

FitHapp=ns-

What I Learned This Winter Part I or On Fats and Fatness

Last fall, some of my colleagues asked me to coauthor a book on weight loss. Not just any book, THE book, the "truth" about weight loss. This book tells you how to lose weight in 3 simple steps. Like all books on weight loss, the first is to read this book (when it comes out.) The second and third are: cut back on calories and burn more via activity, be it exercise or simply moving more rather than sitting. My job was to research and write about fat cells. What I learned from my research could be discouraging for those trying to weight. But it was also somewhat encouraging.

First, there are basically two types of obesity: that which was initiated before you were two and that which developed after puberty. Basically, in utero, you start adding new fat cells in preparation for leaving the warmth of the womb. Those deposits are influenced in quality and quantity by the weight and nutrition of your mom. Then, after birth, you add more cells to insulate you against the world, and again these are influenced by how and what your mom (or dad) fed you. Since you were but a toddler, most of those decisions about foods were out of your control.

Second, it was believed that the cells you deposited early in life remained constant in number into adulthood with some likelihood of adding more fat cells around puberty. But even here, things have changed. Studies suggest that if we eat more calories than we need, and grow fatter, we are also capable of *adding* more fat cells for a brief period of time in late childhood into adolescence. For the most part, that second form of obesity which results from adding more fat into those fat cells is the one you have more control over. Those cells you deposited in pre-conscious stages of life can also lose fat with diet and exercise but the cells remain.

Third, fat cells are not passive storehouses of excess calories. They are active tissue that both *respond* to their surrounding circumstances, such as by which foods you eat - for example, a recent study shows that saturated fats are more readily stored around the middle than are unsaturated fats - and they *dictate* their circumstances. That is, they actually alter your hormones of appetite and digestion such that you keep supplying them with calories. They virtually 'demand' more food intake. Yes, you have the power to say no, but the drive to eat more, and more high calorie foods, is deep within you. That's the problem fat cells present.

Knowing that the number of fat cells you have and how much fat they hold was determined almost before you could make choices for yourself, you could throw up your hands in surrender to your size. But now you do have a choice and, despite the challenges, you can make better decisions. Not to lay blame on you - for those of us who have never had weight issues, it's all too easy to fault the victim. Rather, if you are to fully understand those challenges and redirect your energies, it's helpful to know what you're dealing with. All fat cells store extra calories, regardless of when they were created. And those cells will give up the fat inside them if two simple things occur: you eat fewer than you need and burn off more than you consume. The simplicity of physics is on your side. What's not are the results. You may not achieve swimsuit-model proportions, but you can deplete the fat in the cells you have with that very simple formula. It will take more work, but too many have succeeded using a variety of dietary manipulations and exercise modalities to make it an impossibility. With the same energy and focus, you have the same potential for success. And that's the good news.



What I Learned This Winter Part II or The Joy of Joint Replacement

In early December, on my 61st birthday, I gave myself a gift that should last 20 years or more: a new knee. This moment was a long time coming, so I prepared myself for it as best I could. Afterwards, knowing there'd be some loss of independence, some lack of mobility, some serious physical therapy, and quite a bit of pain and discomfort, I psyched up for the challenges that lay ahead. Here's the short version of what I learned from the process:

- 1. All who've endured pain in non-medicalized situations, deserve lots of respect. I had Oxycodone; Sen John McCain had his arms broken, lying in a sweltering hot tiger cage in Vietnam, with no Oxycodone. You gotta do what you gotta do, but if you're looking at a joint replacement, remember: you will have access to some great pain-killing meds, and won't have to suffer nearly as badly as others. I don't know if that thought will help you, but it helped me.
- 2. Pain is relative. Einstein said all things are relative, and he's mostly right about that in terms of physics. But pain is relative to each person, and each body part. My hip replacement was painless; I never needed any pain meds after that first night in the hospital, and even that was so I could sleep. Knees are notoriously more painful and require a more intensive post-surgery rehab process.
- 3. Keep your range of motion (ROM)
- 4. Take BCAA + Protein powder. A month before my surgery a research group found that taking 20 grams of amino acids twice a day a week or two before and after surgery reduced the degree of atrophy of the quadriceps muscles by more than half! In other words, it helped maintain some of the very muscles that would otherwise shrink once the surgeon uses his knife.

So, while any joint surgery presents some serious risks, including pain, blood clots, or infections, with some attitude adjustments and pre-surgery preparation, the long-term benefits will most likely exceed the fears you had before you did it.

What I Learned This Winter, Part III or How To Recover From Surgery

Having had my own share of surgeries and having worked with others after theirs, I'm very interested in how to recover from them. As for surgery, first, don't need it. Second, don't get it. And third, if you're going to get it learn as much about the surgery, the surgeon, and the recovery process as possible and set your mind to the task at hand: recovering. Watching people in a rehab setting, with professional physical therapists, talking with those therapists,

I learned that some folks are simply too scared of the pain they will have to confront to do the work they need in order to avoid future pain and disability.

Pain is one of those things we animals, and even plants, try to avoid. But pain is something that accompanies almost any surgical procedure despite the great drugs we have available. I can say from personal experience and from working with people whose pains are pretty debilitating, that pain is one of those facts of injury or disease that, if focused on, merely gets worse.

What I believe, as do the docs and PTs I've met as a patient, is that it is most valuable to the recovery process to have an intent to recover. That intention starts months before the surgery, with physical preparation, and manifests within days of it as one confronts the challenges of the procedure and the pain it leaves behind, even if the surgery will ultimately reduce pain.

Intend to recover, to resume normal life, and chances are, you will succeed.

Rest In Peace, Ted Welch 1933-2014

As many of you know, Nashville and many people far beyond our border lost an amazing man when Ted Welch passed away from complications related to Alzheimer's Disease on March 8, 2014. Besides being a real estate mogul, a persistent, powerful and perpetual fundraiser for GOP politicians for decades, and a friend and funder of community non-profits and charities, Ted was a friend and mentor to anyone who got to know him and was willing to listen. Humble in his own right, Ted was willing to give his time and attention to folks interested in learning how to succeed in whatever endeavor they chose. Having been a tenant of his for 14 years, I have had a few opportunities to tap into his experience and wisdom, but also his generosity. He helped me through some rough times with the economy's swings. And he did it in his inimitable, personal, mano-a-mano manner. He lived a clean life by all standards - exercised regularly, ate healthfully, drank moderately, worked sanely, had a broad social network, etc., yet some diseases are not completely avoidable. Ted knew it, felt it coming on a few years ago, and gently alluded to it in a conversation in my office one day. One hates to hear it, to see it, but most of all to watch it take the energy from someone as vibrant, as solid, as kind and as gentlemanly as Ted Welch. Our hearts go out to his wife, Colleen, and his kids and grandkids. and we'd like them to know that Ted was and is still much beloved by all who've been touched by him in any of his many capacities.



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^{*} Initial consultation required for all new clients (\$100)