



What's New from APFRI

**Inside this edition: A New Year, A New Decade, A New You...
How's it Going?, Women's Heart Health, Sugary Beverages:
Buyers Beware, Heart Healthy Recipe, and more...**



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Army Physical Fitness Research Institute

A New Year, A New Decade, A New You...How's it Going?

It's now been more than a month since we started the New Year. Did you set any goals or make any resolutions? If you did, you're in good company. According to a poll published by Reuters, about 44% of Americans will make New Year's resolutions with the top two being to quit smoking and lose weight ...two great resolutions that would go a long way in improving heart health! Actually, anytime is a good time to set health improving goals: eating better, exercising more, losing body fat, getting more sleep, controlling anger...the list goes on. So, are you still in the fight? Are you reaching your goals? If you have relapsed into some old behaviors, you're not alone. Indeed, it is actually very common to lose momentum. While 52% of individuals surveyed firmly believe that they will persist toward their goals, only about 12% ultimately do. If you have gotten off track, the following suggestions from the University of Maryland Medical Center, the Mayo Clinic, and others will help.

- **Don't Quit Yet:** View past failure as an opportunity to start again. Ultimate failure will only occur if you stop trying. View setbacks or relapses as simply that...setbacks. That's all. Remember, if it were easy you would be doing it already.
- **Adjust Goals If Needed:** If you've been struggling to keep your New Year's goals, perhaps they are unrealistic. Often our initial goals are lofty but then life gets in the way. Perhaps there isn't enough time to exercise two hours a day or your weekly weight loss goal was unrealistic and possibly unhealthy. As a general rule 1 - 2 pounds per week is safe and more sustainable. If you are not achieving your initial goals, re-evaluate them to ensure they are achievable AND maintainable. If they are not, adjust them.
- **Get a Partner:** This is often called an "accountability partner." This is the positive side of peer pressure. It's harder to quit when you know that someone else is "watching." Exercise clubs and diet groups capitalize on this phenomenon. In addition to being visible to others, partners increase the likelihood of receiving praise, encouragement, and advice, all of which go a long way in fueling your psychological "gas tank" and keeping you motivated.
- **Reward Your Efforts:** Small rewards can be a powerful motivator. For example, someone quitting smoking may use the money previously spent on cigarettes for a trip or night out. Or a dieter might purchase new clothing to accentuate and celebrate their weight loss success.
- **Monitor Your Progress:** Keeping a record of your progress is useful for making course corrections, and it motivates you as your accomplishments are charted in black in white. Set achievable goals with manageable milestones along the way. If more exercise is desired, consider logging your gym time or tracking improvements. If trying to reduce anger, track how many times you lose your cool per week to see if the trend is down. Simply tracking the behavior you would like to change significantly increases your odds of actually changing it!
- **Keep a Long Term Perspective:** Our goals or resolutions are usually grounded in sound logic and reasoning. Typically, these decisions are not haphazard or cavalier. Reminding yourself of your reasons, the benefits associated with this change, and the purpose or meaning behind your decision together will help keep you motivated. Be creative in finding ways to remain focused. For example, posting notes on your refrigerator, sticking photos on your bathroom mirror, or putting a written reminder in your gym bag are simple but effective tools to help keep you on target.
- **Stay Positive:** Focusing on the benefits or gains associated with your new behaviors will likely serve as a better motivator than thinking about the costs or losses you are avoiding. For example, sustain positive thinking such as, by exercising, I'll have greater stamina, look and feel better in my uniform, and get better scores on my physical fitness (PT) test.

If you are struggling to reach your goals, take heart. Just as reaching advanced levels of leadership is not an easy task, achieving greater levels of personal health and wellness is typically not simple either. Consider the comments of our 30th President, Calvin Coolidge. "Nothing in the world can take the place of persistence. Talent will not; nothing is more common than unsuccessful men with talent. Genius will not; unrewarded genius is almost a proverb. Education will not; the world is full of educated derelicts. Persistence and determination alone are omnipotent. The slogan 'Press On' has solved and always will solve the problems of the human race."

Women's Heart Health

Heart Disease. You may be thinking, "This doesn't apply to me. I don't have heart disease." You may, however, have conditions or habits that can lead to heart disease, such as being overweight, smoking, or being inactive. In fact, 90 percent of women have one or more risk factors for developing heart disease, which if controlled could reduce their risk. You may already know about these other "risk factors" for heart disease. You may even know which of these you personally have. What you may not know, is that if you have even one risk factor, you are much more likely to develop heart disease with its many serious consequences.

Did You Know?

- More women die of cardiovascular disease than the next four causes of death combined, including all forms of cancer.
- Heart disease and stroke are the number 1 and 3 killers of women.
- 1 in 3 women die of heart disease or stroke each year, while 1 in 30 die of breast cancer.

Now, the good news. You have tremendous power to prevent heart disease---and you can start today. Eighty percent of cardiac events in women could be prevented with better choices involving diet, exercise, and not smoking. By learning about your own personal risk factors and by making healthful changes in your diet, physical activity, and other daily habits, you can greatly reduce your risk of developing heart-related problems. Even if you already have heart disease, you can take steps to lessen its severity. Start taking action now to protect your heart. Coronary heart disease is the main form of heart disease. It is a disorder of the blood vessels of the heart that can lead to a heart attack. A heart attack occurs when an artery becomes blocked, preventing oxygen and nutrients from getting to the heart. Other cardiovascular diseases include stroke, high blood pressure, angina (chest pain), and rheumatic heart disease.

What's Your Risk?

Here is a quick quiz to find out

- Do you smoke?
- Is your blood pressure 140/90mmHg or higher, OR have you been told by your health care provider that your blood pressure is too high?
- Has your health care provider told you that your total cholesterol level is 200 mg/dL or higher OR your HDL (good cholesterol) is less than 40 mg/dL?
- Do you have diabetes OR a fasting blood sugar of 126 mg/dL or higher, OR do you need medicine to control your blood sugar?
- Are you over 55 years old?
- Do you have a body mass index (BMI) score of 25 or more?
- Do you get less than a total of 30 minutes of physical activity on most days?
- Has your health care provider told you that you have angina (chest pains) OR have you had a heart attack?
- Do you have a family history of early heart disease?

If you answered "YES" to any of these questions you are at an increased risk of having heart disease.

One reason some women aren't too concerned about heart disease is they think it can be "cured" with surgery. This is a myth. Heart disease is a lifelong condition—once you get it, you'll always have it. That's why it is so vital to take action to prevent and control this disease. Unfortunately, most women don't know *The Heart Truth*, a campaign designed to raise awareness about heart disease in women. Although significant progress has been made increasing the awareness about heart disease risk factors among women (from 34 percent in 2000 to 65 percent in 2007), most women fail to make the connection between those risk factors and their personal risk of developing heart disease.

Many women don't take their risk of heart disease seriously or personally. Women often fail to make the connection between risk factors, such as high blood pressure and high cholesterol, and their own chance of developing heart disease.

What next? Review the Action Steps for Healthier Living Tips on page 3.

Action Steps for Healthier Living

TAKE ACTION TO BE HEALTHIER

- Have your cholesterol and blood sugar levels checked.
Goals:
Total Cholesterol - below 200 mg/dL
HDL (good cholesterol) - above 50 mg/dL
LDL (bad cholesterol) - below 100 mg/dL
Triglycerides – below 150 mg/dL
Fasting Glucose – below 100 mg/dL
- Monitor your blood pressure and aim for keeping it less than 120/80 mmHg.
- Stop smoking.
- Get at least 150 minutes of moderate physical activity each week.
- Reach and maintain a healthy body weight. Aim for a Body Mass Index (BMI) of less than 25.
- Eat a well balanced diet, including lots of fruits and vegetables, less salt, low saturated and trans fats, more beans, fish, poultry, and lean meats.
- Be cautious with energy drinks. These types of beverages contain high levels of caffeine and Taurine aimed at increasing "energy" with the objective of enhancing performance and alertness. Taurine is an amino acid found in animal protein foods, such as meat and fish. Like caffeine, Taurine has been shown to increase blood pressure and heart rate. Studies have found a link between consumption of energy drinks and high blood pressure or heart disease risk. Blood pressure and heart rate rise naturally during intense physical exercise but may go up even more with energy drinks. This additional cardiac stress may cause a greater risk for heart disease, especially for those who are unaware of having high blood pressure or heart issues to begin with.
- De-Stress your heart by turning off all your electronic items. You will be surprised to see how all electronic media gadgets and being connected 24/7 causes high stress which may lead to increased blood pressure and heart disease.
- Unplug cell phones, computers, lap tops, PDAs, black berries, blue tooth devices etc. for 10 minutes at a time, eventually leading to one hour per day to reduce stress.
- Turn on some relaxing music, close your office door for 10 min, listen and breathe...



**February is
American
Heart Health Month**

Sugary Beverages: Buyers Beware

There is nothing better on a hot summer day than a tall cold glass of lemonade or sweet tea. Or is there? Sugary beverages have been implicated over recent years for their deleterious effects on bone health, body weight, triglyceride and insulin blood levels, liver function and inflammation, dental caries/decay and Type 2 diabetes. The occasional sugary beverage is fine but large amounts are harmful.

Why are sugary beverages detrimental to the body? For one, consuming large amounts of regular soda and other sugary beverages, including fruit juice, can take the place of more nutritious beverages, such as milk. Children and teenagers are especially vulnerable in this regard since they need the added calcium, protein and other nutrients from milk for bone mass accretion. Colas, in particular, are not only devoid of these nutrients, but the phosphoric acid they contain can actually leach calcium from the bones as the body neutralizes its acidic effects on the blood.

Another harmful aspect of sugary beverages is the concentrated amount of calories they contain. A regular 12-oz soda contains roughly 150 calories. This is the equivalent amount of calories found in 6 cups of raw vegetables. Fruit juice is even more concentrated with twelve ounces of juice containing 180-240 calories (the equivalent of 7-10 cups of raw vegetables). Since the body does not register the calories provided in sugary beverages in the same manner as solid food, one can easily consume 300 calories from a sugary beverage and not feel as satiated as one would if the calories were from solid food. The resulting weight gain increases the risk for many disorders, one being Type 2 diabetes. Two large prospective studies found that one or more regular sodas per day increased a woman's risk of Type 2 diabetes by an astounding 83%, with weight gain being a culprit.

The fructose content of these beverages also plays a negative role. Fructose is a form of sugar found in fruit and table sugar. Concentrated amounts of fructose are found in fruit juice and sodas sweetened with corn syrup or sucrose (table sugar). Fructose is metabolized differently than other sugars. It is more easily converted to fat in the form of triglycerides. Not only does fructose circulate in the blood but, it is stored more readily than glucose as abdominal fat. This can increase inflammation throughout the body by the release of certain hormones and other substances. Abdominal fat makes the body more insulin resistant and increases the risk of metabolic syndrome, heart disease and diabetes. Fat deposits in the liver from a high fructose (and high calorie) intake can ultimately lead to non-alcoholic liver disease.

What about beverages sweetened with artificial sweeteners? The jury is still out on whether or not they are a good substitute for sugary beverages. Indeed they are free of calories but the sweet taste uncoupled from any calorie content appears to have complex effects on the brain and how the intestinal tract responds to these beverages. Some research is showing that these sweet beverages without calories may actually increase hunger and weight gain.

Here are some alternative beverages to try that are low in calories and do not contain artificial sweeteners:

- Black coffee
- Tea: black, green and herbal
- Club soda: plain or with a splash of juice
- Low-sodium broth
- Low-sodium vegetable or tomato juice
- Water infused with one or more of the following:
lemon, lime or orange wedges



In summary, large amounts of any sugary beverage will indeed have a negative impact on one's health for a variety of reasons. Artificially sweetened beverages may not be the best alternative. When looking to quench your thirst, rethinking your beverage options can potentially have long-lasting, positive effects on your health.

Steamed Halibut with Ginger and Green Beans

This recipe is from the American Institute for Cancer Research website. Halibut is a good source of selenium and other nutrients important for the immune system. This is a good meal choice for keeping winter colds and flu at bay.

- 1 lb. fresh green beans
- 1 lb. halibut (4 fillets), rinsed and patted dry with paper towel
- 1/2 tsp. coarse sea salt
- 1 Tbsp. minced fresh ginger
- 3 Tbsp. thinly sliced green onions
- 1 Tbsp. low-sodium dark soy sauce
- 1 Tbsp. peanut oil
- 1 Tbsp. toasted sesame oil
- 1/4 cup fresh cilantro sprigs, lightly packed



DIRECTIONS:

- Steam green beans for about 5 minutes and set aside.
- Gently rub both sides of the fillets with salt. Place them onto a heatproof ceramic dish. Sprinkle ginger over top.
- Place dish onto a steamer over several inches of boiling water and cover. Gently steam fillets for 10 to 12 minutes.
- Remove ceramic dish from steamer. Sprinkle green onions and drizzle soy sauce over fillets.
- Heat peanut and sesame oils in a small skillet over medium high heat until they just begin to smoke. Then carefully pour on top of the fillets. Use caution because hot oil will cause onion and residual water on fillets to pop and spatter. Arrange green beans around the fillets. Garnish fish with cilantro and serve immediately.

March is National Nutrition Month

Makes 4 servings.

Per serving: 200 calories, 7 g total fat (1 g saturated fat), 8 g carbohydrate, 26 g protein, 4 g dietary fiber, 410 mg sodium

Sudoku Puzzle (easy)

8	6	4	5		9			3
	2		6			5		
	9		2	1				
4			9	2			1	8
	1					6	9	
9		2		8		7	5	4
		7	3	6	1	9		
		1	8	9		4	6	
6	8	9	7	5		2		1

USAWC Class Schedule - Thorpe Hall

FITNESS CLASSES

February

Feb 1, 3, 8, 10, 22, 24
APFRI Peak Performance

Feb 15 - Lumbar Stabilization

Feb 17 - Flexibility

March

March 15, 17, 22, 24
APFRI Peak Performance

March 23, 29, 31
Teen/Parent
Strength Training

Teen/Parent Strength
Training is held on the
2nd Floor.
1600—1700

Lumbar Stabilization,
Flexibility and APFRI
Peak Performance
classes are held on the
3rd floor.

**Please
Join
Us!**

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NOON-TIME LECTURES 1145—1245

Wil Washcoe Auditorium
(WWA)

Feb 4 - “Hypertension:
The Silent Killer”
(WWA)

Special Guest Speakers

Feb 14 - Ms. Charlotte Libov
“Women’s Healthy Heart”
(Bliss Hall)
1300 — 1430

Feb 25 - Dr. Thomas Ostronic
“EBCT”
Electron Beam
Computerized Tomography
Coronary Calcium Imaging for the

USAWC Staff Highlight Mr. Victor Schwartzmiller Computer Assistant



Victor Schwartzmiller came to AFPRI in November of 2009 after nearly 6 years in the entertainment industry. Victor served in Iraq from June 2005 – June 2006 with the 1st - 110th Infantry Division of the PA National Guard. A graduate of Shippensburg University, Victor holds a Bachelor’s Degree in Communications with a minor in Computer Science. He combined his education and military experience during his deployment by receiving cinematographic credit for footage he shot during his deployment. The footage was used in a documentary detailing the unit’s experiences. At APFRI Victor is the Computer Assistant handling all things technical. He is the resident DTS, Portal and Calendar expert as well as the troubleshooter for the various technology issues that creep up every day. In his free time Victor is an accomplished chef and hosts his own weekly Podcasts.

CGSC bids farewell to Cecilia Thomas, M.Ed, RD, LD



Cecilia has been a Registered Dietitian for almost 30 years. She began her career as an Army Dietitian with assignments that included the Army Physical Fitness School, the Research Dietitian at Natick, the 55th Medical Group Dietitian, and an Instructor at the AMEDD Center & School. After retiring from active duty she stayed home to raise her three children and follow her husband in his career as an Army Chaplain. With her children in college and high school, she rejoined the workforce when APFRI opened the CGSC annex at Fort Leavenworth and has enjoyed her time as part of the APFRI team. She has a Bachelor's Degree in Nutrition from Southwest Texas State University and a Master of Science in Health Promotion/Nutrition from Vanderbilt University. In her free time she enjoys reading, walking/hiking, and traveling. Cecilia will join her husband who was reassigned to FT Lewis, Washington.



Or <http://usacac.army.mil/cac2/cgsc/Events/APFRI/index.asp>

For More Information: <https://apfri.carlisle.army.mil> then click on CGSC

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CGSC Staff Highlight Ms. Michelle Cwiklinski, MSPT, M.Ed., CCRT Physical Therapist



Michelle Cwiklinski joined the APFRI team in September 2010 and brings a diverse educational and professional background. She holds a Bachelor's Degree in Biology Education and a Master of Education in Exercise Physiology from Bowling Green State University. After a short teaching stint, she spent eight years as a Naval Officer where she served as an Aerospace Physiologist and had the chance to fly in multiple military aircraft (although her first love is helicopters). After the Navy, she went on to complete her Master of Science in Physical Therapy (PT) from Texas State University. Since PT school graduation, she has worked in Colorado and North Carolina in both the hospital and rehabilitation environments. Michelle has also spent time at UNC Chapel Hill as a graduate student in Human Movement Science and has recently completed her certification in canine rehabilitation. Michelle is excited about working in the military again and being able to combine her PT and Exercise Physi-

ology skills. When she is not working, Michelle enjoys watching football, gardening, cooking, her 3 dogs, and reading.

USASMA Annex Class Schedule



*Classes are held in the
West Auditorium
1200-1250*



Is Diabetes in your Future?

14 February
0800-0850

Executive Stress Management

16 February
0800-0850

February/March

Class 61 Re-Assessments
NRC Assessments

NRC students Blood Draw

11 February
18 March

Metabolic Syndrome

9 March
0800-0850

Deployment Fitness

11 March
0800-0850

Restorative Sleep: Retake the Night

23 March

Increasing Aerobic Power

30 March

USASMA Staff Highlight

Henry Cenicerros, Executive Fitness Program Director USASMA APFRI



Henry Cenicerros is the Executive Fitness Program Director at the APFRI USASMA Annex. Henry has been with APFRI since the spring of 2009 and a few of his duties include one-on-one consults with students and running the strength and flexibility stations as well as an out briefer during assessments. He graduated in 1984 from the University of Texas San Antonio with a degree in Physical Therapy. His career as a Physical Therapist has spanned more than 20 years. In 2005, Henry started a district-wide, physical training program for the Socorro Independent School District in El Paso, TX called "Teach Well", for school employees who preferred to exercise at work. The Teach Well program provided campus coordinators and equipment for circuit training and other physical activities. In 2008, Henry started a community-based fitness program called "U-Fit." This program eventually evolved into "Reaction Total Fitness" which currently caters to those who want to improve their fitness and performance in all aspects of their lives. He is married, has two sons, and two grandchildren.

Contributors/Article Authors

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Women's Heart Health

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Sugary Beverages: Buyers Beware

Jennifer Eiland, MS, RD, LD, USASMA

Steamed Halibut with Ginger and Green Beans

Jennifer Eiland, MS, RD, LD, USASMA

Sudoku Puzzle

Manu Peeni, MS, CSCS, HFI, USASMA

Sudoku Puzzle Solution

8	6	4	5	7	9	1	2	3
1	2	3	6	4	8	5	7	9
7	9	5	2	1	3	8	4	6
4	7	6	9	2	5	3	1	8
5	1	8	4	3	7	6	9	2
9	3	2	1	8	6	7	5	4
2	4	7	3	6	1	9	8	5
3	5	1	8	9	2	4	6	7
6	8	9	7	5	4	2	3	1





References & Resources

A New Year, A New Decade, A New You...How's it Going?

Basil Katz, "Majority of Americans Say No to New Year's Resolutions: Poll," December 28, 2010, <http://www.reuters.com/article/idUSTRE6BR2HC20101228> (accessed January 05, 2011).

Danielle Lewis, "How to Maintain New Year's Resolutions: Setting Realistic Goals for the New Year," December 31, 2009, <http://www.suite101.com/content/how-to-maintain-your-new-years-resolutions-a184379> (accessed January 04, 2011).

University of Maryland Medical Center Home Page Featured Stories, "Where to Begin: Expert Advice on Maintaining Resolutions," December 31, 2009, <http://www.umm.edu/features/prepare.htm> (accessed January 04, 2011).

Mayo Clinic Home Page, "Barriers to Fitness: Overcoming Common Problems," February 21, 2009, http://www.mayoclinic.com/health/fitness/SM00085_D (accessed January 04, 2011).

Thomas J. Coates, Robert W. Jeffery, and Lee A. Slinkard, "Heart Healthy Eating and Exercise: Introducing and Maintaining Changes in Health Behaviors," *American Journal of Public Health* 71, No. 1 (1981): 15-24.

Alexander J. Rothman and Peter Salovey, "Shaping Perceptions to Motivate Healthy Behavior: The Role of Message Framing," *Psychological Bulletin* 121, no. 1 (1997): 3-19.

Calvin Coolidge, "Quotations by Author," http://www.quotationspage.com/quotes/Calvin_Coolidge/ (accessed January 05, 2011).

Women's Heart Health

Lori Mosca et al., "Evidence-Based Guidelines for Cardiovascular Disease Prevention in Women: 2007 Update," *Circulation*, no. 115 (2007): 1481-1501.

Donald M. Lloyd-Jones et al., "Defining and setting National Goals for Cardiovascular Health Promotion and Disease reduction. The American Heart Association's Strategic Impact Goal Through 2020 and Beyond," *Circulation*, no. 121 (2010): 586-613.

American Heart Association Home Page, www.heart.org (accessed January 12, 2011).

American Heart Association Go Red for Women, www.goredforwomen.org (accessed January 12, 2011).

Sugary Beverages: Buyers Beware

The Harvard School of Public Health Home Page, "The Nutrition Source, Sugary Drinks or Diet Drinks: What's The Best Choice?" www.hsph.harvard.edu/nutritionsource/healthy-drinks/sugary-vs-diet-drinks/index.html (accessed January 10, 2011).

The Harvard School of Public Health Home Page, "The Nutrition Source, 6 Ideas for Low-Sugar Drinks," www.hsph.harvard.edu/nutritionsource/healthy-drinks/low-sugar-drink-ideas/index.html (accessed January 10, 2011).

Vasanti S. Malik et al., "Sugar-Sweetened Beverages and Risk of Metabolic Syndrome and Type 2 Diabetes," *Diabetes Care Online*, August 2010, <http://care.diabetesjournals.org/content/33/11/2477.full> (accessed January 10, 2011).

New York State Department of Health Home Page, "Evidence Related to Sugar-Sweetened Beverages and Health," January 23, 2009, http://www.cspinet.org/new/pdf/sdtaxes_nys_soda_lit_rev.pdf (accessed January 11, 2011).

K.L. Stanhope et al., "Consuming Fructose-Sweetened, Not Glucose-Sweetened, Beverages Increases Visceral Adiposity and Lipids and Decreases Insulin Sensitivity in Overweight/Obese Humans," *Journal of Clinical Investigation* 119, no. 5 (2009):1322-1334.