Starting Strength

Cardell and Dr. Coleman by Mark Rippetoe

I have worked in the fitness industry since 1978, and have owned a gym since 1984. Since I went into business for myself, I have approached the teaching of strength training from a completely different perspective than the industry's standard model – I have taught all my members to lift barbells, as opposed to the machine-based exercise paradigm used by the commercial fitness industry at large.

During my time as a gym owner I have made several mistakes, none of which had anything to do with my decision to teach everybody how to use barbells safely, efficiently, and productively. Rather, my biggest regret was not doing so, once, when I should have.

Dr. Coleman came to the gym on the advice of his doctor. He was in his late 60s at the time, still a working cardiologist, but he was not terribly robust even for a guy his age. He was a very nice man, excruciatingly polite to everyone and generous to a fault. I remember the first question I asked him, being one of the first doctors we'd had in the gym and me being curious about lots of things: "How is it, Dr. Coleman, that a dog can drink nasty water out of a puddle in the road and be perfectly fine, but if I did that I'd get sick – as a dog? Haha." He regarded me momentarily, as if deciding how to respond to a curious but dull child (not an altogether inappropriate assessment), and calmly explained that there were profound differences in the digestive environment between that of myself and my little bulldog girlfriend Dumplin. He was a patient man as well.

My friend Cardell ended up with Dr. Coleman as his personal training client. Cardell and I had trained together for years, starting at the YMCA in downtown Wichita Falls, Texas in the early 80s. This was the same weight room in which Bill Starr, former editor of York Barbell's *Strength and Health* and one of the first strength coaches in the world, had started out in the late 50s – the room had history. It was important to us too, as a place where we honed our skills and grew as lifters and men. When I bought Anderson's Gym in 1984, we moved our training headquarters to the renamed Wichita Falls Athletic Club, and I began the task of applying barbell training to a commercial gym's clientele.

Following the prescribed industry methodology we had both been taught by the then-becomingmainstream National Strength and Conditioning Association, Cardell used a machine-based approach in his work with Dr. Coleman. It was perfectly congruent with the thinking at the time, and it still is: the client was old, free weights are dangerous, we mustn't hurt old people – we mustn't even *entertain the possibility* of hurting old people – and Dr. Coleman skated through his workouts with Cardell unscathed.

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He also failed to make any significant progress toward a more robust physical capacity. Dr. Coleman joined the gym as a frail older man, never walking with the aggressive, confident stride of a fit person, and never assuming the positions of sitting, standing back up, or getting in and out of the car without carefully and deliberately measuring his position. He left the gym many years later a still-frail even-older man.

And I let it happen. My fault for standing there, watching but paying no attention, as the potential for reversing the effects of age and a sedentary lifestyle slipped through our fingers.

I really didn't know at the time what I came to understand later – and what I'm explaining to you now. I hadn't yet exposed enough people of Dr. Coleman's demographic category to legitimate barbell training, and I hadn't seen the response over both the short and the long-term. I had begun to suspect, but didn't yet know, that older people respond to the systemic stress of correctly-designed barbell training the same way everybody else does: they get stronger. The muscles that move them through the day, the connective tissues that keep their skeletons tight and efficient, *even the bones themselves* – everything gets stronger under the bar.

So, read carefully my important lesson: The most significant loss in physical capacity with advancing age is *strength* – the ability to produce the force of muscular contraction. Your ability to interact with your environment effectively is predicated upon your ability to exert the force of muscle contraction against the system of levers that comprises the skeleton, and therefore to control your own body's mass and the masses of the physical objects you interact with.

All the other physical problems associated with age – the loss of muscle mass and balance and bone density, the increased risk of diabetes, and the much higher risk of physical injury – are related to either the loss of strength itself or the process by which this loss occurs. Balance, endurance, power, accuracy, and speed are all aspects of strength. And the things we do to remain strong – the use of our muscles to do physical work and the associated use of carbohydrate as the fuel for muscle contraction – keep our metabolism functioning normally, thus preventing the acquisition of Type II diabetes, and perhaps even dementia. I am aware that this seems like a rather lavish



statement. But the facts are rapidly emerging, and those of us who have been in this business long enough to see the patterns already know that the opposite of sitting on your butt is not running – it is lifting weights. Walking is the way you get from your car into the store – it's not really exercise unless you're already two-thirds dead. Running is fine; it keeps your heart and lungs working pretty well, but so does strength training. More importantly, lots of older people simply cannot run, and running absolutely fails to convey the other benefits that strength training enjoys as a monopoly.

As it turns out, *everybody* can train for strength, if it's done properly. We learn from teaching, and teaching thousands of people to squat, press, bench press, and deadlift has taught me a lot about exercise, training, the exercises themselves, how to teach them, and what happens to people who do them for years. I have followed many people over the course of decades spent in the gym, and experience has condensed for me the following facts:

1. Barbell training is the best way to get strong. It allows everyone to make improvements in strength, power, and general physical capacity, regardless of age, sex, and current ability. It works the whole body,

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it's more effective than running, and it's much safer than the constantly-varied popular fitness Craze of the Day, neither of which are doable by most people after a certain age.

2. Barbell training is basically normal human movement patterns which are loaded with *a gradually increasing weight*. In the same way that picking a load up from the floor, shoving a load up overhead, and squatting down and back up with a load is safe when you do it without a barbell, barbell training is a safe way to gradually increase the strength of these normal human movements. Your knees, back, and shoulders are designed to work under a load – barbells allow the loading to gradually increase and to remain biomechanically efficient.

3. Since you're standing on your feet while you lift, barbell training teaches balance. Too often, a broken hip is the first in a series of events that lead to death. Learning *not to fall down* as you move the load is the first step in barbell training. For example, a squat is the same motion as sitting down and getting up from a chair – taken for granted when we're younger, but often a great effort for the elderly. Barbell training dwarfs the ability of a machine-based program to make changes in general physical capacity because machines don't *allow you to fall.* If you learn how *not to fall* while you get stronger, you improve much more than just your strength.







4. Barbell training is the most effective way to increase bone density. One of the key features of living organisms is their ability to recover from stress in a way that produces an adaptation to the stress, so that next time it happens the organism is prepared for it. The gradually accumulating loads used in the primary barbell lifts strengthen not only the muscles, but the bones, ligaments, tendons, nerves, and recovery systems. Quite literally, *every part of your body* adapts more effectively to systemic stress than to a piecemeal approach, since heavier loads can be lifted and greater stress can be applied.

5. Old age should not be a holding pattern for death. Perhaps someday it won't be. None of us should be parked and left to die. Our gyms have worked with people who have diabetes and its associated pathologies, like blindness, neuropathy, heart disease, dementia, and profound frailty. When we improve their strength, we improve their lives, and sometimes we can make their final years more productive than their wasted youth.

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My big mistake was made before I learned these lessons. I allowed Cardell to take a less-effective approach with one of his clients, and the client paid the price. My gym, my fault.

Dr. Coleman was never profoundly incapacitated until the last years of his life. He was merely very frail, with the tentative approach to every movement of his body which marks the condition. Unfortunately, these years were significantly more numerous than perhaps they could have been had I taken a more aggressive approach to his training when he first asked us for help. Once physical capacity is lost, it's much harder to recover than it is to merely maintain it, and it's certainly harder to increase it in your 80s than in your 60s.

Had I insisted that he be trained like all the other people we worked with all those years – and as I have since approached the older people who have come to us, including our 91-year-old gal who currently deadlifts, bench presses, and pushes her very own weighted sled, who is using less insulin, *and who has abandoned both her walker and her cane* – things would have been different for Dr. Coleman. I'm convinced we could have made his last years more productive and his death a shorter event than the protracted chaos of losing his physical grasp on life.

Had I been able to explain it to him at the time, he would have understood. I won't make the same mistake again.

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