

"For many years I have been very impressed with how Mackie Shilstone's comprehensive and sophisticated approach...has benefited both elite athletes and everyday men and women."

—BOB COSTAS

STOP RENTING YOUR HEALTH



OWN IT!

A 3-STEP APPROACH

MACKIE SHILSTONE

"My life, my career changed when I met Mackie Shilstone."

—SERENA WILLIAMS

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ISBN: 978-0-615-57826-2

Printed in the United States of America by
MPress
4100 Howard Avenue
New Orleans, Louisiana 70125

Front and back cover by Phillip Collier designs

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ACKNOWLEDGMENTS

I would like to thank the following people and groups for the roles they played in the compilation of this book:

Leigh Simons – For recognizing several years ago that my message “to stop renting your health” would be the key to a longer, healthier, more prosperous life. His belief in me and our friendship is truly appreciated.

To Leigh’s great staff at LS Productions for their excellent support and follow-up to make this project a reality.

To Dean M. Shapiro for putting words to my thoughts and consistently staying on top of this project until completion.

To Chris Bynum who understood how to focus the project and bring it to life. And to her cohort Suzanne Stouse, for eagle-eyeing the copy.

To Dr. Leonard Kancher for his brilliant, concise and forward-thinking approach to medicine. His gold-standard approach to health care and his patients is a path for other primary care physicians to follow.

To Michelle Hyde for always being there for me even when I think I do not need help.

To Julie Fortenberry for putting the nutrition component together in a workable plan and sharing my vision.

To Chris DePolo for 15 years and counting of loyalty and support.

To Beth Krebsler for overseeing the Pro Circuit Exercise descriptions and quality control of the photographs.

To Jheri Bellard for her technical review of the manuscript, especially in the exercise chapter.

To Julie Chappius for the boxing graphic and the body measurement chart.

To Glade Bilby for taking the photographs of the Pro Circuit.

To Patrick McCausland for the male and female vitamin recommendations.

To Stuart Tomc at Nordic Naturals® for the research and writing of the fish oil story.

To the staff of Nordic Naturals® for supporting this project with the research, quality, and integrity necessary to produce the best fish-oil products in the world.

To my clients John Goodman, Clay Leon, and Christie Dannewitz for a willingness to share their stories of a path to better health.

To Kelley Hunter Ellis for the section on the psychology and strategy it takes to stay on the path to better health.

To Mark A. Letendre ATC, Director of Umpire Medical Services for Major League Baseball, for his design of and consultation on the Fitness Principle Structural Layout and Programs.

To Alice Ford for demonstrating the exercises in the Pro Circuit.

To The Fitness Principle Staff, my fellow team members at East Jefferson General Hospital, and Dr. Mark Peters, President and CEO of East Jefferson General Hospital, for believing and investing in my concepts and programs

To Kelly Gaubert of MPress for her tremendous assistance in the printing of this book, and to Wilma Hopkins of MPress for her excellent typesetting and design work.

FOREWORD

From the moment you meet Mackie Shilstone, you know his passion for what he does is genuine and infectious. The light in his eyes and knowledge he has about the human body can now, through this book, *Stop Renting Your Health, Own It*, help everyone who can't personally be trained by Mackie to take ownership of their health and fitness.

I first met Mackie Shilstone twenty years ago when he was training Riddick Bowe for the first Andrew Golota fight in New York City. Mackie was training Bowe in New Orleans and, for the final part of the training, he was to come to New York City. Mackie was referred to me by the New York Giants Team Physician Dr. Allan Levy, and I became Team Bowe's doc for his New York period. We met at the hotel restaurant. I was impressed with Mackie's enthusiasm and his knowledge from the get-go. After ten minutes Mackie excused himself and went into the kitchen. When he came out he explained that he wanted to be sure Bowe's food was being made with the groceries he picked out and cooked in the manner he had dictated. This wasn't just compulsive; he was paying attention to every detail of Bowe's training, including all substances this athlete ate. His training was just as impressive.

Ever since that time, Bowe and I have continued to send patients, both professional and enthusiastic non-professionals, to work with Mackie in New Orleans. Mackie's knowledge and motivational skills make everyone better. I know every reader will pull from the words and knowledge Mackie has and feel that motivation to take hold of their health, follow his guidelines, and feel and look light years better. This book will be your storied reference and a valuable resource that not only you will benefit from, but all your friends. As you feel better you will be recommending it to others.

Enjoy the Ride.

Lewis G. Maharam, MD, FACSM, is one of the world's most extensively credentialed and best-known running health experts. Better known as *Running Doc™*, Maharam is author of four books including **Running Doc's Guide to Healthy Running**. He is past president of the New York Chapter of the American College of Sports Medicine and has a private practice of Sports Medicine in New York City.

INTRODUCTION

The book you hold in your hand is about **owning** your health, not renting it, as many people do. It's about taking charge of your body and not letting your body take charge of you. If you are ready to take ownership of your health — and therefore your life — this book holds the tools you need.

What I share with you on these pages is going to make the difference in how you live your life within the body you were given. You can either take ownership of it, like you would a new house or a new car, and put in the time, effort and resources necessary to maintain it in peak condition — or you can rent it; forgo any improvements and reap the consequences of your neglect. The choice is yours to make. You've always had the power to make that choice, whether you were aware of it or not.

Most of us, throughout our lives, have been told that it's what we don't know that will kill us. In this book I am submitting the premise that it's what we DO know that can kill us. Too many people in the world are dying needlessly every day because of what they have been told and taken as truth. They've been told if they take this pill or follow this program or stick to this diet they'll either maintain the good health they're fortunate enough to have, or improve it. They allow themselves to be influenced by promises that they'll reach the supposed "ideal," not realizing that that has been placed out of their reach so they'll continue to buy into the product or program with the false guarantees.

In the chapters that follow, I provide for you a strategic plan that I have found to be most successful with my own clients, from elite athletes to iconic entrepreneurs to ordinary individuals on a quest for fulfilling and energetic lives. Like most other programs, it's going to entail exercise and proper nutrition, but it's also going to go further than that. It will add the elements of determination, drive, passion, commitment, and an overall positive, can-do attitude that is absolutely essential to the success of this or any other program.

Most of my work, as you will see in the chapters to come, is based not only on what I've observed and experienced, but is solidly based on scientific principles and hard supporting data. In my 35 years as

a performance enhancement and positive lifestyle management expert, I have been a voracious reader of scientific and highly technical trade journals in the world of sports medicine and sports therapy. I firmly believe in applying the latest technology and the principles behind that technology to the work I do.

The fields of science and medicine have been with us for thousands of years, but only now are we beginning to understand the specifics about the human body and its capabilities that our forefathers could never have imagined. Armed with that knowledge and the technology to track progress, we can develop individualized programs that allow us to reach our full physical capabilities.

The work I do will stand up to the most rigorous scrutiny. It is “tried and true” and those who have gone through my programs will vouch for them.

This is my promise to those of you who have made the commitment to buy this book and the program for health ownership within it. No matter who you are, what you are, or what you do, you are going to find something in this book that will be life-changing. I am going to provide for you the two main tools necessary for this transformation — passion and commitment. Armed with the fire of motivation the two provide, you will see good things happen in your life.

Nothing in this world makes me feel better than pointing to the many success stories I’ve had and the many more I look forward to having.

Helping actor John Goodman lose 100 pounds, Baseball Hall of Famer Ozzie Smith extend his career another 10 years, Serena Williams win major tennis titles, and four professional boxers win world titles: These are just a few of the rewarding experiences I’ve had. But the greatest sense of accomplishment comes from the greatest good — reaching more people open to the new frontier of better health and greater longevity.

With that goal in mind, let’s hit the road that will get us there.

THE TOOLS THAT WORK

The partnership of passion and motivation

Before you can even set foot on the track there's a critical first step: reassessing the power of passion. Get that down, and passion, in turn, will feed motivation. And there you have a pair of vital tools — passion and motivation — for moving your life into the realm where the once impossible is possible.

Simply put, passion is a life force, the internal combustion engine that sparks the fire within you. Attaining what we want in life is almost never easy, nor meant to be. We are conditioned almost from birth to follow the maxim "You get what you work for," and our brains are likely genetically programmed that way as well. We are inclined to work at whatever we like to do or what we do best. We are expected to be productive, and that is all for the good. But those who succeed welcome a challenge for the satisfaction of reaching a goal. Passion is free for the taking, but it must be nurtured and maintained. Passion does not run on autopilot. It thrives on self-awareness and effort. Only then does passion become the energy that moves you forward.

SOLIDIFYING THE PARTNERSHIP

Sharpening the cutting-edge tools

Once you have connected passion and motivation, it is time to manage your performance. You do this by managing your health — both mental and physical. When health ownership, passion and motivation come together, you summon the energy it takes to live the successful and fulfilling life you want.

PART ONE

CHAPTER ONE

Passion and Motivation

THE ROAD TO HEALTH OWNERSHIP

Ready, Aim . . . Higher!

How many times in your life have you set goals for yourself only to be disappointed when you failed to reach them? I'm sure none of you has been keeping score, but it's undoubtedly happened to us all at least once. (More than once?)

No matter how many times you've encountered this, never be discouraged by your failure to reach those goals. Maybe yours was related to your job, or your health. Regardless, you just had to deal with it.

What are the odds?

How many times have you heard the expression "Failure is not an option?" Do you believe it? The answer you give can determine your odds at success.

I happen to agree with the statement. For me and in the work I do, failure is NOT an option. If I don't achieve my goal of offering the best, most effective, most results-oriented fitness program my training and experience can offer, then people who enroll in my program won't accomplish their goals either. If I didn't make the effort to stay abreast of scientific developments and the most current information available to people in my field, if I didn't take advantage of the latest technological advances in measuring body composition and other essential components of my program, if I didn't seek out the expertise of other specialists in fields that feed into mine, I would be out of business.

I have to keep my goals in front of me all the time, keep striving to achieve them, and keep setting new goals as the need arises — which of course includes the goal of this book: to share with readers what I've learned from working with people who want to improve their physical condition and overall well-being.

Moving on

Again, this doesn't mean that I've never failed to reach a goal; it means I'm not going to dwell on those occasions. Much of what I've incorporated into my program has been learned through trial and error — finding out what worked and what didn't, minimizing or eliminating margins for error, and then adjusting the variables to find the best results. It's all part of the learning process about reasonable and attainable goals. Understanding the challenge and then going for it.

Not every boxer I helped train won every fight, nor did every baseball player win an MVP award, nor every team a World Series or a Stanley Cup. But here is what I *can* say, with absolute certainty: As I strove to accomplish those goals, each of these athletes got something positive out of the experience of working with me. I helped them improve their performance physically, mentally, and in other less tangible but equally important ways. And why can I say this with such certainty? Because this was my primary goal. Because in the long run, getting someone healthy, keeping him healthy, and instilling the keys to a lifetime of good health is a more beneficial, farther-reaching goal than winning any title or award. While a trophy may reflect excellence in achievement, good health is the heartbeat of your life.

Training for life

I train and condition professional athletes to be the best they can be during their active careers, but I also train and educate them about maintaining their good health beyond their careers — for the rest of their lives. And it's this emphasis on *lifelong* health that most have said they appreciate more than anything I did for their careers.

I can name names here, starting with Ozzie Smith, a perennial All-Star shortstop for the St. Louis Cardinals and a Major League

Baseball Hall of Famer. Time after time he's said publicly that he's as grateful we helped him extend his career by 11 years as he is for a fitness plan he can follow for the rest of his life. Needless to say, testimonials like these make me feel very proud. They remind me that I am accomplishing a long-range goal as well as a shorter one.

But short-range goals that evolve into long-range goals with lifetime benefits are not just the desire of those in the athletic arena. People from all walks of life who seek out my Executive Wellness Program at East Jefferson Hospital (in Metairie, La.) desire an immediate solution to such health concerns as being overweight or battling hypertension or fatigue. But they soon realize that lifetime control of their health and well-being is at the root of those desires.

Kim Lepine, 51, had open-heart surgery (valve replacement and one bypass) in 2004 at the age of 44. Thereafter, she worked out off and on, but could never make the commitment to stay with a health and fitness program. That changed in the winter of 2010 when Lepine joined the Wellness program with her husband.

"My husband always had the discipline to stay in shape, but I developed the discipline through a supervised program that made me accountable by making it easy and simple," said Lepine, who began to see the time she devoted to her well-being as an investment in her future.

"I decided my husband and I could give up vacations to enroll in a program where we were personally guided (in both fitness and nutrition). If I didn't get myself healthy, I wasn't going to be enjoying any vacations. And if I didn't take care of myself, I wouldn't be around to have a vacation," said Lepine. "I now feel in control of my health, and I know I am now mentally and physically stronger than I have ever been before." She defines this newfound health ownership as "a beam of light." Along the way, she has lost 45 pounds and 38 inches.

So, what can you do to take ownership of your health and your life and start achieving the goals you set out to accomplish? Let's start by asking some basic questions. Your answers will be "Never," "Sometimes" or "Always." Write down your answers, and continue to read through this chapter. Keep them handy to compare to the answers I'm going to give you.

HEALTH CHECK: TEST YOUR ATTITUDE FIRST

1. Do you let others' opinions influence the goals you set and affect the confidence you have in your ability to reach them?
☐ Never ☐ Sometimes ☐ Always
2. Do you thoroughly evaluate your current situation before you set a goal? ☐ Never ☐ Sometimes ☐ Always
3. When you set goals, do you know what you want to accomplish over the long term? ☐ Never ☐ Sometimes ☐ Always
4. Do you have a clear vision of where you want to end up when you achieve your goal? ☐ Never ☐ Sometimes ☐ Always
5. Do you strive for your goals in realistic, incremental steps?
☐ Never ☐ Sometimes ☐ Always
6. Do you feel relaxed and clear-headed when thinking about your goals? ☐ Never ☐ Sometimes ☐ Always
7. Do you get nervous about or intimidated by the processes you may have to go through to achieve your goals?
☐ Never ☐ Sometimes ☐ Always

1. Do you let others' opinions influence the goals you set and affect the confidence you have in your ability to reach them?

If you answered "Never" to No. 1 (and are being honest), you may well be on the path to achieving your health and/or life goals. No matter what "they," your detractors, say or do, their opinions are not going to undermine your confidence in your ability to reach your goals. You are confident of getting there.

Doubt the doubters. For those who answered "Always" or even "Sometimes," you need to ask why you are allowing yourself to be subjected to the doubtfulness of others, why you allow them to torpedo your confidence. Restoring it is something we can do.

As you set a goal, be the prize a health-related accomplishment or career benchmark, think back to your childhood and the story of "The Little Engine That Could." A small locomotive is called upon for the very difficult task of hauling a long train over the top of a steep

hill. All the way up the hill the engine is saying to himself, “I think I can. I think I can,” and when he finally hits the top and is on the way down, the words become “I thought I could. I thought I could.”

But take it a step further. *Start out* with a fully-convinced “I know I can.” Make this your mantra and repeat it over and over and over to yourself, as many times and as often as necessary. This simple thing will be your confidence builder.

Let’s say you have a goal of losing 10 pounds over the next six months and you know this is going to be tough. You’ve tried it before and failed. Maybe you’ve tried it several times and failed. And if that wasn’t bad enough, you have people around you with whom you’ve shared your goal and all you’ve gotten from them is cynicism. So now you have a double whammy to overcome.

And the way to accomplish that it is to remember the words of the old Johnny Mercer song, “Accentuate the Positive.” Focus on all the ways you plan to accomplish your goal, draw up a game plan, and *eliminate the negatives*, which would include the opinions of negative people around you. Surround yourself with people who are positive, goal-oriented and confident, and hopefully some of that will rub off on you. And, when it does, you’ll be that much closer to attaining your goal.

2. Do you thoroughly evaluate your current situation before you set a goal?

Those who answered “Always” to this one are doing what they should be doing. After all, how can you know where you’re going later on if you don’t know where you are now?

The first thing you need to do is think about whether you’re a good “fit” for the goal you’re seeking. Is it something you are capable of doing? You need to sit down and give it an honest assessment.

If the career fits, wear it. Maybe you would like to be a lawyer. Or a doctor. What you may have going in your favor is a burning desire to help people in need of those services. This is admirable. But, do you have the time and the patience it’s going to take to become certified to practice? Do you have the necessary resources?

If you don't have the time, the patience, the resources or any of the other things the job is going to demand, it may be time to think about something that allows you to deploy your best assets, within a framework you can manage. Think about something related but less stressful and more realistically attainable. Then pursue it.

If you're thinking about moving forward in your chosen career or even into a new one, again: Stop and do a pros-and-cons list. The same applies if your goal is weight loss or getting yourself into better physical condition overall. Think about where you are; then mentally measure the distance to the place you want to go. Then forge ahead with a confidence grounded in reality.

3. When you set goals do you know what you want to accomplish over the long term?

Of course ideally the answer to this one is "Always," but I expect most of you will be realistic and say "Sometimes." With all the uncertainty in today's job market, we can't always know where we want to go. Or if we do know, we can't be certain that it's going to be there at the time we can reach for it.

But rather than dwell on these variables, assume that your goal is going to be attainable at the time you're ready to go for it. If it's not, then you'll have to rethink and readjust your goal at the appropriate time. So, if you answered "Sometimes," let's work on making it "Always." It's called know-where-you're-going.

Take the long view. The point here is not to focus on the variables but rather on the goals themselves. None of us have a crystal ball. The most learned economists in the world can't predict what will happen with the economy years from now. So, the objective is to focus on what you want to be doing, knowing that circumstances may change the picture. If you see that happening, be prepared with a Plan B or even C.

If your goal is losing weight, gaining healthy muscle and enjoying better overall health, you stand a better chance of achieving it than you do a career-oriented goal whose fulfillment may not be within your control. With the world changing at a faster pace than ever, that job or promotion you so desperately want may not be there

five years from now — but your health and your responsibility for maintaining and improving it will be.

Health is something more controllable — not subject to the vagaries of the marketplace or changing technologies. It is yours. You OWN it. So, when you set long-term goals for where you want to be weight-wise and health-wise, you are the boss. Your job? Know where you want to go, where you want to be by a given time. And then do what you need to do to get there. Believe it or not, it can be as easy as it sounds.

4. Do you have a clear vision of where you want to end up when you achieve your goal?

Again, your answer here *should* be “Always,” but for most, “Sometimes” it will be. But there are things you can do to change that. If your goal is to become the CEO of the company you work for now or the company you’d like to work for, take a moment to relax and let your mind wander a bit. Sit down in a comfortable chair, close your eyes and see yourself in the future. Envision yourself sitting behind that big glass-topped desk and the floor-to-ceiling picture windows and the panoramic view overlooking your city and, maybe, a river that runs through it. Imagine what that would be like, enjoying the view, meeting with interesting people whose work feeds your company’s lifeline, and having a staff of skilled, dedicated people who share your vision. And they are all answering to you.

In a clear way, you can see forever. Take that vision even further. Imagine what it would be like to reap more benefits of the job, come home to a beautiful home and a sprawling, landscaped yard and a swimming pool. Imagine yourself taking those relaxing vacations on the beach, in a secluded cabin in the mountains or on a luxury cruise liner. Imagine sending your kids to a prestigious college where they can prepare for a promising and rewarding career. Then open your eyes.

And when you do, take a look around at your surroundings. If you tell yourself, “I can do better than this” and make up your mind to do it, chances are you can. Even if you don’t get the big job with the view, you can do well nonetheless. Most upwardly mobile and ambitious people will be inclined to accept the next best thing

within the corporate structure. Just by aspiring to and moving to a higher position, you can better see what you want. Climbing the corporate ladder even higher may not be what you want, in fact; perhaps you prefer more time for family. The choices are much easier to make when you view your life from a higher vantage point.

Now, take this same approach to your personal health. If you are grossly overweight or even moderately so, sit back, close your eyes, and picture yourself the way you would like to be. If you have always had a weight problem, think about what it would be like not to. Picture yourself as the svelte “After” figure in the ads you see in the magazines and on TV. If you were of average weight for most of your life and only started gaining in recent years, think back to the way you looked in the past. Think back on how good it made you feel. If you have any old pictures of yourself from that time, pull them out. They could give you some inspiration.

Imagine yourself once again slipping into the fabulous dress you’ve had hanging in your closet since you were 40 pounds lighter. Imagine yourself once again fitting into that size 38 or 40 suit you haven’t been able to wear in 10 years. Imagine the joy of feeling your pants getting looser around your waist and hearing the compliments. Envision having the stamina to engage in a good workout or to take a long, strenuous hike in the mountains. Above all, imagine the tremendous satisfaction you will feel by having attained your goal.

Make it a goal; then make it a habit. Imagine all of these good things and keep imagining them. Plan out how you are going to achieve your goal, then work the plan. Keep an ongoing record of your progress – and your setbacks. The point is to add a sense of what it may be like to achieve your goal. Keep trying and you will succeed. Every day you get closer to your goal, the more you will feel like meeting it.

5. Do you strive for your goals in realistic, incremental steps?

Hopefully all of you said “Always.” Personally, I don’t know any other way to do it — what’s the point of goals that are nebulous and unfocused?

Getting through life itself is, of course, a step-by-step process, but it’s amazing how many people think they can leap-frog through the

process of goal achievement by taking shortcuts. In so doing, they may be missing out on important lessons along the way. They may arrive at the door to the goal they set only to realize that they don't have the key. By short-circuiting the process, they missed out on learning experiences that could have greatly benefited them.

So, in order to attain your goals, you must first break them down into simple, logical, more-easily-attainable steps. Any long-term goal is best reached by attaining short-term goals; this applies to your job, your career, your personal life, and especially your health.

In sports we call this a game plan. Make your own game plan for life. Write it down, then write down the steps you see as necessary to attain your goal. Number them 1 through whatever, and try your best to follow them in the sequence you outlined. Check off each goal as you attain it, then take the next step.

Be aware, of course, that situations change and game plans must change with them. Be flexible and have a backup plan in case the original isn't working the way you envisioned: you're OK if the alternate plan leads you in the same general direction. The point is to have a plan that helps you reach your goal incrementally and stick to it. Follow it and you'll get where you're going.

6. Do you feel relaxed and clear-headed when thinking about your goals?

If you answered "Always" you can probably skip this part. If you answered otherwise I have some important information I can share with you here.

Cool your jets. When thinking about and planning for goals you should *always* try to feel relaxed. Focusing in on your goals amid a lot of distractions or when you're under stress is like trying to read a newspaper in a strong wind. You're not going to be at your creative best and you're not going to be able to focus clearly on your goals.

Your mind must be perfectly relaxed, clear and focused if you are going to plan your goals: You need a mind at peace to piece together what's in your mind. You need to create an environment free of or with minimal distractions. Turn off the TV, the iPod, maybe even the computer and Smartphones. If you have other people living with you they must give you your space. Then sit back in a comfortable

chair, channel out all the negative vibes interfering with your objectives, and focus.

If it's nighttime, turning out the lights works for some people I know. If it's daytime, draw the curtains. Not being able to see your surroundings makes it easier to focus on what you can't see — what's coming from your brain.

Then, while you're in this relaxed, introspective state, start writing down your goals and how you plan to accomplish them. Make a note of when you started to establish a time frame. As you go along, continue making notes on your progress, and always date those entries. This is very helpful if you have set a specific or even general time frame in which you plan to accomplish your goals. A written record will help keep you on track or serve as a reminder if you stray off the track.

Listen to the sound of your own voice. For some people, "talking out" their goals works best. Make a recording, noting the date just as if you were writing the information down. Then start by describing your present situation in as much detail as you can. Tell yourself how you plan to reach your goal and the steps you'll be taking, and set some sort of a timetable to get there.

Make more recordings, and play the words back as often as necessary to remind yourself of where you are in your game plan. But be flexible. Don't set a goal and/or time frame that's unrealistic — you'll be disappointed if you're not exactly on track, especially if you have no backup plan.

The main thing is that you get focused and stay focused. Not stressed out. Planning for your goals will come to you a lot easier if you're in the proper state of mind — receptive to processing that information.

7. Do you get nervous about and intimidated by the processes you may have to go through to achieve your goals?

If you (honestly) answered "Never," you're free and clear here, neither intimidated nor overwhelmed by the process. You're determined to side-step obstacles, ready to pass "Go," collect your \$200 and start on your way to taking on the world.

But those of you who answered “Sometimes” or “Always” must think about whether your goals are do-able. If you’re intimidated about the process you have to go through to achieve goals, and if the thought of striving for them is overwhelming, sounds like what you’re looking for isn’t right for you.

So, before you go any further, take a moment to think about whether or not the fit is good — or if you have to readjust your career focus, or weight loss, or other fitness goals. Be realistic, be logical, and most of all, be honest with yourself. If you need to, consult people you trust to give you an honest opinion, not condescend or discourage. Trust me, you will be a lot worse off if you pursue a goal that’s not a good fit for you.

I’ve known people who fell into this trap. Some of them spent a lot of years and a lot of money in law school, thinking they were going to be hot-shot lawyers. But once they realized what the profession would demand, the thought was overwhelming. So they never went into practice and, instead, pursued other careers. But did they waste their time? The answer is no. They learned a valuable lesson from the experience, and they learned something about the legal field. If that was the lesson it took to steer them into a more rewarding career, it was a lesson worth learning.

Just as we learn valuable lessons from our experiences, we should also be open to learning new things. And to reexamining what we have come to accept as truth. Sometimes we must shake our foundations to stand on solid ground. Let’s examine just a few of the misconceptions that have shaped our lives. Others will be explored in later chapters.

The more friends the better. Who doesn’t want to be George Bailey in “It’s a Wonderful Life”? But this is only true if the friends are positive ones — those capable of offering an honest opinion in an affirmative way. Friends with only negative energy can suck the life out of you. Beware the vampires!

Hard work never killed anyone. Really, why prioritize when you can agonize, right? Just grit out that crushing load of stuff that needs doing. Truth is, emotionally and physically healthy people set realistic priorities; they think twice about projects requiring time

and energy commitments they may not be able to keep. Even as they plan for the future, they take on only what they can do well here and now.

Watch your weight. Actually, that would be watch your waist. The circumference of your mid-section is a clear indicator of your health, specifically your risk for heart disease and type 2 diabetes. While one's body weight and body mass index (BMI) can remain the same over time, inactivity and poor nutrition can cause body fat to settle around the waist. The alarm goes off when a woman's waist exceeds 35 inches, a man's 40.

Just as our lives are filled with revelations, they are also full of challenges. We face them every day. But we don't resolve them at the exact moment they come up. Some challenges can be met and overcome in a short period of time, others can take years. The thing to remember is that whatever challenges you set for yourself, make them attainable, and ultimately rewarding. You'll feel better about yourself and those around you.

PART ONE

CHAPTER TWO

Passion and Motivation STAYING IN FIGHTING FORM People who work in public

relations live by this saying: “It’s not enough just to put the word out there; you have to keep it out there” — meaning you can’t just send out a press release and not follow up, not make a sustained effort to keep the promotional effort going. The same thing applies to sports, to career goals, to personal health and wellness, to all of life. The most important things we do in life all have to be part of a sustained, ongoing effort.

Reaching “the top of your game” is the goal of everyone who excels in a sport. The same holds for career and health. I’ve outlined some of the ways you can reach your top form by setting goals. But let’s assume you have already “arrived.” How do you stay there? You may think the answer is the one that got you to where you are now, but this is not usually the case.

Let’s use the example of trying to get ahead in your career. While you were striving for a career goal you were using a set of strategies aimed at getting you to a certain level. Think of it like driving a car with a manual shift. To get to your present position you had to shift through first, second, third and fourth gear. Now you’re in fifth, moving along at full cruising speed, and you want to stay there. If you slow down you will have to downshift into a lower gear. Don’t go there.

Take the fifth

So how do you stay in that high gear you worked so hard to get into? By staying alert and focused on what you’re doing. By not slowing down and letting your competitors catch up with you. By not resting on your laurels and getting complacent. By not closing your eyes and your mind to changes going on around you. And, most of all, by not assuming that what you do makes you indispensable and

that you can't be replaced. You can and very well might be if you get too complacent about your standing in the company structure and mission.

Let's apply the same analogy to sports. You're at the top of your game in your chosen sport, say baseball. You've just won the Most Valuable Player award in your league. You led the league in home runs and runs batted in and were third in overall batting average. You helped your team win the World Series with two game-winning home runs and several other key hits. You've reached the peak of your profession and your picture was on the cover of *Sports Illustrated*. Well guess what happens next?

A new season starts. You, too, have to start all over again. Statistics don't carry over from one season to the next — all eyes are on you and you have to perform. You have to prove to yourself, your team, and the rest of the world that the previous season was no fluke. And you know you can do it again, perhaps even better. But complacency will get you nowhere.

Throwing heat

If you assume that the key base hits and the home runs are just going to come with little effort, you're in trouble. Opposing pitchers are still going to be throwing heat at you, and you're going to be in for a very long season if you can't respond and give it back. After three or four bad seasons the one good season you had is going to be quickly forgotten. There's another player on the bench just waiting for you to fall so he can take your position on the field and in the batting order. The next thing you know, you're off the team and, if no other team wants you, you're out of the game.

The sports analogy holds up in both our private and public endeavors. We compete in all aspects of our lives. Corporate executives who have done great things for their companies must continue to do great things if they expect to keep their positions. Elected officials who've been responsive to their constituents must continue to listen or they might not be re-elected. Teachers, above all, must maintain results each day, preparing the next generation for excellence. Women, in particular continue to navigate uncharted paths, knowing endurance is everything. Going the distance depends on your health and longevity.

Health Wanted: Full-time Job, Great Retirement Plan

Let's say you set a goal of losing 10 pounds in six months and did it. Congratulations! It was a struggle; you had to make a lot of sacrifices, but you made them, and finally you're where you want to be. Now your goal is to stay there. And, as you may well know already, that's the hardest part: Losing weight is always easier than keeping it off.

Later, I'll give you some specific weight-reduction strategies that will help keep you at the top of your game. I've been in my profession more than three decades, and I've seen these work. Many times. With the athletes I've helped train and with non-athletes who simply want to improve their fitness levels. But first I want to give you some guidelines:

TO YOUR HEALTH!

A checklist

- Become your "health age."
- Fight back against fatigue.
- Maximize your performance level.
- Strive for emotional equilibrium.
 - Think (and plan) ahead.
- Strive for "compressed morbidity."

Now let me explain how to make these goals work for you.

Act your 'health age'

Each one of us has two parallel ages: a chronological age based on how many revolutions the Earth has made around the sun since we were born, and a "health age," which can be best measured by what kind of shape our bodies are in relative to our chronological age. Depending on what kind of shape you're in and how well you take care of yourself, you can be 30 going on 50 or 50 going on 30. It's all a matter of how you feel, but more important, it's a matter of how well your body's systems are in sync with one another.

Chronological age is just a number. It doesn't tell you how healthy you are. When you hear someone say "you look good for your age," that's generally an acknowledgement that you look younger than you actually are. It's a compliment, but wouldn't you rather just hear a person say, "You look good" and leave out the "age" part?

Attaining and maintaining your "health age" is an ongoing process. It doesn't stop when you've reached a personal weight or health goal — that's where the maintenance begins. You need to eat the right foods, get the proper amount of exercise and rest, keep your stress levels low, and stay alert to any changes you may notice that don't feel right. To help you maintain that alertness and health age, consider these factors:

- **Body-fat percentage**
- **Resting heart rate**
- **Upper and lower body strength**
- **Metabolic rate (with normal thyroid)**
- **Cholesterol levels — total, LDL, HDL, VLDL, IDL**
- **Fasting glucose levels**
- **Triglyceride levels**

These things, which we'll look at in detail later, are basically the most important things you need to know about your body to maintain your health age. Regular medical checkups will give you a status report.

Medical experts used to claim that our health was 50 percent genetic (hereditary) and 50 percent environmental. But today you may not be able to "blame it on the genes." Or at least not to the extent that you could have before: Today medical experts say our health is based on two-thirds environmental factors and one-third genetic factors. With environmental issues defined as those within your control, you can see your opportunity and responsibility to be as healthy as you can be. Being responsive to the challenge can help lower your health age.

Energize against fatigue

Fatigue is something we all feel at some time or other. It is a normal response to your level of activity and it is the body's way of telling you to stop what you're doing or at least slow down and take a rest. What isn't normal is when you push yourself and your body and mind beyond tolerable limits.

Fatigue can be just as much mental as physical. If you have a desk job that requires a lot of thinking, calculating, planning, organizing, writing and other physically undemanding activities that nonetheless strain your brain, you can feel just as tired at the end of the day as someone who has been out in the hot sun doing pick and shovel work.

When you are overly tired, you are not likely to be operating at your peak levels of efficiency and productivity. If you are of normal, average health or better, your body is capable of producing the amount of energy necessary for you to accomplish whatever you need to. However, that energy is not inexhaustible. When drained, it must be restored with rest. It needs "down time" in order to replenish.

If you push yourself beyond your body's capacity to supply the necessary energy, it will draw from its emergency energy reserves, which are also limited. And when you're tapping into reserves, you are challenging your body to keep up with you. At this point, it may not be able to kick in efficiently and effectively. This is when fatigue sets in.

Pounds lost, energy found

What are the factors that determine how much energy you have? There are many things that could be contributing to fatigue, but one stands out — your weight. If you are overweight or obese your body may have to work that much harder to keep up with you when you are expending a lot of energy.

Back in the late 1980s I was working out with a pro football defensive lineman whose weight topped 300 pounds. At that point in his career he had been playing for eight years and wanted to play for at least a few more, but he was experiencing physical problems that were slowing him down.

After a series of tests we determined that his weight might be contributing to a growing weakness in his knees — and increasing his fatigue levels. I worked with him on lowering his fatigue threshold and helped him lose about 35 pounds, transforming excess body fat into lean muscle. With these improvements his game became sharper, he was less tired, and his career was extended well beyond his expectations.

I could cite many more success stories, but the point is that keeping your weight within manageable and acceptable limits is one of the keys to helping reduce fatigue. Here are a few other tips to guide you:

- **Follow a healthy, balanced meal plan.**
- **With your doctor's clearance, get plenty of exercise to lower your resting heart rate.**
- **Get the amount of sleep you need.**
- **Keep your stress level low.**

And, above all, go in for regular medical checkups. Your doctor is the best person to advise you on what you can do and at what level.

Maximize your performance level

This is “going the distance” — managing your energy to carry you through the long haul.

No matter what task you undertake, you usually know going in that it's going to take some time. You're going to be breaking a sweat literally or figuratively. Throughout, you're going to need to maintain the level of energy necessary to complete the task. In most cases it is not going to be easy, but you know it has to get done and the responsibility is yours.

When I train boxers, I train them to go the distance. The full 12 rounds. Each round is three minutes long, with a one-minute rest before the next. Three minutes may not seem like a long time to the rest of us, but for a fighter in a boxing ring throwing and absorbing punches, it can seem like eternity. With a lot of punishment pounded out and received during that time, if a boxer doesn't dispatch the opponent early on, he or she has to have the strength, the stamina,

the alertness and the determination to make it through each of those 12 rounds.

If the opponent is bigger and stronger and punches harder, the other person has to be ring-savvy enough to stay out of the way of the crushing blow that could end it all — all while scoring points and keeping the opponent off-balance. A fighter has to be able to go the distance — ideally with enough accumulated points to be declared the winner.

Now apply this analogy to the project you've been assigned on your job. It is being entrusted to you because you have shown your higher-ups that you are capable of undertaking and completing difficult tasks. But this one is harder than anything you've ever done. It is going to call for nearly every skill you've learned on the job and it will require long, hard hours, focusing nearly every ounce of energy you can muster up. Everything for which you've ever worked is riding on the outcome, especially your reputation and clout in the company, plus a nice bonus and maybe even a promotion.

If you have mastered the art of managing your time and energy, you will be successful at taking on this responsibility and the stress that comes with it. Like a distance runner competing in a marathon, you don't start out too quickly and burn yourself out in the early going. You establish and maintain a healthy pace and make it across the finish line with energy to spare.

Now apply these same principles to your health. Set a goal. Make it realistic. Go for it. Pace yourself. Don't overreach. Be patient but persistent. Go the distance. The reward of accomplishment will be yours.

Strive for emotional equilibrium

You must also strive to reach and maintain your top form from a mental perspective. This means keeping your emotions under control and not letting them get in the way of your performance. At the same time, you can use your mental acuity to your advantage: This is the equilibrium you want.

Yogi Berra twisted the language when he said "Ninety percent of this game is half mental," but he made the point nonetheless. Your

emotions and how you deploy them — whether in competitive sports, the workplace, or in achieving your own personal goals — are a very large part of the whole picture. Lose control over your emotions, and you will sabotage your performance. Lack of control can slow you down, and in extreme cases, short-circuit your energy-supply system and plunge you into inactivity.

There is a ritual I use that always works for me. When I find myself in a stressful situation I squeeze my hand as hard as I can into a fist. Then I slowly release it. I do this five times and each time I do it I repeat the word “control.” This helps me consciously release whatever it is that is stressing me out. I can feel my stress level passing right through me. Sometimes I even visualize that my heart is in my hand while I am doing this, and I am squeezing all the tension out of it. I’ve been doing this for years and it works for me. It can work for you, too. Give it a try the next time you face stress.

Beware the roadblocks

Another vital element in the process of staying on top of your game is being able to think ahead toward whatever adversity may be coming at you. Your ability to anticipate these situations and to make plans to handle the consequences could very well determine whether or not you survive in the upper echelons of where you now are.

What your invaluable “sixth sense” entails, in large part, is staying alert to your surroundings and developing the ability to sense when something “in the air” doesn’t seem quite right. In the animal kingdom, this is called instinct. In sports, it means anticipating what your opponents are likely to do and being one step ahead. Here’s an example:

A perceptive quarterback on a football team can quickly look across the line of scrimmage toward the other team and “read” what its defensive strategy might be. A subtle shift in a linebacker’s stance may tip off the quarterback that a blitz is coming. The quarterback picks up the read and calls an “audible” at the line of scrimmage that changes the play called in the huddle. The audible alerts his offensive line that the blitz might be coming and from which direction.

The linemen protecting the quarterback know they have to tighten up and try to keep the defense from penetrating the backfield, where the quarterback may be vulnerable. The receivers also pick up the audible and know they have to get open quickly because the quarterback's pass may be rushed. The key to an offense's ability to put points on the board often turns on the ability of a quarterback to anticipate what might be coming. It can make all the difference — between a team that goes nowhere on three downs and has to punt its way out of bad field position, and a team that moves steadily downfield and scores.

In an office situation, the same basic rules apply. If you have been in the workforce for any length of time and you're observant enough, you can develop a sense of where things are going. You learn by keeping your eyes and ears open. If other employees are quietly being let go one at a time, that's certainly a sign that the company might not be doing as well as it's been leading you to believe. You may be next, or soon thereafter.

There may not be anything you can do to save your job, but at least you won't be blindsided when it happens. You will be prepared to take the next step. You've read the signs in the air, updated your resume, and started sending out feelers to other companies. On the day you're given your notice you can be ready to walk into another company's office for a job interview.

If you're in a situation in which others are gunning for you and your position, the same rules apply. Keep your ear to the ground. If word gets back to you that someone is bad-mouthing you, find out what they're saying and take the necessary steps to set things straight. You can head off your rivals if you're alert to what's happening and are one or two steps ahead of them.

Strive for “compressed morbidity”

This topic we talked about before is a term those around me hear frequently. You'll see it referenced quite often in this book as well. What does it mean? Well, here goes.

Compressed morbidity can be loosely defined as “saving the worst for last and doing it in the shortest amount of time.” That is, taking the worst period of your health and squeezing it — compressing it

— into the least amount of time at the end of your life. If you have made it your objective to live a healthy, fulfilling life, you should expect to enjoy that good health and sense of fulfillment right up to the end, or as close to the end as possible.

Obviously, no one wants to spend the last five or 10 or 20 years of life in pain or in a nursing home totally dependent on others. No one wants his life to end prematurely because of obesity, heart disease or type 2 diabetes. No one wants any of this, but millions of people face these prospects in their final years.

Could these conditions have been avoided? Truthfully, not in all cases, but in many. If the individuals affected by them had taken better care of themselves while they had the chance, if they had been more conscious of their overall health and the possible consequences of neglecting it, they might have been able to live all or most of their remaining years painlessly and productively. As I tell most of my clients, “How you live will determine how you will die. It’s your choice to make.”

You Can’t Keep a Goodman Down

(Just His Weight)

Case Study: A celebrity client gains insight

When actor John Goodman came to me in 2007 to help him lose weight he was already in his 50s and weighed close to 400 pounds. Earlier in his career, John’s weight may have helped him land “character” roles that called for someone his size, like the one he played in the long-running “Roseanne” TV series. However, as he got into middle-age, he was carrying way too many extra pounds on his 6’2” frame. His doctors warned him that he was endangering his health and possibly shortening his life by being obese, and it certainly didn’t help matters that he also smoked and drank heavily. He was “a walking time bomb” when he came to me for help.

During the early stages of John’s more than 30-year career on stage, in films, and on TV, John ate pretty much whatever was put in front of him. Actors are fed very well during shoots in

terms of quantity, but careful attention to the quality of meals is in many cases sorely lacking. Off set, John led a sedentary existence, failing to exercise and spending a lot of time as a couch potato tuned into an inordinate number of TV shows.

On occasions during his career, John would lose up to 50 or 60 pounds, but when he was called off to do a shoot, the weight would come right back on again. He had trouble resisting all the food that was being offered during filming, and he was eating out at restaurants that may not have been offering the healthiest food choices.

After putting John through a battery of tests to determine as much as we could about his body composition and overall health profile, we had to decide on a plan. We knew that he would be needing knee surgery down the line, so I approached him as I would one of my boxers training for fight night. He needed to drop significant weight before he could have the surgery. So I marked March of 2011 down as his “fight time” to have surgery, so he would push and train and have a tangible goal.

After getting John’s test results we designed a program and monitored his progress religiously. We had him follow a rigorous and consistent exercise regimen six days a week — cardio training, resistance workouts using elastic bands, and boxing with the heavy bag. To maximize fat loss, we focused on safely getting his heart rate up into the appropriate training zones. Because of the right workout structure, he was able to take advantage of both gym- and home-based routines. During his free time, when he was on the road with a TV show or movie, he used my “Gym in a Bag” resistance-training apparatus, which relies on elastic-band and related equipment.

In addition to working on John’s body mass we also had to work on his mindset, making him aware of the patterns that were making him gain weight. Going into my program, John had the best motivation in the world. He knew his life literally depended on it. John’s story continues as you read on, presenting the tools that not only worked for him, but can work for you, too.

These days, with all the remarkable advances in medicine and technology, and with all the sophisticated research methodologies that can diagnose and isolate the causes of many once-common fatal ailments, the average person is living much longer than his or her grandparents and great-grandparents. At the turn of the 20th century, life expectancy for men was just under 50 years old, for women a little over. By 1950 those averages rose to 66 for men and nearly 72 for women. Today it's roughly 78 for men and 82 or 83 for women. The number of centenarians counted by the U.S. censuses from 1980 to 2010 rose from 32,194 to 71,944. Worldwide, by the year 2050 there are expected to be 4.1 million people 100 or older.

With life expectancy rising and no leveling off in sight, all of us have to be prepared to live longer. Not all of us will, of course, but we have to prepare to reach those upper numbers anyway because there is a good likelihood that many of us *will* get there. How will you spend those extra years that most of your ancestors were denied? How will you make the most of this priceless gift of extended longevity? Will you enjoy good health and a feeling of being productive, or will those extra years be wasted? The choice is yours to make.

If the choice of compressed morbidity is not taken from you by circumstances beyond your control, you're on your way to a happy and healthful life. Read on and I will show you some of the ways to get there.

PART ONE

CHAPTER THREE

Passion and Motivation

OH, THE STRESS OF IT ALL . . .

Way up there on the list of things you now know can kill you is stress, which does its dirty work over time.

Elevated levels of it in your system trigger chemical reactions that can weaken your immune system — sometimes fatally. In fact, each of the six leading causes of death in the United States — heart disease, cancer, stroke, chronic lower respiratory disease, accidents, diabetes — is to some extent a result of stress. But there's more: Stress also can cause hypertension (high blood pressure), which is linked to most of these potentially fatal conditions.

The fallout from stress is huge: It can also lead to brain damage and to memory loss, and may be connected to the development of Alzheimer's disease. Studies even associate stress with the development of Crohn's disease, a painful and destructive inflammatory bowel condition that basically causes the immune system to attack the body. Stress causes a lot of harmful side effects, things that you now know can kill you. That's why it gets my full attention throughout this book.

There's no need to define it; we all know what stress is. Most of us rarely go a day without experiencing it in some form — at home, in the office, in the traffic, at a crowded store. Stress has become such a part of life that many of us don't even recognize it. But our bodies do. It is all around us.

What me, worry?

Worrying is probably the No. 1 cause of stress, followed closely by depression and having to deal with conflict. We worry about our finances, our jobs, our families, our home lives, our health,

about other people and other situations we can't control — and that builds up system stressors that can sometimes overpower us emotionally and physically. When we deal with difficult situations, we worry about how they're going to come out, and we stress over that.

In a case of the cure being worse than the disease, in seeking to relieve your stress you may actually be doing things to worsen it: If you smoke to help relieve your stress, you may find yourself smoking more. Drink alcohol? You may find you drink more. The same applies to antidepressants, coffee, unhealthy food. So beware: If you find yourself (over)doing any of these things, you may be causing serious damage to your body and overall well-being.

Letting stress “get” to you is a surefire way to cause yourself serious emotional damage. You may find yourself brooding, enervated, not up to doing just about anything. Overwhelmed and immobilized, you may have a million things to do but can't get yourself up for even one. Can't get yourself going even for the tasks you enjoy — your daily walk, your exercise routine. Your remedy? Sitting and “waiting out” the feeling. Until it passes, you feel helpless.

In many cases, this stress/depression can make it hard to get out of bed. You may find yourself getting more sleep than you need, waking up feeling even more stressed and depressed. Feeling so overwhelmed can spur many reactions — in the most extreme cases, suicide.

But our day-to-day lives are packed with stress-producing situations — and sometimes we just have to deal with them. If we let every stressful episode get the better of us, we could be candidates for hospitalization. We have to move on, all the while striving to keep our sense of balance and presence of mind.

As I was writing this chapter, an email making the rounds titled “STRESS” arrived in my inbox. Usually I delete these things of unknown origin, but this one stopped me. It made a lot of sense. So I'll share:

A lecturer addressing stress management raised a glass of water and asked, “How heavy is this glass of water?”

The answers he got ranged from 20g to 500g.

The lecturer replied, “The absolute weight doesn’t matter. It depends on how long you try to hold it.

If I hold it for a minute, that’s not a problem.

If I hold it for an hour, I’ll have an ache in my right arm.

If I hold it for a day, you’ll have to call an ambulance.

In each case, it’s the same weight, but the longer I hold it, the heavier it becomes.”

He continued, “And that’s the way it is with stress management. If we carry our burdens all the time, sooner or later, as the burden becomes increasingly heavy, we won’t be able to carry on. As with the glass of water, you have to put it down for a while and rest before holding it again. When we’re refreshed, we can carry on with the burden.

“So, before you return home tonight, put the burden of work down. Don’t carry it home. You can pick it up tomorrow. Whatever burdens you’re carrying now, let them down for a moment if you can. Put down anything that may be a burden to you right now. Don’t pick it up again until after you’ve rested a while.”

An astute observation all of us should take to heart. Now, some specifics — stress causes and effects — and what you can do about it.

A defining moment

Despite how well you think you know what stress is, there’s more to learn. Let’s start out by defining how it relates to our overall well-being. Webster’s Online has multiple definitions, but here we’re focused on:

- A physical, chemical, or emotional factor that causes bodily or mental tension and may be a factor in disease causation
- A state resulting from a stress, especially one of bodily or mental tension, arising from factors that tend to alter an existent equilibrium (i.e. job-related things)

Now let's take a look at how stress came to be a part of our lives and remind ourselves that not all of it is bad. In fact, stress may well be a big part of why we are here today. In order to understand this, we have to go back in time, *way* back in time, to our cave-dwelling ancestors.

Our forebears obviously couldn't go down to the corner store to get something for dinner; they had to hunt it down. They had to kill animals often larger and more powerful than they, and so had to have greater than normal physical strength, sharp wits, keen sensory awareness — and enormous reserves of energy. Most of this came from adrenaline, the “super-chemical” the body produces in stressful situations.

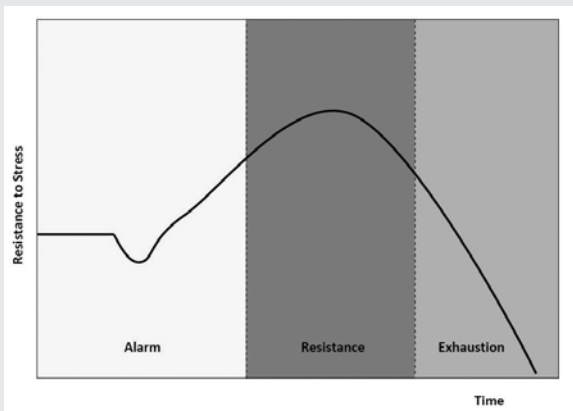
Our earliest ancestors had to know when to fight or flee, and that stress-produced adrenaline rush helped them decide quickly. Because of their ability to flee potentially dangerous situations, they were able to live another day. It was stress that kept the human species on its toes — and from extinction.

Those stress-producing reactions are still with us, thankfully. If we manage our stress levels well, we can make them work in our favor. Use them to help us stay sharp and productive, establish and maintain the competitive edge we need to survive, set goals and supply the energy and determination we need to achieve them.

Therefore, certainly not all stress is bad for you; it's a matter of how well you handle it. When asked how we handle it, however, many of us admit “not too well.” To see what's causing high anxiety in stressful situations, let's look at what's behind the stress response and examine the mechanics. To understand the causes of stress is to understand that there are complicated chemical reactions going on inside your body and mind when you encounter a high-pressure situation. To simplify a complex chemical formula and technical explanation, the pioneering Hungarian endocrinologist Dr. Hans Selye developed a three-step General Adaptation Syndrome (GAS) model for the stages of stress.

STRESS: A DRAMA IN THREE ACTS

- **Alarm:** When the threat or stressor is identified or realized, the body's stress response is a state of alarm. During this stage, adrenaline is produced to spark the fight-or-flight response. The steroid hormone cortisol is released, increasing blood sugar and aiding in fat, protein and carbohydrate metabolism at the same time it suppresses the body's immune system. Autonomic nervous system symptoms (sweating, raised heart rate, etc.) present themselves.
- **Resistance:** If the stressor persists, it becomes necessary to attempt some means of coping. Although the body begins to try to adapt to the strains or demands, it can't keep this up indefinitely, and its resources and reserves are gradually depleted.
- **Exhaustion:** At this point, the body's resources are depleted and the body is unable to maintain normal function. The initial autonomic nervous system symptoms may reappear. If Stage 3 is extended, long-term damage may result: The body and its immune system are exhausted and normal functions are impaired, resulting in responses including mental incapacity, illnesses such as ulcers, depression and diabetes, trouble with the digestive and even cardiovascular systems.



Reprinted from [Wikipedia Commons](#): Exploring Psychology 7th ed. (Worth) page 398, David G. Myers, author

A Body Blow: How Stress Takes Its Toll

Cardiovascular strain: Have you ever been seriously injured but didn't notice the pain right away? If an injury has caused an open wound, have you noticed how you didn't bleed as much as you thought you would? This shouldn't surprise you. It's the direct result of your body's reacting to a situation that shocks it, pushes it up into a higher gear ratio.

Then you go into what is commonly called a state of shock. Feeling stress or danger, the body responds by redirecting blood to where it's needed most: in the vital spots — brain, heart, lungs, liver. The blood vessels leading to your limbs are constricted and the blood flow is decreased to a level lower than normal for an open wound. At the same time, pain-reducing chemicals are being produced, and may numb the body to the worst first reaction to injury. Added strain is put on your heart, now handling greater blood flow, while adrenaline supplies the energy boost needed to either fight or flee the situation.

All systems down: While in a state of shock or heightened stress, the body compensates by “shutting down” some of its systems. While you're in a state of elevated stress, you undoubtedly have noticed that your sexual desire has diminished — or vanished. It's a natural response, but one that over time may cause irreparable harm to a relationship. Many people faced with ongoing stress may be unable to focus on their relationship or perform sexually. Many divorce papers have cited this as a reason for the breakup.

A cortisol-spurred 'rush': Following or even during a stressful situation, we may feel an uncontrollable urge to eat. And in those instances, the foods we choose may not be the best. During a stressful situation, adrenaline releases fats and glucose as energy sources for the body, causing a buildup of cortisol. Cortisol activates insulin, which in turn stimulates your appetite, producing a “food rush” or “the munchies.” So you grab for the nearest thing to satisfy your food cravings — often something high in unhealthy carbs and sugar. If this happens to you only once in awhile it might not be too bad, but if you're under frequent stress, these constant food

cravings can lead to unhealthy weight gain — especially in the all-too-vulnerable abdominal area. This can lead to further physical and medical complications, especially metabolic syndrome, a combination of symptoms that can be associated with heart disease, type 2 diabetes, and other debilitating and possibly fatal ailments.

Weakened immunity: As noted in the GAS model for stress measurement, elevated stress levels — especially those experienced frequently — can lead to compromised immunity as well. During a stressful/dangerous situation, the body is directing more energy than normal to its vital systems — and away from the systems that aid immunity. Certain levels of energy need to be maintained to operate the organs that make the immune system function properly. Cells and hormones feeding into the system need to be replenished, and this can only happen if the body is functioning normally. Being under constant stress makes the body more vulnerable to the pathogens that can invade the body.

Before you can set a goal of managing the stress in your life you have to ask yourself where it's coming from. What are the external factors causing or adding to it? Can you pinpoint why they're stressing you out? There are lots of causative factors.

WHAT, ME STRESSED?

11 things that contribute to stress

- Financial and job-related worries
- Inadequate or erratic sleep
- Poor eating habits including failing to eat at least one balanced meal a day
- Lack or loss of affection from loved one(s)
- Lack of a satisfactory social life and good friendships

- Inadequate or no exercise
- Smoking or excessive consumption of alcohol
- Excess weight or obesity
- Inability to find “quiet time”
- Inability to organize and manage any time
- Trouble focusing

Any combination of these factors could be the cause of your elevated stress level. If you see yourself connecting to any of these stress sources, stop and think of how you can make your situation better and your stress lower. See where you stand in terms of:

Little money, lots of stress

Dissatisfaction with one's job and paycheck ranks as the No. 1 cause of stress. We need money to pay our house notes or our rent. We need it to put food on the table and gas in the tank. Basically, we need it to pay for nearly everything we do; rarely does a day go by without our spending something.

For many, if not most, people struggling to make ends meet, there never seems to be enough money to pay for everything that comes up normally — and even less to pay for unplanned expenses like car repairs or medical bills. If all that's not bad enough, you can lose your job and be forced to get by on much less.

In today's technology-driven world, many jobs once considered “skilled” work can be done by computer/machine — or outsourced overseas, where to their advantage, the employers pay workers less. For many years you may have felt secure in your position, confident that you would be working your job until retirement — but now “retirement” may come unexpectedly. You can be caught off-guard, blindsided by the pink slip. For someone used to living on \$70,000-\$80,000 annually, it can be devastating to suddenly have

to make do on the amount of one's unemployment checks. Yet this is happening today — probably at a record pace.

No matter how well you've done your job over the years or how well you're doing it now, you may still be vulnerable to the thing we euphemistically call downsizing. Just the thought of it can be stressful, weigh on you morning to bedtime. It can negatively affect nearly every facet of your life, especially your relationships and interactions with those around you. Even worse, it can do a number on your health.

Those under tremendous stress are prime candidates for high blood pressure (hypertension), which can then lead to strokes, heart attacks and other potentially fatal ailments —even if people are in peak condition. Worrying about how you're going to survive financially can seriously elevate your stress levels, which may then produce harmful chemical reactions in the body.

Poor chance to dream: not enough or erratic sleep

This one is tricky. Getting inadequate or erratic sleep can be caused by stress or it could be a cause of stress. Even a little of both.

Sleep patterns vary widely, and there is no standard for how much sleep one needs. It is generally accepted that adults need less sleep than children; that some can get by on four or five hours a night while others may need eight to nine. Regardless of what works for whom, one thing is a given: Good sleep is an absolute necessity, the time the body and the mind shut down and recharge. With activity levels at a near standstill, cells have a chance to regenerate and rebuild. Your brain is given a much-needed break from thinking and decision-making. Your body and your mind need this down time to prepare for the challenges of the day you're going to wake up to.

However, inadequate or erratic sleep, the kind you wake from during the night, can be unnerving. If you've woken up for the third time at 3 in the morning, couldn't get back to sleep till 4:30, then had to wake up to the alarm at 6:30, you may be in for a long, cranky, stressful day. And if this is an ongoing pattern you're going to be in for a lot of long, cranky, stressful days.

Whether this is what's causing your stress or whether your stress is causing *this*, not sleeping is a problem. I'll have some recommendations later to help you with relaxing before bedtime. But chronic sleep problems need to be addressed medically. See a doctor.

Inadequate eats

You may wonder how what you eat (or what you *don't* eat) can be connected to the stress you are feeling. But studies have consistently shown that's so. My own experience with clients bears this out as well.

Again, is it the chicken or the egg? Poor eating habits may be causing your stress, or your stress may be causing poor eating habits. When you're under stress you may simply not feel like eating, have much of an appetite. You might eat because you know you *have to*, but what you're eating probably isn't what you need.

In my book *The Fat-Burning Bible*, I note that a fasting healthy person normally derives 90 percent of his or her calories from the body's fat stores, and only 10 percent from protein. For a healthy, uninjured person undergoing continuous high levels of stress, those numbers change to 70 percent fat stores and 30 percent lean protein.

What accounts for the different numbers is that during times of stress, the body needs more glucose to function properly, and protein can be broken down for that purpose. If this happens only once in a while it may not be too bad, but if the body has to do this *too* often, there can be serious consequences. Eventually your emergency stores can become greatly diminished or even wiped out, thus weakening your immune system and strengthening your chances of getting many different illnesses. A balanced meal plan, such as the ones I'll supply later, can keep you from undermining your health while you struggle with stress.

Love's labors lost

Some people can live very well by themselves and wouldn't have it any other way. But most of us want some type of intimate human companionship. We need to love and be loved.

People who experience intimate relationships are generally considered more content and anchored, and more productive because of it. However, some who don't experience intimacy may feel unloved and often "forced" to have negative thoughts about themselves. They may think something must be wrong with them, or they would have someone special to share life with. Feelings like this can lead to depression, which can lead to stress – and vice versa: Research has indicated that many of today's stressors contribute to symptoms of depression.

Depression-related stress that stems from a loss of affection is most commonly felt when a loved one dies. In long-term marriages, when one spouse dies the other may not be far behind, the survivor appearing to have lost the will to live. These feelings, of course, can be experienced after the breakup of any longstanding relationship, or even a short-term one if the affection turns out to be one-sided.

If this has happened to you, well-meaning friends and/or family members may have advised you to "move on with your life," but a satisfying new relationship may not come as quickly as you may like, or come at all. And the thought of this can depress and stress even more. But you *do* have to find a way to "move on with your life," or it will move on without you.

Shaky connection to the social network

Most of us go through life with at least a few close friends and some semblance of a social life. Many others don't, and the sense of isolation can be a source of depression-related stress. Like the old Bill Withers song says, "We all need somebody to lean on."

We need at least a small circle of people with whom we can talk freely, confide in, share our feelings and emotions. It's a safety valve, releasing stress. Many people, however, don't have that safety valve. For whatever reason, they failed to develop a network of people with whom they can talk, release bottled-up feelings. They failed to develop a social life that provides opportunities to meet new people — and the attendant feelings of anxiety and depression can lead to elevated stress.

Life can be very lonely without an intimate relationship or a support network of friends. Even though one may appear calm, blood

pressure may be skyrocketing because of the stress. And elevated blood pressure can lead to heart conditions – and that can lead to an early demise.

Sometimes in stories written before these conditions could be explained medically the term “dying of a broken heart” was common. We still use it today. But in fact, the heart *can* be damaged. Stress and loneliness can be the culprits.

So, if you’re already depressed, stress can do more damage. Don’t let it. Life wasn’t given to us as a punishment. There are many, many things one can do to enhance enjoyment of it. These do *not* include:

Living in a fitness-free zone . . .

This is another area in which *not* doing something won’t necessarily cause you stress — but *can* increase it.

If you don’t exercise enough, or at all, you are not giving yourself the benefit of the stress relief that comes with it — and the more you exercise, the more beneficial it can be. Not only does it build up your body and your overall health, but your sense of accomplishment, too. Meeting an exercise goal — such as walking two miles a day five days a week, completing a set number of repetitions on an exercise machine, lifting a certain amount of weight — can replace stress-induced feelings of inadequacy with a sense of fulfillment. Later on, I’ll discuss the stress-busting benefits of regular exercise, including my Pro Circuit of exercises that can be done in a gym or at home with minimal equipment such as dumbbells, kettle bells, etc.

. . . or fighting the fog of smoke and alcohol

Some people turn to smoking as a way of relieving their stress; others turn to alcohol. Or both. While to them this may seem like the way to go, it’s actually a fast road to ruin.

Nothing good can be said about smoking. Not even as a stress-reliever. It has been definitively linked to lung cancer, heart disease, asthma, emphysema, a multitude of other ailments and a host of unpleasant side effects. While some alcoholic beverages, such as limited amounts of red wine, can be said to have beneficial

effects, most of them do more harm than good. Alcohol abuse can lead to cirrhosis of the liver and permanent brain damage, and can exacerbate cardiovascular problems. You *can* drink yourself to death. Excessive alcohol consumption can over-tax the body's circulatory system and spur heart attacks. It can also lead to thoughts of suicide or put you in harm's way if you're driving under the influence.

So, instead of relieving stress, smoking and drinking can actually make the problem worse. By ingesting "foreign" substances that aren't essential or even helpful to the body's normal, everyday functioning, you are adding to the stress that may already be there.

If you don't smoke, don't start. If you do, quit. You'll be doing your body — and everybody around you — a favor. Likewise for excessive alcohol consumption. These are just two of the things you do know that can kill you. That alone should be a deterrent to the evil twins.

Carrying the weight of the world

An excessive amount of body fat is yet another of those things that you do know can kill you. Study after study has linked being overweight or obese to increased risks of cardiovascular ailments, respiratory problems, type 2 diabetes and that (mentioned earlier) potentially fatal cluster of symptoms known as metabolic syndrome.

Many people obsess over their "scale weight" and focus on getting it closer to where they should be for their height, but "waist-to-height" ratio has now become the gold standard for measuring one's body mass and determining if a person is within a healthy range. The circumference of the waist and how efficiently fat is stored in that vicinity will often give you a better picture of where improvements can be made.

In a recent study presented in the *Journal of Clinical Endocrinology Metabolism*, the waist-to-height ratio (WHtR) was the strongest predictor of cardiovascular risk and mortality.

The WHtR is calculated by dividing waist size by height, and takes gender into account. As an example, a male with a 32 inch waist who is 5'10" (70 inches) would divide 32 by 70, to get a WHtR of 45.7

percent. The WHtR is thought to give a more accurate assessment of health since the most dangerous place to carry weight is in the abdomen. Fat in the abdomen, which is associated with a larger waist, is metabolically active and produces various hormones that can cause harmful effects, such as diabetes, elevated blood pressure, and altered lipid (blood fat) levels.

Many athletes, both male and female, who often have a higher percentage of muscle and a lower percentage of body fat, have relatively high BMIs but their WHtRs are within a healthy range. This also holds true for women who have a “pear” rather than an “apple” shape.

The following chart helps you determine if your WHtR falls in a healthy range (these ratios are percentages):

WOMEN

- Ratio less than 35: Abnormally Slim to Underweight
- Ratio 35 to 42: Extremely Slim
- Ratio 42 to 46: Healthy
- Ratio 46 to 49: Healthy
- Ratio 49 to 54: Overweight
- Ratio 54 to 58: Seriously Overweight
- Ratio over 58: Highly Obese

MEN

- Ratio less than 35: Abnormally Slim to Underweight
- Ratio 35 to 43: Extremely slim
- Ratio 43 to 46: Healthy
- Ratio 46 to 53: Healthy, Normal Weight
- Ratio 53 to 58: Overweight
- Ratio 58 to 63: Extremely Overweight/Obese
- Ratio over 63: Highly Obese

Regular exercise and a healthy meal plan to get you through the day are two of the key components to getting your weight and body composition where they should be for your age and height. I'll have more later on what you can do to make a difference in your measurements.

Living too loudly for quiet time

Some people consciously choose to sit home by themselves and fret over predicaments; others may *wish* they had the luxury of extra time to ponder anything at all. Many who live frantic, fast-paced lives with nearly every waking minute scheduled are operating on automatic pilot. They know what they have to do and they get out there and do it. And this can be desirable — but living a life that is *too* regulated is *not* desirable, and can bring on stress in subtle ways.

Each one of us, but especially those living life in the fast lane, needs some down time during the course of the day. And by this I don't mean a nap. I'm talking about having some time for yourself while you're still awake to unwind, sit back and just think. Time to get your thoughts together. Chances are you may not have much of this "good time" available, but whatever time you do have, use it for this purpose. It might be a coffee break or part of your lunch hour or a break between the time you finish one project and start another. There is no set limit: The important thing is that you give yourself this time.

The wiring of the complex systems in our body can take only so much overload before it short-circuits and begins the shutdown process. Have you ever been in a meeting in which you were making a presentation and suddenly your mind goes blank? You struggle to regain your train of thought, improvising until you're back in control. This is what happens when your circuits get overloaded, and it happens to the best of us. Sometimes you'll see it happen when you're watching the news and the anchorperson is suddenly at a loss for words. Stress is one of the reasons.

Some who know they're going to be addressing a group allow themselves a few minutes of silence before going into the room. They don't take phone calls or allow others to whisk through with memos or updates. They simply sit, think, compose themselves for what is to come, and allow the stress to pass before going out to face others. These people know the importance of quiet time and they've figured out how they can make it a part of their routine. They can do it and so can you. Later on I'll show you how.

Flying blind

We hear the expression “flying by the seat of your pants,” but I call that “flying blind” or “flying without radar,” because that’s what many of us do when we don’t have a plan for what we do. And why don’t we have a plan? To a great extent, it can be because we never mastered the art of learning how to organize and manage our time efficiently.

Many people don’t like to admit that they have a problem with this, especially those in positions requiring specific tasks to be done on schedule; sticking to tight deadlines keeps the operation running smoothly. Somehow such people manage to figure out what to do to meet their schedules and keep their jobs, but the stress of flying blind, not having an organized plan and thus not being able to manage time efficiently has been a silent killer. Lack of structure breeds internal pressure, and it’s been eating these people up on the inside.

This can be the case at home as well. You know you have to clean out the garage, mow the lawn, trim the hedges, fix some broken things and get the kids to and from baseball practice and dance lessons, all of which take place at different times. And the jobs all have to be done over the weekend because that’s the only time you have off.

As you get started on this mega to-do list, it may not take long to realize that you’ve taken on more than you can handle. You didn’t think about how much time it was going to take to get each chore, or all of them, done. You failed to plan and, as the saying goes, “If you fail to plan, plan to fail.” In the meantime, this failure is causing you to stress out.

These situations can be avoided by learning proper time-management skills: knowing what you can or can’t do in the time you’ve set aside for a job — and knowing how much energy will be required as well. You may have to lower your expectations to some degree, but do it anyway. Your expectations may not be the only thing that gets lowered: Your blood pressure may go down as well — and with it, your stress.

Failing to focus

Another reason you can't get organized and manage your time efficiently may be that you're having trouble focusing. To make the problem worse, you may be easily distracted. That lowers your stress threshold, too, and you're going to get stressed out more easily.

Let's say you're at work typing an important report. You hear an incoming email click in, and stop what you're doing. The mail looks interesting even though it's probably totally unrelated to the task at hand. You give in to your urge to read the thing — and lose focus. By the time you get back to what you were typing, you've lost your train of thought and have to start over. The clock is ticking and now you have only 15 minutes to get your report done for the 10 o'clock meeting. You've lost all that valuable time; you feel stressed. And it grows: More stress means even less ability to focus.

With so many technological advances all around us, this is a common problem these days. There are more things to distract us and siphon off the valuable attention we need to be paying to the tasks directly in front of us. It takes focus — and it takes discipline to develop and apply that focus. But it *can* be done. I will show you how to do that as well.

Don't stress — decompress

Have you ever noticed how when you're stressed out, you feel a sense of being tightened up? You feel like your body and your mind are being compressed into a tight little ball. Your scale weight hasn't changed but you feel like your body mass has.

When deep-sea divers start making their way back to the water's surface they have to do it slowly and make frequent stops along the way. The number of these stops will vary according to how deep the divers were and for how long. The reason for this is that at great depths gas bubbles form in the body and a too-rapid ascent doesn't allow sufficient time for them to break up.

Stopping and resting every 10-20 feet or so allows the body to slowly regain its equilibrium and steady blood flow. Ascending too rapidly and surfacing prematurely can result in an extremely painful

condition you've heard of called "the bends." Sharp pain comes to the bones and joints, and the whole body may feel like it's bent out of shape. In extreme cases, if the gas bubbles start to impede the flow of blood into the heart, the condition can be fatal.

To lessen the likelihood of getting the bends, divers go through a step-by-step process of decompression. The frequent stops along the way to the surface allow the body to literally decompress, to return to its normal state. The pressure of the water on the body – the pounds per square inch – decreases as the diver gets closer to the surface. Some undersea operations even use decompression chambers, which divers must pass through before surfacing.

Stress can be likened to compression. When we are under stress our bodies feel tightly compressed and we must *decompress* in order to return to our normal state of being. This may not seem easy, but, like the divers' procedure, it can be done step-by-step.

Once we've identified the cause(s) of stress we can begin to decrease or eliminate it. Here are some of the methods that have worked for me and for others I've known:

Just Relax! 11 Ways How

There are quite a few techniques that can help you relax, lower your stress level, and begin functioning normally again. Let's start with deep-breathing techniques.

Biofeedback: The term that sounds disarmingly technical basically just entails getting in touch with your body and how it feels. This can be accomplished by hyperventilating, a fancy way of saying "deep breathing." Breathing in deeply and exhaling slowly can help slow down the activities of your body and your mind, allowing you to better focus on returning to a normal state. You want to feel relaxed, centered and in control.

As you breathe in and out deeply, close your eyes and focus on various body parts. How do they feel? Are they starting to feel relaxed or are they still tight? Make a mental note of this and continue hyperventilating a little longer (but if you start to feel faint or weak, stop immediately). More relaxed now? If so, make a note

of how you now feel and compare it to how you felt at the start of the breathing exercises. The next time you're stressed out, think back to that good feeling. Doing so could help you overcome the stress.

Meditation: This is a technique known and used for thousands of years in Eastern civilizations. It also has roots in the West, where it has been practiced for centuries by cloistered monks. For millions of people, the technique works so well that it's been incorporated into various religions. Its basic function is to help you get your mind to such a relaxed state that you feel in total control. You are in tune with your surroundings. No problem seems insurmountable. Everything will be taken care of in its time. You're not going to allow yourself to succumb to the pressures around you and feel crushed by them.

At the heart of transcendental meditation is a rhythmic sound called a mantra, something repeated over and over silently while your eyes are closed and you're seated comfortably. You should plan to do this for roughly 15-20 minutes, at least once a day but preferably twice — when you wake up in the morning and just before bedtime.

While you repeat the mantra, you are attempting to focus on that alone. Until this rhythm and routine becomes second-nature for you, which takes time, you will likely find your mind wandering. Let it — but slowly try to let the external things pass through you, and begin channeling back to the mantra. Focus your mental energies on that single sound and repeat it over and over. In time you may find it working wonders.

Receiving an “official” transcendental meditation mantra involves a ritual rooted in ancient practice — a Hindu ceremony with flowers, fresh fruit and incense offerings. If you live in or near a major city, there's a good chance you'll find a transcendental meditation program. But be aware that there are costs involved. If you want to try meditation and don't feel like spending the money or going through the ritual, choose any two-syllable word that has a smooth, soft, rhythmic flow to it, and go through the steps described above. If it works for you, you may find yourself sleeping better and getting through each day easier. For that, lots of practice and patience is required.

Eat: As we said earlier, not eating properly might not be the *cause* of your stress, but if it's a *result* of your stress, you need to get a handle on it. Otherwise it could escalate into something worse and negatively impact your whole being.

No matter what your state of mind is, healthy eating at regular intervals is essential for your body and mind to function properly. I explained earlier the chemical processes the body must go through when it taps into your energy reserves. Sooner or later you will run out of reserves if you don't replenish. If you don't feel like eating but your body is telling you you *have to*, listen to it. It's not going to lie to you about what you need.

Pray: Regardless of your beliefs, if your feelings about your faith are strong, you can take some of that strength and apply it toward relieving your stress.

Prayers, of course, are basically supplications, asking God to grant you favors, the most basic leading to the inner peace that comes from releasing whatever is preying on your mind and causing your stress and anxiety.

For millions of people it seems to work, so there is definitely something to be said for it. Make it work for *you*. Consult with clergy, state what you're seeking, and ask him or her for a recommendation. Chances are you can be steered toward a prayer or several that suit your goal.

Love: Bonding is something women seem to do better than men, but men need it just as much. Part of the reason the bonding instinct appears to be stronger in women can be explained chemically.

In a stressful situation, a hormone called oxytocin can be released in both men and women, but to different effect. Oxytocin counters or softens the "fight or flight" instinct that stress often triggers. However, in men, the high levels of testosterone produced during stressful times appear to counteract the effects of oxytocin — while in women, estrogen hormones seem to enhance it, producing a calming effect that may make them more likely to seek out others in times of need.

But just because you may have a harder time doing something that might be beneficial doesn't mean you shouldn't try. You just need to try harder. Male bonding is just as important as female bonding. Having a good buddy you can talk freely with about what's stressing you out can literally be a lifesaver – for *both* of you, even. The other guy just may be going through something, too.

Cultivate a better mind for money: Stress caused by external factors such as financial trouble can seem beyond resolution. The only thing you can think to do is make more money, but that may not be possible, at least not *immediately* possible. So you're stuck trying to resolve an issue considered out of your control.

Well, think again. Many companies to which you owe money are willing to work with you, to take as payment what you can afford at a given time; the first step is calling to discuss your situation, or visiting in person. Utility and phone companies, your mortgage holder (or landlord), and even the IRS can offer a number of payment options. But unless you make the effort to find out, you'll never know, and you'll continue to stress out — over something you could have resolved.

For people who aren't good at managing bills or who get stressed out when it comes to handling personal finances, there are companies or agencies that can do the job for you — those that specialize in “bill consolidation.” You tell them how much money you've got coming in each month and what bills you have, and they handle contacting the companies to which you owe money and working out a payment amount and schedule.

Not only does this method take the burden off you, it stops the bill collectors' calls, which the law says can be made any time between 8 a.m. and 9 p.m., on any day of the week (even Sundays and holidays). It stops the stress-producing disconnect notices coming in the mail. This service will cost you a little money — generally a small percentage of whatever money you're giving the company to manage for you — but trust me, it could well be worth it. The amount of stress it can take off your shoulders may be incalculable.

Exercise your options: One surefire means of releasing

stress is exercise, plenty of it. A regular exercise regimen, one that gets all or most of your body's vital systems pumping properly, is one of the best things you can treat yourself to. For many reasons.

Exercise is the way you get your body tuned up to achieve its maximum level of performance, in much the same way a tune-up gets your car humming like it's new. Think of your body as a machine with multiple systems all working in sync with one another. Each component of each system is vital to the operation of the whole. If one part is out of whack it can set off a chain reaction that upsets the delicate balance. Your mind – your brain – is, of course, a vital component in this system. That must be working properly so that all the others can do their parts.

A pastor from the New Orleans area with whom I've worked and who heads a large congregation shared his faith's way of putting it: "Treat your body like a temple."

Stress preys primarily on the brain and works its way down to the other body parts, negatively impacting their ability to function properly. You need to get a handle on it before it reaches that point. Regardless of how you're feeling mentally, get yourself up anyway. Don't let your brain make the rest of your body suffer. Lift yourself up out of that chair and get out and do whatever it is you do for exercise.

If you have a walking routine, try to go to the nearest body of water, either a lake or a river. Water has a calming influence on the body and the soul. Spend a few moments taking in your surroundings. Focus on the water for awhile and let it soothe you. Then turn slowly around, pausing long enough to take in your other surroundings. Focus on something in your line of vision that captures your interest — a flower, a tree, a flock of birds, anything that helps take your mind off your problems. This is doing a double: exercising both your body and your mind. Try it. It works!

Think shhhhhhhhhh: "Quieting down" may not be an easy thing for many of us to do, but whenever and however it's possible, it's a very good thing. Obviously, you can't do this when you're in the middle of a project that needed to be done yesterday — but why not seek a sense of calm as soon as possible after you finish

the job? If you can't do it at work, do it as soon after you get home as possible.

Everyone in the conventional workforce has a life on the job and at home. Both can be stressful, but one can better control his home life. When you're at work, your time basically belongs to the company, even if it's your own company. *Especially* if it's your own company. But when you arrive at your front door and your home life kicks in, that's when *you* are in control. Even if you have half a million things to do at home, you are still the one in control. And, if this is the only time you might have to relax and relieve some of your stress, you need to take advantage of it.

Decide how much quiet time you're going to need and set a limit – or, take as much time as you need. However long your time is, you need to make sure it's *quiet*. As we said before, turn off the phone(s). Turn off the TV(s), and the computer(s). Put a “DO NOT DISTURB” note on the door to whatever room you choose for your quiet time. Take steps to ensure that nothing will interrupt this special time of yours, then settle back in your favorite chair, and go aaaaahhhh.

Nothing is more important to your mental and physical health than the attention you give to achieving a balance between the two. So when you feel the need and can set aside the time, detach yourself from your surroundings and disconnect from the rest of the world. You worked for the time, you've earned it, now go ahead and enjoy it.

Take time to make time: There are whole books and seminars addressing this topic, but there are also some simple things you can do that cost nothing.

You can start by drawing up a to-do list. This can be done daily or weekly, whatever works better for you. If you're not sure, try both. As you make up your list, try to prioritize the things you have to do, which often is determined by a time frame, a deadline for a project's completion.

The list can and should include things that have to be done at work, at home, and in your own “space,” where you can concentrate on

things that benefit *you*. You can make separate lists for each or combine them. The important thing is to remember, all together now: *Prioritize*. Then, with the list complete, try to project a rough time frame in which to complete each project. Write down the time you estimate each thing will take, then add it all up. If the projects take more time than you consider reasonable, you may have to tweak a few things, adjust priorities, and, yes, eliminate some things.

One writer I know makes it a rule to never let his weekly to-do list, typed up every Sunday night, run onto a second page. If it does, he might decrease the type size (but never below 10 point!). If his list won't fit onto a single page at 10 point, some of the items get eliminated. They may go into a "hold" file, to be readdressed when enough of the other items are done — or they may be scratched off, deemed un-do-able. Years of experience have taught him not to bite off more than he can chew.

Do whatever works best for you. If you can master the art of time management, you'll be amazed at how far your stress levels are likely to drop.

Deep-6 the distractions: These even affect those who have good time management skills. Potentially distracting stimuli are all around us, in the office or at home. They may be conversations going on within earshot, that beautiful view you have out the window, something on your computer screen that grabbed your attention while you were researching another subject.

The trick here is not to lose your focus, because distractions take vital time away from what you're doing; time you can't get back. Once it's passed, you may have to step up your pace beyond your comfort zone. If you can't eliminate distractions, minimize them. If a colleague comes up to you in the middle of a project and starts to talk about something unrelated to it, don't be afraid to stop him in his tracks. It's not being impolite; it's being practical, and you can word it in a way that keeps the door open to later discussion.

Focusing on the road ahead of you is a key element to success. Anyone who has ever been successful at anything will tell you that. "Eyes on the prize" is one way of putting it. Keep them there and you should be successful, too.

Look good, feel good: This one is a well-known, time- (and lab-) tested maxim that women, especially, seem to grasp. Trying on and buying the dress you've been eyeing, coloring or re-styling your hair, then admiring yourself in the mirror can make you feel good about yourself in times of depression and stress. Men can experience this feeling by doing basically the same thing: trying out a new hairstyle or buying some sharp new clothes and seeing how good they look in them.

Doing this might help you come out of the shell you've shrunk into while you tried to deal with your depression-related stress. Once you've seen how good you look, you may want to share it with the world. You may want others to see you look great, and tell you so. It just makes you feel good — and out of the doldrums.

You can see that stress comes in many guises, but I've only scratched the surface. The main thing is to become aware of stress as it develops and nip it in the bud if you think it has the potential to bring you down. Make stress a positive force or get rid of it by returning to the pointers you just read. If you don't, stress will get the best of you. And this book is about being the best you can be.

PART TWO

CHAPTER ONE

HEALTH OWNERSHIP

It's Time to Stop Renting!

The Strategic Medicine and Executive Wellness Program

What would happen if you ran your business the way you managed your health? You already know how to manage your business or job, maximize its productivity and extend its longevity. Are you doing the same for your health?

One of the things I offer in my Fitness Principle with Mackie Shilstone program is the Executive Wellness Program, part of the Executive Wellness Initiative at East Jefferson General Hospital in Metairie, LA, which is designed to look at our clients' wellness levels and not only keep them well over the long term but also increase longevity and productivity.

Those of you reading this book can get an idea of how the things we apply in the Fitness Principle can benefit you wherever you may be. Since most of you obviously are unable to be here, I'm doing the next best thing and bringing the program to you, introducing the many things you can do at home that will move you along the road to health ownership. I want to make you aware of health conditions that can affect you positively or negatively, what signs to look for that may indicate potentially debilitating ailments and, most of all, impress upon you the importance of regular medical checkups and testing.

When a client enrolls in my program he or she goes through an extensive history-recording process and an extensive physical exam. This allows us to get to know the client and his personal and family medical history, about his home life, work environment, level of happiness and other key information.

Following the history and physical, blood and urine samples are taken and the lab results may turn up identifiable problems. In examining major functions of the human body, we get a good snapshot of a person's physical state.

Because our emphasis is on wellness and longevity, we also look at various markers in the blood that might alert us to increased risk for any number of diseases. Our objective, however, is not only to identify disease processes, such as high blood pressure or high cholesterol, but to identify less than optimal physiologic states as well, so that we can intervene early on, stopping or at least delaying the onset of a particular disease process. From the data we gather we can "stratify" an individual's risk.

Basically, the Executive Wellness Program is a high-level concierge service during which the client is personally guided through the experience, from the very first phone call to addressing the very last medical need.

Barbara Nunez, a 57-year-old clinical microbiologist, was drawn to the program because of the "hard data" that came with it. That, and the pre-workout testing that individualizes the program.

In the fall of 2010, Nunez trained for and ran a half-marathon. She was dedicated to her workouts, but never lost any weight. When she entered the Executive Wellness Program, she shared that frustration.

"Mackie said, 'Something isn't right. You are too fit not to be losing weight,' " Nunez said. The impasse was broken when further testing revealed that Nunez was hypothyroid.

"With a sluggish metabolism from menopause and the thyroid issue, I would have been destined to fail without this information," Nunez said. Now with thyroid medication and workouts and meal plans tailored for her, Nunez has seen success. She has lost 27 pounds and 23 inches.

GETTING THE BIG PICTURE

A Comprehensive Health Exam

The Executive Wellness Program, administered at East Jefferson General Hospital under the direction of Dr. Leonard E. Kancher, offers physical exams tailored to your age, gender, medical history and specific needs, with the goal to address any concerns before they affect your health. Clients receive an in-depth consultation with a physician as well as a panel of advanced tests that may reveal risk indicators undetected by previous testing — an extension of our basic philosophy of early detection of suboptimal physiologic states.

Let me give you an example of what a comprehensive health exam would look like.

The EJEW program's testing panel includes:

- A **CBC**, or complete blood count, is a measurement of red cells, transporters of oxygen around our body for use by the tissues; white cells, the infection fighters; and platelets, which help our blood to clot .
- **Urinalysis and blood chemistry** work to detect problems such as diabetes, thyroid abnormalities, liver disease and kidney disorders.
- **Cholesterol and advanced lipid testing**, the first revealing the three values most people are familiar with — total cholesterol (TC); low-density lipoprotein cholesterol (LDL-C), the “bad” cholesterol; and high-density lipoprotein cholesterol (HDL-C), the good stuff. A triglyceride test measures very-low-density lipoprotein cholesterol or VLDL-C, which carries most of the triglycerides (another fat), in our bloodstreams and is also a “bad” cholesterol. Although considered the tests of choice in evaluating lipids, there are more advanced tests that might better predict one's risk of heart disease. I'll have more to say about these in Chapter 2. One's non-HDL cholesterol (obtained by subtracting the HDL-cholesterol from the total cholesterol, a simple subtraction many physicians do not do) is a better risk predictor for cardiovascular disease than the LDL-C. This measurement provides a single index of all the atherogenic/bad fatty particles in the blood.

- **Tests for inflammatory biomarkers** that examine inflammation on a cellular level, something you will not feel but that's complicit in traumatic events such as heart attacks.

Biomarkers tests include those for:

- **CRP or hs-CRP** (high-sensitivity C-reactive protein), one of the better-known inflammatory markers that studies have shown better predict the aforementioned cardiovascular events in apparently healthy people

- **Lp-PLA₂** (lipoprotein-associated phospholipase A₂), a vascular-specific pro-inflammatory enzyme marker reflecting the presence of rupture-prone plaque

- **Myeloperoxidase**, an enzyme made by the white blood cells and whose detrimental effects can be seen in the formation and progression of plaque build-up in our arteries

- **PSA** (prostate-specific antigen), a blood test considered to be the most effective test for the early detection of prostate cancer

- **Vitamin D**, a prohormone, actually, one well known for its role in healthy bone metabolism. Studies have suggested that deficiencies may predispose an individual to increased risk for cardiovascular disease, certain forms of cancer, some autoimmune diseases such as multiple sclerosis, and perhaps even high blood pressure and diabetes.

- **Homocysteine**, an amino acid produced by our cells and of which excessive amounts, studies have shown, are associated with increased risk for coronary artery disease, peripheral vascular disease, cerebrovascular disease, and an increased risk for clot formation, including formation in our peripheral veins, or deep vein thrombosis

- **Fecal occult blood test** for blood in the stool not obvious to the naked eye. This is a screening used for early detection of colon cancer.

The program also will identify the need for any immunizations that are not current, based on an individual's age and immune status.

CARDIAC HEALTH TESTS

- **Resting electrocardiogram (EKG)**, a recording of electrical activity within the heart that detects abnormalities ranging from rhythm disturbances to heart muscle strain to even changes that can detect previous heart damage
- **Cardiac stress test**, a treadmill exercise test that can reveal unrecognized coronary artery disease and abnormal heart rhythms (arrhythmias)
- **Computed tomography calcium-score screening**, which measures the amount of calcification in one's coronary arteries. There is a direct relationship between the amount of calcification in one's coronary (heart) arteries and the risk for cardiovascular events, which include heart attacks and strokes.

PULMONARY TESTS

- **Spirometry**, a test of lung function useful in assessing the presence of such conditions as asthma and chronic obstructive pulmonary disease (COPD)
- **Chest X-ray**, used to detect many conditions involving the chest wall, bones and organs of the thorax including the lungs, heart, great vessels and lymph nodes

BONE DENSITOMETRY TEST

This one is designed to identify bone loss and is used to diagnose osteoporosis and determine fracture risk.

Also provided is a:

FITNESS EVALUATION

A nutrition evaluation uses data obtained from your resting metabolic exam, helping a registered dietitian calculate a personalized caloric energy equation. You learn the number of calories you need to maintain, lose or gain weight as needed. Nutritional counseling provides guidelines for healthy eating, taking into account your lifestyle, food preferences, activity level and medical history.

FITNESS CONSULT

A certified personal trainer establishes a specific fitness plan for you, based on your physician's recommendations, your personal goals and your activity level. Whether you are training for a marathon or just starting a fitness regimen, recommendations are tailored to suit your schedule and equipment available to you. Tips for on-the-road fitness are included.

FOR FEMALE EXECS

These tests can be performed by the Executive Wellness Program as well:

- **Pelvic exam** of the cervix, uterus, ovaries and vagina
- **Cervical Pap Smear**, which tests for cervical cancer
- **Human papilloma virus test** for cervical cancer
- **Mammogram** test for breast irregularities that may indicate cancer

For an additional cost, the Executive Wellness Program also offers **gastroenterology** procedures, which may include a **colonoscopy**, a flexible **sigmoidoscopy**, and/or upper **endoscopy**; **abdominal and pelvic computed tomography (CT)** imaging — an **evaluation of identifiable growths** or other abnormalities in the abdominal and pelvic areas; a **computed tomography of the chest**, which evaluates the thoracic structures including lungs and heart.

Toward 'compressed morbidity'

"Besides adding years to your life it becomes very important to add life to your years." That's how I explain "compressed morbidity."

So how *do* you add "life to your years"?

Achieving compressed morbidity is the major long-term aim of my program. I want to shorten as much as possible the period at the end of life during which health may be in noticeable decline. I want to help our clients maintain the highest quality of life possible throughout their years and, when they start to decline, have their final phase of life measured in days and weeks rather than months and years.

So, if we can identify subtle abnormalities during the course of our program, and if we can deal with them, we may be able to confine morbidity to a compressed time frame. The objective of the program is to identify these suboptimal physiologic states and move them toward a normal range, into a manageable condition — which will reduce risk. Let's look at an example to better explain this concept.

You probably know of someone who has been diagnosed with type 2 diabetes (adult-onset diabetes). Diabetes is diagnosed when one's fasting blood sugar level is 126 milligrams per deciliter (mg/dl) or greater (normal fasting glucose being less than 100), or if a post-“Glucola” test detects glucose at 200 mg/dl or greater (normal being less than 140). For this test, a person drinks 75 grams of glucose and a blood sugar is measured two hours after ingestion. A third, recently introduced way of diagnosing type 2 diabetes is the glycohemoglobin (or hemoglobin A1C) blood test; it provides long-range blood-sugar readings and reflects a person's average blood sugar over a three-month period. A glycohemoglobin of 6.5 or greater is diagnostic for diabetes.

The main culprit in the genesis of type 2 diabetes is insulin resistance — meaning the body is resistant to the insulin required to lower blood sugar; for this reason, the pancreas has to make more insulin to compensate. Initially, the only identifiable abnormality may be an insulin level elevated despite normal blood sugars; this is the first hint of a suboptimal physiologic state. This process may begin five or more years prior to the diagnosis of diabetes.

The two-hour post-Glucola test can identify an abnormality because the pancreas may not be able to make enough insulin to keep this elevated glucose in normal range — less than 140. Values between 140 and 200 are indicative of impaired glucose tolerance (perhaps a second identifiable suboptimal physiologic state). Over time the fasting blood sugar may begin to rise because the pancreas is not able to produce enough insulin to maintain a fasting blood sugar in normal range (perhaps the third identifiable suboptimal physiologic state).

If these findings are not addressed — or even identified — a person with this profile may well progress over several years to type 2

diabetes. Studies have suggested that by the time type 2 diabetes is diagnosed, a person may have already lost 50 to 75 percent of his pancreas's ability to make insulin. And as all these subtle changes are taking place, other metabolic abnormalities may be present in the background. Two of these changes can be a lowering of one's HDL (or good) cholesterol and an increase in the triglyceride level.

These abnormalities, even in a person with normal blood sugar levels, should be a tip-off to the beginnings of changes that may lead to a diagnosis of type 2 diabetes years down the road. So with this in mind, elevated triglyceride may be all that is needed to further identify diabetes, or at least an insulin-resistant state.

PART TWO

CHAPTER TWO

CHOLESTEROL AND TRIGLYCERIDES

What IS That Stuff, Anyway?

Although one of the premises of this book is “What You *Do* Know Can Kill You,” there are, of course, multiple examples of what you *don’t* know having the potential to be lethal, too. Over the years we have been hearing a lot about cholesterol and triglycerides, but what, exactly, are these things? In this chapter Dr. Kancher explains what cholesterol and triglycerides are all about.

Much of the confusion about cholesterol stems from the fact that not *all* forms of cholesterol are bad for you – there’s the good stuff, too. Let’s start with a general definition of what your doctor obtains when drawing blood for a full lipid profile.

HDL (high-density lipid protein) is called the “good” cholesterol, LDL (low-density lipid protein) the “bad” cholesterol, and triglycerides are the fats found in the blood immediately after one eats, in the form of chylomicrons. Triglycerides become stored energy that is released and metabolized by the body as needed.

A defining moment

Cholesterol is a waxy, fat-like substance absorbed from the gastrointestinal tract. It is not truly a fat, however, but rather a sterol compound containing no fatty acids. It does exhibit both chemical and physical characteristics of fats, is derived from fats and it is metabolized similarly — so from a dietary point of view, it is considered a fat.

Most of the cholesterol in our diets, however, is in the form of cholesterol esters, composed of free cholesterol and one molecule of fatty acid. It is most commonly found in animal products such as meat, dairy and eggs, though it may be present in smaller quantities

in other types of food. Besides this *exogenous* cholesterol that is absorbed each day, an even greater amount of *endogenous* cholesterol is made in the cells of our body, and essentially all of it circulating in our blood is formed by the liver. All of the other cells in our bodies, however, form at least some cholesterol.

This last statement isn't so hard to believe when you consider that many of the components that make up the walls of every cell in our bodies are partially composed of cholesterol: it is required there for optimal membrane permeability and fluidity. In addition, cholesterol is an important component in the manufacture of steroid hormones, vitamin D and bile acids, which help digest fat.

By far the most abundant fats in our diets are the “neutral” fats, also known as triglycerides, which again, appear in our blood immediately after a meal. Every molecule of triglycerides is composed of glycerol and three molecules of fatty acids. Triglycerides are the chemical form of most fat in food, the main constituents being vegetable oils and animal fats. Think of triglycerides as the body's main storage bin for fats (ingested food not used immediately) — an energy reservoir or backup food supply, if you will. When the body needs energy (particularly between meals), these fatty acids are gradually released into the bloodstream as needed.

Do I even need to tell you that those storage areas are usually in the thigh and torso areas? This is where the balancing act between stored fats and metabolized fats comes in.

An indelicate balance

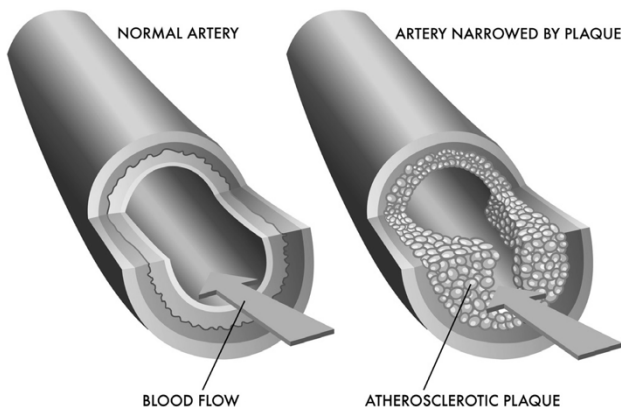
So, as you can see, triglycerides are essential to the proper functioning of the body. But, like cholesterol — with which it is closely associated — too much of it can be harmful. In some people, an excess of triglycerides in plasma can be linked to coronary artery disease. Elevated triglyceride levels, along with correspondingly high levels of bad cholesterol, are often the consequence of being overweight or obese. Elevated triglycerides may also be a consequence of other diseases, such as untreated diabetes mellitus (especially type 2), or of unhealthy eating habits (i.e. inordinate amounts of non-lean meat and dairy and other animal products). Heredity may be a factor in some instances, but more often than not elevated levels of both LDL (bad) cholesterol and triglycerides stem from a lack of exercise and/or the consumption of foods high in saturated fats.

Because cholesterol and triglycerides are fats, and are fat soluble, they cannot dissolve in our water-based blood stream and then circulate around the body. Water and oil don't mix. For these fats to be dissolved in our blood stream for circulation around our body, they must first be covered with a protein, and then transformed into compounds called lipoproteins. These lipoproteins are complex macromolecules that transport these lipids — triglycerides and cholesterol esters — through the aqueous environment of the plasma in our blood.

Everyone has good lipoproteins, known as high density lipoprotein particles, or HDL, and bad lipoproteins, known as low density lipoprotein particles, or LDL. Very low-density lipoprotein particles are called VLDL. LDL are the main carrier of cholesterol and VLDL carry most of the triglycerides around our bodies. When we use the term good and bad cholesterol, we are really referring to these different lipoproteins. The bad lipoprotein particles, in particular LDL, can deposit cholesterol in the walls of our blood vessels, forming plaques or atheromas that over time can lead to narrowing in the lumen (or "cavity") of these vessels. High-density lipoproteins have the ability to actually remove cholesterol from these atheromatous plaques in our arteries, and transport them back to the liver for excretion — or turn them back into lipoprotein particles. For this reason the HDL particles are known as the good guys.

Here is an illustration of what a healthy artery looks like, as opposed to one that is partially blocked by cholesterol deposits.

ATHEROSCLEROSIS



The Good, the Bad and the Particles

It also must be noted that the stuff in the bad cholesterol particles is the same cholesterol that is found in the good stuff's particles — so it is the *particles* that become important, not necessarily the cholesterol or triglycerides *in* the particles.

This fact is significant because typical lipid testing measures one's (pay attention, class) total cholesterol (TC), the HDL cholesterol (HDL-C) and the VLDL cholesterol (VLDL-C, from which the triglycerides are calculated). From these values, the LDL cholesterol (LDL-C) is calculated.

The formula is: $TC = LDL-C + HDL-C + (Triglycerides/5)$

These values represent the amount of cholesterol contained in the respective lipoprotein particles. But remember, as we said earlier, it is the actual number of these lipoprotein *particles* that defines our cardiovascular risk and not the amount of cholesterol in these particles — although it is the cholesterol number that dictates risk rather than the particle number, the latter represented as LDL-P, HDL-P and VLDL-P.

If a person had small, dense LDL particles, or LDL-P (the worst ones to have, by the way), he or she may have a low LDL-C because these particles do not have a lot of cholesterol in them. And this low LDL-C number might give someone a false sense of security. This is why we do advanced lipid testing in our program — measuring the different lipoproteins' particle numbers and particle sizes, which is a much more accurate way of determining one's lipoprotein levels, and the associated risk that goes along with that level.

Conversely, someone might have very large, fluffy LDL particles — the better to have because these tend to be less atherogenic or have less potential to deposit their cholesterol— which have more cholesterol in the particles, reflected in a higher LDL-C. In fact, the high level might prompt the use of cholesterol-lowering drugs, when in actuality the individual may not have as high a particle number, which might not require treatment.

As an example, a 53-year-old male on cholesterol-lowering medication who has a history of coronary artery disease — and

coronary artery balloon angioplasty and stenting for significant coronary artery blockages — had a total cholesterol of 118, and an LDL-C of 48, which is certainly a goal for a person with known coronary artery disease. However, his LDL-P was 1199 — a high LDL particle number for a person with coronary artery disease.

The Good, the Bad and the Triglycerides

So now that we know what good and bad cholesterol represents, let's look at the numbers and then some of the ways you can get those in line with your goals. And since the majority of readers will be familiar with their total cholesterol, HDL-C (the good stuff), LDL-C (the bad) and triglycerides, we will orient ourselves to these values.

Cholesterol and triglyceride numbers are measured in the United States by milligrams per deciliter of blood (mg/dl). In Canada and Europe, a different set of measurements is used. For our purposes here, the numbers in the charts below will represent mg/dl.

The American Heart Association now recommends that everyone over the age of 20 get a lipid panel to measure cholesterol and triglycerides.

The interpretation of all these values is based on recommendations made in the Third Report of the Expert Panel on Detection, Evaluation and Treatment of High Blood Cholesterol in Adults, or Adult Treatment Panel III (ATP III) guidelines. These lipoprotein levels should be determined after a 9- to 12-hour fast. Fasting is recommended because triglycerides can be significantly elevated following a meal, and as we said earlier, the LDL-C is calculated based on the formula:

LDL-C = total cholesterol - HDL-C - VLDL-C; the VLDL-C is estimated as triglycerides divided by 5.

A high triglyceride level in a non-fasting state can be falsely high, thus affecting the calculation on the LDL-C. Although not routinely done, direct measurement of the LDL-C would preclude the need for fasting prior to testing.

Starting with total cholesterol, this is how the numbers shape up and how they are interpreted:

Total cholesterol

- Total cholesterol less than 200 considered desirable
- Between 200 and 239 considered borderline high
- 240 and above considered high

LDL

- Below 70 considered “ideal for people at very high risk for heart disease”
- Below 100 considered optimal and ideal for people at risk for heart disease
- 100-129 considered “near optimal”
- 130-159 considered borderline high
- 160-189 considered high
- 190 and above considered very high

HDL

- Below 40 for men and below 50 for women considered poor
- 50-59 for both men and women, better
- 60 and above for both men and women, best

Triglycerides

- Below 150 considered desirable
- 150-199, borderline high
- 200-499, high
- 500 and above, very high

Previously we mentioned that the non-HDL cholesterol measurement (calculated as total cholesterol minus HDL-cholesterol) is a better predictor of the risk of coronary artery disease than the LDL-cholesterol. For example, patients with Type 2 diabetes have elevations in triglyceride levels, often making the calculation of the LDL-C level potentially inaccurate. As a result, the latest version of the NCEP (National Cholesterol Education Program) guidelines recommends that non-HDL-C be used in patients with high triglycerides, especially over 150. Go to www.nhlbi.nih.gov/about/ncep to learn more.

Non-HDL-C

- Below 100 considered “ideal for people at very high risk for heart disease”
- Below 130 considered optimal and ideal for people at risk for heart disease
- 130-159, near optimal
- 160-189, borderline high
- 190-219, high
- 220 and above, very high

If you took a non-fasting test and your total cholesterol was high or borderline high, your doctor or the clinic or health fair where you were tested may recommend that you make an appointment for a fasting test. That will break the numbers down for you in greater detail, plus give you your triglyceride levels.

In any case, regardless of your overall health and what you perceive it to be, I strongly urge all of you to have your cholesterol tested soon and as often as your doctor feels it’s necessary. You may feel fine, but without being tested you can’t really know what’s going on inside your body. Low concentrations of HDL cholesterol and elevated triglyceride levels are hidden killers. Get them checked out so that there are no surprises later on when you’re least prepared for them.

Steps to Take to Lower Your Cholesterol

If you were told your cholesterol is above normal, you can take the appropriate steps to get it down. Fortunately, for most people, those numbers are not irreversible. They can be changed in your favor, but you and only you can change them. You have to take the initiative, even if it means sacrificing some of the foods and beverages you enjoy most.

Your health is the most important thing you have in your life and, as I’ve said many times, you must take ownership of it. You don’t want to just rent it. And in order to do this you have to take control

over it. Here are some of the ways you can begin getting your bad cholesterol levels under control and lower your risk for heart disease:

Quit smoking: Smoking lowers HDL (again, the “good”) cholesterol levels. This trend can be reversed if you quit smoking. Smoking can also increase various inflammatory bio-markers — which can increase one’s risk factors.

Exercise: Exercise increases HDL cholesterol in some people. Even moderate-intensity activities, if done daily, can help control weight, diabetes, and high blood pressure — all risk factors for heart disease. Check with your doctor to determine how much exercise is right for you in your present condition.

Take medication if it is prescribed by your doctor: Making changes to your diet and increasing exercise may help bring your cholesterol down but it may not be enough to get you down to a safer level. You may also need to take a cholesterol-lowering prescription medicine.

Low Density Lipoprotein-lowering drugs include:

- Statins
- Niacin
- Bile-acid resins
- Fibric acid derivatives

Cholesterol-lowering medicine is most effective when combined with a low-cholesterol diet. Talk to your doctor and a licensed, certified nutritionist to determine what’s best for you and follow your medication directions explicitly. Along with eating right and exercising, it can literally save your life.

Heart attacks are nothing to be taken lightly, with many people succumbing to the first one. If you’re one of the fortunate individuals who survives that first heart attack, don’t wait around for it to happen again. Don’t let it happen again. Don’t even let it happen the *first* time, if you can help it. Get your cholesterol and triglyceride levels checked early and you could be one step or more ahead of the game.

Steps to Lowering Your Triglyceride Levels

The main way to deal with high triglyceride levels is through improved lifestyle. That means eating a healthier diet and getting more frequent exercise. Here are some guidelines to help you manage your triglyceride level:

- Moderate physical activity five or more days each week can help lower triglyceride levels.
- Weight loss also lowers triglycerides as well as bad cholesterol.
- Reducing saturated fat, trans-fat, and cholesterol in your diet can improve triglyceride levels as well as help manage your overall cholesterol level.
- Alcohol consumption has strong effects on triglyceride levels. Consuming more than one alcoholic beverage a day for women or two for men can raise triglyceride levels considerably. Some people with high triglycerides may need to cut out alcohol entirely.
- Eat more fish high in omega-3 fatty acids instead of red meat, which is high in saturated fat. Fatty fish like mackerel, lake trout, herring, sardines, albacore tuna and salmon are high in omega-3 fatty acids.

For certain people with high triglycerides, medicine may be needed. The decision to treat triglyceride levels with medicine can be complicated because other health conditions are usually involved. Several medicines can improve triglyceride levels, among them:

- Statins, which mainly improve cholesterol levels
- Fibrates, the most potent reducers of triglyceride levels
- Nicotinic acid
- Omega-3 fatty acid supplements. High-doses of omega-3 are needed to lower triglycerides and should be taken only under a doctor's care. Lovaza is a prescription form of omega-3 fatty acids.

By taking steps to improve your triglyceride levels, you'll likely improve your overall health, fitness, cholesterol levels, and risk for heart disease. And, again, as is the case with cholesterol medicine, follow your doctor's orders and the prescription directions to the letter.

PART THREE

CHAPTER ONE

Rx Healthy Eating Guidelines

ENERGY INTAKE VS. EXPENDITURE

Inch by inch, pound by pound . . .

One of the main objectives of the Executive Wellness Program is to preserve or increase our clients' muscle mass, which in turn should preserve or speed up their metabolism. By revving up metabolism, one's digested food burns up faster, thus lessening the chances for fat buildup and unhealthy weight gain.

One of the patterns we've noticed is that our clients who have been on restrictive diet plans have a slower than normal metabolic rate. And men, because of their higher muscle mass, usually have a higher metabolic rate than women. We also have learned that on average, people with thyroid issues have a metabolic rate that can be lower or higher than normal. When we encounter situations like this, we advise the client to check with his doctor to see how the thyroid is affecting metabolism and what, if anything, can be done.

Among the tests administered by the staff is a resting energy expenditure (REE) test, which helps us learn how many calories a day a client is burning while at rest; this number is roughly equal to 65 percent of total energy expenditure. Once we have that number, our nutritionist can use all the calculations to build a healthy, workable meal plan based on the client's goals. These are individualized plans based on need, not "cookie-cutter," one-size-fits-all types. Knowing the REE number allows us to formulate a nutrition program that will yield optimum results when combined with the exercise component.

With the tests we perform we can see exactly how many calories our clients are burning while at rest. From this data, we determine

if the calories they're burning are at a normal rate for their height, weight, and age. Is their metabolism slower because of diet history or some other factor? Or is their metabolism faster because they have more muscle mass than the average person of their height, weight and age? By comparing test results with those of other people of similar physical makeup, we can determine how fast or how slow one's metabolism is.

Do try this at home

The best way to determine how many calories your body actually needs is by estimating your total daily caloric expenditure. This figure will include your REE (the number of calories required for essential body functions such as tissue repair, brain function, blood circulation, digestion, etc.), plus the number of calories burned during exercise and normal daily activity.

To determine REE, our program uses a metabolic cart, a specialized piece of equipment that the average reader obviously can't access. If you want to figure your REE at home, there's a simple way: Multiply your body weight by 10. For example, a 150-pound woman has a resting metabolic rate or REE of 1,500 calories. To determine your daily calorie needs, multiply your REE by the approximate activity factor, as follows:

- If you are sedentary, calorie calculation = $REE \times 1.2$
- If you are somewhat active (light exercise/sports one-three days a week), it's $REE \times 1.375$
- If you are moderately active (moderate exercise/sports three-five days a week), $REE \times 1.55$
- If you are very active (hard exercise/sports six-seven days a week), $REE \times 1.725$
- If you are extra active (very hard exercise and physical job or intensive training), $REE \times 1.9$

A total calorie-needs example: If you are sedentary, multiply your REE (1,500) by 1.2 = 1,800. This is the total number of calories you need in order to maintain your current weight.

Once you know the number of calories needed to maintain your weight, you can easily calculate the number needed to gain or lose weight.

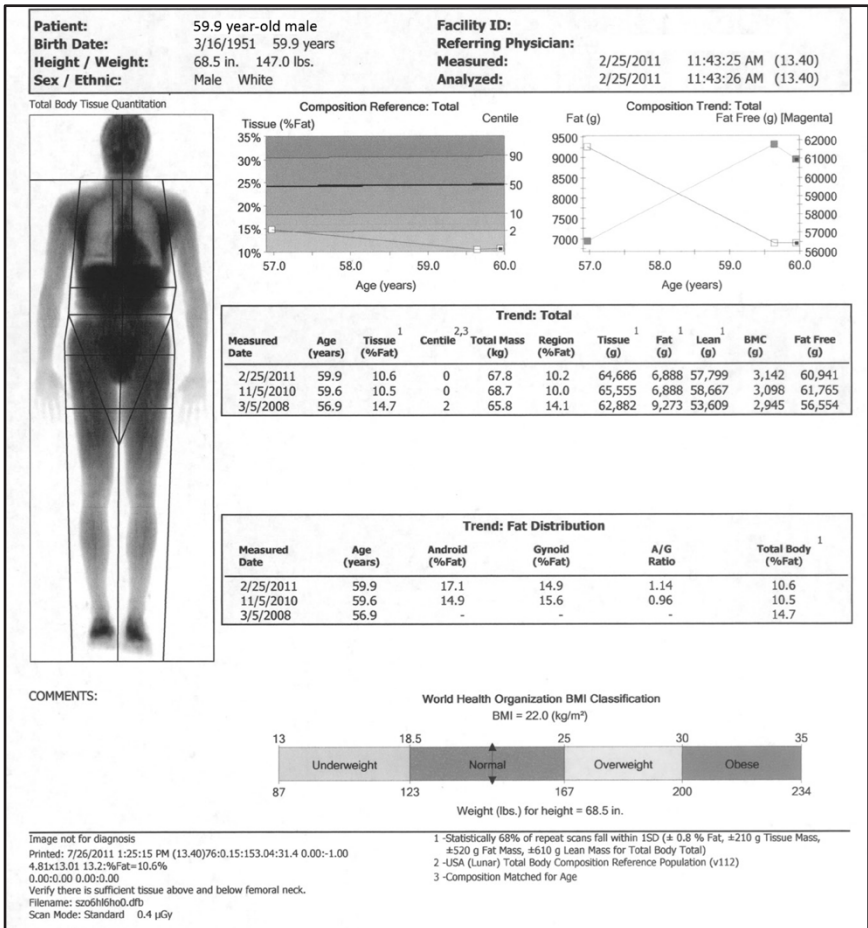
One pound of fat is equal to 3,500 calories. So, if you create a deficit of 500 calories a day, you should lose one pound each week. To accomplish this, either increase your level of exercise and/or cut back on calories. Take care not to slash too many calories, though, because you don't want to deprive your body of the nutrients it needs. Consuming fewer than 1,200 calories a day for most people is not recommended for weight loss, unless recommended and supervised by a doctor.

The DXA scan

Another test we use at The Fitness Principle with Mackie Shilstone to help us determine body composition is a DXA scan. This is short for Dual X-ray Absorptiometry, which isn't quite as intimidating as it might sound. While it uses sophisticated X-ray technology, it actually exposes the patient to less radiation than do conventional X-rays: roughly four millirems compared to 60-80 millirems in a normal chest X-ray or the hundreds of millirems delivered by a mammogram.

DXA scans were primarily developed to measure bone mineral density but at the Fitness Principle we use them to measure that as well as overall body composition. The General Electric Lunar Prodigy System we use is a revolutionary device that has given us astoundingly accurate and valuable data about our clients. It tells us exactly what we need to do to get them into optimal physical condition. It gives us a picture of what they look like inside which in turn gives us the blueprint for the program we design for them. This device is the gold standard for the industry.

On the following page you will see a sample DXA scan of a 59.9 year-old-male:



Here's a summary of what a DXA scan can do besides measure bone mineral density:

- Determine body composition based on three body compartments consisting of fat mass, lean body mass, and bone mass
- Measure regional tissue in terms of fat percentage and total mass, then break down fat, lean mass, bone mineral content, and total fat-free content — which would be the sum of the lean and the bone mineral content.

In our program, the DXA scan allows us to get a breakdown of one's body composition — arms, legs and trunk regions. Then we get categories of fat patterns — *android for the male fat pattern and gynoid for the female. The scan also can show the regional fat percentage in each of the categories listed above, in addition to highly specific information about bone mineral content.

DXA scans are especially popular among professional golfers because the way they swing at the ball tends to build up more lean mass on one side of their body, including arms — typically the side from which they swing the club. A recent article in the *New York Times* explained the procedure and its results: After the data taken from the scan is processed, organized and printed out, "It separates the lean mass on the right and left sides of the body and highlights the difference between the two. Total fat is broken down for the left and right arms to the hundredth of a pound."

The data we acquire from a DXA scan can often tell us if people are at-risk even before they show symptoms. It's akin to an early warning system. If, for example, we find a significant amount of unhealthy fat (visceral fat or adipose tissue) stored in the midsection, we can go after the problem before it becomes worse. We can devise a program to help the person convert as much as possible of that unhealthy fat into healthy muscle tissue.

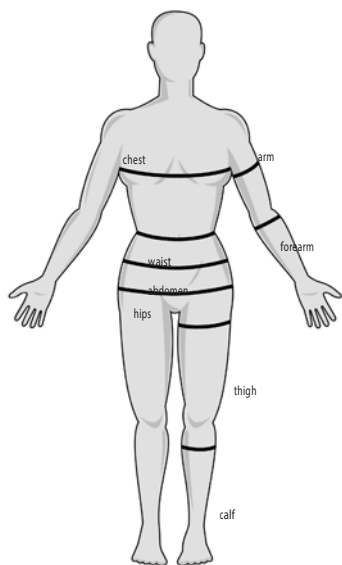
The scan also helps us immeasurably when we're working with post-menopausal women. The average age of menopause in women in this country is 51, and we tend to see women older than 51 having a higher amount of trunk fat. This puts them at a higher risk for type 2 diabetes and makes them more susceptible to heart attacks after menopause. A lot of this is connected to their estrogen supply.

Body measurements

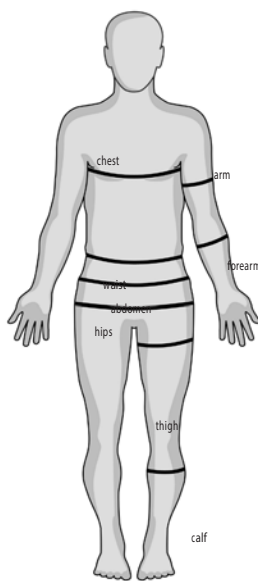
Taking regular measurements is essential to regulating clients' success and body composition changes. We measure and, depending

** An android (male) fat pattern is defined as one that stores excess fat above the waist, primarily in the abdomen. A gynoid (female) fat pattern is defined as one that stores excess fat below the waist, primarily in the hips, thighs and buttocks.*

on the program, record the following measurements on a bi-weekly or tri-weekly basis:



Female



Male

- Shoulder
- Chest
- Waist
- Abdomen
- Hips
- Left bicep, forearm, thigh and calf
- Right bicep, forearm, thigh and calf

If things are going according to plan, fat accumulated in the waist, abdomen and hips should be decreasing as lean tissue is maintained or increased. We usually see, from my experience, at least a loss of three-fourths of an inch per pound of scale weight. For example, if someone loses 12 pounds, he's lost about 10 inches all around, across the entire body. And that's just an average: Some lose more, or less. Our goal is to preserve or increase lean body mass so that the DXA scan and inch loss/pound loss ratio can show lean to fat changes over time.

Homework

Before showing you how you can measure at home the same parts of your body that we measure with the DXA scan, I want to give you some numbers you can use to gauge your body fat percentage and see what category you fall into. Here's a helpful chart you can use that comes from American Council on Exercise.

ACE BODY FAT % CHART		
Descripton	Women	Men
Essential fat	10-13%	2-5%
Athletes	14-20%	6-13%
Fitness	21-24%	14-17%
Average	25-31%	18-24%
Obese	32%+	25%+

Adding Up the Numbers to Make Subtraction Work

Case Study #1: Christie

Christie Dannewitz, a mother of two in her early 40s, came into our Executive Wellness Program in early October 2010. At 66 inches (5'6"), she weighed 207 pounds and had a waist measurement of 38.5 inches. Her abdomen measured 43 inches in circumference, her percentage of body fat was 48.7 percent, and her waist-to-height ratio was 58 percent.

Case Study #2: Clay

Clay Leon is a nurse in his early 30s who does rounds on the night shift. He is 6' tall and when we first measured him for the program on Aug. 23, 2010, he weighed 246 pounds. His waist was 42 inches, and his abdomen circumference was 43¼ inches. His body fat percentage was 32 percent, and his waist-to-height ratio was 58 percent.

Throughout the book, you will discover the progress made by both Christie and Clay, who participated in the program at East Jefferson General Hospital. You will find out how their successes can mean success for you.

Now, in order to get your measurements, you need to look at the illustrations on page 82, which show you the areas you need to measure and at what points. You will see that eight specific areas need to be measured on both men and women – the chest, arm, waist, forearm, abdomen, hip, thigh and calf. As you get your measurements in inches, write them down — you'll need them to help calculate your body-fat percentage.

Here's how, using formulas from Philip L. Goglia's book *Turn Up the Heat: Unlock the Fat-Burning Power of Your Metabolism*. Let's start with the men.

AT-HOME BODY FAT TEST FOR MEN

Step 1: Taking Measurements

1. Height in inches _____
2. Hips in inches _____
3. Waist in inches _____
4. Weight in pounds _____

Step 2: Determining Your Percentage of Body Fat

1. Multiply your hip measurement in inches: _____ X 1.4 = _____, minus 2 = _____ (A)
2. Multiply your waist measurement: _____ X 0.72 = _____, minus 4 = _____ (B)
3. Add A plus B = _____ (C)
4. Multiply your height measurement: _____ X 0.61 = _____ (D)
5. Subtract D from C, then subtract 10 more: $(C - D) - 10 =$ _____ % fat

AT-HOME BODY FAT TEST FOR WOMEN

Step 1: Taking Measurements

- | | |
|---------------------------|---------------------------|
| 1. Height in inches _____ | 3. Waist in inches _____ |
| 2. Hips in inches _____ | 4. Weight in pounds _____ |

Step 2: Determining Your Percentage of Body Fat

1. Multiply your hips measurement: _____ X 1.4 = _____,
minus 1 = _____ (A)
2. Multiply your waist measurement: _____ X 0.72 = _____,
minus 2 = _____ (B)
3. Add A plus B = _____ (C)
4. Multiply your height in inches: _____ X 0.61 = _____ (D)
5. Subtract D from C, then subtract 10 more: $(C - D) - 10 =$ _____ % fat

And that's basically all there is to it. You don't need fancy equipment to measure yourself at home. Just a simple cloth tape measure as shown in the illustration. However, I would have to add the following disclaimer:

Using the measurements and a calculator is one possible body fat formula. There are others from different authors. Since this method is the quickest and cheapest, it will be the least accurate. However, it can be quite useful over time if you use the same formula. In other words, if this method reads 25% now and 20% in two months, your body fat has improved, regardless of the accuracy of the method used. Watching the trends will be the most effective approach.

Try it and see how your numbers come out in terms of body fat percentage. If you find that you are in the fat to obese range, read on and I will give you some exercises and sample meal plans that can help you drop that percentage, lower your risks for serious ailments, and add years to your life.

PART THREE

CHAPTER TWO

Rx Healthy Eating Guidelines

EATING HEALTHY: HOW YOUR CHOICES CAN CHANGE YOUR LIFE FOR THE BETTER

Eating nutritious meals and snacks is as much an essential part of living a healthy life as exercising and taking other steps that enhance your chances for greater longevity. In my Fitness Principle program, devising healthy meal plans for my clients is a key component in an overall plan to adjust body composition to favor fat tissue loss while preserving and/or increasing lean tissue.

For many years, since I began supervising health and wellness programs for various medical institutions in the New Orleans area, I have kept a licensed nutritionist on my staff. My nutritionist, Julie Fortenberry, has been an asset to my program, and I have come to rely heavily on her expertise in what types of foods she can recommend for clients. In this chapter, Julie helps me explain the guidelines for my program, guidelines that can also be used by those reading this book who want to live longer and healthier lives through proper nutrition.

The comprehensive approach to the nutritional component of my program includes the mental, physical, and medical aspects. We try to incorporate all of these elements and ask multiple questions to get the best results. When potential clients first come to us, we interview them extensively and they fill out applications including a detailed medical history. From their answers to the questions we try to determine which program might work best for them.

When Julie meets with a client the most important thing she has him or her do is cite a “typical day” meal-wise. We want to know what he’s eating and drinking. This helps us determine any problems the client may be having and learn about any misconceptions he may have about what’s good or bad for him.

It is surprising that many people have difficulty recalling what they ate on a particular day or even what they eat on a normal day. This proves to Julie that they are simply unaware of the foods they are consuming. For many people, eating is just something they do because their bodies require it, not something they consciously think about. From this we can see how such an oversight over a period of time can lead to unhealthy food choices, unhealthy weight gain and unhealthy conditions.

When Pam Rees, 59, met with Julie, she had become overwhelmed with the all the information she had gathered about nutrition and the many types of diets she had tried. Rees was never able to lose the 40 extra pounds she wanted to.

"I needed someone to put this together for me," said Rees, who discovered she was not getting enough protein in her diet, and therefore lacked the energy she needed to commit to regular workouts. She also learned that she was an emotional eater, often turning to food during stressful times.

Unlike most diet programs, we do not espouse plans that require people to give up everything that isn't 100 percent nutritionally sound. We allow them to indulge in some of their favorite treats with moderation, and these indulgences are balanced out with foods and beverages more in keeping with our plan.

Case Study #1: Christie

"People get caught up in all these different diets and all these diet books. (With the program) everything was really simple. It was tailored to what I eat day to day, and I was able to incorporate healthier things and definitely expand that to new foods. I never felt deprived or hungry. It was always more than enough, and I was very comfortable."

Case Study #2: Clay

"I am eating differently and better now. And I have been reading Mackie's books and taking supplements – whey protein and creatine. I am also eating salmon at least once a week. I have noticed that my strength has increased dramatically, and my waist size is down."

Write it down

To keep our clients in sync with their meal plans, we ask that they keep food journals that include everything they consume – good, bad or in-between. They also record date, time, and what amounts they ate.

This enables us to track what they're doing on their own and to balance what they're consuming with what they *should* be consuming. In other words, if they're consuming one of their favorite foods or beverages and it doesn't follow one of our recommendations, we can balance things out with nutritious choices.

Having our clients keep a food journal makes them accountable for what they consume. We expect them to be honest with us, even if they're eating a fast-food burger with fries or something similar. We're not going to come down on them for occasional deviations from our plan. In situations like this, we do our best to encourage them to get back on track with food items supplying the nutrients lacking in their indulgences. Because they're paying to go through the program, they wouldn't be getting their money's worth and would only be cheating themselves if they weren't completely honest with us. They're here for results and they are not going to get what they want if they continue with old eating habits and are not sharing that information with us.

Looking over John Goodman's shoulder

John was put on a nutrition plan that, among other things, cut sugar out of his diet. Working closely with our nutritionist, he began eating lighter, healthier meals that emphasized whole grains, high fiber and lean protein content, essential oils and fatty acids, and grilled foods (nothing fried). Fresh fruits, and raw or grilled vegetables were also incorporated.

As he followed his meal plan, John kept a food journal that allowed him and us to gauge what he ate, how much and at what time of day. Using the data in the journal, we pinpointed how his calories were being consumed.

In the back of this book you will see a sample food journal similar to the one we use. I obviously don't expect everyone reading this to come to Metairie, La., to take part in my program. That's why I am spelling everything out here: so that you can do this at home and control your own weight destiny with the aid of the accompanying information. My objective, quite simply, is to help you improve your health and fitness wherever you may be.

OUT OF THE LAB, ONTO THE PLATE

Using Lab Results to Plan Your Food Selection

Much of what we do in the program revolves around the results of laboratory blood tests conducted by my clients' physicians or our own before we start. What the results tell us is whether or not people have conditions that could pose problems for them (and us) as they're going through their program. At the very least, we don't want people with counterproductive pre-existing conditions spending their money on a program that may not get them the results they want — and we definitely don't want to be responsible for worsening a condition that's already there. That is why we are as thorough as we are during the screening process. If there are problems or a strong potential for problems, we want to catch them early and take appropriate corrective steps. If there are problems or if there is a strong potential for problems, we want to catch them early and take appropriate corrective steps, with the help of the person's physician.

Among the things we look for during the testing phase are:

- Abnormal lipid profiles — both the good and bad kinds of cholesterol (respectively HDL and LDL) and triglyceride levels
- Thyroid conditions
- Metabolic syndrome
- Diabetes or “pre-diabetes”
- Hormonal imbalances (such as PCOS or menopause)

During the screening process, we perform lipid tests to determine each individual's levels of cholesterol. This also enables us to determine the triglyceride levels, and from this data we can plan needs-based diets. We do this as well through fasting blood sugar tests. A blood test can help us determine the presence of a thyroid condition; if there is one, we can work with the client's physician. Many of our clients meet the threshold for Metabolic Syndrome

diagnosis as well. This condition is characterized by a group of metabolic risk factors; three of the five below indicate its presence:

- Abdominal obesity (excessive fat tissue in and around the abdomen), determined by measuring waist circumference ≥ 40 " for males and ≥ 35 " for females
- Triglycerides ≥ 150 mg/dL
- HDL cholesterol ≤ 40 mg/dL for males and ≤ 50 mg/dL for females
- Blood pressure $\geq 130/85$ mmHg
- Fasting blood sugar ≥ 100 mg/dL

People with Metabolic Syndrome are at increased risk of coronary artery disease and other diseases related to plaque buildups in the artery walls — stroke and peripheral vascular disease — and type 2 diabetes. Metabolic Syndrome has become increasingly common in the United States, with an estimated 50 million Americans believed to have it in varying degrees. I have found it especially prevalent among professional football offensive and defensive linemen, who are typically in the 300-plus pound range and have broad waistlines. Our objective in the program is to catch this problem before it becomes more serious.

There are other conditions our screenings may detect as well, but these are the primary ones. As technologies improve and more advanced scientific testing methods are devised, we will continue to incorporate those that enhance our mission and which we can administer as safely and effectively as possible.

Meal plans and nutritional guidelines

Sometimes we find it necessary for a client to spend a good bit of his time meeting with the nutritionist and getting into an effective, workable nutrition plan before the physical training begins. If, for instance, a person is very overweight and we don't feel he's quite ready to get into the training yet, we try to get some of the fat off first. It is very important that clients be in a condition that will allow them to endure the training they are about to undergo. Once we have the medical and nutritional history of the client documented, Julie is ready to put a nutrition plan in place.

The plan she devises is based largely on what the client likes and dislikes, except in extreme instances, such as when he's consuming things that may be seriously harmful. We simply try to get him to consume these items in moderation while we transition him to a plan that includes the healthy foods and beverages that will allow him to reach his goals.

Those who enroll in our program are given a printed copy of our meal planning guide. Let's talk about that:

Tips anyone can follow

1. Try not to skip meals or snacks. Eat every three hours during the day.
2. Try to eat four-six small meals or snacks per day, and take at least 20-30 minutes to eat your main meal — that's how long your body takes to realize it is full.
3. Limit your intake of saturated and trans-fats to less than 20 grams daily. Instead, incorporate more heart-healthy fats, particularly those found in fish, nuts and olive and canola oils.
4. Grill, broil, roast or bake meats instead of frying them. Limit fried food to one time per week.
5. Select 100-percent whole grains, looking for foods with at least three grams of fiber per serving.
6. Listen to your body. Become aware of feelings of hunger and fullness, and know the difference between being bored and being hungry. Trust your mind and your body, paying attention to the signals they are sending you. Also be sure to occasionally allow yourself moderate amounts of those foods that you eat simply for pleasure.

Daily fluid needs

1. Stay hydrated with fluids containing no caffeine or alcohol. Divide the number of pounds you weigh by 2 and make that amount the number of ounces of pure water you drink each day. That is, if you weigh 200 pounds, drink 100 ounces of water a day.
2. When you exercise or work outside, drink extra amounts to replace fluid lost through perspiration.

Starches and breads

Each food listed in the portions below contains approximately 15-20 grams of carbohydrates — known to diabetics keeping track of their intake as a “carb exchange.” This will help you determine what portions you should be consuming at meal and snack time. Everyone has different carbohydrate needs but this gives you a starting point. Most men need two to three carb exchanges at each meal, most women one or two.

The foods listed below in portion size each contain 15-20 grams of carbohydrates (one carb exchange).

Cereals/Grains/Pasta

Breakfast cereals, dense	$\frac{1}{3}$ cup
Breakfast cereals, normal	$\frac{3}{4}$ cup
Oatmeal, cooked	$\frac{1}{2}$ cup
Grits, cooked	$\frac{1}{2}$ cup
Rice, white or brown	$\frac{1}{3}$ cup
Risotto, cooked	$\frac{1}{3}$ cup
Pasta, white or whole-wheat	$\frac{1}{2}$ cup

Dried Beans, Cooked

Red, black, white beans	$\frac{1}{3}$ cup
Split peas, black-eyed peas	$\frac{1}{3}$ cup
Lentils	$\frac{1}{3}$ cup

Starchy Vegetables

Corn	$\frac{1}{2}$ cup
Lima beans	$\frac{1}{2}$ cup
Green peas	$\frac{1}{2}$ cup
Potato, baked	3 oz.
Potato, mashed	$\frac{1}{2}$ cup
Yam (sweet potato)	3 oz.

Bread

Bagel, large deli or coffee-shop style	$\frac{1}{4}$
Bagel, mini-size	1
English muffin	$\frac{1}{2}$

Hot dog or hamburger bun	½ (1 oz.)
Pita, 6 inches across	½
Tortilla, 6 inches across	1
Bread, white or whole-wheat	1 slice
Bread, low-calorie, 40-50 calories per slice	2 slices

Crackers/Snacks

100-calorie pack, any variety	1 pack
Melba toast	5 slices
Popcorn, low-fat	3 cups

Meat and meat substitutes

Try to consume a source of protein at each meal and snack time, since protein takes longer to digest, keeping you fuller longer. Some tips:

- Each ounce of meat and meat substitute contains seven grams of protein.
- The calorie and fat content will vary depending on whether you choose lean, medium-fat, or high-fat meats.
- Three ounces of meat = one medium pork chop, one small burger, half of a chicken breast, or one fish fillet (approximately the size of a deck of cards).
- On average, men should consume 6-8 ounces of lean meat at meals and women 4-6 ounces.

Lean meat and substitutes

33-35 calories per ounce

Beef

Eye of round, sirloin, flank, tenderloin, filet	1 oz.
At least 93% “extra lean” ground beef	1 oz.

Pork

Ham, tenderloin or Canadian bacon	1 oz.
Center-cut pork chops	1 oz.

Poultry

Chicken breast, turkey breast (skinless)	1 oz.
Ground turkey breast (skinless)	1 oz.

Fish

All fresh and frozen fish	1 oz.
Crab, lobster, shrimp, crawfish, clams	1 oz.
Oysters	6 medium
Tuna or salmon in water or packet	¼ cup

Cheese

Cottage cheese	¼ cup
Reduced-fat cheese (i.e. 2%-fat cheese)	1 oz.

Other

Deli meat (turkey, ham, chicken, roast beef)	1 oz.
Egg whites	2
Egg substitute (i.e. Egg Beaters)	½ cup
Jerky – beef or turkey	1 oz.
Plain low-fat Greek yogurt	4 oz.

MEDIUM-FAT MEAT SUBSTITUTES

75 calories per ounce

Beef

Ground beef less than 90% lean	1 oz.
Rib, chuck, or rump roast; cubed or T-bone steak	1 oz.

Poultry

Chicken with skin, ground turkey	1 oz.
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Fish

Tuna, canned in oil	¼ cup
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Other

Egg	1
Tofu	4 oz.

HIGH-FAT MEAT SUBSTITUTES

100 calories per ounce

(NOTE: These are high in saturated fat and calories and should be consumed no more than 1-2 times a week.)

ANYTHING FRIED**Beef**

Ribs, prime rib, most corned beef	1 oz.
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Pork

Spare ribs, ground pork, pork sausage	1 oz.
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Fish

Any fried seafood product	1 oz.
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Cheese

All regular cheeses – any variety	1 oz.
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Other

Bologna, salami	1 oz.
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Sausage	1 oz.
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Hot dog	1
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“FREE” VEGETABLES

“Free” vegetables are low in calories and high in fiber. Most vegetables contain at least 2-3 grams of fiber per serving and are excellent sources of vitamins and minerals. These are very low in calories and should be added to every meal in unlimited portions, to add fiber and aid in satiety.

Artichoke

Asparagus

Beans (green beans)

Bean sprouts

Beets

Broccoli

Brussels sprouts

Cabbage

Carrots

Cauliflower

Celery

Cucumber

Eggplant

Greens (collard, mustard, turnip)

Mushrooms

Okra

Onions

Pea pods

Peppers (green, yellow, red)

Salad greens

Sauerkraut

Spinach

Squash Tomato

Tomato/vegetable juice

Turnips

Water chestnuts

Zucchini

- Starchy vegetables such as corn, peas, and potatoes are not considered “free” vegetables.
- Fresh and frozen vegetables are the best; canned vegetables are better than none at all. If you must use canned vegetables rinse well to decrease salt intake.
- Vegetables are best eaten raw, steamed, stir-fried, or grilled.
- Cooking spray, olive oil, spray butter, lemon, lime, Parmesan cheese, salsa, balsamic vinegar, low-fat dressings, light cream cheese or any seasoning can be used to flavor vegetables.

FRUITS

- Each fruit listed contains about 15-20 grams of carbohydrates and 60-80 calories per serving. It is important to remember that while fruit is very good for you it is not a calorie-free food. It is essential to monitor portions as you would other carbohydrates.
- Most fruits have at least two grams of fiber per serving
- Whole fruit is more filling than fruit juice and is a better selection for individuals trying to lose body fat

Fresh/Frozen/Unsweetened/Canned Fruit

Apples	1
Apricots, medium	4
Banana, 9 inches long	$\frac{1}{2}$
Blackberries/blueberries	$\frac{3}{4}$ cup
Cantaloupe/honeydew melon, cut up	1 cup
Cherries	15
Figs, raw	2
Grapefruit, medium	$\frac{1}{2}$
Grapes	15
Kiwi, large	1

Mandarin oranges	$\frac{3}{4}$ cup
Mango, small	$\frac{1}{2}$
Nectarine	1
Papaya	1 cup
Peach, small	1
Peaches, canned	$\frac{3}{4}$ cup
Pear	1 small
	$\frac{1}{2}$ large
Pineapple, raw	$\frac{3}{4}$ cup
Plums	1-2
Raspberries	1 cup
Strawberries	$1\frac{1}{4}$ cup
Watermelon	$1\frac{1}{4}$ cup

Fruit Juice

Apple juice/cider	$\frac{1}{2}$ cup
Grapefruit juice	$\frac{1}{2}$ cup
Orange juice	$\frac{1}{2}$ cup
Pineapple juice	$\frac{1}{2}$ cup
Grape juice	$\frac{1}{3}$ cup
Cranberry juice cocktail	$\frac{1}{3}$ cup
Prune juice	$\frac{1}{3}$ cup

For most individuals trying to lose weight or maintain a healthy weight, juice should be limited since the calories and sugar add up quickly. If you do choose to drink juice be sure it says 100% juice on the label.

FATS AND OILS

The fats listed below contain approximately 100-120 calories and 10-14 grams of fat per serving (as shown).

Unsaturated Fats

(add to diet in healthy portions)

Avocado	$\frac{1}{4}$ medium
Almonds	12 whole
Cashews	12 whole
Pecans	5 whole/10 halves
Peanuts	15-20
Walnuts	5 whole/10 halves

Oil

(corn, olive, canola,
safflower, soybean)

1 tbsp.

Saturated Fats

(limit usage)

Butter

1 tbsp.

Bacon

3 slices

Sour cream (light or reduced fat)

2 tbsp.

Heavy whipping cream

1 tbsp.

Cream cheese

1 tbsp.

Cream cheese, light

3 tbsp.

To see sample meal plans for both 1,400- and 2,000- calorie meal plans, see the Appendix of this book.

Vitamin D

Another key element of the nutritional component of our program is making sure that the client is getting an optimum level of essential vitamins and other nutrients. We emphasize omega 3 fish oil, covered in a separate chapter in this section. Another is vitamin D, and we encourage our clients to have their vitamin D levels checked by their own doctors. Many people, but especially those who are overweight, are vitamin D deficient because of the way the body stores it in fat, where it does the least amount of good. Also, because exposure to the sun is the primary natural source of vitamin D, many people may not be getting it that way. They're wise to wear sunscreen, but that blocks the sun's beneficial rays.

In addition to helping the body absorb calcium (which is key to building strong bones and teeth), vitamin D is strongly believed to be a preventative of cancer, multiple sclerosis, and the inflammatory bowel ailment Crohn's disease, and it aids fat absorption in the body. Unfortunately, there are not too many food sources from which vitamin D can be obtained directly. As mentioned above, the best source of vitamin D is the sun; 10 minutes' daily exposure at the minimum. However, some people, because of sensitive skin conditions, can't be out in the sun too long or at all. And, of course, during the cold winter months, there may not be much sun; vitamin D deficiency levels are generally higher in winter than in any other season.

Vitamin D can be found in fortified foods and beverages such as some types of cereals, milk, and orange and other types of juices. This fortification is usually specified on the product labels. However, the vitamin D levels in these foods and drinks are generally low, well below the minimum daily requirements. For supplementation, vitamin D₃ is what I would recommend, the proper level ascertained under medical supervision.

ABCs of multivitamins

One final word about nutrition. The ideal situation, of course, is to obtain all of the essential vitamins, minerals, and other nutrients from food and beverage sources — but this is not always possible. For supplementation I would recommend the GNC age-specific multivitamins, which are available for men and women. For men these include Mega Men, Mega Men Sport, and Mega Men 50+.

For women, choices are Women's Ultra Mega, Women's Ultra Mega Active, and Women's Ultra Mega 50+. The women's version comes with and without iron.

All the products go through 150 different quality checks and are guaranteed for quality, purity and potency. They are in caplet form.

In addition, I am announcing the launch of a new product bearing my name, Renew-ALL®, a synergistic blend of vitamins, minerals and nutrients specifically designed to enhance your nutritional needs. This product can be ordered at www.stoprentinyourhealth.com. Follow label recommendations on all the products referenced here unless advised differently by your physician.

PART THREE

CHAPTER THREE

Rx Healthy Supplement Plan

OIL YOU NEED TO KNOW

The remarkable benefits of fish oil

There is documentation dating fish oil consumption as a daily wellness tonic back as far as the late 1700s. It was a curious British physician who experimented with spoon-feeding some cod liver oil to a patient with severe arthritis and nerve pain. Prior to that cod liver oil had only been used medicinally as a topical treatment for tuberculosis. The doctor had great success easing the patient's aching joints and declared that the patient had regained her health.

The usage of fish oil as a health tonic didn't cease with the 1700s. Many baby boomers remember when their grandmothers made them take cod liver oil from a spoon to maintain good health and as it turns out, grandma was right! Cod liver and other fish oils have resurfaced as some of the most important nutritional supplements we have ever used.

Fish oil is the best source of two incredibly important essential fatty acids: eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA). These polyunsaturated fatty acids are required to maintain good health. Scientific evidence has shown that the human body does not produce enough EPA and DHA to meet its own needs, and therefore these must be included in the diet or taken as supplements.

As the most investigated nutritional supplement in the world, fish oil has been fully endorsed by academia and science. The conventional medical world, late to acknowledge the plethora of clinically proven health benefits, now fully supports regular supplementation with the essential omega-3 fatty acids found in fish oil. So it's come full circle, with contemporary cardiologists, psychologists, dermatologists and pediatricians now recommending fish oils to

their patients. A number of medical organizations including the American Heart Association, American Diabetes Association, World Health Organization, and the British Nutrition Foundation also recommend omega-3 fatty acids. Multinational food corporations have taken notice and are seeking techniques to fortify food with EPA and DHA.

If your memories of grandmother's fish oil are not all that fond or if you've only heard about grandmother's fish oil, you should know that fish-oil manufacturing has improved drastically over the years and the awful taste is gone. At present, quality fish oils are manufactured to maintain freshness, remove potential environmental contaminants, and are available as flavored or unflavored liquids and soft gels. There are even chewable fish oils for kids. If you're not sure your body is getting enough essential fatty acids, take this to heart.

Case Study #1: Christie

"I take 2,000 milligrams of fish oil per day, as recommended by the program. Two or three weeks after I started fish oil supplements, I noticed I was feeling better and functioning better, and my blood pressure stayed more stable."

Case Study #2: Clay

"I continue to eat salmon once a week and take fish oil supplements, and I can tell a difference. I feel better and therefore continue to work out."

A defining moment

What exactly are essential fatty acids (EFAs)? The human body can manufacture most of the fats it needs including cholesterol, saturated fatty acids and monounsaturated fatty acids. However, the omega-6 and omega-3 fatty acids are not synthesized by the body and thus, they must be obtained through diet or consumed as supplements. This is why they're the only fatty acids that are termed "essential" fatty acids.

Sources of essential fatty acids

The primary source of omega-6 fatty acids in the human diet is linoleic acid (LA) from the oils of seeds, beans and grains. Linoleic acid happens to be the “parent” omega-6 fatty acid and sunflower, safflower, soy and corn oil are particularly rich in it. Evening primrose oil, borage oil and black currant oil are unique because their relatively high content of the health-promoting omega-6 fatty acid gamma-linolenic acid (GLA).

The primary dietary source of omega-3 fatty acids is the short chain alpha-linolenic acid (ALA) from the oils of certain seeds and nuts. Alpha-linolenic acid is the “parent” omega-3 fatty acids and some examples of foods that contain it are flax, walnuts and canola. Fatty fish and fish oils are the richest source of the pre-formed longer chain omega-3 fatty acids, EPA and DHA, which offer the greatest health benefits of all the omega-3 fats.

The key: balancing omega-6/omega-3

Humans evolved eating a diet that contained approximately equal amounts of omega-6 and omega-3 fatty acids. Approximately 100 years ago, the Industrial Revolution introduced technology that allowed for the refinement of vegetable and seed oils from plants such as corn, cottonseed, soy, sunflower and safflower. The increased availability of vegetable oils led to a dramatic rise in the consumption of omega-6 fatty acids among industrialized countries. The introduction of these products to animal feed has resulted in the production of meat, fish and eggs high in omega-6 fats and virtually void of omega-3 fats.

Today, in Western diets, the ratio of omega-6 to omega-3 fatty acids ranges from 15-30:1, as opposed to the pre-Industrial range of 1-2:1. Scientific evidence has established that a diet that provides high levels of omega-6 fats shifts the physiological state to a pro-inflammatory one that promotes thrombosis, vasoconstriction (vein-narrowing), inflammation and poor cellular health. Associated physiologic changes include the development of heart disease, diabetes, autoimmune and inflammatory diseases (rheumatoid arthritis, Crohn’s disease, colitis, multiple sclerosis, lupus, asthma, etc.), depression, dementia and other chronic diseases.

Excessive omega-6 consumption is now one of the most pressing public health issues of the 21st century. It has been suggested that an increase in consumption of omega-3 fatty acids with a concurrent reduction in the consumption of omega-6 fatty acids would be a simple public health intervention that could have significant impact on the health of modern society. This simple dietary change could improve quality of life, reduce health care costs, and promote healthy aging.

The alpha and omega (3)

Dr. Jorn Dyberberg's landmark study analyzing the eating habits of the Greenland Inuits in the 1970s marked the beginning of clinical research into the benefits of diets rich in EPA and DHA. Supplementation with fish oil has become one of the most impressive and prolific areas of nutritional science in the past four decades. In fact, thousands of scientific publications and clinical trials have established the many health benefits of these long chain omega-3 fatty acids.

There are four primary ways omega-3 fats are thought to impact the human body: by (1) influencing cell membrane characteristics, (2) modulating the inflammatory response via eicosanoid production, (3) protecting cells via metabolism into "resolvins" and "protectins," and (4) influencing genetic expression.

AT THE CELLULAR LEVEL

Omega-3s as Components of Cell Membranes

The health benefits of fish oil boil down to a few simple concepts. First, EPA and DHA are required constituents of ALL cell membranes from our heads to our toes. As constituents of cell membranes, EPA and DHA are determinants of many important cell functions including cell receptor action, hormone binding, cell membrane fluidity, signal transduction, ion channel function, and membrane-bound enzyme activity. Hence, EPA and DHA are absolutely essential for proper cellular health.

There are thousands of prescription drugs on the market designed to modify one or more of the above cell membrane functions. Fish oil is a single, non-toxic, health-promoting substance that can

influence ALL of these actions. The overall health of every cell is dependent on its cell membrane: A cell membrane surrounds and protects the cell, allows nutrients into and waste out of the cell, and facilitates cell-to-cell communication.

Many cells in the human body are constantly recycled, and are programmed to replace themselves every 30 to 60 days. Omega-3 fats are required for the synthesis of new cell membranes and the repair of existing cell membranes.

Because the longest chain omega-3 fat, DHA, is especially concentrated in the cell membranes of the brain, eyes, heart, nervous tissue and spermatozoa the earliest signs indicating a deficiency of essential fatty acids usually develop in these omega-3-rich tissues.

Omega-3's role in the inflammatory response

The second major way that EPA and DHA omega-3 fats are thought to impact human health has to do with their role in the immune system as moderators of the body's inflammatory response. These long chain omega-3 fatty acids are precursors to a family of hormone-like "messenger" molecules known as eicosanoids that act as potent anti-inflammatory agents in the body. The omega-3-derived eicosanoids counterbalance the omega-6-derived eicosanoids that act as pro-inflammatory agents.

Proper immune response is dependent on the delicate balance between the activities of omega-6 and omega-3-derived eicosanoids. The inflammatory response is activated when the body is exposed to trauma, allergens, toxic chemicals, or disease. This is a normal part of the healing process. When the inflammatory response has been activated fatty acids are released from cell membranes for conversion into eicosanoids and they signal the surrounding tissues to respond. It is the omega-6-derived eicosanoids that promote vasoconstriction (narrowing of the blood vessels) and increase blood clotting, pain and inflammation. The omega-3 fatty acids and GLA support an anti-inflammatory immune response and help the body return to homeostasis. Over-consumption of the omega-6 fatty acids disrupts the necessary balance between the omega-6 and omega-3 fatty acids and causes inflammation to become a long-term physiological state.

There are disease-causing consequences for long-term inflammation and outcomes may include chronic pain, breakdown of cartilage and muscle, increased blood clotting, increased development of atherosclerotic plaques, and genetic changes that promote metabolic syndrome and other forms of cell dysfunction. Recent medical research asserts that chronic inflammation is the root cause of many chronic diseases including arthritis, heart disease, ADHD, asthma, eczema, depression and cancer. Long term-inflammation resulting from an omega-6/omega-3 imbalance is one of the top 10 reasons patients visit their doctors.

All things considered, the EPA and DHA essential fatty acids play a vital part in reducing inflammation. Scientists are just beginning to understand and appreciate the complexity of inflammation and its impact on health and disease. Pharmaceutical companies have spent billions of dollars trying to block inflammation. Non-steroidal anti-inflammatory drugs (NSAIDs), designed to prevent the formation of pro-inflammatory omega-6-derived eicosanoids, have become one of the most profitable drug categories. NSAIDs include ibuprofen, aspirin, Aleve, and Celebrex. The importance of balancing dietary omega-6 and omega-3 fats is a true example of how diet impacts health.

The prevalence of chronic inflammation in our society is borne out by the impressive sales of anti-inflammatory drugs, which in 2003 reached \$20 billion in the United States alone. Unfortunately, with long-term use, studies show, many of these drugs can greatly increase the risk of stomach irritation, ulcers, heart attack, stroke and potentially lethal stomach bleeding. According to unbiased studies, fish oil has been proven to be an extremely safe and effective way to lessen inflammation — thereby preventing the diseases associated with it and without the side effects.

New anti-inflammatory mechanisms

Over the past 30 years fish oil research has attributed the anti-inflammatory activity of the oil mainly to EPA. What about DHA? From a biochemist's perspective EPA and DHA are structurally similar. They both reside in the cell membrane and are released from the membrane when the immune system is triggered. However, it was recently discovered that both EPA and DHA function synergistically to mitigate excess inflammation and promote health and longevity.

A new group of compounds derived from omega-3 fats was found to resolve inflammation in tissues. Accordingly, these compounds were appropriately named “resolvins.” The compounds synthesized from EPA are resolvins of the E series, while those formed from DHA are denoted as either resolvins or protectins (formerly neuroprotectins) of the D series.

This is where the third fundamental way in which omega-3 fats are thought to impact the human health comes in: resolvins and protectins are part of the molecular mechanisms that aid in the removal of inflammatory cells and restoration of tissue homeostasis once the need for inflammation is over. During the inflammatory response white blood cells are produced to counter the effects of trauma and disease-causing organisms. However, if the inflammatory response is not stopped at the appropriate time those white blood cells begin to cause trauma and tissue damage. Resolvins play an important role in regulating and inhibiting the harmful effects of unopposed inflammation and signal the white blood cells to stop.

Protectins operate in the same way as resolvins but are concentrated within the brain and nervous tissue. In addition, it has been shown that protectins protect the tissue of the eyes from the damaging effects of light and oxidative stress. Protectins have also been shown to exhibit protective effects in animal models of stroke and of Alzheimer’s disease. The data supporting omega-3 consumption for the prevention of Alzheimer’s disease is so impressive that in 2007 the National Institute on Aging (NIA) initiated an 18-month clinical trial, conducted at 52 sites across the United States, to determine if omega-3 fats can help slow the progression of Alzheimer’s disease.

The discovery of resolvins and protectins is providing scientists with an expanded understanding of the collaboration that takes place between the EPA and DHA omega-3 fatty acids. That said, clearly we don’t know everything there is to know about fatty acids. These compounds are an exciting and emerging area of research that will continue to enlighten us as to how omega-3 fatty acids can be consumed to dampen inflammation and improve human health.

Proven Benefits of Essential Fatty Acids

1. To your general health!

Higher omega-3 intake is associated with several parameters of good health and well-being, including improved mood, body composition and metabolism; bone strength, respiratory function, skin health, eye health, attention, focus, memory and much more. It has also been linked to greater longevity in studies on centenarians.

2. Take heart: the cardiovascular component

Cardiovascular diseases continue to be our nation's number 1 killer. Since 1963 the American Heart Association has been dedicated to urging Americans to be proactive against the development of these diseases. The foundation of preventive medicine for cardiovascular disease is built on exercise and good nutrition. The most important heart-healthy nutrients may be the long chain omega-3 fats, EPA and DHA, from fatty fish and fish oil.

Significant new findings are continually being reported on the benefits of omega-3 fatty acids from fish oil relative to cardiovascular disease. These findings include evidence from randomized, controlled clinical trials that demonstrate how omega-3 fatty acids improve heart health by reducing triglyceride levels, decreasing the growth of atherosclerotic plaques, lowering blood pressure, reducing the risk of thrombosis, and improving arterial endothelial function (relating to the cells lining the closed spaces of the body such as the inside of blood vessels that aid in blood flow). Fish oil is also a powerful supporter of the body's natural anti-inflammatory response, which counteracts the progression of heart disease.

Prevention studies suggest that taking between 500 mg and 1,500 mg of EPA and DHA daily significantly reduces the number of deaths from heart disease (all causes). The American Heart Association (AHA) recognizes the significant and ever-growing body of scientific evidence that reveals just how important omega-3 fats are for cardiovascular health. The AHA recommends that Americans with existing risk factors for cardiovascular disease should consume a minimum of 1000 mg of combined EPA and DHA per day. Additionally, individuals with elevated triglycerides need 2,000 to 4,000 mg of combined EPA and DHA daily. The AHA

recently acknowledged that these recommendations are higher than what will likely be achieved through diet alone and therefore a high-quality fish oil supplement may be necessary.

3. Heart and head: cognitive health

Research has shown that omega-3 fats are necessary to develop, maintain and protect structures of the central nervous system — from conception through pregnancy and, undoubtedly, throughout life. Regarding the importance of EPA vs. DHA, the scientific consensus is that both EPA and DHA contribute to cognitive health, development, mental well-being, behavior, learning and mood. Thus, they are best taken in combination with one another.

Published clinical trials suggest that EPA deficiency may have a role in conditions associated with altered mood and behavior, including depression, bipolar disorder, schizophrenia, and ADHD. Research indicates that lower levels of long chain omega-3 fats are found in individuals who suffer from depression and bipolar disorder. Clinical trials have also shown that supplementation with fish oil improves symptoms of depression, bipolar disorder and schizophrenia.

4. The eyes have it

Omega-3 fatty acids from fish oil help maintain healthy structure and function of the ocular tissue by supporting the body's natural anti-inflammatory response, supporting tear production, and protecting eyes from oxidative damage. DHA is particularly important for the eyes and is most concentrated in the eye tissues. DHA accounts for approximately 30-35 percent of the total fatty acids found within the eye. Certain unique biochemical characteristics of DHA make it vital for the development, function and maintenance of the highly active, light-receiving cells found within the eye.

How much is enough?

It is important to remember that omega-3 fatty acids are essential nutrients that are unquestionably required by the body. Without a steady supply of EPA and DHA it does not function optimally. Various health organizations state in their guidelines that diet should be the first source of omega-3 fatty acids. To meet the minimum recommended amount of EPA and DHA, two servings of cold-water

fatty fish such as salmon, sardines, herring, anchovies or mackerel should be consumed per week. Two servings weekly is equivalent to approximately 200 to 500 mg of combined EPA and DHA per day.

The lesser recommendations of some of those organizations may not be enough to achieve the documented health benefits of fish oil. This is why many professionals in diverse medical disciplines specifically recommend between 500 mg and 1,000 mg of combined EPA and DHA daily to maintain health and support the cardiovascular system, eyes and nervous system. One gram of combined EPA and DHA daily is included in the recommendations of both the American Heart Association and the American Psychiatric Association for those with risk factors for heart disease or mood disorders. When choosing a fish oil it is important to focus on the amount of combined EPA and DHA in the product rather than the amount of total fish oil, as supplements vary in potency.

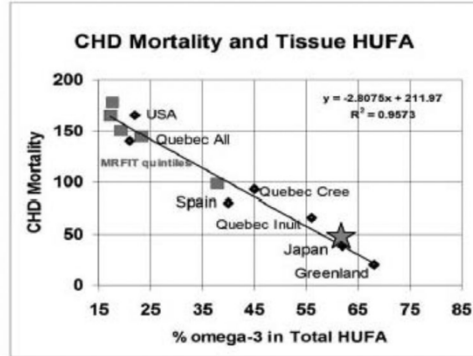
There are a number of factors that affect how much of the omega-3 fats we need. Body size, background dietary levels of omega-6, activity level and disease are examples of factors that may adversely affect the omega-3 fatty acid levels in our body. If you're committed to making sure your body is getting what it needs and you're having a difficult time determining if you're eating enough long chain omega-3 fats, I have some good news for you. A new and easy way to quantify need and optimal intake is with an omega-3 blood test.

Your omega-3 number may be the most important number you will ever know. A recent study published in the *New England Journal of Medicine* reported that people with a total omega-3 level of 6.9% were 90% less likely to die of sudden cardiac death than those with a total omega-3 level of 3.6%. So, how do you know if you're omega-3 level is closer to 6.9% or 3.6%? How do you know if you are taking enough fish oil or eating enough fatty fish? Thanks to advances in laboratory science you can now measure your omega-6/omega-3 levels with a simple test (requiring only a few drops of blood) in the comfort of your home. The test can be found at www.omega3test.com and is provided by the laboratory that actually invented the term omega-3. By entering 'NORDIC3' in the offer code box during checkout you can get this test for \$49.99; the suggested price is \$200.

Try to get at least 1000-2000mg of EPA and DHA and 4000mg of ALA per day with fish, fish oil and flax. Avoid omega 6 rich oils (soybean, corn, safflower) and foods made with them.

Omega 3 in HUFA = 61 % US Average = 24%

OPTIMAL > 50% Your value indicated by the purple star on the graphic below.



Total Omega 3 = 11.3 % US Average 4.8%
Desired >9%: correlates with a 50% risk reduction for sudden cardiac death (Albert et al)



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Named after Professor Ralph T. Holman, the scientist who coined omega-3, the Holman Omega-3 test identifies your fatty acid profile and quantifies your omega-3 and omega-6 fatty acid levels. This graph, using Dr. Bill Land's work that includes modeling of several populations and their dietary habits, is just one of the interesting components of the test results and illustrates how my diet and omega-3 intake compares with that in those populations. Because I avoid consuming too much omega-6 and make sure I get enough omega-3 I scored near the Japanese levels, where the typical diet includes a significant amount of marine based

foods. As you can see, this puts me in a lower risk category for mortality from cardiovascular disease.

Safety first

The U.S. Food and Drug Administration (FDA) has classified omega-3 fatty acids from fish oil as “generally recognized as safe” (GRAS). In fact, the FDA has ruled that up to 3 grams of combined EPA and DHA is safe for inclusion in the food supply of Americans, without fear of adverse events. In addition, there are no known significant drug interactions with omega-3 fatty acids. As with all nutritional supplements it is important to inform your doctor of what you are taking.

One of the cardiovascular benefits of fish oil is related to how it can thin the blood. The blood-thinning effects have led to concerns about increased risk for bleeding at higher doses (above 3 grams combined EPA and DHA) — if they’re taken with blood-thinning medications, or before surgery. The theoretical risk of clinically significant bleeding has not been verified in a controlled setting. However, it is advised not to combine fish oil with blood-thinning medication or before surgery without a doctor’s guidance.

Fresh fish, please

It’s important to keep in mind that fish oil is meant to be fresh — just like fish! The biggest problem with the deterioration of a fish oil product, or rancidity, is a distinct rank taste, smell, and fishy eructations, a.k.a. stinky fish burps. The main cause of rancidity is oxidative free-radical damage (yes, the stuff that causes us to age) to the double bonds found in EPA and DHA. Taste is directly related to freshness and oxidative damage (or lack of) to the oil. To achieve the benefits of fish oil choose a fresh, great-tasting fish oil that does not “repeat.” If the idea of biting into a capsule to taste test the freshness makes you uneasy, select a brand that offers a certificate of analysis, as this will illustrate the level of freshness via laboratory testing.

The therapeutic action and safety of fish oil is in part related to its molecular stability and resistance to oxidative damage. Any oil exposed to oxygen, or light or heat in the presence of oxygen, is subject to free-radical attack and oxidative damage. Fish oil is rich

in long-chain polyunsaturated fatty acids (PUFAs), which have many double bonds in their structure. Everywhere there is a double bond there is an opportunity for free-radical attack.

Fish oil that has been subject to oxidative damage may do the body more harm than good. Do not underestimate the value of an old-fashioned taste and smell test. If fish oil smells or tastes rank, the test is complete. The next step is to throw out the bottle. A fresh, non-oxidized oil should taste good and not carry a fishy aftertaste. If you ordered sushi and it smelled bad, would you eat it? Rotten fish oil is no different from rotten fish – the bad taste and/or smell is nature's way of telling us that something is not healthy to ingest. Continuing to do so will only increase the body's exposure to harmful molecules and add to the body's oxidative stress load.

In conclusion: the best of the best

Fish oil is unequivocally the best source for the omega-3 fatty acids EPA and DHA. Some purists still recommend eating fish to achieve optimal omega-3 levels. Unfortunately, contamination of our oceans has made reaching optimal omega-3 levels via eating fish a potential health hazard. Both the FDA and Environmental Protection Agency have warned the public about the potential dangers of consuming too much fish because of the associated toxins.

High-quality fish oil supplements that have been processed to remove environmental contaminants allow for supplementation of high levels of EPA and DHA for preventive and therapeutic clinical use without the risk of toxicity. In addition, studies have compared levels of mercury and organochlorines in fish vs. fish oil supplements and concluded that purified fish oils provide the beneficial omega-3 fatty acids without the risk of toxicity.

Nordic Naturals® is a company that, in my opinion, has set the standard for fish oil excellence. This company specializes in omega-3 essential fatty acids and offers a full line of non-concentrated and concentrated fish oil products. It also makes specialty products such as the chewable fish oils for children and fish oils mixed with other synergistic ingredients to meet the needs of people with specific health conditions.

Because there are no fish-oil quality standards in the United States, people must determine for themselves what standards a manufacturer is voluntarily following to ensure the fish oil it produces is pure, fresh, and contaminant-free. Nordic Naturals adheres to the highest standards in the industry and it has been my experience that results come more easily when using a great-tasting fish oil that does not “repeat.”

Native Norwegian and company owner, Joar Opheim, has developed relationships with independent fishermen who use small boats rather than large trawling vessels that spend a longer time at sea. This means there is less time between the catch and the oil extraction, which is done in a low heat, nitrogen-rich environment. These are the kinds of steps in the manufacturing of the fish oil that minimize free-radical damage. For more information visit the Nordic Naturals® website at <http://www.nordicnaturals.com>.

NOTE: Be sure to consult your physician before using intakes greater than 500 mg FDA/EPA/DHA as it pertains to your present health condition and medications used.

PART FOUR

CHAPTER ONE

The Fitness Cure

STEP BY STEP: AN EXERCISE IN LONGEVITY

How the Pro Circuit Workout and Strategic Walking Can Get You That Much Closer to Great Health

Before participating in my program, clients must first seek approval from his physician or one of my team doctors.

Here, in the words of Dr. Kanher, is our statement about medical clearance:

“Before you begin to embrace the notion of ‘health ownership’ and embark on your journey to achieve the goals you have set, clearance from your health care provider is essential. This is not only to make sure you are ready and able to embark on this journey, but also to make sure you have no medical concerns that need to be addressed before beginning. As an example, exercise will increase both heart rate and blood pressure, so you certainly want to make sure your blood pressure is under control before starting on your exercise program. It is never too late to do the right thing, and the right thing to do is to get started on your new you . . . *after* you get your clearance from your health care provider.”

Cardiopulmonary Stress Test (CPX)

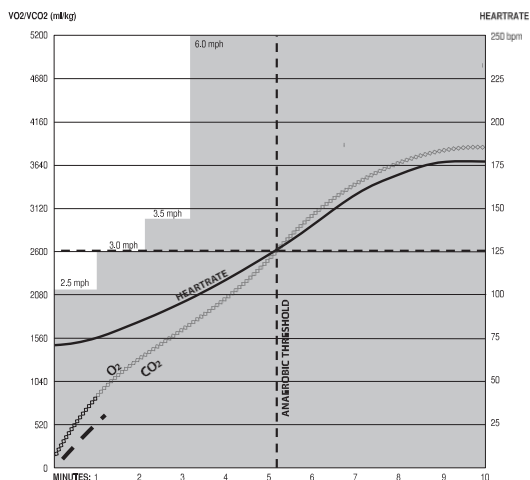
While a client hooked up to a 12-lead electrocardiogram (EKG) does a strenuous exercise such as a treadmill or exercise bike workout, this test basically measures the rate of exchange between carbon dioxide (CO_2) exhaled and oxygen (O_2) inhaled. The results of the test are reviewed by a cardiologist and a pulmonologist.

The test begins at a very light intensity and gets slightly harder each minute until maximum exertion is attained. The subject wears a mask and we measure the volume of air expired along with the percentages of oxygen and carbon dioxide in the expired air.

What we are looking for in this test is the maximum endurance capacity of the person, and it is measured in what is called a VO_2 max. The V in VO_2 stands for volume, and the O_2 is the chemical formula for oxygen in its most stable form, the form found in the air we breathe. Your VO_2 at the stage of maximal exertion is called your maximal oxygen consumption (VO_2 max).

This test measures milliliters of oxygen per kilogram of body weight (1 kilogram = 2.2 pounds) used per minute. By measuring VO_2 max relative to body weight, we are able to determine endurance and stamina levels. Then we can relate this to a heart rate at any point during the test.

VO2 Max and Anaerobic Threshold Testing



For example, to effectively train boxers to excel during the 36-minute duration of a world title boxing bout, one that goes the full 12 rounds at three minutes per round, I have used the results of this VO_2 test to formulate specific heart rate training zones for each athlete. Boxing of course is a labor-intensive sport requiring a level of stamina well above the normal range. In order to determine a boxer's ability to "go the distance" and still stay at a peak level of effectiveness, I have to get a measure of the ventilatory (also called anaerobic) threshold, which is the point at which the body shifts to a higher carbohydrate dominance.

High-energy physical activity— boxing or other sports or exercises in which the participants are constantly working at higher levels of heart rate beyond the ventilatory threshold (the point during exercise where the person can no longer carry on a conversation comfortably) — can significantly elevate levels of lactate.

Lactate is a byproduct of anaerobic exercise such as medium-distance sprinting (100-200 yards and above), which can compromise muscle function and may contribute to fatigue. During even low-intensity exercise, athletes are producing lactate, which their muscles are constantly burning and using as a fuel. At intensities below the anaerobic threshold, the muscles easily recycle as much lactate as is produced. This is called equilibrium. The higher the intensity, the more lactate can be produced by the muscles. This can cause excess fatigue by irritating the muscles (along with other substrates).

When I help train my boxers one of our goals is to force their opponents into a higher level of lactate production, push them above their anaerobic threshold, keep them there, and not permit them to recover during the one-minute break between rounds. This can weaken and tire an opponent if he cannot tolerate the lactate buildup or clear it— making him easier game for my fighter.

In our program, we measure the VO_2 max and we use it to determine the appropriate intensity (heart rate) of exercise both above and below the anaerobic threshold. We train above and below this to optimize cardiovascular conditioning and to accentuate loss of excess body fat.

Got all that?

Let me try to simplify it a bit: When the CO_2 you exhale and the O_2 you inhale are at equilibrium you're able to carry on a conversation.

But when the CO_2 is overcoming the O_2 , that's called oxygen debt, or "out of breath." It has been proven that if you can carry on a conversation with yourself while exercising, the chances are you are at or below the anaerobic threshold. This "talk test" was developed by the former co-founder of Nike, Bill Bowerman.

As you go further and further into oxygen debt you shift more to using carbohydrates, which are stored in the liver, muscle and circulatory system. This is a finite number -- you don't have a limitless number of carbohydrates to store. And so in this test we have to push the person above the point where the O_2 consumed and the CO_2 expelled is greater than 1. Meaning we have to push you into oxygen debt to find the corresponding heart rate number. And that's the sophistication of this test. (People will achieve less than their max heart rate if they are doing a SubMax VO_2 test. However, many athletes may achieve above their "predicted" maximum heart rate during a VO_2 max test, normally.)

Once again, these are sophisticated tests involving expensive, scientifically calibrated equipment. You need something you can do at home — and here it is.

After receiving a medical clearance to exercise from your primary care physician, you can easily determine your estimated Heart Rate maximum (HRmax) for developing your own cardiovascular training exercise prescription.

There are several different formulas used to estimate HRmax. They are noninvasive and seem to be effective in estimating Target Heart Rate (THR) zones. A research article in the September 2011 issue of the *Journal of Strength and Conditioning Research* compared age-predicted HRmax equations. According to this study, it was determined that the Gellish equation was the most accurate of the equations in a college-age population who are generally in good health and of similar age (18-25 years). The formula and an example of how to use it is listed below.

FORMULA: $\text{HRmax} = 191.5 - (0.007 \times \text{age}^2)$

EXAMPLE: 25 year old college-aged, healthy male

$\text{HRmax} = 191.5 - (0.007 \times (25^2))$

$\text{HRmax} = 191.5 - (0.007 \times 625)$

$\text{HRmax} = 191.5 - 4.375$

$\text{HRmax} = 187$ beats per minute (bpm)

According to an article in the May 2011 issue of the *Journal of Strength and Conditioning Research*, although the traditional 220-age equation tended to overestimate the maximal heart rate in individuals between 20 and 40 years of age, the 208- (0.7 x age) equation was accurate for individuals who are considered overweight or obese.

FORMULA: $HR_{max} = 208 - (0.7 \times \text{age})$

EXAMPLE: 30 year old, 40 pounds over optimal weight

$HR_{max} = 208 - (0.7 \times 30)$

$HR_{max} = 208 - 21$

$HR_{max} = 187 \text{ bpm}$

Basic math

If you do not fall into one of the two categories listed previously, I recommend that you fall back on the age-predicted HR_{max} formula used by the American College of Sports Medicine (ACSM) which is $HR_{max} = 220 - \text{age}$.

The simplest thing you can do is measure your pulse rate to see if you are staying within the target range of 220 minus your age. And the way you do this is by placing your finger lightly on your radial artery, which is the soft inside of your wrist, close to your hand. As soon as you feel a strong pulse, count every beat within a 10-second interval, then multiply that number by 6. Ten times 6 equals 60 — and that will give you the number of heartbeats per minute.

An effective way to monitor your training intensity is to purchase a heart rate monitor. You strap it to your wrist and it gives you a continuous status of your heart rate throughout the training session. If your pulse is measuring higher than your target training zone then you know to slow down your activity level and conversely, if your pulse is measuring too low, you know to increase it.

Reaching Your Target Training Zone

In my *Maximum Energy for Life* book I discuss what you need to do in order to maximize your Pro Circuit training benefits. You will want to exercise with enough intensity to reach your target training zone plus or minus 5-10 beats per minute.

According to ACSM, the optimum cardiovascular training zones are found between 60 and 85 percent of HR_{max} for intermediate to

advanced exercisers. However, individuals who have been physically inactive or are in the poor or fair cardiovascular fitness categories should use a 50-65% HRmax training intensity during the first few weeks of the exercise program. Below is an example of an optimal workout heart rate training zone according to your age and fitness level utilizing the standard formula for finding your HRmax (220-age).

EXAMPLE: 20 year old beginner with no known health issues

HRmax = 220 - age

HRmax = 200 - 20

HRmax = 200

TRAINING ZONE 1 = 200 X 50%

TRAINING ZONE 1 = 100 bpm

TRAINING ZONE 2 = 200 X 65%

TRAINING ZONE 2 = 130 bpm

Starting Zone for cardiovascular activity = 100 bpm - 130 bpm

Just be certain that, before you attempt to begin your Pro Circuit training or any other HR zone training, you check with your physician and get his or her OK.

Heeding the STOP signs

If you start feeling any pain or prolonged discomfort, STOP whatever exercise you're doing immediately and check with your doctor. That's the strict advice I give my clients. You may think it's "manly" or normal to work out through pain but, trust me, it's not. It's your body's way of telling you to slow down or stop. "No pain, no gain" is a fallacy. Working out is not meant to be painful. It is meant to be beneficial and, if you are careful about what you do and stay within a specified range, it *will* be beneficial to you.

But do not attempt to test your maximum heart rate by yourself; be monitored by trained personnel.

The Pro Circuit: how it works out

In these hectic times, when the moments we have to ourselves are more limited than ever, many people are letting their physical condition go by the wayside. They simply don't have the time to

exercise, or at least they think they don't. However, when it comes to our bodies and our health, we need to make the time. It gets back to what I've been saying all along — taking *ownership* of our health and not renting it.

For that reason I developed the Pro Circuit Exercise System. This is a workout regimen that combines strength and core training with cardiovascular conditioning. It is designed to fit comfortably into the busy person's schedule, offering maximum benefits for a minimal investment of time. Thirty to 45 minutes three days a week for as little as eight-12 weeks may be all it takes to get you back on the road to a healthy lifestyle. From that point, hopefully, you will have the incentive to continue the program for many years to come.

Over the years I have seen clients use the Pro Circuit System and lose significant amounts of body fat. I've seen them gain lean muscle, slim down their waistlines, increase their energy levels, and manage their stress levels more effectively. I have seen substantial improvements in their overall health. Trust me, this is one program that works — a program you can do at home or on the road. Let me explain.

The Pro Circuit Exercise System offers two modes — aerobic and resistance exercise. Aerobic exercises include walking, jogging, biking, jumping rope and riding a stationary bike. Resistance exercises include lifting free weights or machine weights, resistance-band exercise or even calisthenics. In conventional exercise programs, most people opt for only one of these modes.

Aerobic training can increase cardiovascular fitness, in some cases by as much as 30%, and weight loss will usually be a result. However, aerobic training will not significantly increase strength and lean muscle mass. Resistance exercises will usually increase mass but won't result in a significant increase in cardio fitness. My Pro Circuit Training solves these problems by combining the two, and does it in the same amount of time you would normally spend doing just one program. And, in the process, the Pro Circuit will lower your resting heart rate, reduce your blood pressure, increase your stamina and metabolism, and substantially decrease your abdominal body fat.

The Pro Circuit System works most efficiently in a gym or fitness center where you have access to the selectorized equipment, unless you have a home gym with the same equipment. However, it can also work with free weights, adding or subtracting the number of weight plates or weight magnets on the bar. In the beginning, however, I recommend that you opt for the selectorized equipment.

Before you start, you need to have an understanding of the sequence of the exercises and which section of the body is the focus of which exercise. You should start with an exercise for the upper part of the body, then move down to the lower part, then come up to the middle, which includes, in the language of physical fitness, the “core.” A series of repetitions (“reps”) for each section of the body should be done. For example, 12 reps for the upper section, 15 for the lower body, and 20 for the core.

But these are not absolutely fixed numbers; you can vary and alternate them. You can do fewer reps for the upper portion of the body and add to the lower part or to the core if those are the areas that you want to zero in on. What is most important is that you establish, then maintain a level of consistency with the program’s objectives — and increase your numbers.

Depending on your level of fitness, you can also vary the number of circuits you do. If, for example, you are basically a sedentary person, you may want to limit yourself to just one circuit and eventually build up to more. Each circuit should take no more than 15-20 minutes to complete.

Another thing that can help to reduce lactate buildup is to do about 30 seconds of some type of cardio activity between resistance exercises. This option may include jogging in place, walking, jumping rope, doing jumping jacks. The ultimate objective you should be striving toward is alternating between strength and cardio exercises — and you continue doing that for the whole circuit. You can put between 10 and 14 different exercises together, depending on the equipment on hand. You may even use light dumbbells at home and/or do some calisthenics and create your own circuit, using the formula for reps shown above. Thirty seconds on each machine should be sufficient.

Case Study #2: Clay

“With the Pro-Circuit Workout, I lost a lot of fat and gained muscle. The trainer in the program kept me honest, and I knew I had to come in even on days when I didn’t want to. That brought back the discipline I needed more than anything because I have continued to work out since. I am now working out on my own four days a week for two or three hours.”

On the days you’re not in the gym, if you like you can do other types of exercise at a moderate level — defined as “breaking a sweat” — for example walking, bicycling, running, swimming, playing tennis. A half-hour to 45 minutes of this should be sufficient; you can start with a pedometer-based movement program to track your success.

As You Begin: First, a Checkup

Before I get into the actual exercises, here are some of the things you need to consider before starting and during the Circuit training. ***First and foremost, you must have a medical checkup and clearance to make sure you are able to do the type of exercises the program calls for.*** If there are health issues that will prevent you from full participation in the program, you may still be able to work it to a limited extent. That can all be determined and worked out once you’ve been properly evaluated.

Among important points:

- **Familiarize yourself with the equipment:** Learn how to operate the selectorized machinery you will be using. If you’re uncertain, ask a gym employee to help you set the machine(s) for the weight you’ll be lifting.
- **Warm up your muscles:** It is never a good idea to jump right into an exercise before your muscles are warmed up and prepared to take on the demands of the exercise(s) you have planned for them. Give yourself an extra 5-10 minutes of light calisthenics and/or stretching that involves all parts of the body, and then do some aerobic exercise(s) such as cycling on a stationary bike or jogging in place.

- **Move quickly between machines:** Since you are moving from one machine to the next, there will be a break in the action for you. Spending too much time between machines could cause you to lose some of the momentum and stamina you've built up. Depending on your level of proficiency – beginner, intermediate, or advanced – the time you spend between machines should range from 5 to 15 seconds — no more than that.
- **Stick with moderate weights:** Set your machines for the amount of weight you can lift comfortably 12-20 times within 30 seconds. Don't make the weight too much or too little; otherwise you won't get the machine's full benefits. As you progress, you may be able to add weights to the machine but, again, don't add more than what feels comfortable and do-able for you.
- **Maintain proper body posture:** In resistance training, it is relatively easy to pull a muscle or another part of the body the wrong way, which can result in pain and the inability to complete the circuit. Some of the more painful muscle pulls can leave you in discomfort for days or even weeks at a time. To prevent this, it is vital that you position yourself to lessen the strain on your spine. Position yourself comfortably against the backrest of the machine you're using, pull your shoulders back slightly, and lift your chest up slightly. While lifting, contract your abdominal muscles to help stabilize your lumbar spine.
- **Breathe:** This may sound elementary, but there is a specific routine that needs to be followed while you're exercising. In most cases you should exhale as you exert the effort; counting repetitions out loud also assists proper breathing technique.
- **Complete all reps:** The program will only have full benefits for you if you complete all your repetitions and your circuits. If something is preventing you from completing them, such as too much weight to lift, reduce the weight as quickly as you can to something more manageable, then continue to the end of the set.

- **Stay hydrated:** Have a water bottle close by when exercising and drink frequently. For each hour of workout time, you should figure on drinking half or all of a 1.5 liter bottle of water.
- **Cool down and decompress:** After completing your workout, don't just stop cold and get ready to go about your business. Like a thoroughbred horse or a NASCAR driver at the end of a race, you'll need a cool-down period to get back to a normal operating level. Light stretching exercises are recommended to get the body back into shape for its regular order of business.
- **Work up to your ideal routine:** If you're not used to a regular exercise regimen you may want to ease into a circuit training routine at first. Thirty to 45 minutes may not be do-able right from the start, so you should start at 15-20 minutes, then work your way up. Try to complete at least one 15-minute circuit per day, three days a week; then try two 15-minute circuits per session, three times a week.
- **Monitor your progress with the 'talk test':** During the cardio portion of the routine you should be able to carry on a conversation. In other words you cannot be huffing and puffing.

With these things in mind, let's move on to the actual exercises used at The Fitness Principle.

CHEST PRESS

POSITIONING: Sit on the bench with your feet flat on the floor and slightly wider than shoulders-width apart. Handles should be chest level.

MOTION: Grasp handles starting at a 90-degree angle at the elbow and push outward until your arms are extended but not locked. Return to the starting position.



LAT PULLDOWN

POSITIONING: Place hands on the bar so that when the upper arms are parallel to the floor, they form a 90-degree angle with the forearms. Sit with the knees under the pad and keep torso upright. Maintain a natural arch in the lower back.

MOTION: Contract the lats and pull the bar down until the upper arms are parallel to the floor. Hold for a moment and return to the starting position.



SHOULDER PRESS

POSITIONING: Stand with feet hip-width apart and knees slightly bent.

MOTION: Start with elbows bent at 90-degree angle and palms facing forward. Fully extend arms without locking elbows. Return to the starting position.



SEAT ROW (ROWING)

POSITIONING: Sit on seat. Adjust pad, shifting to upper part of chest. Arms should be slightly bent.

MOTION: Grasp handles in the neutral position and pull back until your arms are bent at a 90-degree angle at the elbow. “Squeeze” shoulder blades. Return to the starting position. Take care not to “lock out” your elbows.



LEG EXTENSION

POSITIONING: Sit on seat. Align knees with axis of rotation. Back should be flat against pad. Pad should be above the ankle.

MOTION: Start with knees bent at 90-degree angle. Extend legs fully without “locking out” knees. Toes should be pointed up.



LEG CURL (Machine or Ball)

POSITIONING: Machines may vary, but the idea is to lie on your stomach with legs together, knees at the end of the pad. Pad should be above the ankle. Hold both handles firmly, keep head straight, and press hips firmly against the pad. Begin with the knees flexed and the weight lifted slightly so there is resistance. Toes should be pointed up toward the knees.

MOTION: Pull the lower legs up slowly, keeping the hips against the pad. Continue until the hamstrings are fully contracted and the knees lift off the pad slightly. Hold for a moment and lower the legs down to the starting position. This exercise may also be done one leg at a time.



BACK EXTENSION

POSITIONING: Sit on bench. Bottom and low back should be against lower back pad. Knees should be bent. Place arms across chest or you can place hands on thighs. You will start in forward position.

MOTION: Start exercise in the forward position. You will push against the upper back pad until you feel that your body is aligned at a diagonal angle. Please do not hyperextend. Return to starting position without letting the weight stack hit.



(DUMBBELL) BICEP CURL

POSITIONING: Stand with dumbbells in your hands, palms facing forward with your elbows slightly bent.

MOTION: Slowly bring dumbbells up to your chest. Hold for two seconds, then slowly lower weights in a controlled motion.



TRICEP PRESS (PUSH DOWN)

POSITIONING: Stand in front of the cable machine with feet about shoulder-width apart, knees and hips slightly bent. Hold upper arms firmly against the sides of the body throughout. Grasp the bar overhand at an angle, placing the hands at a width that is aligned with the elbows and upper arms. Begin with the arms straight down and the elbows aligned under the shoulders, pointed back and slightly flexed.

MOTION: Slowly let the forearms be pulled up and in front of the body. Continue until they form a 90-degree angle with the upper arms. Hold for a moment, then slowly push the lower arms back down to their original position, following the same path.



The following two exercises offer you an option of choosing one or the other:

SEATED CRUNCH (ABDOMINAL MACHINE)

POSITIONING: Pull seat lever so that you sit with your navel in line with axis of rotation, and hook feet behind roller pads.

MOTION: Place elbows on movement pads and grip handles lightly. Pull chest toward hips by contracting abdominal muscles in a crunch movement. Pause in position of full muscle contraction. Return slowly to starting position and repeat. Please do not let the weight stack hit!



SEATED ROTATION (MEDICINE BALL TWIST)

POSITIONING: Sit on floor with knees bent and feet crossed at the ankles. Hold weight (5-10 pound dumbbell, medicine ball, or weight plate) in front of chest with both arms extended. Tighten abdominals and raise feet slightly off the ground.

MOTION: Twist the upper body to one side, following the weight with the head and eyes. Continue as far as possible without losing form or leaning. Hold for a moment and return to the starting position. Repeat motion to the other side. Throughout motion, avoid bending over at the waist, keep your upper body as straight up and down as possible, and keep feet off the ground.



PART FOUR

CHAPTER TWO

The Fitness Cure

FEET FIRST

How 10,000 Daily Steps Can Get You That Much Closer to Great Health

With 34% of American adults now classified as obese, we obviously have a serious health problem in this country. Obesity rates in the United States have steadily increased over the last 40 years and are higher than those in other developed nations. There are many reasons for this, among which are:

- Low levels of physical activity due to a built environment that restricts or otherwise discourages opportunities for outdoor activities such as walking, running or bicycling
- Heavy reliance on personal motorized vehicles
- Declining occupational activity, including the decrease in jobs that rely on physical labor
- Technological innovations that have made for more time allocated to sedentary leisure activities
- Increased usage of additives and artificial ingredients in the food and beverages we consume, accompanied by unhealthy eating habits that encourage the consumption of “fast foods” rather than those with proper levels of essential nutrients

As shocking as our national obesity epidemic is, I prefer not to dwell on the causes here but on the solutions. One of them was developed in early 2000 by a national weight-gain prevention program that

is now known as America on the Move. It was launched in 2003 as an extension of a similar program that began in Colorado the year before. The two initiatives are based on data that suggest that if sustained over time, small, simple changes in individual eating habits and physical activity can have a major impact in controlling body weight.

Among these “small, simple” changes are (1) adding an extra 2,000 steps a day to the amount of walking we do and (2) choosing one behavior each day that removes about 100 calories from our normal food consumption.

Good but not enough

In a study published in 2010 in the American College of Sports Medicine’s journal *Medicine & Science in Sports & Exercise*, it was concluded that the average American adult takes approximately 5,100 steps per day. Compare this, as the study did, to the number of steps taken – on average – by study participants (adult men and women) in three other industrialized nations, Switzerland, Australia, and Japan:

STEPPIN’ LIVELY

People in other industrialized countries take a lot more daily steps than Americans do. For instance:

- In Switzerland, men take 10,400 steps a day; women, 8,900
- Australia: men, 10,221 steps; women, 9,178
- Japan: men, 7,575 steps; women, 6,821

Source: *Medicine & Science in Sports & Exercise* journal of the American College of Sports Medicine, 2010

Obviously these numbers pinpoint the need for American adults to do better than they are now. Setting a goal of nearly doubling the present average number to 10,000 steps a day, and sustaining it, would beyond a doubt set the participant on the path to better

health. In essence, to get the fat off, we need 10,000 daily steps or 300 minutes per week of exercise.

But, before setting out to achieve this goal, we need to know what these numbers actually mean in terms of distances with which we're more familiar. The distances covered by each of our steps obviously differ among people, due largely to height, which helps determine the length of each stride.

However, to simplify things, for the average person, 2,112 steps equals one mile. Since the average adult takes about 5,100 steps a day, that roughly computes to nearly two and a half miles a day. Doubling that to 10,000 steps a day means nearly five miles covered daily.

If that sounds like a lot to you, it really isn't. The two and a half miles you may already be walking per day includes the steps you take just going around the house or office, to and from your car, down the aisles of a supermarket, around your favorite shopping mall. You are taking the steps without even thinking about it or how far you are actually walking. So, the next step toward increasing the number of steps you're taking is to start counting them. Of course you can't do this by physically counting each step, so you do the next-best thing and clip on a pedometer or an accelerometer (see the sidebar for an explanation of the differences between them) and measure your steps that way.

"As soon as I put my feet on the floor in the morning, I slide the pedometer into my shoe so that I count every step I make during the day," said Pam Rees, the client who in previous attempts had not been able to shed 40 unwanted pounds, but who at this writing has lost 20 pounds and 19 inches. For her success, she credits a nutritional plan designed specifically for her, three workouts a week and 10,000 steps a day. All three are tools that Rees sees herself incorporating into her life when she leaves the program.

For Kim Lepine, the 51-year-old woman who had undergone bypass surgery and valve replacement in 2004, the simple act of wearing the pedometer is a motivator.

"It just makes you want to get those 10,000 steps in every day," she said.

Barbara Nunez, the 57-year-old client who discovered in her pre-testing that she was hypothyroid and subsequently removed that barrier through medication, relies so heavily on the pedometer for daily motivation that she even wears one when she's walking in her bare feet, strapping it on one ankle with a ribbon.

PEDOMETER VS. ACCELEROMETER

There are two basic types of pedometers, one that only counts steps and another that counts steps and records distance traveled. Both types can be purchased inexpensively and the type you use is strictly up to you; the step count is the most important data you need to know. If your device doesn't record distance, you can do the conversion yourself simply by knowing that 2,112 steps taken by the average person equals one mile, and adding or subtracting from that figure. Nearly all pedometer models on the market are digital these days.

Pedometers work by detecting vertical (up-and-down) motion, counting a step each time they detect this vertical change in direction. A spring-suspended horizontal arm oscillates inside the unit, bouncing up and down with each step.

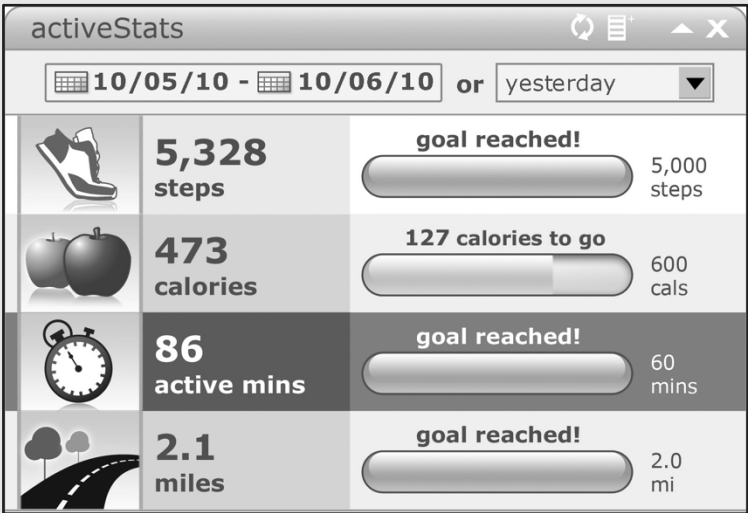
Accelerometers are more sophisticated than conventional pedometers — basically small computers. Like pedometers, they measure acceleration of movement up and down but they also measure in two other directions — right/left and forward/backward. Because they measure movement from right to left and vice versa (and forward and backward), step counts will normally be higher on an accelerometer.

Accelerometers are very expensive and require expertise to operate and interpret. Consequently, they are not recommended for casual use. I use them in the studies I

conduct on athletes and other people who lead physically active lives because they provide my staff and me a more realistic measure of activity-related motion levels.

Pedometers are typically worn at the waist, while accelerometers can be worn on the foot or ankle. Pedometers should not be worn at ankle level because in this position, they receive too much shock during each stride, causing the pedometer to register an excessive number of steps.

In my comprehensive weight management program we use the ActiGraph® accelerometer to make sure our clients obtain the necessary daily steps, especially on days away from my program.



This illustration is an actual client “dashboard” showing a sample of steps taken

A leg up: using a pedometer

As said before, this simple, low-maintenance device provides a digital record of the number of steps you take between settings.

Electronic pedometers provide an accurate, objective and low-cost method of measuring walking and other ambulatory activities. They come in many brands and price ranges.

The pedometer should be clipped onto your belt or waistband after you get dressed in the morning. Keep it clipped on all day, and check the numbers when you take it off before you go to sleep. The numbers you should be seeing are the number of steps you have taken that day. Record those numbers on a chart and remember to zero the pedometer out for use the next day. Repeat the process each day.

If you want to be able to reset your pedometer to zero to record only a workout, then you need to make sure it comes with a reset button. Some pedometers are designed to show only total daily steps, and automatically reset themselves at midnight.

If you choose a pedometer with a reset button, make sure it's one that won't get accidentally pushed, causing you to lose your recorded steps. Look for a design that shields the button with a cover or has it deeply recessed, and requires several seconds of pressure to reset. During the day, at various intervals, you may want to check your pedometer readings just to see how you're doing.

If, at the end of the day, you're seeing that you are taking close to or more than 5,100 steps each day, you'll know you're at least walking as much as the average adult does on a given day. And once you have established that you're taking the average number, you need to start thinking of ways you can up those numbers until you've reached the goal of 10,000 steps.

Case Study #1: Christie

"I was first given a stress test to get my heart rate. When I was given a pedometer I was told to do 5,000 steps a day and then eventually work up to 10,000, then 12,000. In the beginning 5,000 steps was quite a bit, but it was never too hard. I got up to 7,000, then 10,000, and it felt so good to know that every day I would get in the number of steps I needed. Getting more than that number was really the big motivator for me."

Walk right up

The study I cited above calls for steadily adding 2,000 steps a day. How is this done? For starters, you can change some of your normal habits. Here are just a few of the things you can do to increase your step count:

- Take the stairs instead of the elevator.
- Park farther away from your destination and walk the rest of the way.
- Walk down more aisles in a store or mall than you normally would.
- Walk more than you normally do around the house or yard.
- Embark on a daily or four to five times a week walking routine.

A few pointers on implementing these suggestions:

— When you trade the elevator for the stairs, you not only increase your step count but exercise your legs and your circulatory levels, getting you into better physical shape. Stair climbing is one of the best exercises you can do without specialized equipment.

— If weather permits, you can walk during your lunch hour – by the block or perhaps at a nearby park.

— When you park as far as you reasonably can from a store or any other destination, you will certainly add steps to your daily count; those extra strides are counted as well as the distance you will be walking inside the store or on the way to other errands. If you go up and down each aisle or walk more aisles than you usually do, that too will add steps to your daily count.

— Instead of parking yourself in your La-Z-Boy® or on the couch and staying put for the whole evening, get up frequently and move around, even if it's only to the kitchen for a snack. When you're out in your yard, walk around it more than you usually do. Every stride you take adds steps to the numbers that will show up on your pedometer at the end of the day.

However, even with the added walking you've decided to do by taking the stairs instead of the elevator or parking farther from your destination, you may still be falling short of the 10,000 steps you should be taking each day. What can you do about it? The answer

is to get into a habit of walking daily or at least four or five times a week.

If you set a mile as your goal, that will add more than 2,000 steps to your count. Two miles will add 4,000. Three miles could well put you over that 10,000-step goal. Decide what works best for you or vary the numbers systematically: You can walk a mile one day, two the next day. On your days off you can walk three or more miles. Just pace yourself and don't over-exert yourself, especially outdoors on a hot, humid day. If the weather is too hot or rainy, you can do your walking indoors at the nearest shopping mall.

In the studies I've read about step counts and measuring devices, several patterns were common to all. First, study participants who were already in good physical shape appeared to be more enthusiastic about upping their step count once they were made aware of the benefits. Many of those in top shape took great pride in setting and reaching the 10,000-steps-a-day goal and, in some cases, even exceeding it. Unfortunately, many of those who weren't as fit seemed to get discouraged; some even removed the measuring devices before the conclusion of the study period.

All the right things

My feeling is that no one need get discouraged along the path to greater physical fitness. Even though it is easy to feel frustrated when you think you're doing all the right things and not seeing significant tangible results, you should never give up. Instead, try harder, but do so incrementally. As I said earlier, set goals that are reasonable and attainable. Don't try to do too much all at once, especially if it is proving too strenuous for you.

One way to help achieve any fitness goal is to make it as enjoyable as possible, and the way to do that is to make a game of it, a fun challenge. Make it like keeping score at a ballgame. Many of us have a fascination with numbers and we enjoy having numbers work in our favor, as they can for you. So, here's what you can do: Take a few days – preferably a week – to record your daily steps, write them down on a sheet of paper (or set up a log sheet on your computer), and compare them each day to your other totals. At the end of the period you've selected, compute the average by dividing the grand total of all the days by the total number of steps. Once you've

calculated what your average daily step count is, you'll know how far you have to go to reach the 10,000-step goal. If you're doing less than the 5,100 national average, make reaching that number your first goal and, as you're doing this, keep a detailed record of walking activities that might be adding the extra steps.

Once you've reached that first goal, set a second one of 6,000 steps; then add increments of 1,000 until you reach the goal of 10,000-plus. Keep a running daily record and note each time you reach one of your goals. Remember, you're the scorekeeper here. If you're set up on your computer, you can color-highlight each day you reach one of your goals. And on those days you may want to reward yourself by treating yourself to something special. The objective is to make this as much fun as possible and give yourself something to look forward to. When you reach 10,000 for the first time, then focus on what you have to do to stay at or close to that level all the time.

Very few things in life make you feel better than reaching a goal you've set yourself and, if it's a health-related goal, that should make you feel 10 times better. Take those extra steps — and keep taking them.

PART FIVE

JUMPING THE ROADBLOCKS

The Emotional Side of Wellness

Taking ownership of your health while losing weight and achieving other wellness goals is as much an emotional undertaking as a physical one. In fact, the emotional aspects of this quest are always the first steps that need to be taken. The road to attaining peak wellness levels has to start in the mind before the body can be brought into the equation, and the emotional investment made in the beginning has to be sustained throughout the physical process.

However, while the physical journey is ongoing, some of those taking it may get discouraged and doubt their ability to sustain the commitment they made in the beginning. This is very common and to some extent normal. I see this all the time in my own program.

For this reason I contract with a licensed clinical social worker to help me get my clients over these hurdles and overcome the emotional roadblocks that could hamper their success. Kelley Hunter Ellis holds a bachelor's degree in biological chemistry and a master of social work degree, both from Tulane University. She is in private practice, has worked for many years at the New Orleans Center for Eating Disorders, and is working toward certification in mind-body medicine with the Center for Mind-Body Medicine in Washington, DC.

Kelley's work with me on the mental and emotional aspects of losing weight and getting fit are very valuable to the overall success of my program. Often there are mental blocks that keep people from doing what is needed to take care of their bodies/health. These take on many forms and can stem from any number of factors, including:

- **Distorted body image**
- **Lack of belief in one's worth**

- **Emotional-eating patterns**
- **Childhood messages about food or worth**
- **Relationship issues**

In individual sessions, Kelley explores these topics to see what might be keeping clients from making necessary lifestyle changes. She also runs mind-body skills groups for those interested in learning about wellness in a supportive group environment. These groups teach people to take responsibility for their health and well-being by working on mind-body skills like meditation, “mindful” eating, movement, exercise, visualization, imagery and more.

Let’s start by examining how each approach works.

Going one-on-one

In most cases, people struggling with weight-loss related issues see them emerge after they’ve already begun the program. They may be noticed by the nutritionist or by their trainer or both. At that point, after a discussion between my staff and me, a course of action is recommended.

Clients are referred to Kelley when they are either struggling with their weight-loss goals or just seem to be having a lot of issues during work with the nutrition and/or exercise components. They may be adhering to the recommended plan and yet their weight loss has stalled. They may not feel like they are moving forward or they’re having trouble staying motivated. They may get discouraged and might even harbor thoughts of quitting the program.

Each case is as different as each individual, but there are certain patterns that emerge when dealing with weight loss and wellness goals. For some participants, the issues stem from difficult childhood experiences. As we all know kids can be unwittingly cruel. If a classmate is grossly obese or overweight, he or she may be teased, ostracized and left out of games or other activities, including social and sporting events. This of course can result in feelings of inferiority, low self-esteem, even self-hatred. Many of these kids find solace in continued indulgence in unhealthy eating habits, which only makes the problem worse. Often this is a coping mechanism that seems to work at the time but later becomes maladaptive.

Sometimes, too, there is a history of other types of physical or emotional abuse that people may have experienced in childhood, particularly at home. If there were already feelings of inferiority because of a weight problem, these feelings can be exacerbated by these types of abuse. Especially if the abuse follows a pattern.

Many childhood feelings can and often do carry over into adulthood. Most people, even children, know when they're overweight or obese and very few of them consciously desire to stay that way. In most cases they *want* to lose weight and may have even been warned by their doctor that they *need* to do this, but actually doing it is a problem. They may have tried it once or even several times and, for whatever reason, were unsuccessful at it. Because of this, they may be facing what they perceive as pre-ordained failure. Their lack of self-esteem and a track record of failed past efforts may be discouraging them from ever feeling they can be successful, thus setting up a pattern of self-sabotage.

These are some of the discoveries that often come out in the individual counseling sessions. Some of these problems are tied to body image. How does the person feel about himself or herself? How do people perceive themselves through the eyes of others? Do they feel they deserve to feel good, look good, and be healthy? Some people are so down on themselves that they may not feel they deserve to be slim and healthy. This is one of the major obstacles we have to help them overcome.

Once the interview process determines why they seem to be stuck, recommendations can be made. Sometimes these recommendations call for more self-care such as meditation, journaling, some type of physical movement or a referral to a mind-body group (described below). Sometimes Kelley will collaborate with the client's trainer to make a recommendation for a certain type of physical activity she thinks will benefit the person on an emotional level. Judging from the positive results we're seeing, this approach seems to be working very well.

What we've seen so far is that people are getting "un-stuck" in their process. They are figuring out the blocks to reaching their goals and resuming their progress. We've also been able to help people through the transition period — which Kelley calls the "romance

time,” when they and everyone around them is excited about their progress — to the everyday maintenance, the hard part that comes after the program is over. That’s when participants have to continue a regimen and aren’t under regular supervision. It requires great discipline and self-determination. But by helping these people gain their psychological focus and a sense of structure, we can go a long way toward helping them set and reach their physical and life goals.

The group approach

Those who take part in group sessions are finding that they benefit from sharing with others in a supportive, safe environment, where there is an atmosphere of mutual learning and understanding.

Some of those involved in the group sessions signed up for them on their own, while others may have been recommended by Julie, my nutritionist, or by one of their trainers. Groups, we are finding, are more specifically related to self-care, especially meditation and mindful eating. The emphasis within the group is to create a supportive network in which everyone can benefit. Everyone gets a chance to talk and no one dominates the discussions.

So many people struggle with their fitness and health goals because of living with a tremendous amount of stress in their daily lives. We know that when the body is repeatedly stressed, the sympathetic nervous system, responsible for the “fight or flight” response, is activated. The continued activation of the sympathetic nervous system causes an abundance of stress in the system. This can lead to many health and lifestyle issues including depression, difficulty with sleep, proper eating, and weight loss.

Kelley’s mind-body group teaches participants to engage the parasympathetic nervous system or the “relax and digest” mechanism. Through practicing breathing, meditation, movement, mindful eating and other skills, people can learn to modify the effects of stress on their bodies and find that they can experience greater relaxation and a better overall sense of well-being. This has amazing impact on the body’s ability to lose weight and maintain health.

Feedback from people we’ve had join our group sessions reports that the groups are extremely helpful, with members practicing the

skills at home and enjoying more relaxation. A recent participant expressed gratitude about having a place and a group of people with whom he feels so safe and non-judged that he can share his most difficult struggles. There is wonderful healing power in this experience. And studies show that those who have an active support system lose more weight and keep it off longer.

ALL ABOUT YOU

Here are some basic tips that can help guide you through the process of trying to overcome the emotional obstacles you may be facing:

- **Your body is an investment worth making. Collaborate in your health and wellness.**
- **Set realistic and obtainable fitness goals.**
- **Set life goals. What do you want to do when you are at a healthy weight? Keep this in mind for motivation.**
- **Put a picture of yourself on your mirror and put pictures of yourself at different sizes along the way.**
- **Understand that a healthy lifestyle means exactly that — changing to healthy habits.**
- **Practice self-care by doing some form of meditation, movement and mindful eating.**
- **Find ways to make your life enjoyable by engaging all of your senses.**
- **Set a daily intention to maintain your health and remind yourself of your intention throughout the day**

Follow these tips, keep your eyes on the prize – which is better health and greater longevity and self-esteem – and you can't go wrong.

PART SIX

Success Stories

PASSION + MOTIVATION = SUCCESS

Success is best measured by success stories. Let me share with you the final chapters in the stories of John, Christie and Clay, who finished the Executive Wellness Program at East Jefferson Hospital using the program I share with you in this book.

John Goodman

I am proud to report that John lost in excess of 100 pounds by the fall of 2010. He was able to have his surgery, a full five months ahead of schedule. Losing so much weight and having his surgery done has produced tremendous pride in his present appearance, and he vows to maintain his regimen and keep his weight down. He also has seen related benefits: Being leaner has helped him with a sleep apnea problem he had when he was more seriously overweight, and it has improved his mental outlook as well.

Going into my program, John had the best motivation in the world: He knew his life literally depended on it. When faced with the strong possibility of an early death, he knew it was time to do something, and he did. This sense of ironclad motivation worked for John Goodman and other celebrities I've worked with; it can work for you, too.

Case Study #1: Christie

When Christie Dannewitz completed the 12-week program in mid February 2011, her weight had dropped from 207 to 180, a loss of 27 pounds. Her waist measurement shrank by 2 1/2 inches, from 38.5 to 36, and her abdomen measurement went down to 36 3/4 inches, a drop of 6 1/4 inches. Her body fat percentage decreased 5.3 percent, from 48.7 to 43.5, and her waist-to-height ratio went from 58 percent to 54 percent, a drop of four percentage points.

Most significantly, her total fat went down from 97 pounds to 75, a drop of 22 pounds.

Christie sums up her results: "I was motivated to achieve better health because I was under a lot of stress . . . being home as a mom for 10 years, I really didn't do what I should have done. The program really has helped my outlook. The positive approach has been like therapy for me."

Date	Height	Weight #	Waist Inches	Abdomen Inches	%BF	Fat #	Muscle #	Other #	W:H
10-7-10	66 in	207	38.5	43	48.8	97	102	8	58%
2-18-11	66 in	180	36	36.75	43.5	75	98	7	54%
Change		- 27	- 2.5	- 6.25	- 5.3	- 22	- 4	- 1	- 4%

Case Study #2: Clay

By the time Clay Leon finished on Nov. 19, 2010, he was down from 246 to 238 pounds — a loss of eight pounds. His 42-inch waist was trimmed down by half an inch. His 43¼ inch abdomen was down to 41½. His body-fat percentage dropped from 32 percent to 27.7, and his waist-to-height ratio of 58 percent was reduced to 57 percent.

Most important, Clay dropped 12 pounds of fat (from 76 pounds to 64) and gained six pounds of lean muscle (from 161 to 167).

Clay sums up his results: "I've been noticing that my waist size is going down. My weight hasn't changed much but I'm gaining muscle and losing fat. Last time I weighed myself I was 237 (one pound less than when he finished the program) but I'm fitting into a 38 (waist size) pants and I was in a 42. I'm getting close to a 36."

Date	Height	Weight #	Waist Inches	Abdomen Inches	%BF	Fat #	Muscle #	Other #	W:H
8-23-10	72 in	246	42	43.25	32	76	161	9	58%
11-19-10	72 in	238	41.5	41.5	27.7	64	167	7	57%
Change		- 8	- .5	- 1.75	- 4.3	- 12	+ 6	- 2	- 1%

The proof, as they say, is in the pudding, and in my program the pudding is the results we get from the people who participate. In the three years I have been doing the current program, close to 1,000 people have left with numbers better than they had when they came in.

“Success is the ultimate motivator,” says Nunez. “I now feel empowered to take charge of my own health and fitness and to produce results.”

Lepine says “Before I took ownership of my health, I was at this place where I had decided that this is the way I am. I wasn’t happy about it, but I was ready to give up. Once I began to work on the physical and mental aspects of my health, my emotional health improved as well. I now have a totally different outlook on life.”

APPENDIX I

SAMPLE MEAL PLANS

Sample 1,400-Calorie Meal Plan

Breakfast:

1 starch option:

Example of one starch option:

1/2 cup cooked oatmeal
1 slice of whole wheat bread
1 serving of fruit
whole wheat English muffin
whole wheat tortilla (80-100 cal.)

1 protein option:

Example of one protein option:

1 tbsp. of peanut butter
1 slice of cheese
1 cooked egg (boiled or scrambled)
2 egg whites
1/2 cup of Egg Beaters®
1/2 cup of cottage cheese
Fage 2% Greek yogurt (plain)

Mid-morning snack: 3 hours later

1 starch option:

Example of one starch option:

1 serving of fruit
1 cup of light yogurt (<100cal)
1 slice of whole wheat bread

1 protein option:

Example of one protein option:

1 tbsp. of peanut butter
1 slice of cheese
Small handful of nuts
1/2 cup of cottage cheese
Low-fat plain Greek yogurt

Lunch: 3 hours later

1 starch option:

Example of one starch option:

1 slice of whole wheat bread
1 serving fruit
 $\frac{1}{2}$ cup of beans, corn or peas
A small wheat tortilla
 $\frac{1}{2}$ wheat pita
 $\frac{1}{2}$ cup whole wheat pasta
 $\frac{1}{3}$ cup brown rice

4-6 oz of LEAN protein:

Example of one protein option:

Lean deli meat (1 oz = 1 slice)
Tuna fish canned in water
Skinless chicken/turkey

**Non-starchy vegetables:
(Unlimited)**

1 fat option:

Example of one fat option:

1 tbsp. of regular salad dressing
1 tbsp. of light mayo
1 tbsp olive oil
1oz. low-fat cheese
 $\frac{1}{4}$ avocado

Mid-Afternoon Snack: 3 hours later

1 starch option:

Example of one starch option:

1 serving of fruit
1 cup of light yogurt (<100cal)
1 slice of whole wheat bread

1 protein option:

Example of one protein option:

1 tbsp. of peanut butter
1 slice of cheese
Small handful of nuts
 $\frac{1}{2}$ cup of cottage cheese

Dinner: 3 hours later

1 starch option:

Example of one starch option:

1 slice of whole wheat bread
 1 serving of fruit
 $\frac{1}{2}$ cup of beans, corn, or peas
 A small wheat tortilla
 $\frac{1}{2}$ wheat pita
 $\frac{1}{2}$ cup whole wheat pasta
 $\frac{1}{3}$ cup of brown rice

4 oz. of LEAN protein:

Example of one protein option:

Deli meat (1 oz. = 1 slice)
 Tuna fish canned in water
 Skinless chicken/turkey
 Salmon
 Pork tenderloin
 Extra lean ground beef

**Non-starchy vegetables
 (Unlimited)**

1 fat option:

Example of one fat option:

1 tbsp. of regular salad dressing
 1 tsp. of regular mayo
 1 tbsp. of light mayo
 1 tbsp. olive oil
 1 oz. low-fat cheese
 $\frac{1}{4}$ avocado

Sample 2,000 Calorie Meal Plan

Breakfast:

2 starch options:

Example of one starch option:

$\frac{1}{2}$ cup cooked oatmeal
 $\frac{1}{2}$ cup dry cereal
 1 slice whole grain bread
 1 serving of fruit
 $\frac{1}{2}$ small whole wheat bagel
 Small whole wheat tortilla

2 protein options:

Example of one protein option:

1 tbsp. of peanut butter
1 slice of cheese
1 cooked egg(boiled or scrambled)
½ cup of Egg Beaters
3 slices of deli meat
4 oz. low-fat Greek yogurt

Mid-Morning Snack: 3 hours later

1 starch option:

Example of one starch option:

1 serving of fruit
1 cup of light yogurt (<100cal)
1 slice of whole wheat bread

1 protein option:

Example of one protein option:

1 tbsp. of peanut butter
1 slice of cheese
Small handful of nuts
½ cup of cottage cheese
6 oz. of plain, low-fat Greek yogurt

Lunch: 3 hours later

2 starch options

Example of one starch option:

1 slice of whole wheat bread
1 serving of fruit
½ cup of soup
½ cup of beans, corn or peas
⅓ cup of brown rice
½ cup whole wheat pasta

6-8 oz of LEAN protein:

Example of one protein option:

Deli meat (1 oz. = 1 slice)
Tuna fish canned in water
Skinless chicken/turkey
93% lean ground beef
Filet
Sirloin
Fish
Center-cut pork chop

Non-starchy vegetables (Unlimited)

1 fat option:

Example of one fat option:

1 tbsp. of regular salad dressing
1 tsp. of regular mayo
1 tbsp. of light mayo
1 slice of cheese
1 tbsp. olive oil
1/4 avocado

Mid-Afternoon Snack: 3 hours later

1 starch option:

Example of one starch option:

1 serving of fruit
1 cup of light yogurt (<100cal)
1 slice of whole wheat bread

1 protein option:

Example of one protein:

1 tbsp. of peanut butter
1 slice of cheese
Small handful of nuts
1/2 cup of cottage cheese
6 oz. low-fat plain Greek yogurt

Dinner: 3 hours later

1-2 starch options:

Example of one starch option:

1 slice of whole wheat bread
1 serving of fruit
1/2 cup of soup
1/2 cup of beans, corn, or peas
1/3 cup of brown rice
1/2 cup whole wheat pasta

6 oz. of LEAN protein:

Example of one protein choice:

Deli meat (1 oz. = 1 slice)
Tuna fish canned in water
Skinless chicken
Salmon
Filet or
Sirloin

93% lean ground beef
Center-cut pork chop

**Non-starchy vegetables
(Unlimited)**

1 fat option:

Example of one fat option:

1 tbsp. of regular salad dressing

1 tsp. of regular mayo

1 tbsp. of light mayo

1 tbsp. olive oil

1/4 avocado

APPENDIX II

X-STRESS PROGRAM

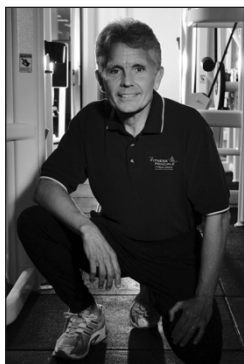
SAMPLE EXERCISE WORKOUT LOG

Exercise	Reps	Weight
Chest Press		
Lat Pulldown		
Shoulder Press		
Seat Row		
Leg Extension		
Leg Curl (Machine or Ball)		
Back Extension		
Bicep Curl		
Tricep Press		
Seated Crunch or Seated Rotation		

MEAL PLAN

DAY	FOOD	AMOUNT
Breakfast / Time:		
Lunch / Time:		
Dinner / Time:		
Snack / Time:		
Notes:		

About the Author



Mackie Shilstone is one of America's most influential sports performance managers, whose expertise has played a pivotal role in the success and longevity of more than 3,000 professional athletes. His clients have included tennis star Serena Williams; Major League Baseball Hall of Famer Ozzie Smith; former world champion boxers Michael Spinks, Riddick Bowe, Roy Jones Jr. and Bernard Hopkins; and all-time leading NFL scorer Morten Andersen, just to name a few.

With a Master of Arts degree and Master of Business Administration, Mackie currently directs The Fitness Principle with Mackie Shilstone at East Jefferson General Hospital in Metairie, Louisiana. He is the author of six previous books, *Mackie Shilstone's Body Plan for Kids* (Basic Health Publications, Inc., 2009), *Lean & Hard* (John Wiley & Sons, 2007), *The Fat-Burning Bible* (John Wiley & Sons, 2005), *Maximum Energy for Life* (John Wiley & Sons, 2003), *Lose Your Love Handles* (Perigee, 2001), and *Feelin' Good About Fitness* (Pelican Publishing, 1986). Mackie has also written articles for prestigious health and fitness journals, including the *American Medical Athletic Association Quarterly* and *The Physiologist*.

Additionally, Mackie has previously served as a clinical instructor of public health and preventative medicine at Louisiana State Health Sciences Center, adjunct professor at the A.B. Freeman School of Business at Tulane University, and special advisor to the U.S. Olympic Committee on Sports Nutrition. He has served on the Governor's Council on Physical Fitness and Sports, State of Louisiana.

Mackie's innovative approaches to sports training have been reported in more than 2,000 newspaper, magazine and online articles, including the *Wall Street Journal*, *New York Times*, *Los Angeles Times*, *USA Today*, *Inc.* and *People* magazine. *KO Magazine* voted him among the top fifty most influential people in the history of boxing. He has also appeared on most of the major news shows in the U.S., including ESPN, The Today Show, Fox News Channel, HBO, 48 Hours, Live with Regis & Kelly and Good Morning America.

A regular on WWL-TV Channel 4 and contributor to local publications, Mackie lives in New Orleans with his wife Sandra, and their two sons, Spencer and Scott.