

CasePerformance

October Newsletter

Part II



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Here is the news that we'll cover in Part II of this month's newsletter....

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Hello,

Glad to see that you're tuning into Part II of this month's newsletter! I hope you enjoyed [Part I](#) which featured an interview with yoga instructor and fitness enthusiast K Ashby Meisel, who shared with us how she got involved yoga and training. In addition, in the CP Community Member Discussion, Alex Leaf shared with us some interesting insight on what may be limiting gains in your training performance in his piece, *Don't Overlook "The Rest" of Your Training*.

In Part II of our newsletter, we take a quick peek at the news of note here at CasePerformance; including our sponsored "Top 5 + 1" Contest where a \$50 Amazon Gift Card will be given away to one CP community member! We'll then move on to the SuppVersity Corner, before closing with our CasePerformance Performance Discussion, *3x10 – A Historical Look at Dr. Thomas DeLorme's Famous Training Workout*.

Respectfully,

Sean Casey

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II. Donations for CasePerformance Are Welcomed

As you've probably noticed while surfing around the CasePerformance website, we do not litter our pages with advertisements or have "Members Only" sections that require a paid subscription.

Why do we do this?

My goal is to reach as many individuals as possible. If an individual truly wishes to improve their health and performance, I want them to succeed. This holds true regardless if they are a multi-millionaire or those pinching pennies.

A Potential Downside & What You Can Do To Help

The cost of running a website in conjunction with paying for full access to the various sport science and nutrition research journals I use is extremely expensive. Also, all of the authors at CasePerformance put considerable time into writing the articles for this site. If you enjoy the free information provided on this site, we humbly ask you to show your support by making a small donation. Thanks for your support!

[CLICK HERE](#) to make a donation. Please know that **ANY AMOUNT** is greatly appreciated!

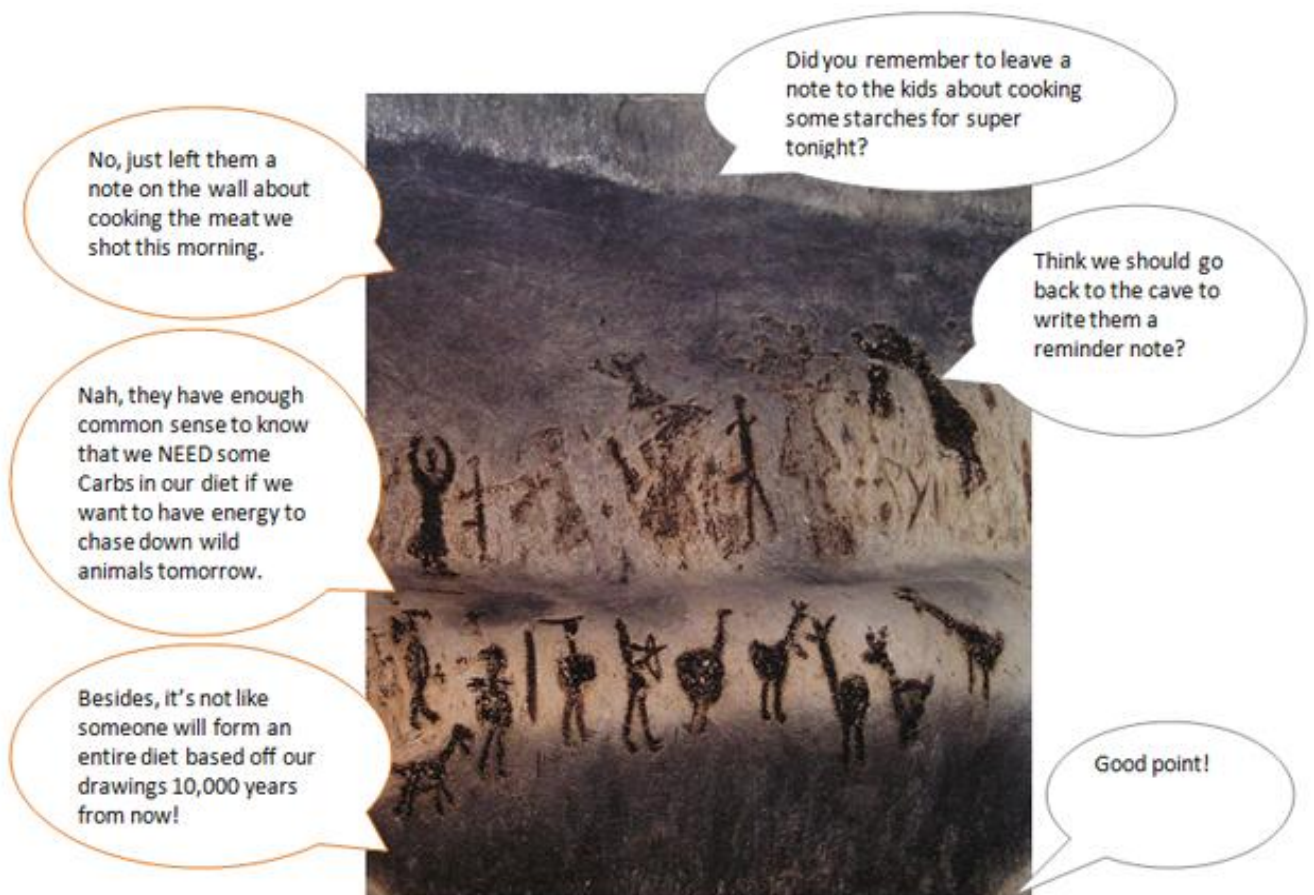
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III. Article News at CasePerformance

One new article has been added to the CasePerformance library since the last newsletter was sent out:



1) [Don't Demonize but Analyze to Find the Perfect Diet for You!](#) by Sean Casey

Popular diets are always coming and going. What doesn't change though is the fact that everyone will have their own unique response to a given diet. This article describes the approach I take with diets, using the Paleo diet as an example

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Top Read Article in October here at CasePerformance...



[High Intensity Interval Training for Fat Loss](#) by Sean Casey

This month the top read *HIIT for Fat Loss* which originally appeared on CasePerformance backing July, 2010. Here is a quick summary of the article...

People have long been told that if they want to lose weight, they must incorporate at least 30 minutes of aerobic exercise into their daily routine. However, there appears to be a more time efficient style of training for individuals looking to lose those love handles. Recent research indicates that high intensity interval training (HIIT), which involves 4-10 repeats of running, swimming, cycling, etc. at maximum intensity for 30 seconds followed by a four minute rest interval, is just as effective as 30-60 minutes of jogging for fat loss. There is one caveat worth mentioning; For HIIT to be effective means of fat loss, one must train at MAXIMUM intensity.

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CasePerformance now has a RSS feed!



The "tech" people in the CasePerformance Community will probably laugh a bit on this one, but it wasn't until very recently that I was introduced to the concept of RSS feeds. It blew my mind away. The ability to get information "fresh off the press" is quite nice. I instantly thought "Adding an RSS feed to CasePerformance would be an excellent way to help people stay connected with us, especially if they don't use [Facebook](#) (which is how I circulate most of my posts)."

Lo and behold, it turns out that CasePerformance always had an RSS feed – I just didn't know it! For those who use RSS, I've just made it a bit easier to find our feed. On our main banner, you'll now see a new icon to the left of the Facebook one. Clicking on that will bring you to this URL - <http://www.caseperformance.com/rss>. Copy and paste that URL into your RSS feed reader of choice (I use feedly, but I'm sure many options are out there) and you'll receive instantaneous updates whenever a new article or newsletter is posted on the website.

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IV. CP Community Member Appreciation "Top 5+1" Contest- \$50 Amazon Gift Card Prize

Everyone who follows CasePerformance knows that we appreciate our community members. Now we are literally putting our money where our mouths are by giving a \$50 Amazon Gift Card to the individual who wins our sponsored "Top 5+1" Contest.

What am I supposed to do?

You will compile a list of your top 5 favorite CP [posts](#) + single favorite [newsletter](#), including a brief description that explains why these selections make your "Top 5 + 1" list.

How do I enter?

All you need to do to enter the contest is to submit your entry on the CP Facebook page by December 10th. If you do not have/use facebook, they can be submitted via [email](#) to CP and we'll post it on our Facebook page for you.

Who will select the winners?

On December 15th, CasePerformance will select the 5 entries which we feel have the best combination of insight, impact and wit (yes we like to laugh!). The contributions of the five finalists will be re-posted in poll format on the CP Facebook page on Dec 15th. The individual who receives the most votes for his or her entry by December 25th will win the \$50 Amazon gift card. All finalists will receive a free nutrition consult with me as well.

Who is eligible?

Every Facebook Friend and/or Newsletter Subscriber; in other words, the whole CP Community can participate in the "Top 5 +1" contest.*

* Only one submission per member

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Exclusion Criterion

If you rank Kanye West, Justin Beiber or Miley Cyrus among the top musicians of the past 50 years.

Other Notes

The amount of the Amazon gift card will be the equivalent of \$50 US dollars. It will be converted to the currency of choice (Euros, Rupee, etc.) based off exchange rates on Dec 25th, 2013.

The Amazon gift card will not be purchased till after a winner is announced; it will be done through the Amazon website specific to the winner's respective country to ensure he or she can access it.

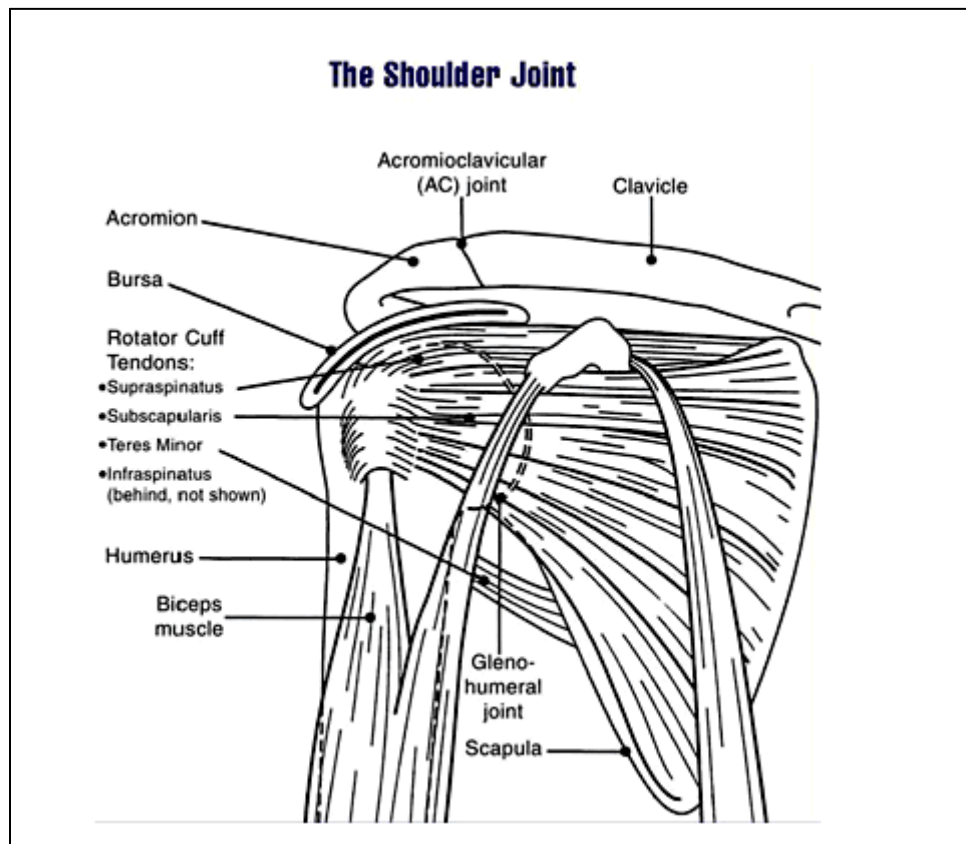
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V. Contributions to CP Partner Website

I contribute to a couple of different websites from time to time. During the past month I wrote the following post for one our partner websites, [Nucleo](#), which is a great site for those looking for "quick hit" type of articles:



[Shoulder Health Part I – Rotator Cuff](#)

This is Part I of a four part series that will examine various factors contributing to shoulder pain and how to remedy/prevent them!

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V. SuppVersity Corner Report!



[SuppVersity](#) is one of my favorite sites. It's run by my friend by my friend [Adel Moussa](#). One of the things we do on the CasePerformance [FACEBOOK](#) page is highlight one of their excellent posts each week. In case you missed it...

Week of Oct 6th

[Maintain & Increase Your Insulin Sensitivity - Wrap-Up: Overview + 3 Stacks. Plus: AMPK & PPAR- \$\gamma\$ Revisited](#)

CP Quick Thoughts

This article was the culmination of Adel's seven part series on maintaining and improving insulin sensitivity. This article provided some nice supplement "stacks" to help you achieve this goal.

As an added bonus, Adel provides a nice little review of AMPK and PPAR-gamma.

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Week of Oct 13th

[Conjugated Linoleic Acids: What's the Difference Between cis-9,11 and trans-10,12 CLA and Should We Label Them as "Transfats"? Plus: What Makes CLA Potentially Harmful?](#)

CP Quick Thoughts

This week's post of the week tackled CLA. Although I never benefited from it, CLA will always hold a special place in my heart as it was the first purported 'fat burner' that I ever tried with the hopes of "getting cut". For reference, my experimentation with CLA dates back to the summer of 2002... a time when I was 18 and PubMed was yet to be introduced into my world.

CLA also holds a special place in my heart as it was discovered at my alma mater, University of Wisconsin-Madison by Michael Pariza and eventually coined CLA by his group in 1987. Somewhat surprisingly, very little research on CLA trickled down into my formal curriculum studies despite the extensive research that was taking place on it at UW-Madison. Thus my knowledge/understanding of CLA (at the time) was the result of independent study and a few kind professors and researchers who didn't kick me out of their offices!

Week of Oct 20th

[DOMS - Delayed Onset Muscle Soreness: No Pain, No Gain? Is DOMS Necessary to Build Muscle?](#)

CP Quick Thoughts

This week's SV Post was contributed by Alex Leaf, whose name you should recognize from the excellent [contributions](#) he's made to CasePerformance. However, my reasoning for choosing this post had nothing to do with him, but rather the topic at hand, "Is DOMS necessary to build muscle?"

As indicated in the title of the article, DOMS stands for delayed onset muscle soreness. In other words, it's the ache one may feel in their muscles following a training session. For many people, the presence of DOMS is a "sure sign" that they had a good workout.

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Thus, they train to the point of exhaustion just to ensure that they experience DOMS. In this article, Alex does a nice job fleshing out the science behind this belief and answering the question "Is DOMS really necessary for muscle hypertrophy?"

When I'm asked about DOMS as it relates to training, I always tell people that purposely inducing it is never on my training agenda. Rather the main purpose of the training session should be to increase mobility, speed, strength, endurance, hypertrophy, etc. DOMS may result from time to time as a byproduct of these training workouts. However, DOMS itself should never be the "end goal" of the training session

Furthermore, using absolutely no data to back up this statement I'm about to share (GASP!) I would hypothesize that those who train to achieve DOMS following every workout are more likely to overtrain, burn-out and/or get hurt simply because they're never allowing their body a chance to recover.

So in short – Train to get better; NOT to get sore!

Week of Oct 27th

["Breakfast Keeps You Lean" Myth or Mystically True: Hard To Tell With All the Bias, Highly Improper Language Use, Misleading Citations and Unwarranted Causal Implications](#)

CP Quick Thoughts

Before diving into my thoughts on this post, I share this portion of the article:

"Brown et al found that of the 46 English language articles that cited Schlundt et al in the context of the proposed effect of breakfast on obesity (PEBO) *only 17% of articles cited the results accurately. 29 of them "abused" the results in favor of the "breakfast helps weight loss"-hypothesis and a single article used Schlund et al.'s results to argue against its benefits, which is obviously just as unwarranted.*"

Adel's note on abusing/misinterpreting study results is actually the #1 reason as to why I chose this as the SV post of the week. It's unfortunate how often I see this while going through the literature ... underlying the importance of following up on references!

With respect to the question, "Does breakfast keep you lean?" my thoughts on it are ...

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Meals are simply meals... It's the food that comprises those meals and the activities one performs between those meals that that keeps you lean! If you properly manage those two variables, in my best Shakespearean voice, the discussion of *"To be or not to be a breakfast eater"* is minutia in the big picture of health and performance, best saved for paranoid physique athletes and PhD candidates looking for thesis topics!

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VI. CP Performance Discussion

Fresh off last month's [history lesson](#) on the most effective non-steroidal anaerobic supplement on the market, creatine, I thought it was appropriate to pay similar homage to the most widely used training program of all time – 3x10 (three sets of 10 reps). I'm confident in saying that at some point every trainee has used this set rep scheme while in the weight room. This includes endurance athletes, powerlifters, bodybuilders, weekend warriors, those simply wanting to look "fit" and of course, those looking to rehab an injury. Thus, without further ado I share...

3x10 – A Historical Look at Dr. Thomas DeLorme's Famous Training Workout

The Man Behind the Method

“I was determined to prove the medicos wrong...and immediately upon leaving my sick bed I started a comeback campaign.”²

- Dr. Thomas Lanier DeLorme

To understand and appreciate the origins of the 3x10 workout, it's important that we first understand the history of the man behind the training protocol, Dr. Thomas Lanier DeLorme. Born in 1917, Thomas DeLorme acquired rheumatic fever as a teenager and per medical instruction, was confined to bed rest for a period of 4 months.¹ Although his physical body weakened considerably during this time period, Thomas DeLorme exercised his mind by reading about medicine as well as fitness, specifically focusing his attention on the stories found in *Strength & Health* magazine to serve the latter area of interest. It was on these pages that Dr. DeLorme found the motivation to defy the doctors' orders, and, following 4 months of bed rest, took up resistance training to help him regain his strength.

Through intense training, by the late 1930's, Thomas DeLorme had created a pretty imposing figure for his era, standing 6 ft tall and weighing 185 lbs.¹ However, he was no "look like Tarzan, hit like Jane"; competing in sanctioned weightlifting competitions, Thomas DeLorme recorded PR's of 250 lb clean and jerk and 240 lb bent press. Other physical feats included a 160 lb curl and 503 lb deadlift.

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A Man With a Radical Rehabilitation Method

"Rather than attempt to develop endurance in an atrophied, weakened muscle, it seems more logical to restore muscle strength to normal, and then to build endurance"⁴

"In order to obtain rapid hypertrophy in weakened, atrophied muscle, the muscle should be subjected to strenuous exercise and, at regular intervals, to the point of maximum exertion."⁴

- Dr. Thomas Lanier DeLorme

The 1930's marked not only the training of the body, but also the training of the mind as, starting in 1939, Thomas DeLorme began attending medical school. Following graduation from New York University's College of Medicine in 1943, Dr. DeLorme, now also a lieutenant in the Army's Medical Corp, began work in the orthopedic section of the Gardiner General Army Hospital (Chicago, USA).¹ At the time, orthopedic rehabilitation techniques involved mostly rest. Although physical therapy techniques were used to a degree, they were not aimed at increasing strength or hypertrophy; rather the focus was simply on increasing blood flow via high repetition protocols using bodyweight only or light external weights. For instance, popular recommendations stated that "...in all treatment, care should be taken not to overtire the weakened muscles" which was accomplished via stopping the exercise immediately upon "any sign of muscular tire."³ However, based off his own personal experience, Dr. DeLorme felt that better approaches were out there for the rehabilitation of physical injuries.

These methods, simply referred to as "heavy resistance exercise", were quickly put to the test after getting appointed to the Gardiner General Army Hospital.¹ Dr. DeLorme's first "guinea pig" was Sgt. Thaddeus Kawalek who had suffered a knee injury that required surgery. Having a background in resistance training dating back to his college athletic days, Sgt. Kawalek was open to the idea of incorporating it into his rehab program. Following Dr. DeLorme's program, it's noted that Sgt. Kawalek recovered much faster than expected vs. those who had similar injuries and followed traditional rehab programs.

The second individual to seek out Dr. DeLorme's innovative rehabilitation techniques was Sgt. Walter Easley who ruptured the ACL and MCL ligaments in his knee upon landing from a parachute jump.¹ After six months of following traditional physical therapy programs, which yielded little improvement, Sgt. Easley sought the advice of Dr. DeLorme to see if his radical rehabilitation techniques would return his knee to normal function. Within a month of implementing Dr. DeLorme's protocol, which involved a max

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intensity set-rep scheme of 7x10 on various exercises, swelling and discomfort in Sgt Easley's knee subsided, allowing him to return to normal every day activities pain free.

As time went on, more and more individuals who had failed contemporary rehab techniques of the time, and informed that they had "no hope" of ever recovering function, turned to Dr. DeLorme.¹ Based off the results of his success, in 1945 the Gardiner Hospital expanded the size of their rehabilitation room, with half of the area being dedicated to Dr. DeLorme's resistance training equipment. In 1946 he published a paper in the *Archives of Physical Medicine* describing how his use of resistance training had benefited greater than 300 patients up to that point. In addition to those with orthopedic issues, Dr. DeLorme also began to successfully employ his techniques in those with polio.⁵

The Program is Born

*Fewer repetitions permit exercise with heavier muscle loads, thereby yielding greater and more rapid muscle hypertrophy*⁶

- Dr. Thomas Lanier DeLorme

Over time, Dr. DeLorme's training program was refined. In a 1948 paper entitled *Technics of Progressive Resistance Exercise*, he introduced a significant change in his methods that would reverberate for years to come; rather than employ a 7x10 set-rep scheme, he began recommending the now famous 3x10 routine.⁶ Accordingly to Dr. DeLorme's recommendation the following intensities for assigned to each set:

* Set 1: 50% 10 rep max (RM)

* Set 2: 75% 10 RM

* Set 3: 100% 10 RM

Dr. DeLorme advocated this approach as he felt the first couple sets should serve as warm-ups for the final max effort set of 10 reps.¹ Once the individual was able to lift greater than 10 reps on the final set, the weights were progressively increased. It's believed that Dr. DeLorme's paper, *Technics of Progressive Resistance Exercise*, was one of the first (if not the first), publication to provide exact intensity recommendations.⁶

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Lasting Impact

Although Dr. LeLorme's 3x10 set-rep scheme was originally intended for physical rehabilitation purposes, its use quickly gained popularity in general fitness and sport circles. While one may not follow his exact intensity prescriptions (i.e. - %RM for each set), almost everyone, be it sport athlete, general fitness enthusiast or physical therapy patient, has at one point in time integrated "3x10" as part of their training routine. For this reason, Dr. Thomas Lanier DeLorme is not only a pioneer in the field of physical therapy but also, training for fitness and performance.

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That wraps up this CasePerformance newsletter. Thanks for being a part of the team. We look forward to hearing your feedback on anything and everything so drop us a note on [FACEBOOK](#).

And as always... Train smart, train hard and leave the excuses to someone else!

Sincerely,

[The CasePerformance Team](#)