs. For instance, certain blood pressure medications can affect your heart rate during a workout, making standard heart rate targets inappropriate for you. Your doctor can help remind you of these differences.

If you have a long history with your doctor, he or she can often identify physical imbalances or old injuries that might flare up. If you have runner's knee or lower back issues, they can suggest low-impact alternatives such as swimming or cycling that build strength without causing further damage. This approach avoids the common cycle of

starting a program, getting injured in week two, and giving up out of frustration.



starting a program, getting injured in week two, and giving up out of frustration.

Gauging the intensity of exercise is an individualized process. Your doctor can help you define what moderate versus vigorous intensity looks and feels like for your body. They can provide personalized parameters, such as a maximum heart rate or a duration limit, that allow you to progress safely.

Don't think about this conversation with your doctor as asking for permission to exercise. Instead, think of your doctor as a member of your support team. Their expert advice is another tool in your toolkit as you build your healthy new life.

list" of general questions that take time away from bigger concerns.

"Physicians can clear up many of the misconceptions about healthcare that have unfortunately been exacerbated by social media," McNeely explains. "But it's best for us to use that time to address your needs."

Patients should not equate writing down questions with being forgetful, but rather with being prepared. Seeing multiple patients each day, McNeely recognizes the impact those reminders can have. "Having prepared patients makes the day more productive for everybody," he concludes.

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Along with a few written questions, employ these tactics to maximize the effectiveness of a doctor visit.

Complete paperwork prior to your appointment. This enables the physician's office to request medical records. Your doctor will have an opportunity to review your medical history and assess your healthcare needs.

Arrive on time. Arrive up to 30 minutes early to complete the check-in process. Think of your appointment time as the time you should be in a room ready to be seen.

Bring a list of your medications. Your

doctor needs to know what you're taking and the current dosages. Even for established patients, a primary care doctor may not know if another doctor has prescribed a new medication. If compiling a list of medications and doses is too much homework, put all your bottles into a plastic bag and bring them with you.

Use a patient portal if your doctor's office offers one. Online portals allow patients access to their medical information, but they can help in other ways, too. You can request prescription refills, update insurance information, check lab results, and ask follow-up questions regarding care. It's a great tool for a better physician-patient relationship.

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Hears to 2026

The Link Between Hearing and Balance

By Dr. Susan Timna | Expert Hearing Savannah

How many New Year's resolutions did you make on January 1? How many have you broken already? You are not alone. In fact, you are among the majority – including me.

One New Year's resolution I hope we all stick with this year is making our health a priority. Most people believe hearing loss only affects conversations between people, but hearing health plays an important role in maintaining balance, too. And balance is critical to healthy aging.

Research shows hearing loss is connected to an elevated risk of falls, especially in adults over 60. Falls are among the leading causes of injury for older adults, contributing to a large percentage of ER visits. Falls lead to a range of problems, from simple injury to potentially fatal head trauma.

Your ears do more than help you hear. Deep inside the ear is the balance system which helps your brain understand how your body is moving and where you are in space. Balance depends on coordination between:

- Your inner ear
- Your vision
- Your muscles and joints
- Your brain's ability to react quickly

When one of these systems is weakened, it's easier to feel off-balance, unsteady — especially in busy environments, low light, or uneven walking surfaces. Perhaps you've woken up in the middle of the night and walked to the kitchen or bathroom, feeling slightly disoriented in the darkness. That's due to low vision, making your balance system more reliant on your muscles and joints. But it's not only your eyes, it's your ears, too.

Hearing loss can increase fall risk in several ways:

- **Decreased Situational Awareness** – Good hearing helps you notice important sounds like approaching footsteps, traffic, alarms, or someone warning you. When your hearing is reduced, you may miss safety cues that help you quickly react.

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• **Strain on Your Brain** – When you struggle to hear, your brain works harder to fill in the blanks, which pulls from its capacity to mediate balance.

• **Reduced Confidence and Decreased Movement** – Many people with hearing loss avoid social situations or walk hesitantly. Over time, reduced activity can affect strength and stability.

A hearing and balance evaluation might be helpful if you've noticed these issues:

- Trouble hearing against background noise
- Unsteadiness while walking
- Feeling "off" in crowds or stores
- Fear of falling or a recent fall

Prevention matters. Better hearing supports clearer communication and safer everyday living. Keep this resolution this year: Make your hearing healthcare a priority.

Dr. Timna is a co-founder of Expert Hearing Savannah. Expert Hearing invites you to the Palmetto Club on Wednesday, February 25, from 5 to 7 p.m. Drs. Stuart Fife and Cori Palmer will speak on balance and the risk of falls. Attendees will receive a gift certificate for a complimentary balance screening. Appetizers and drinks will be served. Please RSVP by February 18 to Expert Hearing at 912.777.8580.



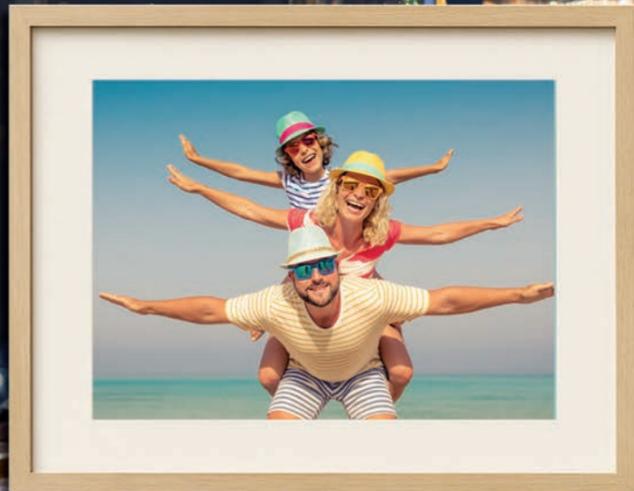
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THE MONROE DOCTRINE

Past as Prologue

By Ron Lauretti

On December 2, 1823, President James Monroe delivered his seventh annual State of the Union Address to Congress, declaring an opposition to any foreign interference in the Western Hemisphere. Commonly known as the Monroe Doctrine, the policy states that any intervention by foreign powers in the political affairs of the Americas is a potentially hostile act against the United States.

Originally expressed in the context of European colonialism, the doctrine was largely disregarded internationally, as the U.S. lacked both a credible navy and army. However, as the U.S. began to emerge as a world power, the rejection of foreign interference from Europe and Asia has guided the nation's foreign policy throughout the Western Hemisphere. It has come to include overt military actions and define a dominance that few have dared to challenge.

The Monroe Doctrine has been invoked by many U.S. statesmen and presidents to enforce a policy of strength, unity, and resolve against the forces of communism, fascism, and foreign infringement. In 1904, President Theodore Roosevelt added a corollary, declaring the right of the U.S. to intervene in Latin America in cases of "flagrant and chronic wrongdoing by a Latin American Nation."

When the Cuban Revolution established



ABOVE: Uncle Sam defensively straddles the Americas in a 1905 editorial cartoon by Louis Dalrymple.



LEFT: James Monroe, fifth president of the United States

a communist government with ties to the Soviet Union, it was argued that the Monroe Doctrine should be invoked to prevent the spread of communism in Latin America. During the Cuban Missile Crisis in 1962, President John F. Kennedy cited the Monroe Doctrine when confronting the Soviet Union regarding its installation of ballistic missiles on Cuban soil.

Most recently, President Donald Trump used the Monroe Doctrine to justify attacks on the Nicolas Maduro regime in Venezuela. Maduro has been the country's president

since 2013, ruling with what critics describe as dictatorial corruption. As a young man, Maduro became the president of a bus drivers' union. A staunch socialist, Maduro seized power through a specious election and two subsequent elections widely alleged to have been tampered. During Maduro's tenure, the standard of living in Venezuela has deteriorated dramatically, with an estimated 75 percent of households now in poverty. This statistic is particularly jarring given that Venezuela was one of the richest countries in the world in the 1970s, thanks to a robust oil-exporting industry. In fact, by the 1940s, the country

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was the world's largest exporter of oil. As Venezuelan state corruption led to protracted economic decline, mass migration out of the country followed.



Nicolas Maduro

Maduro became a major nemesis to the Trump administration. As relations deteriorated between the nations, Maduro rejected suggestions to abdicate and live in exile. On January 3, U.S. military forces raided Maduro's residence, taking him and his wife into custody. Code-named Absolute Resolve, the operation involved precise planning and was an outstanding demonstration of U.S. military might and intelligence reach. Delta Force, an elite group of American commandos, captured the Maduros and delivered them to a federal detention center in Brooklyn, New York.

Some people claim President Trump overstepped his authority by ordering the raid in Venezuela. Others maintain that Maduro was an evil dictator, in cahoots with drug trafficking cartels, who lived in luxury while his population labored in poverty with no human rights. Time and the courts will eventually decide. In the meantime, it seems like Monroe's 200-plus-year-old doctrine is alive and well as an American foreign policy touchstone principle.



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- Hypertension**
Can make hearing loss worse
- Diabetes**
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- Mental Health**
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Correlated with hearing loss
- Cardiovascular Health**
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- Falls**
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- Reduced Quality of Life**
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The Skinnie Football Pick 'Em Pool

The Last Word(s)

It doesn't get any closer. It can't. As of last issue, we were going to a tiebreaker to determine the winner of our Bowl Bonanza football pool. Both Crystal "Ball" Higgins and Steve "The Machine" Mulqueen projected Indiana and Ohio State in the final game.

Both had Indiana as the national champion. Indiana won and the total points scored in their game with Miami was 48 (27 - 21). The Machine was off by 6, while The Ball was only 5 from right on. Crystal wins the crystal (metaphorical trophy) by a mere point.



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SHELF INDULGENCE

WHAT: Bag of Books Sale
WHEN: Last Saturday of every month
WHERE: The Village Library, 1 Skidaway Square
HOW MUCH: Buy a bag for \$15 and fill it with books from the sales wall
CONTACT: Contact the library at 912.598.1183 for more information
WHAT ELSE: Fiction and nonfiction, hardcover and paperbacks, all genres. Benefits the Village Library.

BETWEEN THE LINES

WHAT: Author Conversation Series
WHEN: Monday, March 2 - 5 - 7 p.m.
WHERE: The Village Library
HOW MUCH: Free to all Skidaway residents
CONTACT: For more information, please contact the library at 912.598.1183
WHAT ELSE: Join us to learn more about Savannah authors Fran Thomas and Maureen Smith and their novel, *Full of Grace and Mischief*. The event includes a wine-and-cheese reception, presentation by the authors, Q&A, and book signing.

READING IS FUNDAMENTAL

WHAT: Book Talk by Dr. Michael Hall
WHEN: March 6, 9:30 a.m. coffee and 10 a.m. talk
WHERE: Skidaway Island Methodist Church, 54 Diamond Causeway
HOW MUCH: \$10 admission at the door
CONTACT: Susan Dischner, 912.655.7248 or susandy111@bellsouth.net
WHAT ELSE: Featured book is *My Name is Emilia Del Valle* by Isabel Allende. This book talk is made possible by PEO Chapter S. PEO is a philanthropic organization dedicated to the advancement of education for women.

island hopping

Please email content to mail@theskinnie.com.
 Deadline is the Friday prior to publication.

HEAR GREAT SPEAKERS

WHAT: Kiwanis Club of Skidaway
WHEN: Thursday mornings at 8 a.m.
WHERE: Palmetto Club
HOW MUCH: Free to attend, including any refreshments, which includes coffee/tea (compliments of Morgan Stanley) and occasional pastries from Auspicious Bakery.
CONTACT: Michael Klavon, 912.306.0474 for gate pass
WHAT ELSE: Membership is open to Savannah/Chatham area residents. Visit www.kiwanisofskidaway.com for more information.

WHO NEW?

WHAT: New Neighbors
WHEN: Visit www.landingsnewneighbors.com to see our calendar
CONTACT: Visit our website or contact Jody at nnnewmember@gmail.com
WHAT ELSE: The club offers more than 250 different activities from biking, golf, pickleball, walking groups or fishing to Mahjong, Bridge, needle-arts and Canasta. We have exciting military tours and special events for you to enjoy right here on Skidaway Island.

POWER PLANTS

WHAT: Plant Sale to Benefit Two Charities
WHEN: Order now through March 4, with a March 19 pick-up from 12-2 p.m.
WHERE: St. Peter's Episcopal Church, 3 W. Ridge Rd.
CONTACT: themarketat3westridge.com for flyer and ordering
WHAT ELSE: Order geraniums, perennials, and hanging baskets. You can order from the website above using a credit card. All proceeds benefit Loop It Up Savannah and Magdalene House.

MUSIC MATES

WHAT: AmiciMusic presents "Come Rain or Come Shine"
WHEN/WHERE: Jan. 31 at 6:30 p.m. at the home of Maaja Roos, 252 Wiley Bottom Rd.; Feb. 1 at 2 p.m. at the home of Betsy Contino, 1 Marsh Bridge Lane
HOW MUCH: Reservations required due to limited seating. Please visit www.amicimusic.org for details.
WHAT ELSE: Pianist Daniel Weiser will be joined by soprano Maria Zouves, co-founder and president of the Savannah VOICE Festival, in this intriguing and thematic program featuring wonderful songs about rain, the sun, and the moon from both the classical and popular worlds

by Schubert, Chopin, Arlen, Mercer, Gershwin, and many more.

MARKET FORCES

WHAT: 15th annual Market at 3 West Ridge, supporting local nonprofits working with at-risk children
WHEN: Tuesday, Feb. 3, 4:30 - 7 p.m.; Wednesday, Feb. 4, 10 a.m. - 5 p.m.; and Thursday, Feb. 5, 10 a.m. - 4 p.m.
WHERE: St. Peter's Episcopal Church, 3 West Ridge Rd.
HOW MUCH: Tickets are \$5, available at the door, and grant access for all three days; Admission plus box lunches are available Wednesday and Thursday for \$15
CONTACT: Lynn Wolfe, 912.660.4252
WHAT ELSE: Vendors from across the country bring stylish clothes, custom linens, luxurious nightwear, home décor items, fashion accessories, hand-crafted jewelry, and (new this year) gardening supplies, containers and adornments. The plant sale offers hundreds of annuals, perennials, and hanging baskets for purchase on site or by preorder for March 19 pick up. Recipients of 2026 Market funds are Loop It Up Savannah and Union Mission's Magdalene House.

GOLDEN GULPS

WHAT: "Potable Gold: Savannah's Madeira Tradition"
WHEN: Friday and Saturday evenings in February at 5:30 p.m. (except Friday, February 13)
WHERE: Green-Meldrim House, 327 Bull St on Madison Square
HOW MUCH: \$36.50 per person, limited to 14 participants
CONTACT: Jamie Credle, 912.233.3845 or jcredle@greenmeldrimhouse.org
WHAT ELSE: This 75-minute program reveals how the flavorful, fortified wine intertwines with the history of Savannah, and mid- and late-19th Century Savannahians, Ward McAllister and William Neyle Habersham. Participants should be able to stand as well as walk up and down stairs. Patrons must be 21 years of age or older to attend.

LET THEM EAT PANCAKES

WHAT: Skidaway Kiwanis Pancake Breakfast
WHEN: Saturday, Feb. 7, 7:30 to 11 a.m.
WHERE: Skidaway Community Church, 50 Diamond Causeway
HOW MUCH: \$12 in advance, \$15 at the door; children under 8 free
CONTACT: Visit www.kiwanisofskidaway.com for more details

WHAT ELSE: All you can eat pancakes, sausage, juice, coffee, and milk.

STAYIN' ALIVE

WHAT: Lifesaving CPR courses
WHERE: Skidaway Community Church
WHEN: Beginning Feb. 12
CONTACT: Visit limitlesstraining.org and skidcc.org for details regarding schedules, instructors, registration, and fees
WHAT ELSE: According to the American Red Cross, the chance of survival while waiting for emergency services during a cardiac emergency decreases 10 percent per minute without CPR. Knowing and initiating emergency CPR is literally a lifesaving gift for you, loved ones, friends, neighbors, and the community we share.

LESSONS IN LEADERSHIP

WHAT: Skidaway Abigails February Speaker - Dr. Otis S. Johnson: A Trailblazer in Civil Rights and Leadership
WHEN: Thursday, Feb. 12, 3:15 p.m. check-in; program begins at 3:30
WHERE: Messiah Lutheran Church, 1 W. Ridge Rd.
CONTACT: skidawayabigails.org.
WHAT ELSE: Dr. Johnson, a former mayor of Savannah and a leading advocate for civil rights and education, will share his remarkable journey and insights. All Abigails members and their guests are welcome.

JUST REWARDS

WHAT: Landlovers Merit Awards for high school juniors and seniors
WHEN: Deadline to apply is Feb. 17
CONTACT: For more information and to fill out an application, please visit landingslandlovers.com/awards/ and click on the 2026 Merit Awards Application link at the bottom of the page
WHAT ELSE: Landlovers Merit Awards are given out each year to Landings students who are juniors or seniors in high school or age equivalent home-schooled students. The Merit Awards recognize students who go above and beyond in giving time and talent through community service.

AN AFFAIR TO REMEMBER

WHAT: Savannah Council on World Affairs
WHEN: Feb. 18, 7 to 9 p.m.
WHERE: Coastal Georgia Center, 305 Fahm St.
HOW MUCH: Free for SCWA members; \$20 - general public; Full-time students, faculty and active military - free
CONTACT: www.savannahcwa.org for more details
WHAT ELSE: Former intelligence officer Jona-

than Panikoff will discuss "When Great Powers Collide: How the Middle East Will Continue to Shape Global Affairs."

THE RIGHT STUFF

WHAT: Ladies on the Right luncheon
WHEN: Feb. 19, 12 to 2 p.m.
WHERE: Palmetto Ballroom at the Landings
HOW MUCH: LOTR members - \$37.50, non-members - \$45
CONTACT: LadiesontheRight.com
WHAT ELSE: Marc Aramian, an independent movie producer, will speak on "How Hollywood Destroyed Our Culture and What We Can Do to Restore It."

FEATHERS AND FINS

WHAT: "Birds and Fish - Friends or Foes?"
WHEN: Thursday, Feb. 19, 4 p.m.
WHERE: St. Peter's Episcopal Church, 3 W. Ridge Rd.
HOW MUCH: free for FOSA members, \$5 for guests, payable online or at the door
CONTACT: fosa@skidawayaudubon.org
WHAT ELSE: Dave Devore, former CCA chapter president, and Garret Jones, former executive director of Wilderness Southeast, will present a look at the relationship of birds and fish and what it takes to sustain their special ecosystem. Attendees are asked to park in the rear lot. Please pre-register online at SkidawayAudubon.org.

GREAT SONG RIDE-ALONG

WHAT: American Traditions Vocal Competition Semifinals
WHEN: Meet at Methodist Church Feb. 19, at 2 p.m.
WHERE: Victory North
HOW MUCH: \$85 per person; Tickets are only available to Landlovers members, and are available at landingslandlovers.com.
WHAT ELSE: Your ticket includes round-trip trolley transportation from Skidaway to Victory North, a cocktail to enjoy on the way, two sessions of amazing vocal competition in the semifinals, and the return trolley. You will have time between sessions for your own dinner arrangements. Make your dinner reservation at the Vault and receive 10 percent off your check. \$5 of your ticket price is a tax-deductible donation to Landlovers.

TAP YOUR TOES

WHAT: Lowcountry Bluegrass Concert
WHEN: Saturday, Feb. 21 at 5:30 p.m.
WHERE: First Presbyterian Church, 520 Washington Ave.
HOW MUCH: Free and open to all

CONTACT: savannahfpc.org; 912.354.7615
WHAT ELSE: Charleston's "New Ghost Town" brings their authentic, refreshingly modern bluegrass to town. Donations benefit Hope Arbor's joyful respite care for seniors. Free street parking.

HOW DOES YOUR GARDEN GROW?

WHAT: The Landings Garden Club meeting and program
WHEN: Monday, Feb. 23; 9:15 a.m. social, 10 a.m. meeting, 10:45 program
WHERE: Messiah Lutheran Church, 1 W Ridge Rd.
CONTACT: Joni, 925.787.9800 or joni-bro2022@outlook.com
WHAT ELSE: Melaney Cress, founder of the organic, all-natural, plant-based skin care company @sageadj.wise, will showcase products from her garden that she created after her 5-year-old daughter had a life-threatening allergic reaction to gluten. This is an interactive presentation, and herbal tea from Melaney's garden will be offered.

PICKUP ARTISTS

WHAT: Landlovers Flea Market intake
WHEN: March 12 - 13, 8 a.m. - 4 p.m.
WHERE: Messiah Lutheran Church, 1 W. Ridge Rd.
CONTACT: Want to be part of the behind-the-scenes preparation for the sale? Contact Maura McGarry at LLFMVolunteers@gmail.com
WHAT ELSE: Donations of gently used items are what makes Landlovers biggest fundraiser so successful. Proceeds benefit the Landlovers Foundation, which provides grants, scholarships, and merit awards within our community. For a list of acceptable/unacceptable items, visit landingslandlovers.com. For large items like furniture, email fleamarketintake@gmail.com to arrange a pick-up.

FLEAMARKET FESTIVITIES

WHAT: Landlovers Annual Flea Market and Auctionmania
WHEN/WHERE: Fleamarket - Saturday, March 14 - 9 a.m. to 1 p.m., Messiah Lutheran Church, 1 W. Ridge Rd.; Auctionmania - Thursday, March 19, at the Palmetto ballroom
CONTACTS: Flea Market: Janie Florenz at janie1040@gmail.com; Auctionmania: Judi Threlfall at judi.threlfall@gmail.com or Christin Street at Jcsstreet@comcast.net; To volunteer, contact Maura McGarry at LLFMVolunteers@gmail.com
WHAT ELSE: Everyone is invited to drop saleable items off at Messiah Lutheran on Thursday and Friday, March 12 and 13, 8 a.m. - 4 p.m.

ACROSS

- 1. Baseball team Savannah Sand ____
- 6. Abrade
- 10. Be a successful pitcher?
- 14. Like a Koontz novel, say
- 15. VIP in a burnoose
- 16. Balm base
- 17. Boeing 777, for one
- 20. Dog command
- 21. Band follower?
- 22. Moon feature
- 23. The Tiffany Network
- 24. Something to hang with?
- 25. *Big ____ House* (Martin Lawrence movie)
- 29. Dance derived from the twist
- 30. Bubbling, in a way
- 31. Fancy kind of rags
- 32. Bleacher feature
- 36. Org. based in Strasbourg
- 39. Follow the advice of
- 40. Lampblack
- 41. "All aboard!"
- 42. Anastasia's father, e.g.
- 43. Gratify
- 44. Lame excuse
- 47. Underhanded
- 48. Princess Leia's surname
- 49. "His Master's Voice" co.
- 50. Millenium Falcon, e.g.
- 54. Karaoke activity
- 57. Ominous date for Caesar
- 58. A lump for your stocking
- 59. "____ circumstances beyond our control ..."
- 60. American Revolution detractor
- 61. James ____ Jones
- 62) After-market item

DOWN

- 1. Understands
- 2. Witches ingredient eye of ____
- 3. *Tosca* tune
- 4. Diminutive
- 5. "What did I tell you?"

1	2	3	4	5	6	7	8	9	10	11	12	13
14					15				16			
17				18				19				
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54					55				56			
57					58				59			
60					61				62			

- 6. Philbin of TV
- 7. Among
- 8. Immoral act
- 9. Rule out in advance
- 10. Word with "greens" or "days"
- 11. Bring cheer to
- 12. Someone who lives solo
- 13. Offensive facial expression
- 18. Catches red-handed
- 19. Snobbish highbrow
- 23. It has many functions, briefly
- 24. Add on, as to a plant
- 25. Jet speed
- 26. Woodwind lower than a piccolo
- 27. Pouty expression
- 28. Matter topper?
- 29. Ocean bottom
- 31. Act self-satisfied
- 32. Palm or pawpaw
- 33. Very small amount
- 34. Narrative writing
- 35. Russo or Descartes
- 37. Act of putting into circulation
- 38. Optically offensive
- 42. "Mickey" singer ____ Basil
- 43. Surveyor's map
- 44. System of principles
- 45. Impolite looker
- 46. Easy victim
- 47. Henley Regatta craft
- 48. Black-bordered bio
- 49. Laugh heartily
- 50. It may be found on a lobe
- 51. Colored
- 52. "... and ____ the fire"
- 53. Exploited laborer
- 55. Make a little_ long way
- 56. Abbr. on a toothpaste box

Puzzle answers, page 36

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