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Inside C2

Southern DAILY

Make Today Different

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Thursday, December 16 2021|

Canada advises against international travel amid Omicron threat



A United States-bound passenger walks in Toronto Pearson Airport's Terminal 3, days before new coronavirus disease (COVID-19) testing

TORONTO, Dec 15 (Reuters) - Canada's government implored residents on Wednesday not to leave the country as provinces ramp up vaccinations to combat the fast-spreading Omicron coronavirus variant, even as efforts to head off a COVID-19 wave are complicated by public fatigue over the pandemic.

COVID-19 case numbers are increasing, with the national seven-day average of new cases at its highest point since Oct. 1, as Canadian hospitals struggle to clear backlogs from months of postponed procedures. Many exhausted staff members appear ill-equipped for another surge in infections.

"I say very clearly: Now is not the time to travel," Health Minister Jean-Yves Duclos told a news conference, adding it is clear there is community transmission of Omicron in Canada.

"I understand this sucks," Prime Minister Justin Trudeau told reporters as he urged Canadians to follow public health advice and "be careful during this holiday season. Get your kids their shots."

Children aged 5 to 11 had the highest infection rate of any age group in Ontario for the two weeks ended Tuesday.

Ontario will start offering a third shot of the vaccine to everyone over age 18 this week, while shortening the required gap between second and third doses to three months from six. The province, Canada's most-populous, is also reducing capacity by half at indoor events with a capacity of at least 1,000, including sports activities, concerts and commercial film and television production.

Canada has banned travel from 10 African countries because of concerns about the new variant.

The federal government advised residents in March 2020 not to travel abroad unless necessary. It withdrew the notice this past October - before the first Omicron cases were reported - citing the success of vaccination campaigns.

Peter Juni, director of Ontario's COVID-19 science advisory table, urged people to take precautions, get vaccinated and not take Omicron lightly.

"What really worries me is that people are asleep at the steering wheel, internationally," he said. "They have wishful thinking it will be mild. ... This is not a realistic attitude."

Scientists suspect Omicron is more transmissible given its rapid spread, although they caution it is too early to draw conclusions about its severity. read more

A United States-bound passenger walks in Toronto Pearson Airport's Terminal 3, days before new coronavirus disease (COVID-19) testing protocols to enter the U.S. come into effect, in Toronto, Ontario, Canada December 3, 2021. REUTERS/Chris Helgren

'MASSIVE VULNERABILITY'

There is "massive vulnerability" in Canada's healthcare systems, said Andrew Morris, an infectious disease doctor in Toronto, who added it is "highly likely" they will be overwhelmed.

In Alberta, a western Canadian province that experienced a punishing fourth wave, Dr. Christopher Doig's ICU in Calgary still has COVID-19 patients,

some of whom have been there for weeks. It is still operating at about 110% capacity, he said.

Shifting staff from other areas lets them "surge up" if needed, Doig said. "The downside of those surges is it pulls staff from other areas," and the pandemic backlog of surgeries grows.

Health officials are trying to persuade the public to get third doses of COVID-19 vaccines.

Amid fears of asymptomatic COVID-19 transmission, provinces that were given millions of rapid antigen tests by the federal government have come under fire for not distributing them more widely.

Ontario promised to make 2 million tests available in "high-traffic" areas and to allot five per student to school children this week. Quebec will hand out five tests per person starting next week. Alberta promised to give out 500,000 starting on Friday.

British Columbia health officials said this week they had not received the tests they were hoping for from the federal government and defended the province's providing tens of thousands of rapid tests

a week to hundreds of private employers.

Ontario said this week it is "temporarily interrupting" its return-to-office plan for provincial employees.

Alberta loosened restrictions on private gatherings on Wednesday, with Premier Jason Kenney citing pandemic fatigue.

Juni said he understands that people are tired of the pandemic.

"I'm completely exhausted," he said. "I've had it. I'm done completely. But the virus doesn't care."



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WEA LEE'S GLOBAL NOTES

12/15/2021



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We Salute Mattress Mack

We went to Gallery Furniture and met Mr. Jim McIngvale and delivered some toys so that his truck could send them to Mayfield, Kentucky. I am so honored to be a part of his mission to help people



when they really need it.

Mr. McIngvale, also known as “Mattress Mack”, was born in Starkville, Mississippi, and moved to Texas where he played football at Denton, Texas’ s University of North Texas.

In the early years when he opened his Gallery Furniture store, he invested his remaining \$10,000 in a television station in Houston. But he was not satisfied with the TV station production, so he created his own slogan, “Save You Money!” He is best known for his energetic and fast-paced sales pitches.

Today he owns one of the largest furniture stores in Texas. In 2002, Jim McIngvale co-authored the book, “Always Think Big” with Thomas Duening and John Ivancevich and talked about ups and downs of his business.

In August 2017, he opened his store to people affected by Hurricane Harvey and when Storm Imelda flooded Houston in 2019, he once again opened his door to storm victims and provided them with free meals.



During the 2021 Texas power crisis and winter storms, McIngvale allowed people to shelter from the cold and spend the night in the Gallery Furniture showrooms. When Hurricane Ida hit the Gulf Coast, particularly in Louisiana, he again opened his door to shelter Louisiana residents at his furniture store and again provided warm meals to them.

Today our communities are facing more challenges than ever. When we look at the disaster that just happened in our neighboring states, we need to help those people like Mr. McIngvale is doing.

We want to urge our community to take action now. Southern News Group has also set up a tent to accept donations from all of you. Let’ s all follow Mattress Mack’ s example, our hero, to send our love to all those people who are still suffering.



Southern DAILY Make Today Different

Editor's Choice



Debris are picture from a cinema after tornadoes ripped through several U.S. states in Mayfield, Kentucky. Shawn Triplett/via REUTERS



Britain's Prince Charles adjusts his protective face mask as he visits a coronavirus vaccination centre in London, Britain. REUTERS/Hannah McKay/Pool



Paul Heinz Suarez Gamarra, locally known as the Peruvian Santa Claus, stands in a ladder basket of the local volunteer firefighter brigade, as he hands out presents to young coronavirus patients at a hospital, in Lima, Peru. REUTERS/Sebastian Castaneda



A car balances against a bridge trestle after entering the rising Los Angeles River as major storm hits California with rain and snow flooding the streets, in Los Angeles, California. REUTERS/David Swanson



Noor Al-Janabi, 28, an Iraqi woman carpenter, repairs a furniture in the garage of her home in Baghdad, Iraq. REUTERS/Saba Kareem



People take a selfie in front of the Grogu “Baby Yoda” balloon as it is inflated the day before the Macy’s Thanksgiving Day Parade in Manhattan, New York, November 24. REUTERS/Carlo Allegri

FDA Panel Recommends Authorizing Pfizer COVID-19 Vaccine For Kids 5-11



Compiled And Edited By John T. Robbins, Southern Daily Editor

A key Food and Drug Administration (FDA) expert advisory panel on Tuesday recommended the agency authorize Pfizer's COVID-19 vaccine for use in children between the ages of 5 and 11, bringing those children one step closer to getting a shot. The Vaccines and Related Biological Products Advisory Committee (VRBPAC) found that the benefits of the vaccine outweighed its risks and voted nearly unanimously 17-0, with one abstention, to recommend the agency authorize the shot. The FDA is not bound to follow the panel's recommendation, though it often does. Extending vaccine eligibility to children younger than 12 has been a major goal of public health officials and eagerly awaited by many pediatricians and families. The FDA has been under pressure for months to move quickly to authorize vaccines for younger children, one of the final barriers to overcome in the country's historic vaccination campaign. Pfizer submitted data to the FDA in late September, and formally asked for emergency use authorization earlier this month. An agency review of the data published late Friday found that the benefits of the vaccine "clearly outweigh the risks," indicating that FDA scientists have a favorable view of the evidence. Some members of the panel said they felt the recommendation was too broad. Not all children will need the vaccine, they argued, or some may only need a single dose because they've been previously infected with COVID-19.



There were also concerns about monitoring the safety profile of the vaccine, because of the potential for

extremely rare but serious condition called myocarditis, or heart inflammation. Cases of myocarditis are generally more common in teenagers between the ages of 16 and 19. It's less common in adolescents, and even more rare in young children. The problem did not turn up in the Pfizer-BioNTech pediatric clinical trial, though experts said it was too small to detect such a rare complication. Patrick Moore, a professor at the University of Pittsburgh Cancer Institute, said the potential risks of myocarditis are important, but theoretical. The risks of COVID-19 to children are much more real, he said. Moore noted that 94 children in the 5-11 year old age group have died of COVID. "All of them had names. All of them had mothers," he said. "It's very hard for me to believe the risk for a severe outcome is going to come close to the risk, known risk, that we've seen for this virus in this age group." A decision by agency regulators is expected in the coming days, and a Centers for Disease Control and Prevention (CDC) panel is scheduled to meet Nov. 2 and 3 to recommend how the vaccines should be used. If the panel gives favorable recommendations and CDC Director Rochelle Walensky accepts them, the vaccination campaign would begin.



A study from Pfizer released as part of its panel briefing document last week showed that smaller

doses of its COVID-19 vaccine for children ages 5 to 11 appear safe, and are nearly 91 percent effective at preventing symptomatic disease. Pfizer said vaccinating children in that age group "could prevent harms" including interruption of education, hospitalization, severe illness, long-term consequences, and death. The Biden administration last week said it's purchased enough vaccine to inoculate all 28 million 5- to 11-year-olds in the U.S., and will distribute it through a network that will rely on more than 25,000 pediatrician's offices, as well as community health centers, schools and pharmacies. Children ages 5 to 11 account for about 9 percent of all reported COVID cases in the U.S., according to FDA data presented to the panel on Tuesday. While it has been declining in recent week, the number of new COVID-19 cases in kids remains exceptionally high. This past week almost 118,000 child COVID cases were added, with more than one million over the past six weeks, according to the American Academy of Pediatrics. (Courtesy thehill.com)

Related

Texas Pre-Ordered 1.3M Doses Of The Pediatric COVID Vaccine For Kids Ahead Of Federal Approval



The Texas Department of State Health Services announced on Monday that the Lone Star State will be receiving about 1.3 million doses of Pfizer's COVID-19 vaccine for children ages 5 to 11 ahead of its anticipated authorization from the Food and Drug Administration (FDA) which was granted on Tuesday. The pediatric vaccine, like its adult companion, requires two shots for full immunization, though it contains just a fraction of the dosage. The agency's director Imelda Garcia said that the yet to be recommended vaccines were ordered as part of the federal government's process called "pre-order prior to launch," according to The Dallas Morning News. "This enables the state to place vaccine orders before the FDA authorization, and before the CDC recommendation process is complete," Garcia explained. The Morning News noted that there are roughly 3 million children between the ages of 5 and 11 in Texas. According to Garcia, the orders for the pediatric vaccines were placed in three waves, with the first two submitted on Thursday and Saturday. The order for the third wave was expected to be placed on Monday evening.



The first wave of orders, consisting of more than 404,000 doses, will be shipped out within one to five days after the FDA grants emergency use authorization to Pfizer's COVID-19 vaccine for children, which is expected to happen sometime this week. The second wave of more than 303,000 vaccines will be shipped within three to seven days while another wave of more than 303,000 doses will go out in five to nine days, according to the Morning News. Garcia said that more than 800 health care providers across 120 counties in Texas will be receiving doses of the vaccine once it's granted emergency authorization. Around 130 counties will not be receiving vaccines because they have not placed orders. According to Johns Hopkins University's COVID-19 tracker, around 54 percent of Texas's total population is fully vaccinated.



Camora Taylor, 12, receives a COVID vaccine Aug. 4 in Ferguson, Missouri. (Photo/Spencer Platt/TNS)

The state has started pre-ordering the shots, and will start to ship as soon as the U.S. Food and Drug Administration initiates the process. An FDA advisory panel met Tuesday and recommended authorization of the Pfizer COVID-19 vaccine for children from ages 5-11. Advisers to the Centers for Disease Control and Prevention, which makes additional recommendations on who should get the vaccine, are scheduled to meet Nov. 2 and 3. "This new age group is a big factor just in helping us reduce the viral load across the state," said Imelda Garcia, the head of the state's Expert Vaccine Allocation Panel. The emergency use authorization would add about 2.9 million Texans to the vaccine eligibility pool and comes as children's COVID cases and hos-

pitalizations have surged during the delta wave. The pediatric vaccine, like its adult companion, requires two shots for full immunization, though it contains just a fraction of the dosage. Pfizer said last week that its shots are more than 90 percent effective in children ages 5 to 11.



The 1.3 million doses likely headed to Texas are not differentiated by first and second doses. Depending on demand, providers can request additional doses in the weeks after the emergency use authorization is granted. Just more than 1 million of those doses will be allocated directly to the state's providers, including hospitals and pediatricians' offices. Roughly 260,000 more will head to pharmacies, which have independent relationships with the federal government. More than 800 COVID vaccine providers in 120 counties will receive the doses in three shipment waves. The first includes about 440,000 doses that will ship within one to five days after the emergency use authorization is issued; the other orders will follow close behind. Garcia said the vaccine's authorization will be another critical development in the fight to stop the spread of COVID-19. She plans to vaccinate her daughter.



"It's not only for my daughter's health and safety, but vaccinating her also protects our extended loved ones," she said. The vaccine currently is available to Texans ages 12 and over. The Pfizer vaccine is the only one authorized for use in children ages 12 to 15; Moderna shots are available for 16- and 17-year-olds. As of Monday, more than 15.3 million Texans have been vaccinated fully — nearly 64 percent of the state's 12-and-over population. (Courtesy https://www.expressnews.com/)

COMMUNITY

Decades After Polio, An Iron Lung Is Still Relied On To Breathe By Patient

Compiled And Edited By John T. Robbins, Southern Daily Editor



Martha Lillard needed a large respirator called an iron lung to recover from polio, which she caught in 1953. She still uses a form of the device at nights. (Photo courtesy of Martha Lillard)

On June 8, 1953, Martha Lillard celebrated her fifth birthday with a party at an amusement park in Oklahoma. A little over a week later, she woke up with a sore throat and a pain in her neck. Her family took her to the hospital, where she was diagnosed with polio. She spent six months in the hospital, where she was put in a giant metal tank — a ventilator informally called an iron lung — to help her breathe. To this day, Lillard is one of the last people in the U.S. who still depends on an iron lung to survive. Polio is a potentially life-threatening disease, once among the world's most feared. In the late 1940s, polio disabled an average of 35,000 people in the U.S. every year. A polio vaccine became widely available in 1955, and millions of Americans got vaccinated. Since 1979, no cases of polio have originated in the U.S., according to the Centers for Disease Control and Prevention. The disease has been nearly eradicated — the World Health Organization documented only 175 cases of wild polio in 2019. It remains endemic in only Pakistan and Afghanistan. Although most people who contract polio will not have visible symptoms, a severe case can infect the brain and spinal cord and cause paralysis. Lillard's breathing muscles were weakened by the disease, and she survived thanks to the iron lung.



Iron lung respirators are prepared in an emergency polio ward at a Boston hospital in August 1955. (Photo/AP) The machines are giant ventilators about 7 feet long. Patients lie inside with just their heads resting outside; a seal around the patient's neck creates a vacuum. Bellows at the base of the device do the work of a human diaphragm — they create negative pressure so the user's lungs fill with air, and positive pressure allowing the person to exhale. Sixty-eight years later, an iron lung is still keeping Lillard alive — she sleeps in it every night. While many people who had polio or post-polio syndrome either weaned themselves off the machines or switched to another form of ventilator, Lillard never did. "I've tried all the forms of ventilation, and the iron lung is the most efficient and the best and the most comfortable way," she told Radio Diaries. The antiquated machines are now more likely to be found in a museum than in someone's home. In the 1990s, when her iron lung was breaking down, she called hospitals and museums that might have had old ones in storage. But they'd either thrown them away or didn't want to part with their collection. She eventually bought one from a man in Utah — the machine she still uses today. The machines were once serviced by Philips Resperonic, but Lillard says the assistance she received from the company was minimal. Once, she says a technician was sent to service her machine and prepared to leave before putting the machine back together. Lillard has gotten stuck in the iron lung. She lost power when an ice storm came through Oklahoma and her emergency generator didn't kick on, leaving her trapped in the device without heat.

"It's like being buried alive almost, you know — it's so scary," Lillard says. She tried to call 911, but the cell towers weren't working. "I was having trouble breathing. And I remember saying out loud to myself, 'I'm not going to die.'" Lillard was eventually able to get a signal, but she remembers the emergency responders had no idea what an iron lung was. Luckily, they were able to get the generator going for her.



Martha Lillard says she worries about running out of replacement parts to make her iron lung respirator function properly. (Photo courtesy of Martha Lillard)

Wear on parts is her main issue now. The belts need to be replaced every few weeks, the cot inside every six months, the motor every 12 years or so. Her most immediate need is collars. The collars create the critical airtight seal around the neck. Each one lasts only for a few months. And she has bought all the back stock of collars from places that don't produce them anymore. "That's the main thing I'm having a hard time with, because I try to stretch out, make these collars last longer," Lillard says. "And when they start deteriorating, it gets harder and harder to breathe as they leak more." She has only a handful of collars left. "I really am desperate," she says. "That's the most scary thing in my life right now — is not finding anybody that can make those collars." Today, Lillard spends much of her time alone. She paints, watches old Hollywood movies and takes care of her beagles. She has been mostly isolating throughout the COVID-19 pandemic, seeing her sister, Cindy, and her brother-in-law, Daryl, in the evenings.



Dr. Jonas Salk administers vaccine to young patient.

Being affected by polio at such a young age has meant Lillard hasn't been able to have all the experiences others have had. She attended school from home for much of her childhood and couldn't participate in most extracurricular activities — she still remembers longing to go camping with her siblings. She was not able to have children or hold a steady job because of her physical limitations. Although some of her life experiences were limited, Lillard thanks a childhood friend named Karen Rapp for teaching her to appreciate small things. Together, they observed ants and built little villages of grass huts. "There's much more to see if you really look for it," she says. And she's grateful for the iron lung. "It's what sustains me. It's what heals me. It's what allows me to breathe the next day," Lillard says. "I look at it as a friend, as a very dear friend." (Courtesy npr.org)

Related

Jonas Salk Creator Of The Salk Vaccine

Jonas Edward Salk (Born Jonas Salk; October 28, 1914 – June 23, 1995) was an American virologist and medical researcher who developed one of the first successful polio vaccines. He was born in New York City and attended the City College of New York and New York University School of Medicine.

Dr. Jonas Salk In 1947, Salk accepted a professorship in the School of Medicine at the University of Pittsburgh. It was there that he undertook a project to determine the number of different types of poliovirus, starting in 1948. For the next seven years, Salk devoted himself towards developing a vaccine against polio. Salk was immediately hailed as a "miracle worker" when the vaccine's success was first made public in April 1955, and chose to not patent the vaccine or seek any profit from it in order to maximize its global distribution. The National Foundation for Infantile Paralysis and the University of Pittsburgh looked into patenting the vaccine but, since Salk's techniques were not novel, their patent attorney said, "if there were any patentable novelty to be found in this phase it would lie within an extremely narrow scope and would be of doubtful value."



Jonas Salk wrote about the polio vaccine trial project, "the most elaborate program of its kind in history, involving 20,000 physicians and public health officers, 64,000 school personnel, and 220,000 volunteers," with over 1.8 million school children participating in the trial. A 1954 Gallup poll showed that more Americans knew about the polio field trials than could give the full name of the current U.S. president.

An immediate rush to vaccinate began in both the United States and around the world. Many countries began polio immunization campaigns using Salk's vaccine, including Canada, Sweden, Denmark, Norway, West Germany, the Netherlands, Switzerland, and Belgium. By 1959, the Salk vaccine had reached about 90 countries. An attenuated live oral polio vaccine was developed by Albert Sabin, coming into commercial use in 1961. Less than 25 years after the release of Salk's vaccine, domestic transmission of polio had been completely eliminated in the United States.



Salk in 1955 at the University of Pittsburgh In 1963, Salk founded the Salk Institute for Biological Studies in La Jolla, California, which is today a center for medical and scientific research. He continued to conduct research and publish books in his later years, focusing in his last years on the search for a vaccine against HIV. Salk also campaigned vigorously for mandatory vaccination throughout the rest of his life, calling the universal vaccination of children against disease a "moral commitment". Salk's personal papers are today stored in Geisel Library at the University of California, San Diego. (Courtesy Wikipedia)

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李医生引进最新设备治疗下肢疼痛！第一次治疗\$49元Coupon！

（本報記者黃梅子）步入中年，不少人會發現膝關節靈活不比從前，患有膝關節炎（Osteoarthritis of the knee）的風險也隨著年紀大了而提高。膝關節炎由軟骨及其周圍細胞耗損而引發，屬於相當常見的人體老化疾病之一。膝關節炎病發是由關節細胞耗損程度和修復程度失去平衡而導致，症狀包括關節疼痛、僵硬和功能減弱。情況嚴重時，還需要手術治療。

還有一部分患者下肢疼痛是Lateral Patellar Compression Syndrome 髌骨外側壓縮綜合症。另有些患者是因為頸椎腰椎或坐骨神經引起的下肢疼痛。還有些患者是車禍後遺症，有些人在車禍過去幾年以後才感覺到身體各種疼痛。

總之，不管您是哪种原因引起的下肢疼，都要引起重視，積極做康復治療，不管是膝關節炎還是車禍後遺症，康復治療總是比動手術更保險。康復治療一定要在醫生的指導下進行，否則有可能使得病情惡化。Texas Spinal Care的李醫生引進最新的多功能下肢牽引治療儀，幫您減輕疼痛，快速恢復健康！這個機器經過FDA批准，是目前最先進最有效的下肢疼痛治療儀，其組成包括固定裝置，放鬆裝置，牽張裝置，能刺激雙腿內側肌群及穴位，可通經活絡，緩解肌肉痙攣，激活運動神經元，恢復下肢運動功能。李醫生還有儀器測試足底，電腦掃描足部定做康復鞋墊，能很大程度上緩解下肢疼痛以及行走困難。

我們首先來看一看膝關節炎的病因，常居潮濕、寒冷環境的人多有症狀，與溫度低，引起血運障礙有關。第二是體重因素，肥胖和粗壯體型的人中發病率較高。第三是年齡因素，從中年到老年，隨年齡增長，常發生關節軟骨退行性變，關節多年累積性勞損是重要因素。第四，營養不良也有可能致病，關節軟骨內沒有血管，其營養依靠從關節液中吸取。軟骨的修復是靠外層的軟骨細胞分裂繁殖和軟骨細胞分泌基質來完成的，由於營養和氧供應不足，影響到軟骨細胞的增殖時，就會導致軟骨基質減少，軟骨新生不足而變軟弱，極易在負重部位發生磨損。

髌股關節綜合症占到了所有運動相關的膝關節問題的25-40%，在膝關節功能障礙與運動損傷中十分常見。髌股疼痛綜合症風險最大的人群是跑步者，騎自行車者，籃球運動員以及相關跑跳較多的愛好者到運動員，當然主要還是動作模式問題與過度不正確使用所引起，病症發作可能是由於慢性損傷或者單次急性損傷直接引起，症狀包括膝關節弥漫性疼痛和局部髌下疼痛。髌骨周圍和下方、膝蓋前部、膝蓋骨的內側邊緣經常有壓痛，髌骨周圍后方發生持續的鈍疼疼痛，運動後有時會出現腫脹。在上下山坡、上下樓梯、久坐起身時，髌股關節位置疼痛往往更嚴重。膝蓋彎曲時可能伴隨發出嗶嗶聲「關節噪音」，髌股關節綜合症往往伴隨著大腿肌肉「股四頭肌」的肌張力異常，髌骨周圍的圓圈性疼痛範圍，久坐後症狀加劇，無力疼痛伴有膝關節屈曲減少。

髌骨與股骨組成髌股關節，髌骨關節和我們的股關節共組成了我們身體上著名的——膝關節，而我們的髌股關節形成在髌骨和股骨遠端之間，可謂是在夾縫中成長。治療中最重要的第一步是避免使問題惡化的活動，並且及時休息，光嚷嚷「疼」而不去治療的人是打算坐輪椅過下半生？我們的髌骨本身沒有血液和淋巴液供應，所以一旦損傷恢復會非常的緩慢，停止進一步的損傷是十分必要的。李醫生治療下肢疼痛，先用電腦掃描儀掃描足部，幫您定制復健矯正鞋墊，能極大地緩解走路時的疼痛，然後再用下肢牽引治療儀來復健治療，配合使用醫用去痛風濕乳液和營養素，是目前治療下肢疼痛的最佳治療組合。您攜帶這篇文章可以在第一次檢查和體驗治療時抵49元錢。

李醫生還專精車禍後的復健，車禍後PI與PIP都收。請打電話給李醫生

免費諮詢。中文請與queen 陳 聯系。
Texas Spinal care
電話：713-278-2225
網址：http:txspinalcare.com
診所地址：2600 S Gessner RD, Suite 120, Houston, TX 77063

診療時間：每週一至五全天，周六上午。



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