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CANCER UP CLOSE

The Cancer Circus Begins

The immediate whirlwind that follows a cancer diagnosis

MICHELE GONCALVES

Just imagine being hit by a bus, then being asked to get up, shake it off, and run a marathon right afterward. Sounds unthinkable, right? Well, that is exactly how I felt about meeting the colorectal surgeon whom my gastroenterologist pulled strings for me to see a mere 17 hours after I was diagnosed with rectal cancer.

I tossed and turned all night and cried alone in my empty house. My mind was in shock and disbelief with the news I had just received. I remember falling asleep for short 20–30 minute bursts and then waking up dazed and confused until I remembered what was happening.

Everything felt like it was out of control and moving way too fast. The thought of having to get myself ready and go to a doctor's appointment in the morning felt like a monumental physical, emotional, and mental challenge, almost as big as climbing Mount Everest.

"I could just say that I've had a change of plans, or I could reschedule for a later time, or I could just not show up," I thought to myself. While lying in bed, I had calculated that I would need to wake up at 6:30 a.m. to arrive at the hospital by 8:00 a.m. (I was asked to arrive early to fill out paperwork). So when the clock struck 6:30, I surprisingly decided to get up and go. I figured it would be beneficial to talk to an expert and learn more about what I was facing. I would just use this time to gather information, and hopefully, nobody would be taking any knives or IVs out just yet.

I was beyond exhausted from not sleeping a wink and crying, but I managed to drive myself to the hospital on time. Of course, I was sobbing the entire 40-minute drive. It was Dec. 15, 2017, and absolutely freezing in the New Jersey suburbs where

the hospital was located. The dark and frigid atmosphere matched exactly how I felt inside. Cold, dark, and bleak. I wandered through sterile hospital hallways and finally found the office. I walked in, and with tears in my eyes, told them my name and that I was here to see Dr. X. I felt like I was in the twilight zone and couldn't exactly process the words coming out of my mouth.

The main question I had for him and wanted answered as soon as possible was if he could tell what stage I was in.

Of course, I had to fill out the usual paperwork. My hands were shaking and I couldn't see very well because I was crying. I thought to myself, "Who can concentrate on filling out their entire medical history and listing all of the medications they are on at a time like this?" I did the best I could and sat back down. I was called and taken into an exam room a few moments later.

A nurse came in to take my temperature and vitals (something you will get very used to if you have a serious illness), and then the surgeon stepped in. "Hi, my name is Dr. X, how are you doing today?" he said in a chipper voice. With my sarcastic self still alive and kicking somewhere deep down inside, I replied, "Um, I've been better, thanks." He listened to my heart rate and commented that I was obviously very stressed out. "Um, yeah, hellooooo," was my annoyed reply. "Could this guy be for real?" I thought. I was just diagnosed 17 hours ago! We discussed how this all started, the conclusion from the colonoscopy I had the day before, and then he asked me to

▲ Sleeping the night after a cancer diagnosis can be a futile effort if your mind churns with the news.

get undressed from the waist down for a rectal exam. I was not prepared for that, but hey, what the heck. This is another thing that a rectal cancer patient needs to get very used to.

He examined me manually with his finger first (ouch), and then with a scope (double ouch). He was trying to find the location of the tumor and how much space I had left for him to connect the colon back together again. You see, if the tumor is very low in the rectum, you may be faced with a permanent colostomy. If it is high enough, and they have enough room to reconnect everything after removing the tumor, you will likely only need a temporary ileostomy while your rectum heals after surgery.

He even asked me to look up and see the tumor on the big monitor in front of us. That was my first glimpse of the beast. There it was, the thing that could potentially kill me.

After the exam, he called me into his office to discuss what he saw and his thoughts of next steps. Being an auditor by profession, I immediately informed him that I'd be taking notes during our talk and I'd appreciate if he could draw or write out what he was explaining to me so I could have a record of it. He did.

The main question I had for him and wanted answered as soon as possible was if he could tell what stage I was in.

He was actually very helpful and carefully explained to me (with drawings, too) how the staging of rectal cancer works. It is made up of two factors: overall cancer presence in the body outside of the tumor location, and cancer presence

locally within the rectum/lymph nodes.

Through some heavenly miracle, I was able to keep focused on our discussion and I comprehended what he was saying.

However, the news I received was not great. He said he'd put me between stage 3 and 4 with the information he had right now. This was so much worse than I thought. But on a positive note, he thought my tumor was high up enough that I may not need a permanent colostomy.

He then explained that the protocol to treat this was: chemotherapy and radiation, a break, more chemotherapy, then surgery many weeks later. Well, it turns out this is only one protocol to treat rectal cancer, which I didn't take, so more on that in a future article.

He also boasted about some recent patients who didn't need any surgery because the chemotherapy and radiation had apparently made the tumor disappear. While interesting, this didn't make me feel any better.

You see, I am generally not a fan of conventional medicine, and I very much embrace holistic approaches to health. With all this chemo talk going on, my alpha female personality kicked in, and I quickly informed him that I didn't want chemotherapy, and that I was hesitant to go this route.

As if we were playing tennis, his alpha male side kicked in. He didn't let me finish my thoughts and suggested I meet with his oncology partner at the hospital. He just raved about how wonderful Dr. S was and that she could put me at ease. Since I was completely exhausted and didn't want to fight, I gave in and agreed to talk to the oncologist. He said he would

The thought of having to get myself ready and go to a doctor's appointment in the morning felt like a monumental challenge, almost as big as climbing Mount Everest.

contact her for an appointment as soon as possible.

He then wrote a prescription for me to get a rectal MRI with and without contrast as soon as possible. This would help him see in better detail how much the tumor had infiltrated the surrounding area and lymph nodes, and would give him a more accurate estimate of what stage I was in. He also wrote another prescription for a CT scan with contrast and mentioned something about insurance. I didn't fully hear or care what he was saying at this point, and I took the prescriptions and put them in my purse.

My mind was only thinking about the fact that I had stage 3 or 4 cancer at this point. I was starting to fall apart inside.

As I was walking out of the door, I started to cry. It was all getting to be too much for me. He put his hand on my shoulder and said, "Hang in there." I thought to myself, "Easy for you to say."

As I write this article and reflect back on that day, I am extremely proud of myself for keeping the appointment and keeping my wits about me during this whole meeting so soon after diagnosis. It was actually very brave, although it didn't feel that way at the time.

Was it difficult? Yes. Would I do it again? Yes, but I think I would have waited a day or two to have this visit. I felt this was all too rushed and I was too overwhelmed.

While getting the ball rolling quickly with doctors is very important with a fast-growing cancer in your body, the truth is, you are not going to die in a few days.

Part of what makes a cancer diagnosis such a crazy rollercoaster ride is the speed at which these doctors want you to act. They almost seem to use fear and prey upon your vulnerability to make you feel that unless you act within the next 48 hours, you will be dead.

Of course, this is usually not the case. My advice is to give yourself a day or two (or three) to breathe, research, regroup and think about what you want out of your treatment and what kind of medical team and care is most important to you. In the coming articles, I will share what was most important for me.

Come back for my next installment next week when I describe what my first week after diagnosis was like, and how I shared the news with my family and friends.

Until then...breathe deep, be kind, and take it one day at a time.

Michele Gonçalves is a financial compliance and fraud auditor for a Fortune 500 company by day and a passionate pursuer of holistic and functional medicine knowledge by night. She is also the author of the column, "The Consummate Traveler."

ELEVATE AND INSPIRE

A Vietnam War Veteran Heals Through His Gardens

ANDREW THOMAS

The Battle of Hamburger Hill was one of the bloodiest battles of the Vietnam War. One man began his deployment by performing a reconnaissance mission on the hill, and the experience left him with PTSD. Over the last 40 years, he's been healing through his gardens.

Chuck Newhall III is 74 years old, and resides in Maryland. When he was 21, he was deployed to Vietnam from 1968 to 1969. Newhall had been a basic training officer and had volunteered to go to Vietnam five times. Eventually, he received his orders to go.

After just one week in the country, he was on a reconnaissance mission on Hamburger Hill.

“Four seconds later, 40 percent of them were either dead or seriously wounded.”

Chuck Newhall III

Chuck Newhall III is a Vietnam War veteran who has coped with PTSD by planting flowers in his gardens.

Incoming

After their helicopter landed, the company commander ordered Newhall to cross an open field. He heard incoming artillery and told his men to hit the ground.

"Four seconds later, 40 percent of them were either dead or seriously wounded," Newhall told The Epoch Times.

The man in front of Newhall had been cut in half. His legs were still standing, and his torso was missing.

That night, Newhall and his unit went to the base of Hamburger Hill and sustained another barrage of artillery.

For the next four days, he and the platoon worked their way up to the summit against machine-gun fire and incoming artillery.

Once the platoon reached the top of the hill, they were ambushed. Newhall helped the wounded off of the hill and earned the Silver Star for his efforts.

"That was the beginning of my tour in Vietnam," Newhall said.

Coping With PTSD

Newhall returned to the United States in August 1969 and faced repeated insult. In one instance, a bartender spit in his face. While he was attending graduate school, he was often called a baby burner.

However, the trauma he experienced in Vietnam would prove to be an even greater struggle.

Newhall began experiencing symptoms of PTSD after his first wife committed suicide. He started wearing Army fatigues and would perform live-fire exercises with his eldest son.

Often, he would wake up multiple times a night to check his house in case of an ambush. Whenever a car backfired, he'd jump into the air.

"I knew I was in a bad place," Newhall said. Newhall sought counseling, and after his first session, he was told that he had PTSD. He continued to see a psychiatrist, and was told that PTSD was a disease, not his identity.

Healing and Flowers

Newhall developed a coping mechanism, which was gardening. He took all of the tragedies of his life and channeled them through flowers. He built his first garden in 1983, which was dedicated to his wife.

Newhall now has 54 different gardens on his property, and each garden represents a different theme. For instance, yellow tulips represent helpless love.

A woman who helped build one of the gardens passed away from cancer at age 31. He has a garden dedicated to her that features bleeding heart flowers, which represent the theme of life interrupted.

"So [for] every garden, the plants are chosen to interrelate with the story of the garden," Newhall said.

The daffodils in his gardens represent rebirth, and specifically Newhall's recovery and battle with PTSD. Over the last four decades, he's been able to heal through his gardens.

"What you have to do with PTSD is to be reborn," Newhall said.

▲ (Top) Secret garden. (Above) Circle of life garden.

TORWAISTUDIO/SHUTTERSTOCK

THE WAY TO Stronger Knees

Avoid the common trials and tribulations of the body's most complex joint

CONAN MILNER

Without knees, your legs would just be two rigid columns extending from torso to feet. Imagine the lumbering walk and all the other daily movements that would become far more awkward in a knee-less existence. Sitting and standing would both take enormous effort, and something to hold on to.

Like everything else we take for granted, we don't typically consider our knees until they become a problem. But when this joint starts to hurt or fail, it's clear how much of your mobility depends on it.

Doctors who work with this joint say knee problems have become incredibly common—impacting a quarter of all adults. Over the past 20 years, complaints of knee pain have increased 65 percent, resulting in nearly 4 million primary care visits annually. Many of these visits are for replacement parts. The number of knee replacements performed in the United States has more than doubled over the course of the 2000s, with more than 600 thousand now done each year. Experts predict that by the year 2030, we will see about 3 million knee replacements annually.

So what makes this joint increasingly prone to problems? Is there a design flaw that leaves knees at the mercy of injury and malfunction? Dr. Eugene Charles, a Manhattan-based chiropractor and director of the Applied Kinesiology Center of New York, doesn't think so. Charles calls the knee "the Ferrari of joints," in reference to its high-performance design. He says the problem is that we run our knees too hard, and don't give them the attention they need.

"The knee is perfectly designed, but we don't use it optimally," Charles says.

The knee is the largest joint in the body and the most complex. It consists of the body's two largest bones—the tibia (shin bone) and femur (thigh)—as well as two smaller bones: the patella (knee cap) and the fibula (calf). This skeletal structure creates a familiar hinge, but the knee does so much more.

Misalignment

In his new book, "Journey to Healing: The Art and Science of Applied Kinesiology," Charles devotes a whole chapter to the knee. He says that what makes the design of this joint so special is that it not only bends but rotates slightly. This rotary movement is what allows us to perform all kinds of everyday activities like squatting, climbing, sitting cross-legged, kicking, and dancing. But it can also open the door to instability.

"What I see in practice and what generally goes unrecognized is that knees slip out of place very subtly," Charles said. "It doesn't show up on MRIs or CAT scans, and it either causes degeneration or sharp pain."

Charles looks for these small misalignments with what he calls a "gait analysis." Basically, he watches how patients walk,

and their movement reveals asymmetries in the body. These imbalances are often caused by seemingly minor habitual movements that can, over time, throw our knees slightly out of whack. "Going up the stairs is big," he said. "For people who try to cover as much of the stairs that they can, a lot of times they twist their foot to get more of it on there. I'll watch people go upstairs sometimes and say, 'Oh boy. That knee is going to be out soon.'"

Another common movement that leads to misalignment is getting out of a car. Charles says he can often tell the drivers from the passengers based on which knee has problems.

"They lift that leg out of the car, and they'll turn their foot out and push it up," he said. "Once is no big deal, but after 1,000, 2,000, or maybe 4,000 times of doing it, the knee just slips out a little bit."

Charles uses hands-on techniques to set out-of-joint knees back into place. But he says that most of what keeps our knees properly aligned, strong, and long-lasting is our responsibility. "If you're overweight, it increases the pressure on the knee insanely," he said.

Weight-Bearing Joint

The knee is known primarily as a bending mechanism, but another critical aspect of this joint's design is that it can carry a lot of weight.

The knee absorbs one-and-a-half times your body weight when you walk on flat ground, and absorbs double or even triple your weight when you go up or downstairs. Knees have to bear five times your weight when you squat. This means that if you weigh 200 pounds, your knees must withstand 1000 pounds of pressure when you bend down to tie your shoes.

Thus, the more you weigh, the more weight your knees are forced to carry. That's why experts say that one major reason our knees wear out faster than the rest of our body is because of excess pounds. Research has found that obese young people who are able to shed as little as 10 to 15 pounds have a much lower risk of osteoarthritis later in life. "Ten extra pounds of body weight adds 40 extra pounds of pressure to your knees. And a lot of us are a lot more than 10 pounds overweight," Charles said.

Losing weight can lighten the load, but it can also take a long time to lose, especially if our joints hurt. Fortunately, there are things we can do right away to increase our knee's ability to bear the weight it must carry, and make us more inspired to do regular exercise.

Complex Problems

There are about 12 different muscles involved with the knee—including the quadriceps (front thigh muscles), calves, and hamstrings. Even part of the glute extends to the knee. The individual area of weakness can vary, but those who work closely with this

joint often point to a few common locations.

"You're only as strong as your weakest link, and almost every physical therapist in the world knows the medial [inner] quadricep is almost always weaker on people than the outer one," Charles said. "This imbalance allows the bottom part of the knee to slip out very easily. If everything was balanced and that medial quadricep was strong, it probably wouldn't rotate out as much."

Krissi Williford, an exercise physiologist at Xcite Fitness in Birmingham, Alabama, traces most of the knee problems she sees to underactive glutes (buttock muscles). Williford says that chronically weak glutes can't support their share of the body's weight and movement, so the burden falls on the already imbalanced quadriceps.

"The main thing I see is that the glutes are underactive, and sometimes completely turned off. I know it sounds crazy to say your muscle turned off, but your nervous system drives everything. It's like the electricity behind the light switch. If the connection is disrupted, then the muscle can't work because it has no power, so to speak," Williford said. "I see it all the time."

It might seem strange to think a knee problem is related to a weak buttock muscle, but consider that your joints don't work in isolation. Even relatively distant parts of the body might be the root cause for knee pain.

"I've even seen knee pain because a shoulder didn't work well. Everybody is different, and the reason you have knee pain is very individual," Williford said.

According to Alice Holland, doctor of physical therapy and director of Stride Strong Physical Therapy in Portland, Oregon, the main reason the knee bears so much of the body's burdens is that it's an "in-between joint." It's at the mercy of what's above and below it.

"Muscles and bones in the foot control foot placement, and large muscular systems control hip and core movement of the torso," Holland said. "The knees are caught in between these two systems and are usually passively placed according to what the body's movements are. With torque, twisting, collapsing and lateral movements, the knee can be bent and twisted into positions that cause pain and damage."

We often associate knee problems with the elderly (arthritis) or athletes (think "runners' knee" or ACL damage). But really anyone who habitually asks more of their knees than what they were trained to deliver can experience pain and malfunction. If your knees are weak, even the most basic movements might be more than this joint can tolerate. However, with regular prac-

tice, a few simple exercises you can make your joints stronger than ever.

"Sometimes this might induce slight amounts of pain and discomfort because to strengthen your lower extremity you would have to strain it first with progressively tolerable demands and exercises," Holland said. "But the stronger and more balanced your muscles are in the lower extremity, the less joint shear force you will have from your activities."

Building Better Knees

The key to better knees is to strengthen them, but Charles says too often people only focus on knee tightness, and ignore the underlying weakness. "They use massage, or foam-roll it," he said. "But if a muscle is tight, there is usually a muscle weakness causing the tightness."

There are many exercises designed to strengthen the knee. For sedentary and elderly individuals, Holland recommends practice climbing stairs and curbs. For more active people, sprinting, lateral movements, pivots, deep lunges, and jumps can all help to improve your knee game.

A widely prescribed movement to activate a weak glute is called the clamshell. It's done lying on your side, knees bent. Ankles stay together while the top knee slowly lifts and lowers, mimicking a clam.

Whatever the exercise, keep in mind that your goal is a stronger, more mobile structure. That's why proper alignment and body mechanics is crucial to successful knee exercises. Charles advises that people consult a physical therapist or personal trainer to make sure they're performing movements correctly.

"The lunge, when done properly, is a very good knee exercise. But sadly most people do it improperly," Charles said. "They'll let the knee go in front of the toe as they're lunging forward, and that's bad news. That's a knee problem about to happen."

Treating Problem Knees

Pain is an easy-to-read indication of a knee problem. But Dr. Steven Struhl, a board-certified orthopedic surgeon and knee specialist, says recurrent swelling is a sign of more serious trouble.

"Popping, clicking, giving way, and poor stair tolerance are all additional clues that the knee is becoming problematic," Struhl said. "Loss of motion and gait disturbances often suggest more advanced disease and require immediate evaluation."

Struhl agrees that the mainstay of treatment for knee problems is physical therapy. However, for

extremely inflamed knees, injections may be necessary.

"Traditional methods such as cortisone are highly effective but often give only short-term relief. Newer 'regenerative' injections such as PRP may be far more effective," Struhl said.

PRP stands for "platelet-rich plasma." The process involves taking either a blood sample or stem cells from bone marrow, concentrating it in a centrifuge, and then re-injecting it back into the knee to neutralize inflammation.

Knee Protection

Taking care of our knees can help us avoid such procedures. Struhl suggests that the quality of our diet can influence this joint. Charles says good fat is particularly important for feeding healthy knees.

"Every joint in your body needs oil like a car needs oil, and most people are three quarts low," Charles said.

"You can have olive oil, and avocados. Omega 3 oils are fantastic. It's for lubrication, and acts as an anti-inflammatory for this hard-working joint."

Another important knee nutrient is protein. This feeds all the tissues in the joint, such as muscles, tendons, and the meniscus—a cushion inside the knee joint that prevents bones from rubbing directly on top of one another.

"Gelatin is a fantastic old-time cure," said Charles. "I'll regularly tell people to take two packages of Knox gelatin and put it in their oatmeal. Gelatin is actually collagen—the most abundant protein in the body. It's great for your joints, and it's great for the meniscus in the knee."

However, when serious structural damage is discovered, surgery may be necessary. Struhl explains that surgery ranges from simple removal of torn tissue to reconstructive techniques to rebuild lost structures such as ligaments or cartilage. The most extreme is a prosthetic replacement for end-stage arthritis.

But if we can learn to maintain our knees before they fall apart, they should be able to last as long as we do.

"If body parts were meant to be replaced, they would have a warranty," Charles said. "Keep them in alignment. Keep the muscles balanced. Keep your weight down. Stay hydrated. Get enough protein and oils, and your knees will really take you where you want to go."

In the Battle of the Fitness Trackers, the Walkers Win

10,000 steps might be more than you need for optimum health, but walking is what matters

BRUCE HOROVITZ

When Sonia Anderson got her first Fitbit step tracker, her poor pooch, Bronx, had no idea of all the steps that were coming.

The device—which counts every step Anderson takes and displays those steps on an app—was a Christmas gift from her daughters two years ago.

At the time, Bronx, a Yorkshire terrier, was younger and could still manage the additional walks up and down the trails along the sprawling apartment complex in Alexandria, Va., where Anderson lives. Anderson was on a mission to clock 10,000 steps a day. More recently, as Bronx hit age 13, the dog started coming to dead stops during these long treks, as if to ask: What's going on here? Like many other folks 50 and older, the 63-year-old Anderson has been commandeered by the step-tracker craze that began about a decade ago, and her dog is an unwilling victim.

Anderson has bought into the \$26 billion global step tracker industry and matches her daily count with her Fitbit-wearing friend, Landy Sorensen, 43. The two women have become inseparable Fitbit fanatics and competitors at the Arlington Food Assistance Center, where they amass additional steps every Friday morning while volunteering in the food bank. Now, they diligently count each other's steps on their cellphone apps in real-time—and compete to record just one

more step than the other.

"My Fitbit made me a friend I'd have never had," Anderson said.

It might also help her live longer, according to a recent Harvard University study published in the Journal of the American Medical Association. The study concluded that among older women, as few as 4,400 steps per day helped to lower mortality rates.

With more steps per day, mortality rates decreased before leveling off at 7,500 steps, the study found.

Mortality rates decreased before leveling off at 7,500 steps.

In other words, the magic marketing number of 10,000 daily steps embraced by so many wearers of these devices—from Fitbits to Garmins to Samsungs to Apple Watches—may be about 2,500 steps more than necessary.

Truth be told, even the woman behind the study—who concedes that she, too, is enamored of her step tracker—can't say how many steps are the right number for each walker.

"No one size fits all," said I-Min Lee, an associate epidemiologist at Brigham and Women's Hospital in Boston and a professor at Harvard Medical School.

But no matter how many steps you take, merely wearing and using a fitness tracker—particularly for older women, older men and other people who tend to be somewhat inactive—"can be beneficial not only to your health but to your quality of life," Lee said.

Of course, some folks go over the top with their trackers—and proudly post their more unusual stats on social media sites such as Reddit. Like the vegan fitness buff who posted a video about logging 50,000 steps a day for five days. And the warehouse stocker who said that he logged 20,000 steps a day on the job. And there's also the guy who credits his Fitbit for helping him slim his 40-inch waist to a svelte 34 inches.

Clocking miles is even popular with workers who are on the clock. C-SPAN network, for instance, ran a month-long walking challenge sponsored by its health insurance plan, Cigna. The step competition among C-SPAN departments, which ended July 3, totaled 22,862,341 steps walked by 74 participants from 12 teams, spokesman Howard Mortman said. That's an average 9,966 steps per day per person. More specifically, he said, that's a total 1,028,805 calories burned—and 294 pounds lost. (For the record, the cable network's digital media team won.)

For Anderson and Sorensen, fitness tracking has created a special bond—and a way to keep close tabs on each other. Like the day when Sorensen noticed that Anderson had suddenly doubled her step output. She immediately texted her and discovered that Anderson was on a European vacation and that her sightseeing had doubled her daily count. Another time, when Anderson noticed that Sorensen had barely logged 2,000 steps, she sent a concerned text asking: "Are you OK?"

"I thought it was so sweet of her to check in on me," said Sorensen, who said the problem was actually a battery issue. "This is the kind of connection I wouldn't otherwise have." Sorensen averages about 15,000 steps daily—roughly between 5 and 7 miles—and often tucks her early-generation Fitbit into a specially designed gold bracelet, so folks can't even see she's wearing one. When she wears this bracelet to formal affairs, no one suspects she's tracking her footwork, she said.

Harvard's Lee said she first got interested in wearable devices five years ago during a workplace program that promoted healthy lifestyles for doctors. Lee received a free device—whose familiar brand name she prefers not to publicize—and was asked to form a team of walkers. Lee, 59, is hesitant to discuss her step count because she believes the sheer act of regularly exercising is far more important than the sum total of steps. But, after some cajoling, she said she averages about 15,000 steps per day.

Studies show that 150 minutes of moderate activity, such as walking, can lower the risk of heart disease and stroke, improve sleep, help reduce weight gain and improve bone health.

Perhaps no one knows that better than Tom Holland.

He's an exercise physiologist and sports nutritionist who has regularly appeared on "Good Morning America" as a fitness coach.

He also has worked as a personal trainer with thousands of clients—many of whom use step trackers. He's a huge fan of fitness trackers because they get people moving.

"The fitness tracker is the first step to getting people off the couch," he said. At the same time, he is put off by the much-ballyhooed 10,000-step daily goal, which he said is arbitrary.

"We need real numbers to shoot for," he said. Holland, who recently turned 50, prefers recommending smaller amounts of exercise—not big feats such as 10,000 steps. "I'm a big believer in excessive moderation. Don't do a lot a little bit—do a little bit a lot."

Unless, of course, it involves himself. Like the 70,000, or so, steps he clocked in a recent 50-kilometer trail run. Because Holland also is a triathlete, he not only uses a Fitbit from time to time but also sometimes slaps on "smart" sunglasses or T-shirts or, however, he wears a Garmin fitness tracker that measures his steps, his sleeping habits and his heart rate.

"I'm not an addict," he said jokingly, "but if you see me passed out on the side of the road, check my tracker, please."

The fitness tracker is the first step to getting people off the couch.

Tom Holland, exercise physiologist and sports nutritionist

As for Anderson's little dog, Bronx, he sometimes gets extra incentive to go on those walks. Occasionally, Anderson brings along her daughter's English bulldog, Winston, whose namesake is the British statesman Winston Churchill. Perhaps, in a cosmic nod to future step trackers of all kinds, it was Churchill who said it best: "I never worry about action, but only inaction."

Bruce Horowitz is a freelance journalist and regularly writes for Kaiser Health News, which first published this article. Kaiser Health News is a national health policy news service. It is an editorially independent program of the Henry J. Kaiser Family Foundation which is not affiliated with Kaiser Permanente.

(Top) Recently, Yorkshire terrier Bronx, who is 13, has started coming to dead stops during long walks. Anderson now carries him most of the way.

(Middle) Sonia Anderson, 53, checks her Fitbit. A recent Harvard University study published in the Journal of the American Medical Association concluded that, among older women, as few as 4,400 steps per day helped to lower mortality rates.

(Left) Sonia Anderson and Landy Sorensen often walk together on Friday mornings while volunteering at a local food bank. The friends track each other's progress on their cellphone apps and compete to see who logs the most steps.



BRUCE HOROVITZ/KHN

FOOD IS MEDICINE

Foods to Quell—or Stimulate—Joint Pain

Diet can have a major impact in how well your joints work as you age

DEVON ANDRE

You might not think your food choices have much of an impact on joint health—but they do. Food choices can influence whether your joints limit your livelihood with severe pain, or allow you to get out and enjoy life.

One way food influences your joints is through nutrients that promote tissue growth in your joints. Another is that they can either inflame or reduce inflammation. And finally, some calorically dense foods that are low in nutrition can promote weight gain, which puts

increased stress on your joints.

Look for nutrient-dense foods if you hope to reduce pain, stiffness, and other discomforts. These include fruits, vegetables, nuts, legumes, whole grains, olive oil, fish, and a selection of lean proteins. Foods that are minimally processed can help limit inflammation and promote joint health. They feature a host of nutrients—vitamins, minerals, and antioxidants—that promote tissue growth, bone strength, and function.

Foods high in sugar and refined carbs, or fried or fatty foods, can cause inflammation and increase the risk of joint pain. Cooking can also influence certain foods' impact on joint

health. When some foods are cooked at high heat, they produce advanced glycation end products (AGEs) that can drive inflammation.

Protecting joint health and limiting joint pain is a multifactorial process, but diet plays a big role. Try to eat more foods that can aid joint health and it may make a big difference—in your life and livelihood.

Devon Andre holds a bachelor's of forensic science from the University of Windsor in Canada and a Juris Doctor from the University of Pittsburgh. This article was first published on Bel Marra Health.



DUSAN ZIDAR/SHUTTERSTOCK

Foods that are minimally processed can help limit inflammation and promote joint health.

MINDSET MATTERS

The Lasting Benefits of Getting Comfortable With Discomfort

Life can be uncomfortable at the best of times, but moving past the pain can pay unexpected dividends

JAY HARRINGTON

I woke in a tent, a bit disoriented, and my attention immediately fixated on my feet. It was the morning of Day 2 of what was to be a four-day, 43-mile hike through Pictured Rocks National Lakeshore.

Three friends and I had carefully planned the journey. We had enough food, clothing, tents, and supplies to get us through. We had the means to filter the Lake Superior water we'd need to stay hydrated.

But as is often the case when planning an outdoor adventure, a small mistake I made had big implications for my comfort level during the trip. At the last minute, I decided to wear a different pair of shoes than I had originally intended. Instead of wearing lightweight trail-running shoes, I opted for an old, high-top pair of hiking boots. I have a chronically weak ankle, oft-injured from multiple sprains over the years, and I was worried about rolling it while hiking the trail and being a burden to my friends. There's no easy way out of the trail if you get injured.

The hiking boots provided good ankle support, but they did a number on my feet. After clambering out of the tent that morning, I surveyed the damage.

It was clear to me just a few miles into the first day of the hike that I was going to have blister problems. Blisters are obviously painful, but they're manageable. The problem was that the blisters that were forming on my heels were causing me to change my gait, leading to an unnatural foot strike on the balls of my feet. This resulted in deep, painful "stone" bruises developing on the balls of my feet.

As we resuscitated our campfire from the night before, made coffee, and cooked breakfast, my only option was pretty clear: pull the boots back on and get comfortable with the idea of being uncomfortable for a few days.

After 11 miles, we reached our second campsite and quickly set up our tents. During that day's hike, we had the chance to enjoy the cliffs, panoramic views of Lake Superior, waterfalls, and other natural wonders that Pictured Rocks is known for. It truly is one of the most beautiful places on earth.

The campsite was much deeper in the woods than the first and the mosquitoes were out. So after setting up camp, we grabbed what we needed—food, water, and bourbon—and hustled down to the beach, where we only had to contend with black flies. We spent a relaxing six or seven hours chilling out on the beach, cooking dinner,

Our little adventure pales in comparison to many of the epic excursions you'll see splashed across Instagram, but for me—a middle-aged desk jockey—it was pretty extreme.

Breaking one's routine, even in small ways, is uncomfortable, which is why most people don't.

and allowing the frigid Lake Superior water to take the sting out of sore feet and calf muscles. After the sunset at about 10:30 p.m., we made our way back to camp and zipped up our tents as quickly as possible as the ambient noise of buzzing mosquitoes enveloped us.

On Day 3, as we set out on our hike, we began to assess our options. We had 21 miles ahead of us, which we intended to complete over the next two days, but the idea of setting up camp among another swarm of mosquitoes wasn't appealing.

After hiking 13 miles, we took a break at Miner's Beach around 5 p.m. By this point, we were all experiencing some level of discomfort, ranging from blisters to sore knees, backs, and feet. We had two more miles to go to our campsite, but we decided to knock out the last eight miles and finish the hike rather than deal with the bugs.

By the time we began the final leg, we knew we only had about three, maybe four, hours of light left, so we had to move quickly. Our hike became a trail run and we spilled out of the trail in near-darkness at 10:30 p.m. We were soaked in sweat, sore, thirsty ... and exhilarated.

Our little adventure pales in comparison to many of the epic excursions you'll see splashed across Instagram and documented on Netflix, but for me—a middle-aged desk jockey—it was pretty extreme. And it definitely got me out of my comfort zone.

Grow Through Discomfort

It's easy to get stuck in day-to-day routines. As we get older, our lives begin to fall into familiar patterns. The spontaneity and adventure of our youth is displaced by the monotony of the familiar. While days may drag, life seems to speed by.

Routine is comfortable. Breaking one's routine, even in small ways, is uncomfortable, which is why most people don't. But getting comfortable with discomfort is the path to personal growth.

Here's a seemingly trivial example that has paid some lasting dividends: I check for new work emails on my phone way too often. By going into the woods, where we lacked a signal for three days, I was forced to break this routine. At first, despite knowing it was futile, I still found myself pulling out my phone out of habit. Within a few hours, I adapted to the new reality (life without the internet) and became much more present in the moment as a result.

While it was uncomfortable at first, I came to realize the madness of allowing technology to steal my attention from the wonders of the world around me. Upon reentering

the world of "five-bar" data signals, I found that my digital detox endured. By no means have I been perfect, but the positive feelings of my tech-free weekend have led me to be less likely to reach for my phone in search of a quick dopamine hit. There are way more appealing things to look at in the beautiful setting of Traverse City.

Another example: Physical fitness has always been an important part of my life, but over the past 12 months, I've fallen into a bit of a rut. My workout routine became, well, routine, and I started feeling stagnant. The Pictured Rocks weekend helped break the script. The hike was a physical challenge to be sure. Covering 43 miles in three days of hilly terrain with a great deal of wet, muddy trails, and obstacles—all while carrying heavy backpacks—was taxing. However, I found that, despite the increasingly acute pain in my feet, the hike got easier as the days went on. In fact, we ran the last eight miles of our 21-mile hike on Day 3.

It was a good reminder that the human body is a pretty remarkable machine. Most of the physical limitations we face (except for injury and disability, of course) are mental. While the body's primal, evolutionary instinct is to conserve energy, it can turn it up when it needs to. While the first couple of days of a physical challenge may seem extremely difficult, by the third day, it's as if the body says to itself, "Okay, this is what we're doing now," and taps into rarely used reserves. Getting comfortable with being uncomfortable on the trail has, like the digital detox, paid me ongoing dividends in terms of better, more rigorous workouts.

Experience Something New to Create Lasting Change

All of this is to say that, while it's not easy to break free from old routines, one of the best ways to do so is to thrust yourself into new (often uncomfortable) situation and experiences. You can't think your way out of undesired habits. No article or online video is going to provide the motivation necessary to overcome the inertia of the status quo.

It's almost always necessary to experience something new—even if it's unpleasant in the moment—to see things differently. Personal experience is the precursor to personal improvement. Discomfort is the catalyst for growth.

Jay Harrington is an author, lawyer-turned-entrepreneur, and runs a northern Michigan-inspired lifestyle brand called *Life and Whim*. He lives with his wife and three young girls in a small town and writes about living a purposeful, outdoor-oriented life.

My only option was pretty clear: Pull the boots back on and get comfortable with the idea of being uncomfortable for a few days.

THINK WELL, WORK WELL

Making Confident Career Choices

Be clear on whether you are going to stay and work it out, or leave a job and move on

JEFF GARTON

Your ability to swiftly make and act on career decisions can be short-circuited by thoughts that feed fear, worry, and doubt. Avoid this by motivating yourself with thoughts that produce the emotions of courage and confidence.

A healthy work-life often begins by being in a job you want to be in, or leaving one you don't want to be in.

Here was one of the peculiar things I observed while working in HR. When an employee spoke to me about whether they should make a job or career change, there was a 50 percent chance their supervisor was simultaneously thinking about replacing them.

This urge to part ways wasn't always due to performance issues or the supervisor's style. Often times, both parties sensed it was time for a change. They were becoming increasingly detached from each other and weren't sure what to do.

Stalemates like this can't be ignored. At risk is the cost of turnover, a decline in productivity, or the employee's apathy might spread to others in the department. This requires an intervention to motivate some type of corrective action.

I had to determine if the employee was receiving a career calling and what the hold-up was in answering it. We believed if an employee's motivation was more toward leaving than doing their job, then leaving was best for everyone. Why didn't they pull the plug?

The reason for this inertia was explained to me by a former colleague. He said, "Only when the pain of staying exceeds the fear of leaving will an employee make the move." His wisdom outlines the path toward resolution.

I would create an atmosphere where the employee felt safe talking about their individual plans and goals. Then I would guide

them to look at their fear and how to face it with greater confidence. I assured them it was okay to pursue their individual plans and they had an obligation to themselves to do so.

This was usually enough to influence an employee's decision to either make a move or delve more optimistically into their decision. At this point, they might even feel confident enough to engage their supervisor in this process.

My son Brian accepted a personal trainer job after graduating from college. When his supervisor started burdening him with administrative tasks, this took him away from training and severely cut his income from commissions.

It took Brian two months to decide the pain of staying exceeded the fear of leaving. Within three weeks of his decision to leave, he was offered a much better corporate job in logistics. But rather than cut ties and move on from the gym, he negotiated with the work evenings and weekends. He

didn't want to hurt anyone's feelings.

I told him easing out like this was a mistake. Loyalties were already severed and there's nothing wrong with making changes to your career. Move on. The only reason you look back is to retain friendships and protect your references.

Sure enough, it wasn't long before his supervisor and coworkers began to ignore and exclude him from activities. This hurt Brian's feelings in ways he never anticipated.

People who decide to stay when others leave don't like watch-

The most confident moves are motivated by thoughts of running toward what you want with enthusiasm.

I assured them it was okay to pursue their individual plans and they had an obligation to themselves to do so.

Leaving a job can be a healthy way to deal with a work situation that isn't working.



LIGHTFIELD STUDIOS/SHUTTERSTOCK

ing sloppy and indecisive departures. They prefer to see that the person leaving is confident, happy, and excited. Then they usually forget about them within a day or two. Oh blah dee, life goes on.

Here was the rule of thumb I was provided. The most confident moves are motivated by thoughts of running toward what you want with enthusiasm. The least confident moves involve thoughts of running away from what you don't want with doubts and hesitation.

My son made the mistake of focusing his thoughts on running away. They produced the emotions of worry and fear that held him back. Just as easily, he could have focused his thoughts on running toward a better career field that he had no doubts about wanting.

Another low confidence indicator is resigning with the request of a counteroffer to stay. Even if this subtle extortion delays your departure, you run the risk of being remembered as disloyal. Then the next time you're involved in a controversy, others may say, "They should have left when they threatened to."

You have good reason to be confident in making a move when you think you are...

- Making this decision on your own accord rather than to please someone.
- Resolved in knowing what you want and what you will accept.
- Certain you have honestly considered all the pros and cons.
- Feeling increasingly upbeat, positive, lighter, and self-assured.
- Hearing more encouragement than discouragement from within.
- Absolutely certain there is nothing else you would rather be doing.
- Feeling proud, happy, and inclined to tell the world about it.

Here was the lesson my son learned from his first real transition: While changing jobs ranks high on the Holmes and Rahe stress scale, prolonging the inevitable can potentially add more stress to everyone involved. Cut the cord when you decide to.

Jeff Garton is a Milwaukee-based author, certified career coach, and former HR executive and training provider. He holds a master's degree in organizational communication and public personnel administration. He is an originator of the concept and instruction of career contentment.

WISE HABITS

The Ridiculously Awesome Practice of Surrendering

Our often futile efforts at control can blind us to the amazing reality spread out before us

LEO BABAUTA

This world presents us with a shaky, uncertain, constantly changing landscape. Our response is to try to get control.

We create lists, systems, routines, schedules, comfort foods, and comfortable environments. We try to build our whole lives and identities around comfort and control.

And it doesn't work. You can't get a firm grasp on the fluidity of life. And so we get stressed, procrastinate, feel hurt, get depressed or anxious, get angry or frustrated, lash out or complain.

Into this craziness, I'd like to suggest the ridiculously awesome practice of surrendering.

What does this mean? It means letting go of some of our efforts to get control or try to make the world exactly as we like it. Surrendering means we relax into the shifting landscape and smile with friendliness at the world as it is, beautiful and amazing.

Surrender Versus Control Strategies
"Surrender" sounds lame or even scary to many people. It's the opposite of the ideal of winning or conquering that our hyper-competitive society tends to uphold. As individuals, we seek control to alleviate the pain of uncertainty and surrender



DUDAREV MIKHAIL/SHUTTERSTOCK

Giving up the illusion that we can control things beyond our control can let us see the inherent beauty of how things are.

sounds terrible.

After all, we control our day with routines, schedules, and systems to be effective and responsible. We create systems for our work to keep things running smoothly and try to control our health through new diets or exercise programs. We take similar measures for our finances, recreation, and even our relationships.

And there's nothing wrong with any of this, it's just that it's futile to try to control the uncontrollable. It's like trying to knit a sweater from water. Some things are simply too fluid to be held to strict controls or patterns. So control is a strategy that isn't actually effective if held to too tightly. Constantly trying to get control results in:

- Stress and anxiety about not having control
- Being driven by fears
- Not being happy with how things are (because they're not in control)
- Striving for more control and suffering anxiety
- Lashing out at others when they interfere with your control
- Spending time, money, and energy seeking control
- Feeling lost, depressed, and unhappy with your inevitable failure at control

Continued on Page 8

WISE HABITS

The Ridiculously Awesome Practice of Surrendering

Continued from Page 7

I'm not saying we should never try to get control. There are helpful ways of getting control, but often it's more helpful to shift the focus from forcing control to harmonizing with the way things are. This can transform a competitive act into an act of compassion. Taking care of yourself can be a loving act rather than an attempt to gain control over your health, for example.

Why Surrender Is Ridiculously Awesome

Surrender can alleviate our need to constantly think and analyze and allow us to be fully present in this moment. And if we can accept how things are, we might even see new opportunities and benefits hidden from us when we were trying to control things.

We tune in to how we're feeling. We notice the sensations of the moment, both in our bodies and all around us. We become present to whoever is in front of us. When we do a task, we pour ourselves fully into it.

We open to the uncertainty of the moment. We see what we can learn from it, with an open mind, with curiosity and a stance of not-knowing instead of a fixed viewpoint.

We start to appreciate the moment in front of us, fully. There is something immensely awesome about the moment in front of us if we stop trying to have it conform to our idea of how things should be. And it takes so much less energy than control.

How to Practice Surrender

We are not talking about giving up all control. That could lead to financial ruin, loss of relationships and unemployment.

But before we grasp for control, we can try surrender as an approach with whatever comes up. Before reacting, we can practice accepting things as they are.

For example, I might feel like my health is out of control and be anxious about it. I want to go on a diet and set up an exercise plan to get everything under control. These are not bad intentions, but this kind of fear-based approach often doesn't work. In fact, anxiety could make it harder to make good diet decisions.

So instead, I practice surrendering and feel the fears coming up for me. I relax a bit and see that I'm suffering, that I could use some self-love. I can set an intention to love myself with nourishing food and movement and relish the thought of the joy these could bring. Surrendering doesn't mean I don't take action—it means that I accept things as they are, and bring a loving intention into the equation.

And even if I never take that loving action in the future, the present is transformed. This moment is completely different for me if I'm not grasping for the illusion of control, but instead loving what is. So here are some ways to practice surrender:

- Notice that you're looking to control things, and instead pause. Drop into your body and notice the fear, uncertainty, anxiety that is causing you to want to get control. Stay with this physical sensation in your body, the energy of uncertainty that causes you to grasp for control. Be with it fully, allowing yourself to feel it. Relax and surrender to it.
- Open yourself to the rest of the moment, noticing how freaking amaz-



MEDIAGROUP_BESTFORYOU/SHUTTERSTOCK

▲ Surrendering means we relax into the shifting landscape and smile with friendliness at the world as it is.

ing this moment is if you open up and pay attention. See it with fresh eyes, as if you've never experienced this moment before. Bring wonder and curiosity into this new viewing of the world.

- Let yourself rest in openness—you don't need to control things, you don't need to know exactly what will happen, but instead, you can find ease in the openness of this moment, the unknown quality of a beautifully shifting landscape.
- How can you love yourself and everything around you in the middle of this openness? Can you fall in love with this moment?
- What loving intention can you set for yourself in this situation? Coming from a place of love instead of fear, what would be the best next small step to take?

What a world we live in if only we can fully see it. Surrendering is the way to move into that.

Leo Babauta is the author of six books, the writer of "Zen Habits," a blog with over 2 million subscribers, and the creator of several online programs to help you master your habits. Visit ZenHabits.net

Some things are simply too fluid to be held to strict controls or patterns.



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Once you remove addictive foods, you might start to crave things you never expected.

EAT WELL

How to Eat Mindfully

by Listening to Your Body

TCHIKI DAVIS

Maybe you follow the standard recommendations for healthy eating, but they don't seem to work for you—and you're always fighting off cravings. Or maybe you're constantly distracted by technology and overwhelmed by busyness, too scattered to find pleasure in your meals.

Learning to listen to your body's reactions to food can do much more than just help you lose weight. Research suggests that mindful eating—nonjudgmental awareness of the complete experience of eating—can contribute to weight loss, a decline in negative emotions, and a healthier relationship with food. It can also help you find a deeper connection to the foods you eat, nourishing you in ways you may never have experienced before.

Eating healthy can become both easier and more enjoyable because you are finally in sync with your body.

What Is Mindful Eating?

To get to know how your body really reacts to food, you first need to listen mindfully. This includes being aware of what's happening inside your body, inside your mind, and

in the world all around you as you eat. It might involve paying attention to the entire timeline of eating: where your food comes from, how it is prepared, and how it is digested. And it might involve paying attention to the dynamic process of eating—for example, what changes occur in your body when you eat a particular food, a particular amount of food, or food prepared in a particular way. When you fully listen to your body's reactions to food, you pay attention not only to your five senses—taste, smell, touch, sight, sound—but also to subtler bodily sensations, emotions, and food triggers. By honing this type of awareness, you can discover how different foods impact your body, mind, and day-to-day experiences.

You might discover that a certain food always makes you groggy and that another food energizes you. Or you might realize that you only eat a particular food when you're anxious or only overeat when you're sad. The goal is simply to listen, learn, and then take actions that better support the body's needs. If you are able to fully embrace mindful eating—becoming aware and accepting of your relationship with food—it can become a superpower. Try these seven strategies to learn how to listen to your body.

1. Mindfully Explore Your Food Issues

▲ Ask yourself: Does eating this food evoke any emotions?

Shira Lenchewski, a registered dietitian and author of the new book "The Food Therapist," suggests that there are five dysfunctional habits that many of us have around food. We may have just one of them or we may have them all. These food habits are: Having trust issues (you just can't stop yourself from eating) Being a "pleaser" (you cave into other people's food choices) Fearing the mundane (you think eating healthy would be way too boring) Craving control (you beat yourself up for tiny diet "mistakes") Having a hot-and-cold pattern (you yo-yo diet, going from "all in" to "all-out") By becoming aware of your food habits, you can better explore the reasons behind them and put in place strategies to change them. For example, if you're like me and you crave control, you might work on practicing self-compassion or acceptance so you're not so hard on yourself when your diet is imperfect. If you're a pleaser, you could practice assertiveness, perhaps by requesting to meet a friend at a healthier restaurant. Or if you fear the mundane, you could get a new cookbook and learn some fun, creative ways to cook healthy meals.

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Paying attention to how your body responds to what you eat can provide uniquely personal and useful insight into your optimum diet.

Why Your Energy Is Low or Depleted

There are many causes and cures for long-term persistent tiredness



ALL PHOTOS BY UNSPLASH

A vegan diet can lead to lower energy due to a B12 deficiency.



Chronic stress takes a toll on the body, mind, and energy level.



Hypersensitivities to dairy and grain can affect some people's energy.



Bringing a new life into the world can cause postpartum tiredness and low energy.

DEBORAH MITCHELL

Experiencing low or depleted energy occasionally is normal, but you don't want to go through life feeling like you can't get out of first gear, do you?

According to experts, one out of 10 people around the world are experiencing persistent tiredness at any one time, and one in every 5 Americans say they have fatigue that interferes with their daily lives.

When low energy becomes chronic, it's time to uncover the cause and find ways to remedy the situation. The first step, however, is identifying the reason. To help you, we've come up with 16 reasons why people can experience low or depleted energy. Could your answer be on this list? If you believe it is—or even if it's not—it may be time to ask a health care provider to help you ferret out the final answer, get tested, and begin the treatment you need.

16 Reasons Why You Have Low Energy

1. Adrenal Fatigue

Adrenal fatigue is a syndrome that occurs when the adrenal glands, which sit on top of the kidneys, are unable to produce enough hormones (e.g., cortisol, aldosterone, adrenaline) to maintain homeostasis. This typically occurs because of chronic stress or a single extremely stressful situation. Indications that you may have adrenal fatigue include:

- Feeling tired for no reason, even though you get a sufficient amount of sleep
- Difficulty getting up in the morning, despite going to bed at a reasonable time
- Feeling overwhelmed or run-down
- Craving sweets and salty foods
- Feeling more awake and energetic after 6 p.m. than you do during the day
- Trouble recovering from stress or illness

2. B12 Deficiency

Vitamin B12 is essential for the formation of red blood cells, optimal functioning of nerve tissue, and absorption of folic acid, among other things. A deficiency of vitamin B12 typically develops gradually over years, and initial symptoms may be subtle. It's estimated that about 6 percent of people aged 60 and older are deficient in vitamin B12 in the United States and the United Kingdom, and nearly 20 percent have marginal levels.

When someone doesn't get enough B12, production of red blood cells declines and, if not treated, will eventually result in anemia once the red blood cell count drops too low. Vitamin B12 deficiency may also result in pernicious anemia, a blood disorder in which individuals can't make enough intrinsic factor (IF) in the stomach. Without enough IF, individuals can't absorb B12, which means they require B12 injections that bypass the stomach.

Possible causes of B12 deficiency include Crohn's disease, short bowel syndrome, atrophic gastritis, weight loss surgery, intestinal parasites, lupus, Graves' disease, pernicious anemia, following a vegan diet, and chronic alcoholism. Risk of deficiency also increases with age. The most common symptoms of B12 deficiency anemia are:

- Tiredness
- Shortness of breath
- Palpitations (irregular and/or heavy beating of the heart)
- Sore tongue or mouth
- Weight loss
- Yellowish or pale skin

- Menstrual difficulties

A simple blood test can identify the presence of vitamin B12 deficiency.

3. Candida

Candida is a fungus (type of yeast) that exists in low levels in the mouth and intestinal tract, where it helps with absorption of nutrients and digestion. When this fungus is overproduced, however, it can cause an infection in the vagina, mouth, and intestinal tract, although it may also affect the skin and mucous membranes. Among people who have a weakened immune system, the infection can spread to the blood and membranes around the brain and heart.

If you are inactive, you are feeding your fatigue.

Factors that can cause candida infection include eating a diet high in processed carbohydrates and sugar, chronic stress, use of antibiotics, use of oral contraceptives, a weakened immune system, and diabetes. Signs and symptoms of a candida infection include:

- Exhaustion (regardless of how much sleep you get)
- Cravings for sweets
- Vaginal or urinary tract infection (recurring)
- Gas and bloating
- Thrush or white coating on the tongue
- Bad breath
- Joint pain
- Mental foginess
- Loss of libido
- Chronic allergy, sinus, nasal drip problems
- Mood swings

If you suspect you have a candida infection, a comprehensive stool test should provide the answer so you can begin treatment, including dietary changes.

4. Depression

Most of us feel sad or lonely occasionally, but when such feelings become overwhelming, cause physical problems, significantly impact everyday activities, and last for months, then you're likely dealing with clinical or major depression. It can reduce your energy levels and disrupt your sleep, making you even more tired during the day.

- Fatigue and reduced energy
- Trouble with memory, concentration, making decisions
- Feelings of worthlessness, guilt, or helplessness
- Irritability, restlessness
- Insomnia, excessive sleeping
- Loss of interest in activities or hobbies once pleasurable, including sex
- Loss of appetite or overeating
- Feelings of hopelessness or pessimism
- Persistent physical symptoms such as headache, cramps, pains that are not relieved with treatment
- Persistent feelings of sadness, anxiety, or being "empty"
- Thoughts of suicide or suicide attempts

If you are experiencing symptoms of depression, you can seek help from a mental health professional.

5. Fibromyalgia

Although the first symptom you may think of when you think about fibromyalgia is chronic pain, chronic fatigue also is a significant part of this syndrome. Approximately 10 million people in the United States have fibromyalgia, and the condition affects 3 to 6 percent of the world's population. The majority of those affected

(75 to 90 percent) are women. It can occur alone or with other conditions, such as rheumatoid arthritis or lupus.

The cause of fibromyalgia is unknown, although experts have noted that the central nervous system appears to be hypersensitive in people with this disease. Diagnosis is a challenge because there are no definitive tests and the signs and symptoms mimic those of numerous other conditions. The symptoms also vary considerably from person to person. That said, here are typical signs and symptoms of fibromyalgia:

- Fatigue
- Chronic pain, stiffness, or tenderness of muscles, joints, and tendons
- Restless sleep
- Anxiety, mood changes
- Depression
- Problems with memory, concentration, attention
- Abdominal pain related to irritable bowel
- Irritable bladder
- Headache, migraine
- Tingling and numbness

6. Food Hypersensitivities (Gluten)

People who have food hypersensitivities or food intolerance have difficulty digesting certain foods. Food hypersensitivity differs from a food allergy, which triggers the immune system and histamine response, while food hypersensitivity doesn't. However, it can cause a variety of symptoms, including:

- Bloating
- Headaches, migraines
- Cough
- Runny nose
- Tiredness
- Irritable bowel
- Stomach pain
- Hives

Foods most often associated with food intolerance include grains that contain gluten (e.g., wheat, rye, barley), dairy products, and items that can cause intestinal gas accumulation such as cabbage and beans. Individuals with a food hypersensitivity usually aren't bothered by eating tiny amounts of the offending foods, while those who have a food allergy typically respond immediately to even tiny amounts.

7. Insufficient Sleep

It's no surprise that getting insufficient sleep leads to tiredness, but the challenge can be in identifying and treating the cause. Possible candidates include:

- Chronic pain
- Too much light, including the white/blue light from electronic devices
- Getting up frequently to urinate (possible urinary tract infection)
- Insomnia
- Sleep apnea, which could be undetected or undiagnosed
- Snoring partner
- Uncomfortable sleep environment (i.e., uncomfortable mattress, temperature, pillow, noise)

Any exploration into why you are tired should begin with some reflection on whether the cause (or contribution) is related to factors that are limiting your sleep, such as those listed above. Naturally, feeling tired or fatigued can be caused by more than one situation or circumstance.

8. Iron Deficiency

Similar to vitamin B12 deficiency, iron deficiency involves red blood cells. In this case, however, there's an insufficient amount of iron to produce hemoglobin, which is the part of the red blood cells that allows the cells to carry oxygenated



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Sugar consumption affects many organs in your body, from your brain to your small intestines.

Sugar can seem to give you an energy rush, but after this short burst comes the sugar hangover and even lower energy levels as a result.

- Slowed heart rate
- Depression
- Impaired memory

You can have a blood test to determine if your thyroid hormone levels are the cause of your tiredness.

11. Menopause

If you are going through menopause, feeling tired some or much of the time is likely nothing new. In fact, up to 61 percent of postmenopausal women experience symptoms of insomnia, and as many as 92 percent say they are generally tired.

Chronic stress becomes a way of life, and so does being tired all the time, even when you get an adequate amount of sleep and rest.

A blood test can detect an iron deficiency.

9. Lack of Exercise

The adage "energy begets energy" is true; if you are inactive, you are "feeding" your own tiredness or fatigue. That is, a sedentary lifestyle or lack of exercise can lead to fatigue.

Such lack of physical activity may be the result of an injury, chronic health condition, boredom, or lack of motivation.

10. Low Thyroid

The thyroid gland, which is located in your neck, produces a hormone that helps regulate your energy usage. When the gland fails to produce enough of the hormone, your thyroid is said to be underactive. Also known as hypothyroidism, this condition is characterized by low energy and fatigue, as well as a few other symptoms.

Symptoms of hypothyroidism include

- Fatigue
- Increased sensitivity to cold
- Constipation
- Dry skin
- Weight gain
- Puffy face
- Hoarseness
- Muscle weakness
- Elevated blood cholesterol level
- Muscle aches, tenderness, and stiffness
- Pain, stiffness, or swelling in your joints
- Heavier than normal or irregular menstrual periods
- Thinning hair

depression. If this is the case, ask your doctor for a referral to a therapist. It's also possible your postpartum fatigue is related to anemia or an underactive thyroid gland (hypothyroidism). If your fatigue seems to be getting progressively worse, call your doctor to see if you should be tested for these or other conditions.

13. Seasonal Depression

Seasonal affective disorder (SAD), also known as seasonal depression, is a type of depression that is related to changes in the seasons. Most people who experience SAD have symptoms that begin in the autumn and last throughout the winter months. Fewer people develop SAD during the spring and summer months.

Symptoms specifically associated with autumn and winter SAD include:

- Low energy or tiredness
- Irritability
- Hypersensitivity to being rejected
- Excessive sleeping
- Difficulty getting along with other people
- Heaviness in the arms or legs
- Cravings for carb-rich foods ("comfort foods")
- Weight gain

If you experience symptoms of SAD, there are several natural ways, including nutrition and exercise, you can use to manage them. Symptoms that grow progressively worse should be discussed with a health professional.

14. Stress

Stress can take an enormous toll on your health, leaving you feeling physically exhausted and mentally drained. Left unchecked, stress can lead to heart disease, obesity, diabetes, and high blood pressure.

There's a difference between feeling physically tired at the end of the day because you worked out at the gym or you have a physically demanding job, and feeling exhausted because of mental stress. Mental exhaustion from stress can be caused by worrying about situations in your life, such as financial worries, relationship problems, or job issues. Chronic stress becomes a way of life, and so does being tired all the time, even when you get an adequate amount of sleep and rest.

People who suffer from stress-related fatigue usually also experience other symptoms:

- Muscle ache or weakness
- Headache

OVERTREATMENT

The Dangers of Taking Antibiotics Without Prescription

There are healthy, natural ways to build up your immune system without the risks of antibiotics

MOHAN GARIKIPARITHI

Antibiotics have saved a lot of lives. They are a useful invention that can offer serious health benefits when required. But they aren't required often, and taking them without a prescription can harm your health and well-being.

A review of 31 studies, recently published in the Annals of Internal Medicine, found that many Americans who take antibiotics do so without a prescription. How do they get them? Some people save ones they don't use, or they get them from friends or family, purchase them online, or get them from pet stores.

Antibiotics aren't like over-the-counter pain or cold medications. They can't be used to treat a headache, cough, or runny nose. Rather, this medication is an antimicrobial substance that is used to wipe out bacterial infections. They are useless for viruses or common illness. When you take an antibiotic, you're essentially carpet-bombing your microbiome. Regular use can diminish healthy gut bacteria and end up making you more susceptible to future illness. It can also lead to drug resistance.

Moreover, a person needs to complete a prescribed cycle for antibiotics to work. Saving them for later just because symptoms have disappeared doesn't mean your infection has been killed; it may remain dormant and put you and your loved ones at risk at a later date. If you're prescribed antibiotics, it's essential to follow protocol.

More recently, researchers have been stressing the importance of limiting exposure to antibiotics and telling doctors to prescribe them only when necessary. Too many cycles can cause damage to the microbiome that can also cause health risks that may be irreversible. When used in moderation, however, they are likely safe.

One thing you can do to limit illness is to find natural ways to boost your immune system. You can do this by:

- Staying hydrated (adding sage, ginger, lemon, licorice root, and turmeric to tea)
- Eating a healthy diet rich in fruit, vegetables, proteins, and healthy fats (will include all the vitamins and minerals you need, plus antioxidants and antibacterial compounds to boost immunity and limit inflammation)
- Regular exercise
- Good sleep
- Intermittent fasting

Mohan Garikiparithi holds a degree in medicine from Osmania University (University of Health Sciences). He practiced clinical medicine for over a decade. On a three-year communications program in Germany, he developed an interest in German medicine (homeopathy) and other alternative systems of medicine. He now advocates treating different medical conditions without the use of traditional drugs. This article was originally published on Bel Marra Health.



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Many children who struggle to sleep have high levels of anxiety about risks to their family during the night.

Insomnia

How to Help Children Get a Good Night’s Sleep

There is help for parents struggling with children that won’t sleep or won’t sleep alone

MICHAEL GRADISAR & RACHEL HILLER

As the day ends and the evening begins, some parents are getting ready for a serious task. Not because they are preparing for a late shift at work, but because they are about to confront the battle of their children’s bedtime. And we’re not talking about infants or toddlers. These are school-aged children who suffer from insomnia. Until fairly recently, insomnia was largely thought of as an adult sleep problem. Then, in 2014, the diagnosis of insomnia in adults was combined with the behavioral sleep problems seen in children. This means that children can now be diagnosed with an insomnia disorder. There are a number of symptoms of insomnia that overlap between children and adults, including difficulties in fall-

With persistence and consistency, gains can be made in a relatively short period of time.

ing—or staying—asleep. To be diagnosed with insomnia, these difficulties must persist for at least three nights a week and last for at least three months. Another key aspect of a sleep problem is that it’s causing some kind of significant disruption to the child’s and family’s life—that the sleep problem affects normal functioning. Examples of this might include night times becoming unmanageable or very stressful (for the child and parent) or it might be that they are sleep deprived during the day and not coping well at school. The key difference between insomnia in adults and children is that to be able to fall asleep or stay asleep, children often require “special conditions.” This usually means they need their parents nearby. This might involve children needing a parent present in the bedroom to fall asleep, or that the child sleeps on a mattress on the parent’s bedroom floor. It

might even mean the child sleeping in the parent’s bed—either from the beginning of the night, or when they wake up a few hours later. There is no single cause of child sleep problems. But these children commonly share high levels of anxiety around bedtime. The other thing they often share is a fear of themselves or family members being harmed (by an intruder, for example), meaning they feel unsafe in their own bed at night time. These worries make them hyper-vigilant to their surroundings. Any noise outside or bump in the night might be interpreted as a potential threat. Understandably, these children commonly seek reassurance from their parents. Of course, it’s natural for parents to want to provide this reassurance—nobody likes to see their child feeling anxious. So they might find themselves repeatedly telling their child that there’s no

WISE HABITS

Cutting Through Indecision and Overthinking

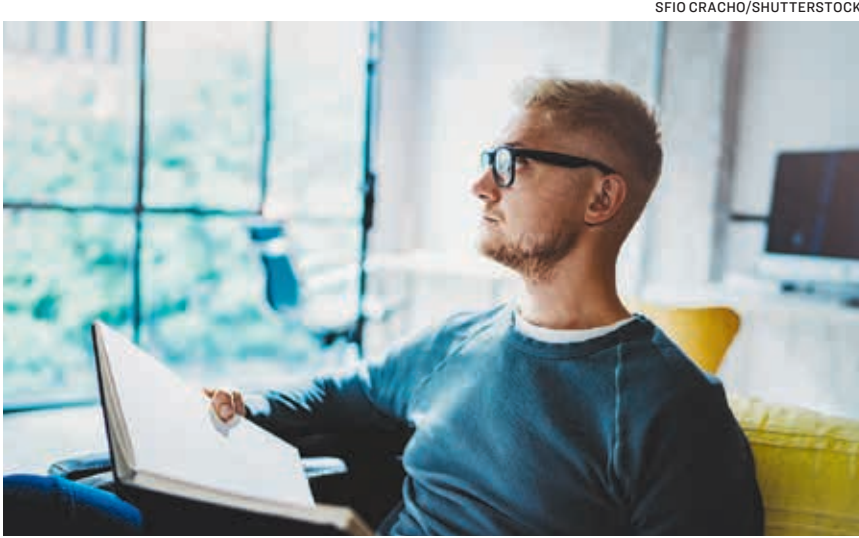
There is a time to think things over, and a time to make a decision and take action

LEO BABAUTA

I’ve been working with a few people who are very intelligent, very competent, and very talented—but they get stuck in indecision and analysis paralysis. In effect, overthinking and getting lost in endless options reduces their effectiveness by producing inaction. Taking any action is likely to be better than inaction and indecision, but we can get so caught up in trying to find the perfect decision that we make no decision. The answer is to cut through the indecision and overthinking with action. Before we talk about that, let’s look at what’s going on with competent people who get stuck in their minds.

The Trap of Overthinking
For someone who doesn’t see a lot of pos-

sibilities, sometimes a choice is easy—you just choose the one that looks obvious. But for someone who has an abundance of intelligence, there are many more doors than that. And choosing can seem impossible. So this person starts creating a decision tree in their mind: “If I choose this, then this might happen, which means I need to decide if I want this, and then that might happen and then this other option brings three more decisions...” They also will research every option, which leads to more research. It becomes an endless cycle of thinking through options, researching them, and through the research, finding even more things to think about. It’s also impossible to analyze so many endless options because each option contains a lot of uncertainty—you can never know how each will turn out, how impor-



SFIO CRACHO/SHUTTERSTOCK

Thinking through a decision is a good idea. Overthinking until the possibilities seem impossibly complex, however, is not.

tant every factor is, what the probability is of each possibility happening. The uncertainty in this kind of thinking is what keeps us stuck in indecision. We fear the uncertain outcome, and would rather have much more certainty. But we can rarely every have that kind of certainty. And spending a lot of time analyzing comes with opportunity cost. In some cases, we may have missed out on time-limited options as we did that research. So how do we deal with this? **Cutting Through With Action** Overthinking can create an unsolvable knot, but how do we untie it? By cutting through it. There can be no solving this knot through thinking—thinking is what gets us into it. That doesn’t mean thinking is

such thing as monsters or scary clowns and that the doors are locked and the house is safe. As understandable as this response is, we know from research that over-reassurance can actually maintain a child’s anxiety. The other common response is the parent sitting with their child until they fall asleep, or letting the child sleep in the parental bed. Sometimes this might even mean one parent ends up sleeping in the child’s bed as a result. These solutions are often planned as short-term plans but can end up lasting for months (or even years). Ultimately, while they are understandable strategies, they are strategies that prevent the child from learning that they can be safe by themselves in their own bed, and can, therefore, end up maintaining the problem. **A Good Night’s Rest for Everyone** If these scenarios sound familiar, you should know that you’re not alone—and that there is a solution. In recent years, there has been more research working out the best ways to help school-aged children overcome sleep problems. We have recently summarized this research in a book, which provides parents with a step-by-step guide to help their children deal with a sleep problem. Multiple studies have now shown that these techniques can significantly reduce the time it takes children to fall asleep and how often they wake at night, while also improving their ability to sleep in their own bed without a parent. Here is a summary of those techniques. To begin with, a good sleep environment and bedtime routine are important. This includes making sure your child has time to wind down in the hour or two before bed. A consistent bedtime and wake-up time are also key. Experimenting with your child’s bedtime can help the child build up something known as “sleep pressure.” Building up sleep pressure helps children to fall asleep more quickly and ultimately to learn that they can fall asleep in their own bed by themselves. Other techniques involve “exposure-based” steps. For example, where the parent moves themselves step-by-step out of the child’s room. Alongside these techniques, parents also learn to work with their child to challenge unhelpful thoughts that might be keeping them awake. These techniques aren’t always easy. But the phrase “short-term pain for long-term gain” rings true for most evidence-based sleep interventions. While it can be challenging, with persistence and consistency, gains can be made in a relatively short period of time, and the whole family can get a better night’s sleep. *Michael Gradisar is a professor in clinical child psychology at Flinders University in Australia, and Rachel Hiller is a lecturer in child and adolescent clinical psychology at the University of Bath in the UK. This article was first published on The Conversation.*

A good sleep environment and bedtime routine are important. This includes making sure your child has time to wind down in the hour or two before bed.



bad. We should contemplate the pros and cons, and take a step back to get some perspective. We should consider the deeper “why” of what we’re doing. But at some point, we have to say, “Enough,” and take action. Setting a limit for thinking can be a good way to do this. “I’m going to spend the next two days thinking about it, and then make a decision on Tuesday.” You consider the merits, do some research, talk to people, and then decide and take action. likely outcomes of each possibility (don’t limit yourself to just two possibilities), and weigh the probable benefits with the probable costs. And then finally, just go with the decision that seems best. Do a quick review of whether this is for the best long-term benefit. And then pull the trigger. Step off the plank. You cut through all the doubts and fears and hand-wringing that are holding you back and just dive in. Get good at this diving in, by doing it in small versions:

You have to pick the best option given your limited information. Write something short and publish it • Take a small action to your long-term dream career or business • Take a small action to be healthier • Declutter one thing that’s easy to decide on, rather than getting stuck on things that are hard for you to make a decision about What decisions are you stuck on? Can you make a small decision that’s easier, and take action? It might give you more information that helps with the bigger decision. And in the end, the real benefit is practicing taking action without getting caught up in indecision and inaction. And if it turns out to be a wrong decision in some way, forgive yourself. Mistakes are inevitable. *Leo Babauta is the author of six books, the writer of “Zen Habits,” a blog with over 2 million subscribers, and the creator of several online programs to help you master your habits. Visit ZenHabits.net*

BECOMING MINIMALIST

Waste Not, Want Not

When goods are cheap, it can be hard to hold onto your money

JOSHUA BECKER

Currently, the average U.S. household carries \$137,063 in debt, but only makes \$59,039 in income per year. The debt-to-income ratio is an important measure of how people are handling their money. It’s not the only measurement, but it can tell us a lot. I’d like to return to these statistics in a moment. But first, I’ll change the subject. I am often confronted with a question about minimalism that goes like this: “My parents grew up during the Great Depression. They were taught a ‘waste not, want not’ mentality. How do I help somebody with that worldview embrace minimalism when it appears to run contrary to everything they were taught growing up?” It’s a good question and one that must be answered. In fact, in “The More of Less,” I write about the different generations and how factors of their upbringing may impact their view of possessions. (I also address why each living generation is currently drawn to owning less). It is important to remember that a “waste not, want not” mentality to possessions is required when goods and resources are scarce or difficult to access. But when that same mentality is brought into an environment where goods are increasingly affordable and accessible, it often results in the accumulation and keeping of possessions that are not needed. A grandmother once shared with me how this mentality resulted in a burdened life. She learned at a young age, because financial resources were limited, to take advantage of sales and never get rid of anything that could eventually serve a purpose. “Joshua,” she said, “I have piles and piles of ungifted Christmas presents in my basement. Every year, after Christmas, when toys were put on clearance at department stores, I would stock up because I couldn’t pass up a sale. But by the next Christmas, there were new things that the kids wanted, and those toys would always go on sale. So, I bought them and gave the new toys. But sure enough, when Christmas toys went on sale after the holiday, I would buy more thinking I could use them as gifts at a later date. The stack of ungifted Christmas gifts in my basement has grown and grown over the years.” This, from my experience, is what happens when we bring a “waste not, want not” mindset into a world of abundance. We accumulate at too fast a pace and rarely get rid of things. I should mention, at this point, that minimalism doesn’t mean we become reckless with the possessions we have. We don’t wastefully throw away everything in our home with the assurance that it can be quickly replaced. That’s not minimalism—that’s irresponsibility. Minimalism has just the opposite effect, it calls us to be increasingly thoughtful in the things that we own. And if something is worth owning, it is worth buying an item of quality that will serve its purpose for a long time. I want to talk a little bit about the “waste not, want not” mentality because it is still a valuable approach to life—not in terms of possessions or the things we keep stacked up in the garage just in case we can use them in the future. I’d like to consider the wisdom of “waste not, want not” when it comes to our finances and how we spend our money. Let me repeat the numbers above: The average American household carries \$137,063 in debt, but only makes \$59,039 in income per year. Additionally, here are some other economic facts from our country:

- 58 percent of Americans have less than \$1,000 in savings.
- 78 percent of U.S. workers are living paycheck to paycheck.
- 85 percent of Americans feel stressed about money.

These are fascinating stats to me considering the United States is one of the wealthiest nations in the history of the world. It doesn’t seem like 85 percent of us should feel stressed about money or that 78 percent of us should be living paycheck to paycheck. I realize, of course, there are some uncontrollable, external factors that may be impacting our personal finances. Losing a job, a medical emergency, or unexpected tragedy (just to name a few) may result in some of us being included among the statistics above. But for many of us, our finances are entirely under our control and we still struggle to get ahead. The reason this happens is that we waste too much money on things we don’t need to buy. We buy clothes we don’t need, furniture we don’t need, decorations we don’t need, kitchen tools we don’t need, cars we don’t need, technology we don’t need, even square footage we don’t need. We struggle to get ahead financially, but our garages are so full of boxes we can’t park our cars inside them. This is all wasted money! Adopting a “waste not, want not” mentality to possessions in times of great affordability and accessibility often results in owning more than we need. But adopting a “waste not, want not” mentality to money in times of great affordability and accessibility is essential. Money is a complicated issue with any number of different variables that come into play in our individual lives. But there is one principle that is important for each of us to adopt: “The less money I waste, the more money I keep.” And the less money you waste, the less stress you feel and the sooner you can get ahead financially. Waste not, want not. *Joshua Becker is an author, public speaker, and the founder and editor of Becoming Minimalist, where he inspires others to live more by owning less. Visit BecomingMinimalist.com*



ROMAN SAMBORSKY/SHUTTERSTOCK

CONNECT TO LEAD

Work Yourself Out of a Job

Empowering others to play your role is a skill that make you more relevant

SCOTT MANN

In the late 1990s, my special forces team was preparing to return to Paraguay on a mission to help the Paraguayan government build a stand-alone special operations capacity. This was a vital need at the strategic level. I was the detachment commander, and “Homer,” a guy who had mentored me for years, was the team sergeant.

As we were preparing for this mission, he called me in and said, “I think we’re doing too much show-and-tell and we’re not working ourselves out of a job.” Here is what he meant by that. The most important thing we could do on this deployment, Homer explained to me, wasn’t to demonstrate our prowess or capability, or provide a short-term skillset, but to help the Paraguayans stand up on their own.

This was something I’d been taught early on in my training, that all Green Berets are taught, and Homer’s words brought me back to center.

From that point on, we re-focused our mission and looked hard at not only what we would teach when we got in there in the short term, but how we could show them what “right” looked like and then start stepping back into more of a tactical oversight to let them take the lead and demonstrate their capability. Even if they stumbled, we’d intervene only when absolutely necessary.

That was a game-changing moment for me as a leader, and it’s a

mindset that I carry with me now in everything I do.

Some people fear that working yourself out of a job means that you make yourself irrelevant to your organization or client. Quite the contrary. What it means is that you actually create opportunities for the people around you to develop their own capacity, so that you can ascend and be even more relevant at a higher level. This keeps us from getting stagnant and it allows organizations and opportunities to grow.

The challenge in this situation is usually the temptation to say, “How do we keep ourselves relevant to them forever?” We give some of what we’ve got, but we don’t give them the full package, keeping them dependent on us. I think that’s the wrong mindset to have.

Instead, get them on their feet and work yourself out of a job, so they retain the organic capacity to do what they need to do. Go in with the intent of working yourself out of a job so they truly don’t need you anymore, where they have either the product or the service on their own, and they can run with it.

This builds a deep sense of reciprocity and trust, paving the way for a lasting relationship and repeat business.

If you are a trainer or leader who teaches skills to another organization, then take it a step further. Go in there and demonstrate what “right” looks like and then use a “crawl, walk, run” method, by which you teach your client to get



on their feet and do what they need to do.

I recently did this with the senior leadership team of a commercial bank. We looked at what the leadership requirements were, and using “crawl, walk, run,” we started to move them in terms of how they needed to work with each other. We got faster and faster until eventually I wasn’t really participating in their meetings at all. I was stepping back in more of a tactical over-watch position. Once that demonstration of capability is there, step back and then just intervene as necessary.

People appreciate anyone who teaches them something they need, and then steps back and lets them run with it. It builds trust and loyalty. And when you think about that with your clients, that’s everything. Because in loyalty, people will forgive you even when you make a mistake. And in trust, you’ve built a relationship that’s bigger than the transaction.

This is the mindset that will low you to attain higher releva with your clients and in your ganization.

Scott Mann is a former Green Beret who specialized in unconventional, high-impact mission and relationship building. He is the founder of Rooftop Leadership and appears frequently on TV and many syndicated radio programs. For more information visit RooftopLeadership.com



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