

NEWSLETTER

AMERICAN SOCIETY OF EXERCISE PHYSIOLOGISTS

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Highlights

The annual ASEP conference was another good one. A big 'thank you' to the folks at the University of Mount Union in Alliance Ohio, for a beautiful and comfortable venue!

Attendees were able to learn from some very well presented topics related to exercise and mental health. From sports psychology to neurological biochemistry, we covered a lot of information and the presenters skillfully integrated how the information could be used in the daily practice of Exercise Physiologists.

ASEP has had a change in plans for the 2017 Annual Conference. We will be meeting in Minnesota to celebrate ASEP's 20th Anniversary. We will be presenting more details on the website and in future issues of this newsletter. We hope you'll stay tuned and plan to join us!

Most people might agree that our most recent election cycle has been tumultuous. In this issue, ASEP's Chief Executive shares some thoughts and we highlight a couple articles from the ASEPonline journals...we hope you'll enjoy them

Recent Inquiry...

- Q: "Do you have a group rate for liability insurance for people in the Exercise Physiology field? Would it cover Internships for college graduates?
- A: ASEP members have found reasonable premiums and good coverage policies under an Exercise Physiologist occupational title with HPSO. Unfortunately, ASEP has not met the member number threshold to qualify for discounted group rates yet. Let's get all EPs to join ASEP so we can get this benefit and other professional level recognition for our new occupation!



Serving Exercise Physiologists since 1997.

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From the CEO

This issue of the ASEPNewsletter is a few weeks behind, but it gives me a chance to share some thoughts on the results of our recent elections. Our new President of the United States will be Donald Trump. Additionally, we will have a Republican majority in both the House of Representatives and the Senate. When our new President is sworn into office, it has been said the first order of business will be to repeal or rework the Affordable Care Act (Obamacare). This may or may not be welcome news to our readers. In fact, it appears our population is split nearly in half for either side. How we each think, feel and relate politically is an individual thing and this article isn't to take one side or the other, but to simply start our thinking as Exercise Physiologists to what these recent changes to our government mean for new or changing opportunities.

One thing I have experienced personally, is a rising cost of insurance. We hear similar reports of this from around the country, so it's not just an isolated issue in my state or region. We know the cost of medical care has been increasing for years and have heard about financial sustainability of systems like Medicare and private insurance companies...even with the mandate that was supposed to bring individual payers into the system to defray and lower premium costs.

Since the medical treatment model is so expensive, and there is turmoil in the systems we have traditionally used to pay for it, it seems a very good time to consolidate ourselves as Exercise Physiologists so that we can exert our expertise in the systems that are going to be changing significantly within the next couple of years and beyond. Specifically because those systems are going to be looking for cost savings and reductions. Prevention through our Proactive Health Model has the potential to be accepted and integrated in how our government approaches population health and health care policies as well as how insurers and care facilities could benefit from a population with less incidence of disease and injury.

I see the main obstacle to those systems and decision makers recognizing Exercise Physiologists is our lack of consolidation. EPs have been lumped in with "fitness professionals" whether degreed or not, by certifications from various organizations over the past 60+ years.

ASEP isn't just another certifying body. We are just for Exercise Physiologists and when we come together as a self-governed professional occupation, (we just got our formal occupational category from the Dept. of Labor a couple years ago) then we will begin to have the numbers that can impress the powers that be, whatever party they might be, that we are responsible and accountable for the practice of Exercise Medicine.

Whether you want more professional opportunities or simply want to support Exercise Physiologists, I request that you join ASEP today. Our election showed us the power of unity, even within great division, so to EPs must come together out of the chaos, to make our change known.

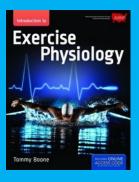
Shane Paulson MA. EPC. CEO, American Society of Exercise Physiologists info@asep.org

Job Postings

There are new job postings on www.asep.org... join ASEP as a member to gain access to them!

Advertisers

Click the image below to visit our advertisers sites:





JEPonline

The "Journal of Exercise Physiologyonline" is an open access journal that is published every other month.

There are many articles published in each issue of the <u>JEPonline</u>. Follow the link to read more.

If you have research that you would like to publish in the JEPonline, click on this paragraph to follow the link to the submission page.

PEPonline

When it comes to philosophy and reasoning on what we Exercise Physiologists need to be thinking and doing to establish ourselves as professionals, both in and out of the healthcare arena, nobody has written more than Dr. Tommy Boone!

ASEP invites you to submit your experiences or concepts for publication in the <u>PEPonline</u> to help us further our professionalization efforts.

Visit the <u>PEPonline</u> to read through our past issues and then write one yourself and submit it!

Visit the <u>JEPonline</u> for this and other articles: October 2016 Issue JEPonline

Effects of a Combination of Aerobic and Resistance Training and Dietary Intervention on Body Composition, Lipid Profile, Inflammation, and Cardiorespiratory Fitness in Obese Adolescents

Nailton José Brandão de Albuquerque Filho1,5, Victor Araújo Ferreira Matos2, Thiago Renee Felipe1,5, Edson Fonseca Pinto1,3,5, Gleidson Mendes Rebouças3, Victor Hugo de Oliveira Segundo4, Maria Irany Knackfuss3,4, Humberto Jefferson de Medeiros3.4

1Programa de Pós-Graduação em Biotecnologia da Universidade do Federal do Rio Grande do Norte (UFRN), Natal, RN, Brasil, 2Programa de Pós-Graduação em Educação Física da Universidade do Federal do Rio Grande do Norte (UFRN), Natal, RN, Brasil, 3Departamento de Educação Física da Universidade do Estado do Rio Grande do Norte (UERN), Mossoró, RN,, Brasil, 4Programa de Pós-Graduação em Saúde e Sociedade da Universidade do Estado do Rio Grande do Norte (UERN), Mossoró, RN, Brasil, 5Escola da Saúde da Universidade Potiguar (UnP), Natal, RN, Brasil

ABSTRACT

Albuquerque Filho NJB, Matos VAF, Felipe TR, Pinto EF, Rebouças GM, Oliveira Segundo VH, Knackfuss MI, Medeiros HJ. Effects of a Combination of Aerobic and Resistance Training and Dietary Intervention on Body Composition, Lipid Profile, Inflammation, and Cardiorespiratory Fitness in Obese Adolescents. JEPonline 2016;19(5):1-14. The aim of this study was to determine the effects of a combination of aerobic and resistance training plus dietary intervention on body composition, lipid profile, inflammation, and cardiorespiratory fitness in obese adolescents. Twenty-three obese adolescents were divided into two groups: Intervention Group (IG) that performed a combined exercise program plus nutritional intervention for 16 wks and a Control Group (CG) that did not performed any intervention. Body weight, height, body mass index, waist circumference, sum of triceps and subscapular skinfold thickness, fasting blood glucose, triglycerides, LDL-C, HDL-C, total cholesterol, hs-CRP, strength by onemaximum repetition, and VO2peak were measured. Across intervention period, effects were tested using analysis of variance for repeated measures with post hoc pairwise comparisons. There were significant improvements in body composition, lipid profile, hs-CRP, upper and lower body strength, and cardiorespiratory fitness in the IG when compared with the CG. There were no effects for fasting glucose, despite a slight decrease in the IG and a significant increase in the CG after 16 wks. The findings indicate that the combination of aerobic and resistance training plus dietary intervention resulted in an improvement in body composition, lipid profile, hs-CRP, and cardiorespiratory fitness in obese adolescents.

October 2016 JEPonline

Comparison of a Time Efficient to Standard Stretching Protocol for Short-Term Flexibility Improvements

Rebecca Marucci, Andrew Heck, Emily Ferraro, Rebecca Kudrna Sport & Exercise Physiology, DeSales University, Center Valley, PA

ABSTRACT

Marucci R, Heck A, Ferraro E, Kudrna R. Comparison of a Time Efficient to Standard Stretching Protocol for Short-Term Flexibility Improvements. JEPonline 2016;19(5):49-58. The purpose of this study was to compare the effectiveness of a short-term flexibility protocol to a standard stretching protocol. Twenty-three healthy college-aged volunteers (18 to 22 yrs of age) were randomly divided into three groups: Experimental (EXP), Standard (STD), and Control (CON). The 5-min EXP protocol involved three stretches targeting chronic adaptive shortening while the 10-min STD protocol consisted of six conventional stretches. Hip flexion measurements with a goniometer, functional double reach test, straddle groin flexibility test, and modified sit-and-reach were used to assess flexibility before and after completed 8 sessions over 2 wks. A Kruskal-Wallis analysis identified a significant difference between groups for overall ranked flexibility improvements (H(2)=7.159, P=0.028). The post hoc Mann-Whitney U Test identified significant flexibility improvements in the EXP and STD groups compared to the CON group, but no significant difference in flexibility between the EXP and STD groups. The EXP stretching protocol improved overall flexibility as much as the STD protocol in half the time. Future studies will need to examine if the time effective protocol yields greater adherence among clients.

EPC REGISTRY

Exercise Physiologist Cer	rtified (EPC)	Certificate #
Sharief Abed	May 2016	269
Elisa Andrew	May 2016	262
Patrick Ayres	October 2000	1
Audra Berg	February 2006	152
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Thomas Brozoski	May 2016	265
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	May 2016	
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Dale Wagner Teresa Walsh	July 2013	21 240
Tim Werner	June 2015	249
Darryn Willoughby	October 2000	249 11
Frank Wyatt	April 2012	234
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EPC Archives

Individuals who have successfully challenged the EPC boardexam but are not listed on the EPC Registry should ensure their online ASEP membership is current and upto-date. Go to www.asep.org and join, renew, or update your profile. If you are having difficulties with your membership payment or updating your member profile, please contact the national office and we will be happy to assist you.

Contact Us

ASEP provides academic EP program accreditation and individual EP board certification as the only exclusive professional organization for Exercise Physiologists in the United States. Our national office is in Minnesota. You may contact the ASEP at the following:

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Visit us anytime on the web at www.asep.org.