

~~CasePerformance~~

Super Human Radio Takeover

April Newsletter

Part I



In Part I of this month's newsletter....

I.	Leading Off	2
II.	Community Member of the Month Interview: Alisa Profumo	3
III.	Community Member Discussion: <i>Killing Me Softly</i> by Carl Lanore	9
IV.	SuppVersity Science Round-Up: <i>Fat Loss Adjuncts</i> <i>for Your 2015 Beach Body Challenge</i> by Adel Moussa	12
V.	Meets/Events/Clinics	16

Hello,

SOS! SOS! SOS! The health and fitness juggernauts from [Super Human Radio Network](http://www.superhumanradio.com) have hijacked Part I of the CasePerformance Newsletter, with Alex Leaf as official editor.

I am working on a treaty with SHR and plan to be back for Part II of the CP Newsletter.

Until then... Train smart, train hard and leave the excuses to someone else!

Respectfully,

[The CasePerformance Team](#)

I. A Look at This Month's Newsletter

Well, well, well, it looks like Super Human Radio's plan for world dominance is going swimmingly well. With all the smart CasePerformance readers now under our control, there is no way we can lose! But seriously, welcome to the CasePerformance April newsletter.

To start things off, we have the CP Community Member of the Month interview with *The Lovely & Talented* SHR co-host, Alisa Profumo. While it is no secret to the SHR listeners that she is 55 years young, you wouldn't be able to tell by looking at her. Her dedication to training, nutrition, and proper skin care has this youngling looking like she is fresh out of college with a PhD in common sense. Fortunately for us, she is willing to share some of her secrets.

Following our interview is the CP Community Member Discussion in which Carl Lanore bestows us with *Killing Us Softly*. In this brief article, Carl uses critical thinking to connect the dots about snoring and how it may be a sign of much more serious health problems. If you expect to find a list of scientific research to support his thoughts, you will be disappointed. This article is 100% pure Carl Lanore, and it is well worth the read.

Finally, we end with a guest article by Adel Moussa, of SuppVersity Science Roundup fame on SHR, who took the time to write a brief piece on *Fat Loss Adjuvants for Your 2015 Beach Body Challenge*.

Needless to say, I think you'll enjoy Part I of the CP newsletter.

In health,

Alex Leaf

II. Community Member of the Month...



**The Lovely
& Talented**

Alisa Profumo

First off, I want to thank you for taking the time to talk with us today Alisa.

My Pleasure!

The world knows you best as "The Lovely & Talented" co-host of [Casual Friday](#) on Super Human Radio (SHR), a podcast started by [Carl Lanore](#). How did you and Carl's story together begin?

Well, to go into the entire story would just take up too much time and space! Having said that, I can tell you that in one of the very first conversations between Carl and me he mentioned that he thought I would be great on the radio. Five years later here we are. I personally feel I have "come a long way" with regard to my comfort level on the air. Carl and I have even discussed branching off and doing a show of my own; one that would be more geared toward women. Stay tuned for this... hopefully we can make this a reality.

You are always on top of your game when it comes to discussing current events each week. How much time do you put into researching topics to discuss, and what do you look for in stories that make them appeal to you?

It would be difficult to determine how much time I put into researching topics for Casual Friday. Suffice to say that it is constantly on my mind. When I do morning cardio, if I am on the treadmill, I flip through the morning news channels looking and listening for stories. I do the same with social media outlets such as Facebook and Twitter. Since Super Human Radio is also considered media, we receive information about new research prior to its release to the public. I typically glean these studies and watch for them on other news outlets. It's interesting to see how the mainstream media can take a study and twist it or leave important information out entirely. It is my mission to either discuss it with Carl on Casual Friday, invite the author on to discuss the outcomes, or both. We endeavor to bring the truth to our audience.

It's interesting to see how the mainstream media can take a study and twist it or leave important information out entirely

Stories that appeal to me will typically be topics that educate, enlighten, or amuse our listeners. Ideally Casual Friday would touch on all three, and I try to include a few stories each week that provide our listeners with some bits of more practical information.

Casual Friday has evolved over the years into what I feel is one of the more popular shows on Super Human Radio. **Alex's note: Casual Friday is definitely my favorite SHR time. Listening to other guests and learning about the wealth of information on health and wellbeing is great and all, but Casual Friday is truly a time where you can sit back, relax, and enjoy a more calm and amusing discussion. Alisa does an excellent job preparing the show.

If you could steer SHR in any direction, what would you like to see happen in the next year or so?

First and foremost, I would love for SHR & Carl to get the recognition they deserve. Carl has been on the air bringing information to listeners around the world for over ten years. He really should be out in the mainstream delivering his message. I know that's a stretch because people in the mainstream don't want to listen to what he's been saying for years, but times are changing and if it's ever going to happen now is the time. People want answers and are searching for them using social media, podcasts, etc. This is obvious with the recent and continuous decline in Monsanto's stock, with large companies such as Kraft taking artificial dyes out of their foods, and the continuous fight to label GMO's. People want the truth and are searching for it. SHR brings it to them.

Changing gears a bit, it is common knowledge that you are no stranger to the weights. Last I heard you were leg pressing over 600 lbs! What does your typical training week look like?

My current training schedule is:

Day 1-Back & Calves

Day 2-Chest, Shoulder & Abs

Day 3-Cardio

Day 4-Arms & Calves

Day 5-legs & abs

Day 6- Cardio

Day 7-Off

I do fasted morning cardio on my training days and the cardio-only days will consist of a longer cardio session. I also try to fit glutes in every day. Some days I am only doing glute activation work or body weight glute exercises. But I always fit in a glute session. I also try to throw in a yoga session whenever possible.

I can still leg press 600 plus however right now I am focusing on leaning out. I have refined my workouts and am seeing great progress.

Are there any short- or long-term training goals that you have?

I feel fortunate to have had the years of training experience that I have. I started lifting when I was in my 20's. Having said that one goal is to be able to train for as long as possible. I can't imagine life without actively training.

The listeners of SHR know that I have always wanted to do a bikini competition. Is that still a goal? I'm not sure right now. Maybe! Right now my life is about balance. Carl & I are very busy with the business and new things on the horizon.

One goal is to be able to train for as long as possible. I can't imagine life without actively training.

I love to travel and that is one thing we are going to try to do more of. This summer we have a trip planned to Alaska... I can't wait for this! This trip has been on my bucket list for a while now. Imagine dog sledding in Alaska... what fun!

When I was 50 I went into a physician's office for a routine visit. When the nurse asked about my medication intake I told her verbally that I don't take medications and then handed her the list of supplements that I take. She asked again about my medications and when I told her that I don't take medications she acted and sounded as if she couldn't believe it. My long-term goal is to continue to be medication free as I age and if I do get on that stage to be the oldest one up there!

If you could pick your top three favorite exercises, what would they be? Why?

This is difficult since I really do love training. But if I had to choose only three my top three are:

Hip thrusts of course are number one! The results will keep you coming back for more!

Push-ups, as they are a great upper body workout. And they're portable. You don't need a gym or even special equipment; you can do push-ups anywhere, anytime! I will typically do 3-4 sets each workout as a warm-up and will often super set with pull-ups during that warm-up session.

Sprinting will round out the top three! If you want a good all-around training session, then get outside and sprint. If you do some glute activation work prior to your sprints, you will really feel the glutes in action.

SHR is a huge advocate of ancestral-based nutrition, and you love to cook. What are some of your favorite meals or snacks? Would you be willing to share a recipe with us?

Yes, I do love to cook. Zucchini lasagna, chicken parm, ground turkey Mexican style, cucumber rollups, baked apples, baked pears, egg muffins, to just name a few of my faves. Of course, keep in mind that each of these is revised to meet our standard of eating.



As for my favorite recipe I will have to feature my ginger ale recipe. Ginger has so many known health benefits. Incorporating fresh ginger into our diets can be difficult so here is a simple way to do so. And if you are like me I don't consume soda so this is a great healthy alternative.

<http://superhumanradio.com/healthy-real-home-made-ginger-ale-in-minutes.html>

Are there any supplements that you have found particularly helpful in maintaining your youth?

I guess it's no secret to the SHR listeners that I am 55 years old... or should I say young? I am on HRT (hormone replacement therapy) and have been for a few years. I think that what the medical community ~~has done~~ not done to endorse women replacing their hormones as they age is a crime. Women are afraid because of the media's misguided attention on one study... The

Women's Health Initiative. This particular study used equine (horse) estrogens and synthetic progestins to replace the participants' hormones. Obviously there will be problems when human women take hormones from a horse and a lab; they need to use bio-identical hormones.

I also take vitamins C, D₃, and B₁₂, glucosamine chondroitin, omega-3s, and metacurcumin. These

I also want to emphasize that
my skin health is an
accumulation of everything

are my staples; from time to time I throw in creatine (post-workout) vitamin E, & CoQ₁₀. I use a blend of glutamine, agmatine, & AAKG pre-workout. Periodically I will take a probiotic as well.

As we age we need to do everything right to maintain our youth. I feel that each of the supplements that I listed above has its place.

Speaking of youth, your skin is legendary. How do you do it?

I am lucky to have had a mother who taught me the importance of skin care while I was still in my late teens and early twenties. I follow her advice to this day: never, never, never go to bed without first cleansing your face along with the neck and décolletage. Luckily, I never really used soap on my face because as a young girl my skin was too sensitive and would break out if I used soap. Having the attentive mother that I had, she started buying me crème cleansers to use instead of soap. Back to cleansing before bed... this is the time to repair the damage that is done on a daily basis. Of course, we are depending on a good night's sleep to help with this process and I do supplement at night with melatonin, a known antioxidant which helps with fine lines and age spots (Alex's note: read more in my article, [Melatonin – Beyond the Zzzzz's](#)).

Hydration is also of the utmost importance. That is, hydration both topically as well as from the inside. Not too long ago on Casual Friday we discussed a woman in the UK that posted before & after pictures from when she started drinking $\frac{3}{4}$ of a gallon of water per day. The results were amazing. She honestly looked ten years younger in her after pictures. On average I try to drink a gallon of filtered water a day. Please notice that I said filtered, as this is important. No chemicals, fluoride, etc. I also shower with a filter on my shower head to filter out chemicals. We are exposed to so many chemicals on a daily basis that I have tried to minimize this exposure as much as possible by, for example, getting the fluoride and sodium lauryl sulfate out of my toothpaste, triclosan out of my hand sanitizers, parabens out of my cosmetics, and lead out of my lipstick. I could go on but I'm sure you get the picture. It is really up to us as individuals to be the stewards of our own health.

I also want to emphasize that my skin health is an accumulation of everything. Water intake, topical hydration, supplement intake, and of course my diet and exercise.

Here at CasePerformance, questions always revolve around nutrition and training. Based on your knowledge and experiences, is there any final advice you have for our readers in pursuit of their health, youth, and goals?

I will end with this thought... always do your own research and come to the conclusions that are right for you and right for your body. Keep an open mind and listen to others but take away what will work best for you. Educate yourself so that you have the knowledge and know how. We can all age gracefully we just have to put forth the time and effort to make that happen. Last but not least listen to Super Human Radio!

Great advice! Once again I want to thank you for joining us here today. Keep up the great work and for those looking to follow you and Super Human Radio, where can you all be found?

<http://superhumanradio.com/>

<https://www.facebook.com/alisa.profumo>

<https://twitter.com/alisaprofumo>

III. Community Member Performance Discussion



How even moderate snoring devoid of frank apnea can be a danger to your health and performance

By Carl Lanore

WARNING: If you expect to find a list of scientific research to support what follows, you will be disappointed. This article is based solely upon the conclusions I have reached through a process of connect-the-dots in my brain. This is critical thinking folks. You've been warned.

If you snore even moderately, you need to think about it as a possible condition that has negative effects on your overall health and performance. When you're younger you can get away with a lot of this because your body is in hyper-drive to repair and overcome these types of issues. But make no mistake, just as moderately elevated blood sugar has a slower but similar effect on health as full-blown type-2 diabetes, moderate snoring is taking a gradual toll on your body.

If people joke about how loud you snore or you've heard comments like "you sound like a train when you sleep," or the person who shares a bed with you complains that once they wake up in the middle of the night they can't get back to sleep because of how loud you're snoring, this message is especially for you. Even if you don't have full-blown obstructive sleep apnea, moderate snoring is doing some of the same damaging effects to your body.

When you snore, you're experiencing fragmented breathing – periods of interrupted respiration. Your breathing is being obstructed, even for moments at a time, and this obstruction causes

stress hormones to elevate throughout the night when they should be lowest. These hormones send signals to the body that you're in real trouble, and rightfully so, because any restriction of oxygen is a real emergency. These hormones have a direct effect on your brain, cardiovascular system, and metabolism.

The first stage of the negative response to this restriction of oxygen causes hyper dilation of the entire cardiovascular system so that the body can squeeze every single drop out of the oxygen it is getting. But over time, just like the over-production of insulin causes insulin resistance, the body becomes more resistant to the natural vasodilator effects of these hormones. The end result is changes in arteries, veins, and peripheral blood vessels that cause you to remain in the constricted phase all the time. This is what surely leads to the disease state of Peripheral Artery Disease (PAD). PAD is not always caused by plaque but quite often caused by blood vessels simply thinning. Physicians chalk this up to aging, but it can also be a result of the tiny blood-oxygen drop set in motion by moderate snoring.

I strongly believe that snoring can also influence the onset of insulin resistance. The push-pull between blood sugar management hormones and stress hormones is well understood. Over time, this hormonal battle can cause a person to have a greater susceptibility to developing insulin resistance, and consequently, higher fasting blood glucose levels upon awakening.

People who snore heavily will often tend to have GERD. In my observation, this has more to do with the mechanical effects on the esophagus and the esophageal sphincter at the entry of the stomach. If you imagine a pipe standing vertical, midway between the top and bottom of the pipe there is an opening for a vacuum hose to be applied. The bottom of the pipe is plugged up with a small rubber flap that is just a tad larger than the opening itself. The top opening of the pipe is wide open to let airflow in so the vacuum can pull air into the pipe. If you obstruct the top of the pipe, then the vacuum effect will act on both the top and the bottom of the pipe, pulling at both ends trying to satisfy his hunger for air. Snoring creates a vibrating pulling effect – in an on-off-on-off-on-off rapid fire fashion. The sphincter muscle is no match for night after night of pulling, and it eventually begins to prolapse. Small gaps form in the seal that normally keeps the contents of the stomach in the stomach. As a result, the highly acidic contents start to escape into the esophagus, leading to GERD.

It may also be that the onset of insulin resistance causes the GERD to worsen because insulin resistance is known to increase visceral body fat production. This type of fat may play a role in putting pressure on and changing the shape of the plumbing leading into the stomach, thus exacerbating the GERD condition.

Often those who suffer with both moderate snoring and GERD will say that they had a bad night sleep because their snoring kept waking them up and they suffered from a bad GERD episode

that evening as well. These two seem to appear side by side more often than not when they occur in the middle of the night.

Starving the body of even small amounts of oxygen can cause blood-oxygen levels to drop enough to change the way the brain functions. I strongly believe that these changes are going to someday be linked to the development of neurological diseases such as Alzheimer's, Multiple Sclerosis, and Parkinson's.

From a functioning-neurologic standpoint, I also strongly believe that these small drops in blood-oxygen levels can trigger events that rewire both the brain and the heart. I feel that anxiety, depression, and arrhythmias like atrial fibrillation can all precipitate as a result of the neural-response imprinting created by these events that the body perceives as a threat. Night after night, these small drops in blood-oxygen levels in concert with the sensation of airflow being restricted put the body into a state of fear. Over time, this state of heightened alert and stress becomes the norm for the nervous system and these changes become hardwired.

My hope is that people start to pay attention to their sleep and snoring. Set up a digital recorder and tape yourself sleeping one night. Listen to your own snoring. Even if you don't find periods of time where you stop breathing completely, if you were snoring very loud, and please be objective about this, you need to find ways to correct this. Something as simple as changing the position of sleep, elevating the upper body a few degrees or learning to sleep on your side, can change this outcome completely. Additionally, look into any gut issues that you may have as a potential culprit for the snoring.

We know of particularly inflammatory foods for the gut. Grains, for instance, should be avoided if you snore. We also know that dysregulation of the gut microbiota goes hand-in-hand with intestinal inflammation. If we understand that these things have a pro-inflammatory effect on the gut and intestines, why is it so hard to believe that they could also have pro-inflammatory effects on the plumbing up north as well? Early signs of inflammation traveling up the esophagus can be as subtle as a slight change in voice. Your voice may become a little more hoarse or deeper than normal. The soft tissue of the palate and the roof of the mouth will also become inflamed and sag more, causing you to snore. If you are noticing these changes you need to heed them as red flags that structural changes are occurring to your vocal chords, esophagus, and soft tissue in the roof of the mouth. Addressing your gut issues can rid you of your snoring.

IV. SuppVersity Science Round-up:

Fat Loss Adjuncts for Your 2015 Beach Body Challenge

Back when I still had the time to do a (bi-)weekly *SuppVersity Science Round-Up*, it was one of the most popular series on SHR; one that evolved from a simple assortment of recent news to an in-depth discussion of the latest studies on one or two different topics.

For the "SHR Takes Over CasePerformance" newsletter I have thus decided to continue on this path of specialization and avoid discussing the *latest* "fat-burner" studies. Instead, I will anticipate the "last minute beach-body diet" articles and give you a brief rundown on the currently available fat loss adjuvants (I prefer this expression over "fat-burner"). The first thing you have to know is that there are three classes of fat loss adjuvants out there:

- (1) Stimulants and beta-/alpha adrenoceptor modulators
- (2) Thyroid mimetics and purportedly fat burning fatty acids
- (3) Appetite suppressants and insulin sensitizers

None of the currently available agents from any of these categories is a "fat-burner" that would actively "burn" significant amounts of fats and few of them are actually useful.

What is useful is highly individual

Let's go take a look at the two blueprints of the average person who buys a "fat burner" to explain what factors may determine which agents work and don't work for you.

- **The typical obese person** who is more than 20% overfat, inflamed, and insulin resistant benefits most from the agents that fall into category (3) because they will facilitate his or her weight loss efforts by helping him or her to adhere to a diet and break out of the vicious cycle of chronically elevated insulin levels that block the oxidation of fatty acids and promote the storage of every extra-kcal of energy in form of body fat. Even 5-HTP – one of the few "appetite suppressants" with scientific backup (specifically in women | Ceci. 1989) – may help.

High dose stimulants on the other hand, will only increase the already exuberant amounts of triglycerides in his or her blood and their pro-hypertensive effects may pose a considerable health risk for them (Robertson. 1978; Cangiano. 1992).

- **The athletic gym-rat** who is decently lean but wants to shed the last slabs of body fat benefits most from agents in category (1) because these agents can enhance his ability to work out intensely while increasing the LPL and consequent elevation of lipid release from the adipose tissue while having glycogen sparing effects.

Appetite suppressants from category (3) may help in view of the appetite reducing effects of stimulants like caffeine (Tremblay. 1988; Racotta. 1994 | the effect is more pronounced in men vs. women, though).

The question that's now preying on your mind is probably "Who benefits from category (2)?" This is a much warranted question that's somewhat tricky to answer because the efficacy of many agents that falls into this category is quite questionable.

- As for *conjugated linoleic acid (CLA)*, a recent study by Li et al. (2015) appears to suggest that the ambiguous, in parts disappointing results from previous studies may be a consequence of the lack of effect this agent has on people who are following an obesogenic diet. If we translate the results of Li's rodent study to human beings, CLA would appear to be more of a "lean low-fat bulk" agent than a fat loss adjuvant.
- With the exception of *T2*, the evidence of the efficacy of thyroid mimetics is quasi non-existent; and for the latter, more recent studies suggest that it may have the same thyroid-suppressive effects as regular thyroid hormones when taken in amounts that are sufficient to trigger meaningful weight loss (Jonas. 2014; Padron. 2014).
- The often-hailed *fish oil* has proven to be useless as a stand-alone weight loss agent (Harden. 2013). And the fat burning thia-fatty acid TTA has no long-term safety data and is as of now only available in Europe.

Eventually, those of you who are looking for a little help on their "beach body 2015" mission will thus have to resort to the functional backbone of today's legally available fat burners and use caffeine and related substances (theobromine, caffeinated green tea extracts, etc.) as well as yohimbine to increase the release of fatty acids from their stores if you're leaner, and EGCG, alpha lipoic acid, berberine, ginger and other anti-inflammatory and insulin sensitizing substances to level the playing field and restore your ability to lose body fat, if you're fatter.



Stims & Co

- Caffeine (on empty) - stay below 600mg per day total and 300mg per serving
- Yohimibine 10mg on empty



Thryoid & FAs

- T2 - 3,5 diiodothyronin (optimal dose unknown)
- TTA approx. 500-1,500mg / day, watch out for cramping



Appetite & Inuslin

- ALA (250mg 20 min before every meal)
- EGCG up to 1,000mg/day
- 5-HTP (300mg 30 min on empty before meals)

Figure 1: Selected agents that may be worth trying from all three categories mentioned in this article.

One thing you will have to keep in mind, though, is that none of the aforementioned agents will induce meaningful fat loss if you are not in a reasonable caloric deficit (20-40%) and work out regularly. In that, it is particularly important to (a) get enough protein in your diet (1.6g-2.0/kg) and (b) hit the weights to reduce the risk of losing lean mass and increase the chance of losing fat mass.

References:

Cangiano, Carlo, et al. "Eating behavior and adherence to dietary prescriptions in obese adult subjects treated with 5-hydroxytryptophan." *The American journal of clinical nutrition* 56.5 (1992): 863-867.

Ceci, F., et al. "The effects of oral 5-hydroxytryptophan administration on feeding behavior in obese adult female subjects." *Journal of neural transmission* 76.2 (1989): 109-117.

Harden CJ, et al. Preliminary meta-analysis of the effect of fish oil on body weight and body mass index in overweight and obese subjects does not support a link. *Proceedings of the Nutrition Society*(2013), 72 (OCE4), E283

Jonas, Wenke, et al. "3, 5-Diiodo-L-thyronine (3, 5-T₂) exerts thyromimetic effects on hypothalamus-pituitary-thyroid axis, body composition, and energy metabolism in male dietinduced obese mice." *Endocrinology* (2014).

Padron AS, Neto RAL, Pantaleão TU, de Souza Dos Santos MC, Araujo RL, de Andrade BM, da Silva Leandro M, de Castro JPSW, Ferreira ACF, de Carvalho DP. Administration of 3,5-diiodothyronine (3,5-T₂) causes central hypothyroidism and stimulates thyroid sensitive tissues. *J Endocrinol.* 221.3 (2014):415–27

Racotta, Ilie S., Jacques LeBlanc, and Denis Richard. "The effect of caffeine on food intake in rats: involvement of corticotropin-releasing factor and the sympatho-adrenal system." *Pharmacology Biochemistry and Behavior* 48.4 (1994): 887-892.

Robertson, David, et al. "Effects of caffeine on plasma renin activity, catecholamines and blood pressure." *New England Journal of Medicine* 298.4 (1978): 181-186.

Tremblay, Angelo, et al. "Caffeine reduces spontaneous energy intake in men but not in women." *Nutrition Research* 8.5 (1988): 553-558.

V. Meets/Events/Clinics

Strength Sport Events

I have not been notified of any strength sport competitions.

Endurance Sport Events

Mississippi Valley Running Association Heritage Trail Run

What: A 5k/10k run

Where: Dubuque, IA, USA

When: May 9th

For more information [CLICK HERE](#)

For a general listing of running events going on in your area, [CLICK HERE](#)!

*** Please know that CasePerformance does **NOT** receive any financial or other incentives if you choose to participate in any of the above events.***

Clinics

Building Better Athletes Elite Performance Clinic

What: A one day clinic covering all ends of training for sport and performance featuring...

Where: Dubuque, IA, USA

When: May 2nd

For more information [CLICK HERE](#)

Presentation Line-Up...

Science of Speed - Michael Zweifel CSCS (Owner and Head of Sports Performance at Building Better Athletes)

Thorough discussion on the mechanics of speed development. Learn what takes place during acceleration and sprinting, muscle activities, and how to coach the different phases of sprinting.

Practical Sports Nutrition for the Fitness Professional - Sean Casey CSCS, RD, CISSN (Head of Sports Nutrition at Building Better Athletes)

Focus on a practical approach to help individuals optimize the training experience via nutrition intervention. Topics covered include determining energy needs, fitting the food with the lifestyle, supplementation & special issues that fitness professionals need to be aware of while working with athletes

The Experimentation and Use of Velocity Based Training: Ideas and Concepts - Mike Mandot MS, CSCS (Head of Strength and Conditioning at University of Dubuque)

There are many applications for using velocity based training feedback, a major one being maximizing power output via tracking movement velocity. Coach Mandot will discuss his experience with using velocity based training (Using a Tendo Unit) and how he implements it with his athletes and how he purposes it to be effective.

The Common Link in Athletes 8 to 80 - Dan Johnson (Owner of Spine and Sport Chiropractic)

Dr. Dan Johnson works on the Sports Medicine side getting athletes back to the playing field. In this presentation, Dan will take a look at how thoracic spine motion/mobility and sitting affect athletes of all ages.

How CrossFit and Strength and Conditioning Can Blend - Phil Gothard (Owner of CrossFit Dubuque)

The Strength and Conditioning world and CrossFit world often clash on different topics, but Coach Gothard will discuss how the two can blend and benefit from each other. You don't have to take a single side of this discussion, instead know the two are different and how each can learn from the other.

**Scientific Principles Associated with Developing Peak Power in the Athlete - Jed Smith MS,
CSCS (Head of Strength and Conditioning at University of Northern Iowa)**

Coach Smith is known for his ability to develop power in athletes, after all the ability to express power is a key quality in high level athletes. His talk will delve into the scientific principles of developing peak power and how to apply these principles to your training.

For more information [CLICK HERE](#)

That wraps up Part I of this Super Human Takeover newsletter. Hope you enjoyed it. Stay tuned for Part II of the Newsletter where we share news of note at the CasePerformance & partner websites before touching on the CP Performance Discussion, *"Avocados & Eggs – It Was Love at First Site"*

Until then... Train smart, train hard and leave the excuses to someone else!

Respectfully,

[The CasePerformance Team](#)