

Ramblin's With Coach Rozy

A Few Of The Training Questions I Get All The Time

BY MARK ROOZEN

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The weather is changing (in South Dakota, that can mean 50 degrees one day and a snowstorm the next) and as we get those sprinkles of nice weather here and there, conversation is filled with those talking about getting ready for outdoor activities and getting geared up for warmer weather adventures. It's a time to look at living a healthier lifestyle and getting in shape as your new goals you set for 2015 might be melting away like the snow in January. You're ready to reach your fitness goals, but you might have a few questions to get started on the right path. What's better as I prepare for a spring of fun, festivity and activity - FREE WEIGHTS or MACHINES? The BIKE or the TREADMILL? Should I stretch BEFORE or AFTER a workout? This column will address a few questions that I get all the time - and hope it will answer some of your training questions.

QUESTION #1: Should I do my cardio first (treadmill, bike, elliptical) or strength training?

A study from Brigham Young University says that if you're doing both types of training in your workout on the same day, start with cardio. The study says you'll burn more calories AFTER you get done working out! Your body will continue to adjust to the work you did and you'll get extra benefits and burn extra pounds over the long haul. Also, after a hard workout with the weights, the time on the treadmill or bike can seem harder which can cause your workout time to be reduced and the intensity of your training may be compromised.

If time is not a major factor — do harder or more intense weights/resistance training and your hard day of cardio on separate days. The University of British Columbia found that people who strength-trained 24 hours after a vigorous aerobic session could do more reps than those who waited just four or eight hours or did it during the same workout. This isn't saying that you shouldn't, or couldn't, do both during the same workout (we do that in our program all the time), just understand that you can't give 75 percent of your effort to your strength program and 75 percent of your effort to your cardio program on the same day. Knowing what to do and when to do it is the art of program design.

QUESTION #2: Should you use Free Weights — or are Machines just as good?

Walk into most gyms and "in one corner" you'll see dozens and dozens of shiny pieces of weight equipment. The machines come in as many shapes and sizes as the folks looking to use them! A newcomer to the fitness and training facility might be a little intimidated besides asking — "WHAT IS ALL THIS STUFF?" The reason for the variety of machines is that each piece works a specific muscle or set of muscles. We think with all the gadgets, hooks, belts, cables and devices attached to them it should also serve up coffee, make lunch, wash our car and pick up



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the kids from school! In the "other corner," you'll see dumbbells, weights, bands, stability balls

and other assortments of workout "toys" that can be used for resistance training — what we call free weights or functional training equipment. You might also see, and hear, people grunting, groining and making terrible faces as they move through their workout — also a little intimidating.

So which corner should you head to? One of the things I like to point out to people is that the reason you resistance train is to help prepare you for life! Our muscles function together — not as just one single moving unit. We need to look to train MOVEMENT — and not just MUSCLE.

Think of it this way — would you spend thousands of dollars on tires for your car and put in a lawnmower engine under the hood? How about hooking a race car motor to a bike? In both of these scenarios, we would have a hard time getting top levels of performance even though some of the parts are top of the line — the whole system needs to work together to gain full benefit.

In a nutshell, free weight exercises simply USE MORE MUSCLE than machines do, which can make them more effective. Research has shown that free weights promote quicker strength gains, require more balance coordination and it recruits more muscle groups. Free motion resistance exercise also gives more versatility in a program and help with joint stabilizer muscles. Also, if you are a home exercise person, you can do a complete workout with a stability ball, a few dumbbells and maybe a band or two.

SO DID HE JUST SAY NOT TO DO MACHINE WEIGHTS? Absolutely not! In some circumstances, it is BETTER to use machines. If you are new to resistance training, workout alone, are concerned about safety, are rehabbing an injury and need to strength a certain muscle — machines are great for a training program. Machines can provide a more controlled motion and isolate certain muscle groups. It might also be easier to track progress and get better feedback while using machines. If you're low on time, using machines can be a safe and FAST way to get in a workout.

WHICH CAME FIRST — THE CHICKEN OR THE EGG! This debate can go back and forth like the argument: which is better chocolate or vanilla ice cream! An ideal training program may, and should, incorporate both free and machines into a program, have you doing cardio AND resistance training and helping you live life to the fullest. After all — who only wants to eat vanilla ice cream! (I'm actually waiting for a weight machine that can serve up strawberry.)

Don't Forget Your Iodine

BY MICHAEL ROIZEN, M.D., AND MEHMET OZ, M.D.

King Features Syndicate, Inc.

In 1509, Michelangelo wrote to a friend that his goiter was so large his "chin and belly meet perforce in one [and] my beard doth point to heaven." A goiter is an abnormal swelling of the thyroid, the butterfly-shaped gland at the base of the neck, commonly caused by an iodine deficiency. In the early 20th century, the upper part of the U.S. was called the Goiter Belt! (The Mayo Clinic in Rochester, Minnesota, and the Cleveland Clinic both gained prominence as goiter-treatment innovators at that time.) Iodized salt was introduced in 1924, and dairy cow feed was supplemented with iodine; those additions have been credited with the near eradication of goiters.

So why has the Counsel for Responsible Nutrition recently sounded an alarm about the need for supplemental iodine? Iodine intake has dropped almost 20 percent in the past 50 years as people reduced their salt intake and now use fancy (Himalayan pink salt anyone?), unsupplemented salts.

Besides avoiding goiter (you don't want them coming back again!), iodine is required for normal fetal brain development in utero and during infants' first 12 months, when they're often breastfeeding. That's why the CRN says multivitamin/mineral supplements intended for pregnant and lactating women should include at least 150 mcg of iodine to make sure they get a total daily intake of 220-290 mcg. (Other adults need a total of 150 mcg daily.) If you take your appropriate multivitamin/minerals and eat fish such as wild salmon (70 mcg per serving), you'll get plenty of iodine. Too bad Michelangelo didn't like seafood.

NEED TO CONSIDER ALTERNATIVES TO ENDOSCOPES?

When James Garner starred as Lt. Kenneth Braden in "Up Periscope" (1959), the submarine commander knew that infiltrating Japanese waters to retrieve secret radio codes was risky business. But getting super-scoped in a hospital can be more perilous.

Recently, headlines revealed that "Fatal Superbugs at UCLA Medical Center" killed two people, and another 170 may have been exposed to a multiple-antibiotic-resistant infection. The cause was a super-complex endoscope (duodenoscope) used in a procedure called ERCP. This duodenoscope is fed through your mouth into your small intestine so that X-rays can be taken to detect disease in and around ducts of the liver and pancreas; docs can also provide treatment or do surgery via the duodenoscope.

Unfortunately, at UCLA the device was persistently contaminated, even though it was repeatedly cleaned properly. Reuse introduced bacteria into a series of patients receiving ERCP.

The Food and Drug Administration now recommends stepped-up disinfection for these devices. Unfortunately, that may not be enough. They also say, "Meticulously cleaning duodenoscopes prior to high-level disinfection should reduce the risk of transmitting infection, but may not entirely eliminate it."



OZ AND ROIZEN

Dr. Mehmet Oz and Dr. Michael Roizen

So what can you do if you need any type of endoscopy or an ERCP? Discuss risks and benefits (risks remain small overall) with your doc and ask about alternatives: For ERCPs, percutaneous cholangiography (X-ray of the bile ducts), ultrasound, CT or MRI cholangiography are non-invasive; all deliver very similar information. Open surgery is often an option for removal of gallstones and treatment of tumors. The good news? These recent events will increase the safety of endoscopies for everyone.

WALKING FOOTBALL

We knew Landon Donovan's career was winding down when he wasn't named to the most recent U.S. World Cup Soccer Team. After he retired in 2014, everyone assumed his competitive playing days were over. However, in the U.K., something interesting is happening in the world of amateur soccer. The Brits call it "Walking Football," and it has taken the country by storm. It's designed for men and women (there are "mixed sex" teams) in their 50s 60s and even 70s who like to go out and have a friendly, but competitive, kick-about.

Established in 2011, Walking Football has slightly flexible guidelines: The field is roughly a third the size of a regulation soccer field (between 15-30 yards wide and 20-40 yards long); you use a slightly smaller, indoor ball; substituted players are allowed to return; no contact or side tackles allowed; you can walk briskly; and the penalty for sprinting, running or jogging is a free kick for the other team. But that doesn't mean it doesn't work up a sweat!

A British Journal of Sports Medicine study IDs the health benefits for people joining walking groups: reduced blood pressure, body fat, body mass index, resting heart rate and total cholesterol. And Walking Footballers? Last year, the Surrey Walking Footballers collectively covered a total of 6,412 miles — and this year over 175 players will take part. Let's hope this sport walks across the pond soon. Maybe Landon Donovan could get the ball rolling. Brilliant way to get in 10,000 steps a day!

WHEN A CHILD HURLS

Hurling, perhaps the world's fastest and oldest field game, was brought to Ireland by the Celts more than 2,000 years ago. Think of it as a combo of lacrosse, baseball, rugby and running golf, with a few hockey rules slipped in. The players use sticks (hurleys) and a leather-covered cork ball (sliotar) to attack each other's goals. It's a dangerous sport, in which sticks and stones will

break your bones.

But if your newborn is spitting up (or "hurling," as Wayne and Garth would say), chances are nothing dangerous is going on. All infants spit up: Their tiny stomach is experiencing food for the first time, plus stomach muscles and the esophageal sphincter, which keep stomach contents where they belong, haven't matured yet. That burp-the-baby spit-up that appears after most feedings usually takes about six months to stop happening routinely, and as your child moves on to solid food, it should go away.

Still concerned? If you want to check on just how much is staying down and how much is coming up, measure out 3-4 ounces of milk and splash it on a towel or diaper. If that looks to be the amount your baby is spitting up each time, or if spitting up is accompanied by crying, then you should take the baby to the pediatrician. There are such things as baby antacids ... but you may want to save the antacids for yourself, just in case when your baby grows up, he wants to try the sport of hurling.

BODYBUILDERS' BETTER BOOSTER (IT'S NOT BREAST MILK!)

Listen up, A-Rod: The Yankees are bringing you back, but Coach Girardi says you'll have to prove you can deliver an all-star performance without using performance-enhancing steroids. And we're here to help. We suggest you opt for hard work and discipline to get back into shape, and skip professional bodybuilders' latest muscle-bulking craze (don't even think about it!): breast milk.

Yup, bench-pressing behemoths are touting the "natural energy drink" as the best thing since, well, mother's milk. The problem is that it isn't from their mothers. Trolling through Craigslist and other online sites, guys are accessing it from unregulated, unclean sources.

According to a new study in the journal *Pediatrics*, you're risking more than wasted money when you make such a purchase. Researchers in Ohio examined 101 samples from a popular milk-sharing website and found that that 74 percent were contaminated with staph bacteria and other infectious microbes. Also, HIV can be transmitted through breast milk, although none of the study samples contained it.

So if you're interested in beefing up and having more energy, try our Super Juice instead. It's an A-Rod special that will keep you out of trouble and in shape: In a blender, combine 1 cup baby kale, 1 cup frozen raspberries, 1 cup almond milk, 1/2 cup no-sugar-added vanilla Greek yogurt. Down that with 900 mg of algal oil supplement, and you'll be good to make your run around the bases or take a walk around the park — and you'll be able to keep doing it with joy for many more years.

Mehmet Oz, M.D. is host of "The Dr. Oz Show," and Mike Roizen, M.D. is Chief Wellness Officer and Chair of Wellness Institute at Cleveland Clinic. To live your healthiest, tune into "The Dr. Oz Show" or visit www.sharecare.com.

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Nursing Scholarship Available To Students

The Avera Sacred Heart Foundation is offering the Lori Ann Schrempf Memorial Nursing Student Scholarship to nursing students who are continuing their education to become a Registered Nurse.

The Lori Ann Schrempf Memorial Nursing Student Scholarship was established in 2002 in memory of Lori, a nurse at Avera Sacred Heart Hospital for more than 22 years.

Lori's life was tragically cut short when a LifeNet helicopter en route to transport a patient crashed. She was the LifeNet nurse on board. The pilot and paramedic also perished in the crash. Lori had a way of teaching nurses not only the duties of the job, but the compassion and spirit of the job as well.

This nursing scholarship will make preference to non-traditional students; however, will also consider nursing students who meet the other criteria. The value of the scholarship is \$500.

Applicants who qualify are those who are in their third or fourth year of a B.S.N. pro-

gram, or first or second year of an Associate's program.

Non-traditional students are preferred and should be a resident in one of the following counties in which Avera Sacred Heart Hospital serves: Bon Homme, Charles Mix, Clay, Douglas, Gregory, Hutchinson, Todd, Tripp, Turner, Union and Yankton, and the Nebraska counties of Antelope, Boyd, Cedar, Holt, Knox or Pierce.

Applications will consist of an application form, resume, letter of reference from a faculty member, and a written narrative that focuses on: passion for nursing, community involvement, and demonstrations of Avera Sacred Heart values of hospitality, compassion, and stewardship.

The deadline for all applications is April 15. The award is given in May of each year. This scholarship may only be given to an applicant once.

Applications are to be mailed to The Avera Sacred Heart Foundation, 501 Summit St., Yankton, SD, 57078. For further information contact the Foundation at (605) 668-8310.

Enrollment Available For Health Coverage

The Open Enrollment period for 2015 health coverage is over. For most people, the last day to enroll in a 2015 Marketplace plan was Feb. 15, 2015.

But in some cases, if you have a qualifying event, you may still be able to get coverage this year. Types of qualifying events include:

- Having a baby, adopting a child or placing a child for adoption;
- Getting Married;
- Losing Health Coverage;
- Being denied Medicaid or CHIP coverage;
- Gaining U.S. citizenship;
- Being a member of or gaining status as a member of a federally recognized tribe;
- Leaving incarceration;

For people already enrolled in a Marketplace plan: Having a change in income or household status that affects eligibility for premium tax credits or cost-sharing reductions.

You may be able to enroll in coverage through Medicaid and the Children's Health Insurance Program (CHIP).

There's no limited enrollment period for these programs, which provide free or low-cost health coverage to millions of Americans. You can apply any time. If you qualify you can enroll immediately, any time of year.

If you have experienced any of these life events and are interested in obtaining Marketplace health insurance coverage, contact your local Navigator, Jennifer Grassrope for assistance at 605-469-5363.

For more information on the health insurance marketplace, visit: Healthcare.gov or call 1-800-318-2596

Find additional locations for local help at localhelp.healthcare.gov/.

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