

# Smarter Bodies

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Editor Jim Rabic

# Nutrition of the week Contest



Prizes for the  
BEST & WORST  
diets!

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## **5 Foods to Fuel Your Workout**

The best food to eat before a workout depends on when you're going to eat it.

If you're an early riser who goes to the gym on the way to work, you won't have enough time between leaving home and arriving at the gym to really digest a full breakfast. Your pre-workout snack is going to have to be really light. On the other hand, if you're working out in the middle of the afternoon, your workout is going to be fueled by your choices at lunch and you'll have a couple of hours to digest your food before hitting the gym. That means a different pre-workout meal from the one you might choose if you were scrounging around the kitchen at 5:30am on the way to the track.

The rule is this: The less time until the workout, the less you should eat. This makes sense: It takes time to digest food, so you don't want to scarf down a huge breakfast right before getting on the treadmill. Those planning to run the marathon on Sunday usually eat a huge dinner on Saturday night. But those planning to go for a three-mile jog at 5:30am may be fine with just an orange eaten about 20 minutes before.

With that in mind, I've prepared a list of my five favorite all-around pre-workout snacks. These work just fine whether you're an early-morning exerciser and need something light or you're about to head out for a workout in the late afternoon and are just looking for a little extra energy to combat the 3pm crash.

- **With a Smear**

This is one of my favorite snacks, period. I take some hearts of celery and fill in the groove with some organic almond butter or peanut butter. This snack really travels well in Tupperware and makes a terrific pre-workout snack. Why? The celery has fiber and nutrients (including calcium and vitamin A) and a ridiculously low 6 calories per medium stalk. The nut butter has protein and fat. The overall calories are low, and this really fills you up without slowing you down, providing great "slow-release" energy for a terrific workout.

- **The Double A**

Simply put, an apple with almonds. The apple is the perfect food for a pre-exercise snack. The sugar load is moderate, it contains valuable pectin fiber which slows the entrance of that sugar into the bloodstream, and it's a nutritional powerhouse containing vitamins, minerals and antioxidants. Combine it with about a dozen almonds, which add some fat and protein, further slow the entrance of the sugar into the bloodstream for sustained energy, and keep hunger away.

Whey to Go

Whey protein is my favorite kind of protein powder. Not only is it extremely high-quality, bioavailable

protein; it supports the immune system by providing the building blocks for glutathione, arguably the body's most important antioxidant. And studies indicate that whey protein may boost weight loss efforts. According to one French study, eating whey before exercise supports fat burning and may help with gaining or maintaining lean body mass. I suggest a whey protein shake made with either water alone or with frozen berries. The berries add fiber, nutrients and some extra carbohydrates, and make for a more delicious drink.

- **Berry Cheesy**

Here's a little tidbit of info that you might enjoy: In my latest book, *The 150 Healthiest Foods on the Planet* (due out in January 2007), I asked 16 of the best-known experts in the country to contribute lists of their 10 favorite healthy foods. Berries, especially blueberries, made the list of more experts than any other food. Berries are loaded with phytonutrients, antioxidants and fiber, and are low in sugar. Mix a bowl of berries with a piece of string cheese for the perfect pre-workout snack. The string cheese has 8 grams of protein, some fat to keep hunger at bay and only about 80 calories. And it's an excellent source of calcium.

- **TG: Too Good**

The initials of this snack stand for turkey and grapes. It's a perfect match of protein, carbs and low calories to take the edge off your hunger and prime your exercise pump. Four small slices of deli-packaged turkey contain only 87 calories but give you more than 14 grams of protein, plus some of the cancer-fighting mineral selenium to boot. A cup of grapes adds some carbs to the mix together with all the health-giving phytochemicals grapes are known for. Go for fresh turkey whenever possible as the packaged kind is high in sodium and go for red or purple grapes as they have more antioxidants.

Obviously there are other choices besides my five favorites. In a pinch, I'll use a protein bar, though you'll want to watch the sugar content and look out for the presence of trans-fatty acids. One of my favorites is Atkins Advantage, though there are others you may like as well. Hard-boiled eggs are another secret weapon in the search for portable protein that combines nicely with a little fruit (such as an apple). Remember: What you eat after the workout is even more important than what you eat before it. That's when your muscles are hungry and your depleted glycogen (muscle sugar) stores need replacing. The "golden hour" after the workout is the time when those muscles soak up nutrients most effectively. Choose what you eat after the workout with just as much care as you choose that pre-workout snack.

## **Running Afowl: Researchers First To Measure Energy Used By Leg Muscles**



Researchers at Northeastern University today announced that they have demonstrated that, contrary to previous research, swinging the limbs during the act of running requires a significant fraction of energy. In contrast to

the established hypothesis, which asserted that force produced when the foot is on the ground (stance-phase) is the only determinant of the energy cost of running, Northeastern researchers observed that a significant fraction energy was used to fuel muscles that move the limb while it is off the ground (swing-phase).

In the study, the researchers estimated energy use by measuring blood flow to the hind leg muscles of guinea fowl in an effort to better explain the energetics of walking and running. In contrast to C. Richard Taylor's "force hypothesis," which suggests that swing-phase costs were low enough to be ignored, the researchers were able to demonstrate that the swing-phase muscles, in fact, consume 26 percent of the energy used by the limbs when running while the stance-phase muscles consume the remaining 74 percent of the energy. These findings represent the first time anyone has been able to look directly at the muscles during running and suggest that the force hypothesis needs modification. The swinging motion backwards is, indeed, the researchers assert, expensive energy-wise. Results of the study were published in the January 2nd issue of *Science*.

"The pioneering effect of this research is that by looking directly at blood flow to all of the individual muscles during running we were able to establish more directly the consumption of energy during the swing-phase," said Marsh. "Taylor's force hypothesis tried to unify the mechanics and energetics of running and explain the effects of body size and locomotor speed on the energy cost of running. Not everyone was necessarily convinced of all of the details of this hypothesis, but no one had been able to prove otherwise because most research on running has been based externally observable phenomena. By being able to estimate the energy use by the individual muscles, we were able to account for energy consumption during swing-phase. Our work maintains Taylor's emphasis on using energetics to understand terrestrial locomotion, but our findings suggest the force hypothesis will need to be modified to account for a

more detailed partitioning of the energetics among muscles used during running."

Senior author of the article titled, "Partitioning the Energetic of Walking and Running: Swinging the Limbs is Expensive," is Richard Marsh from the department of biology at Northeastern University. Contributors to the article include NU researchers Jennifer Carr, Havalee Henry and Cindy Buchanan and David Ellerby from the University of Leeds in England.

This ability to demonstrate energy consumption in the swing-phase of running is significant because it provides a technique to answer other questions about the energetics of running, which could lead to a more in-depth understanding of which specific muscles are used to support weight and how changes in energy use are caused by differences in body size and speed. The report's findings may potentially improve our current knowledge of rehabilitative medicine.

"The potential application of these findings are many," said Marsh. "Future research will allow us to connect the mechanical functions of individual muscles with their energy use. This detailed information will be useful in models that integrate the energetics and mechanics of running. Because running birds are the best bipedal runners other than humans, our research should provide many valuable clues to understanding human locomotion."

## **The Need to Count Calories**

Hopefully you will always be interested in the nutritional value of the food you eat, and perhaps from time to time you will be curious about the calories burned by an activity you perform or are considering making a part of your routine. But counting the calories you eat and the calories you burn on a daily basis is quite a different matter.

This website was not created with the intention that you visit it daily for the rest of your life, but rather to help you learn to make healthy choices about the foods you eat and the activities in which you participate.

Today you may need to count calories in order to better understand your eating and exercise habits and make improvements. Or perhaps you find counting calories necessary to help keep things under control. But our lives are always changing, and your needs in this area will change too.

The greater value of counting calories today is what you will learn from the experience. As you learn to eat highly nutritious, low calorie foods and exercise on a regular basis, you will likely find that counting calories is not necessary at all.

# Spinning News

## Spinning Tips & Hints

- **Dress for success**

Don't make the mistake of showing up in your usual boxers or running shorts. Opt for bike shorts, preferably padded.

- **Don't forget your H2O**

Bring a full water bottle and be prepared to consume plenty of fluids throughout class.

- **Make the proper adjustments**

Before class begins, have the instructor help you adjust your seat to the appropriate height. If the seat is too low, you won't be able to get enough leg extension on the down stroke. If it's too high, you'll be straining to reach and might injure yourself. Here's a good rule to follow: Your upstroke knee should never exceed hip level, while your down stroke knee should be about 85% straight.

- **Relax your grip**

Don't grip the handlebars too tightly, since this will increase the tension in your neck and shoulders.

- **Exercise at your own pace**

Don't be intimidated by the high speeds and furious intensity of your cycling mates. Listen to your body and adjust the tension and speed accordingly, and don't be afraid to sit back and take a break when necessary.

- **Talk to your instructor**

Be sure to introduce yourself to the class instructor and go over any questions and or concerns you may have. The instructors are professional and are there to make your experience the best it can be.

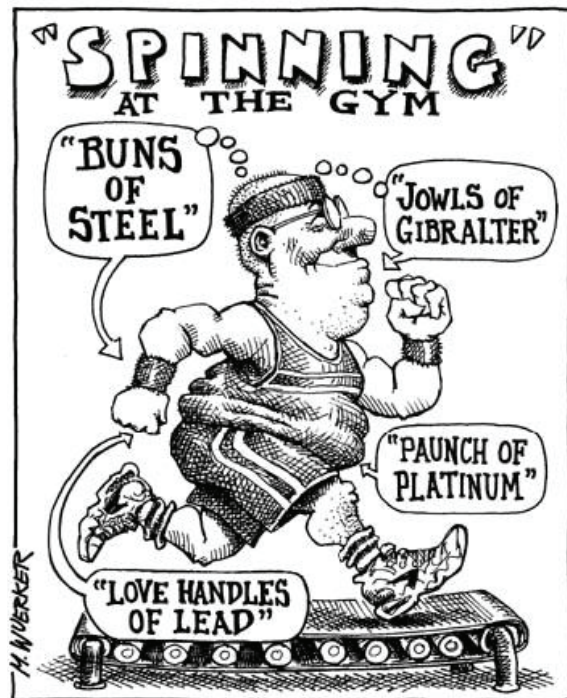
### One-Leg-Pedaling Trainer Workout

One-leg pedaling is an extremely effective way to work on strength and add variety to your indoor training at the same time. When you pedal with both legs,

the leg that pulls the foot through the bottom of the stroke, up the back and over the top gets lazy. That's because the other leg is pushing the pedal down, a much more powerful and natural action than pulling the pedal up.

Now think about it. If your leg doesn't help bring the pedal up and over the top, it's just dead weight. It increases the resistance your muscles must overcome to move your bike down the road. This is why learning to pedal a complete, 360-degree circle with each leg makes you a better rider. One-leg pedaling drills teach your muscles and nervous system.

Warm up on the trainer for 20 minutes by pedaling with both legs. Unclip your left foot from the pedal. Hook it back over the trainer just to the left of where it connects to the rear hub (photo). Or, rest it on a chair or stool just outside the left pedal circle. Pedal at about 90 rpm with your right leg. Use an easy gear until you get accustomed to the unusual feeling. You'll probably find it difficult to pedal for more than 2 or 3 minutes the first time. The muscles that lift your thigh and push the pedal over the top will fatigue quickly. But you'll improve rapidly. After a few minutes of using the right leg, switch to the left and pedal for the same amount of time. As you improve, increase the gear and the amount of time you pedal with each leg.





**Help Wanted** for the Front Desk  
coverage for shifts in September.

**Leave your name at the Front Desk**

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Now Available - Permanent Book  
Waiting List



If you can't get the appointment  
time you need, leave your name  
at the front desk and we will  
contact you when it is available

### QUOTE OF THE MONTH

Fitness - If it came in a bottle, everybody would  
have a great body.  
- Cher

## Strength Training May Lower Diabetes Risk in Teens

Overweight or obese adolescents may lower their risk of developing type 2 diabetes by doing strength training exercises at least twice a week, a recent study showed. The study was conducted by researchers at the Keck School of Medicine of the University of Southern California (USC).

Being overweight or obese significantly boosts a child's risk of developing insulin resistance, which is the inability of body cells to effectively use the hormone insulin to process blood glucose, which can subsequently lead to type 2 diabetes.

Both aerobic and resistance exercise have been shown to improve insulin sensitivity among adults, but little information exists on benefits for overweight teenagers. Researchers used a resistance training regimen for this study.

The researchers focused on Latino teenagers, who are at greater risk for diabetes. According to the U.S. Centers for Disease Control and Prevention (CDC), about half of all Latino children born in 2000 are expected to develop type 2 diabetes in their lifetime.

For this study, 22 boys ages 14 to 17 performed weight lifting exercises twice a week for 16 weeks. Personal trainers guided the teens, who were using gym equipment. As the study progressed, the trainers had the teens do fewer repetitions but with increased weight resistance.

The results showed that 91 percent of the study participants considerably improved their insulin sensitivity. Although there was no change in the boys' total body fat mass, their percentages of body fat significantly decreased and lean muscle mass increased.

**"This shows that lifting weights is a good form of exercise that overweight teens can excel at and benefit from. Whether they lose weight or not is not important—they still benefit by increasing muscle mass," Dr. Michael Goran, the study's leader and USC professor of preventive medicine, said in a press release.**

**T-Shirt  
Tuesdays**



**T-SHIRT WINNERS**

**T-Shirt  
Tuesdays**

**MARLTON**

**Push up**  
Amber Mcveigh 127  
Steve Furst 147

**Prone abdominal hold**  
Karen Gomez 5:07  
Sean Jr 5:16

**Leg extension**  
Alan Pechinski 115  
Maureen Woods 90

**Static hold**  
Lynn Pechinski 3:00  
Jeff Ferraro 2:07

**Bench press**  
Maryann Hajduk 60  
Ron Shapiro 57

**Jump rope**  
Danielle Senior 2:58  
Mike medina 4:01

**Pull up**  
Deb Marsdale 30  
Ron Shapiro 24

**TURNERSVILLE**

**Most Military Push ups**  
Rich Flexon 75  
Darci Bianchi 60

**Longest Jump Rope**  
Ray Anderson 2:42  
Vikki DeVincent- shirt & pic  
5:10

**Longest Static Dumbbell  
Hold**  
Rich Flexon 2:05  
Rosie Stoelker 2:18

**Pull ups**  
Ed Derosé Jr 1:05  
Jaki Holshue – shirt & pic  
46 sec

**Longest Static Abdominal  
hold**  
Ed Derosé Jr 4:31  
Darci Bianchi 4:11

**Dips**  
Mike clothier 36  
Jaki Holshue 8

**Leg Extensions at 40% BW**  
Ed DeRose Jr. 325  
Jaki Holshue 111



**T-Shirt  
Tuesdays**



**T-Shirt  
Tuesdays**

## **Botox May Quiet Chronic Daily Headache** *Nearly two-thirds of patients got relief, study found*



Botox injections may be an effective treatment for sufferers of chronic daily headache, according to a new study.

"The diagnosis of chronic daily headache is used in patients who have 15 or more 'headache days' in a 30-day period," study co-investigator Dr. Stephen Silberstein, director of the Jefferson Headache Center at Thomas Jefferson University Hospital in Philadelphia, said in a prepared statement. Experts estimate about four percent of the world's population suffers from this type of recurrent headache pain.

In their study involving 117 patients, Silberstein's team found that after three cycles of Botox (botulinum toxin type A) injections in the face, head and neck, nearly 60 percent of participants experienced an average 50 percent reduction in headaches.

The study -- funded by Allergan, Inc., the makers of Botox -- was presented April 14 at the annual meeting of the American Academy of Neurology, in Miami Beach, Fla.

People with chronic daily headache are likely to have family, social and occupational problems, which perpetuate the headache cycle, Silberstein noted, and many also suffer occasional or frequent migraines.

## **Daily Aspirin Helps Prevent Enlarged Prostate**

### *Other NSAID painkillers did the same*

Older men who regularly take aspirin or a similar painkiller may help keep prostate enlargement at bay, a new study finds.



The common condition, called benign prostatic hyperplasia, typically affects one of every four men ages 40 to 50 and almost half of those over 70, experts say. Enlarged prostate can lead to frequent urination and other bothersome effects. However, men who regularly took a non-steroidal anti-

inflammatory drug (NSAID) "had a reduction of 50 percent in enlargement and a 35 percent reduction in moderate to severe urinary problems," said Jenny St. Sauver, a Mayo Clinic epidemiologist who led the study, which was reported in the American Journal of Epidemiology.

It didn't matter which NSAID a man was taking: aspirin, ibuprofen, naproxen (Aleve) or a more expensive cox-2 inhibitor such as Celebrex, St. Sauver said.

"Eighty percent were taking daily aspirin," she said.

"We did look at the other drugs, but the differences were not statistically significant."

The study was prompted by several earlier studies that suggested a decreased risk of prostate cancer for men who took NSAIDs regularly. This study included nearly 2,500 men living in the neighborhood of the Mayo Clinic in Minnesota. Data on NSAID use and prostate enlargement arose from questionnaires the men completed every two years from 1990 to 2002.

There are several theories as to how NSAIDs might keep prostates from enlarging. According to St. Sauver, the drugs may reduce prostate cell growth or increase the natural death of these cells. Another theory credits the drugs' anti-inflammatory activity.

The findings should not be seen as a green light for men to rush out and start taking these painkillers without consulting a doctor first, the experts stressed. Men should always be cautious about taking NSAIDs, St. Sauver said, because the drugs raise risks for gastrointestinal bleeding.

"We would like to see the results of our study replicated," she said. "If it can be, it would be important to figure out what kind of dose and what kind of timing would be proper."

The warning against indiscriminate use of NSAIDs was repeated in stronger terms by Eric Jacobs, senior epidemiologist at the American Cancer Society.

Jacobs headed a study last year that found that men who had taken NSAIDs regularly for a long period of time were at slightly decreased risk of developing prostate cancer.

"The important thing about NSAIDs in general is that they can have very serious side effects, gastrointestinal bleeding that can be fatal," Jacobs said. "We do not recommend using NSAIDs for cancer prevention." Many of the men in the Mayo Clinic study were taking low-dose aspirin to protect against heart disease, he said. "Currently, the decision about whether or not to take aspirin is based on balancing cardiovascular benefits with the risk of gastrointestinal bleeding," Jacobs said. "If someone is at high risk, the doctor can decide that the benefits outweigh the risk. Currently, cancer is not part of the risk-benefit ratio."

# Low Carb Recipe of the Month

## Ricotta Stuffed Chicken Breasts



- ✦ 4 chicken breasts with bone in, skin optional
- ✦ 300 grams ricotta cheese
- ✦ 4 small green onions, chopped
- ✦ 2 cloves garlic, finely chopped
- ✦ 1/4 cup fresh chopped cilantro (or flat parsley)
- ✦ 4 fresh rosemary sprigs
- ✦ 4 fresh sage leaves
- ✦ 4 slices bacon

· **Preheat oven to 350°.**

1. In a small bowl, combine the cheese, green onion, garlic and cilantro. Be sure to blend well.
2. Using a sharp knife, cut a slice into the thickest portion of the chicken breast to make an opening.
3. Stuff the opening with the cheese filling. Lay a sprig of rosemary on top of the filling, inside the opening.
4. Wrap the chicken breast with a slice of bacon. You can secure the bacon with

a toothpick, if necessary.

5. Lay a fresh sage leaf on top of the chicken breast and under the bacon.
6. Bake for 40-45 minutes or until the internal temperature of the chicken breast (not the stuffing) is 170° Fahrenheit.
7. Place the chicken breast under a hot broiler for 2-3 minutes until the bacon strip is brown and crispy

Nutrition Information /Per Serving  
Calories 336.78  
Protein 50.16 g.  
Carbs 3.73 g.  
Fat 13.28 g.  
Fiber 0.25 g.  
Net Carb 3.48 g.

Makes 4 servings

## Web Site of the Month

**StartupList:** A simple tool that lists all and every auto starting program on your system. You might be surprised what it finds, this is way better than Msconfig. Commonly used to troubleshoot malfunctioning systems, trojan/viral infections, new spyware/malware breed and the likes. Compatible with: All Windows versions

[http://merijn.org/  
programs.php](http://merijn.org/programs.php)

## Anabolic steroids raise levels of harmful protein



A new study provides more evidence that long-term use of anabolic steroids can cause heart and blood vessel disease, and may even boost the risk of sudden death.

UK researchers found that bodybuilders who used the muscle-building steroids had increased levels of homocysteine, a protein tied to increased mortality, heart disease risk and blood vessel damage, compared with bodybuilders who didn't use the performance-enhancing drugs.

Three steroid users died suddenly during the course of the study, and all had homocysteine levels that were higher than the average for steroid-using study participants.

"The findings of this study suggest that anabolic-androgenic steroids are detrimental to cardiovascular health and appear to be implicated in cardiovascular mortality in long-term anabolic-androgenic steroid abuse," Dr. Michael R. Graham of the University Glamorgan in Pontypridd, Wales and colleagues conclude.

There have been reports suggesting that steroid users face an increased risk of sudden death as well as acute clotting-related health problems such as stroke and heart attack, Graham and his team note.

To determine whether steroid users might have increased homocysteine levels, which could contribute to the risk of heart and blood vessel problems, the researchers measured levels of homocysteine and several other substances in the blood in bodybuilders who had been using steroids for more than 20 years.

They were compared to steroid-using bodybuilders who had abstained from the drugs for three months, bodybuilders who had never used steroids, and sedentary, non-steroid-using men.

Current and past steroid users had higher homocysteine levels than other study participants, as well as "dramatically elevated" levels of hematocrit.

As mentioned, three of the steroid-using bodybuilders died during the study period and all of them had significantly higher levels of homocysteine than the average for the steroid-using group.

Sudden death and acute clotting events "may represent under-appreciated risks" of anabolic steroid use, the team warns.

## Preventing Height Loss: How to Keep from Stooping to New Lows



The image of a tiny old man or woman stooping over a cane is a common association with aging. While your body will undergo changes as the years pass, there are steps you can take to keep standing tall.

Height loss is natural, and shouldn't be a cause of worry, unless it occurs rapidly. On average, people lose about one centimeter in height every 10 years, beginning at 40 years of age. This rate increases after the age of 70, leading to a total loss of between one to three inches of height. The reason for the shrinking has to do with the vertebrae, the disk-like bones that make up your spine, which begin to lose mineral content and thin slightly. Additionally, the fluid that fills the space between each vertebra begins to diminish. Each of these small changes adds up to a noticeable loss in height.

Making matters worse, the loss of muscle mass in your back and the gradual deterioration of your spine and muscles causes many elderly to hunch-over when they stand. This bent-over position can cause pain and difficulty breathing.

The good news is that the sooner you take steps to prevent height loss, the greater the overall impact you can make. The National Institutes of Health suggests two basic means of stemming the tide against height loss:

### **Prevent osteoporosis**

By consuming plenty of calcium, you can prevent osteoporosis, the disease characterized by the weakening of bones. While men may also get this disease, postmenopausal women are most at risk, and need 1,200 to 1,500 milligrams of calcium every day to keep their bones strong. Vitamin D is important, too, as it helps the body absorb calcium.

### **Exercise**

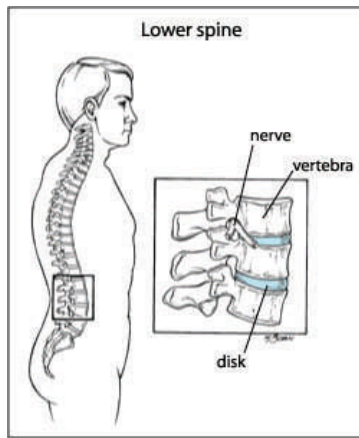
Exercise is important to keep your bones strong and to improve flexibility. Weight-bearing exercises, like running, puts stress on your bones and send signals telling your body to strengthen them. Some experts also suggest trying yoga or tai chi, as these exercises emphasize maintaining a straight posture. Another exercise to try involves lying on your stomach and lifting your head and shoulders off of the ground for a few seconds. This will strengthen the muscles in your upper back to prevent stooping.

## Low Back Pain: Tips on Pain Relief and Prevention

### What can cause low back injuries?

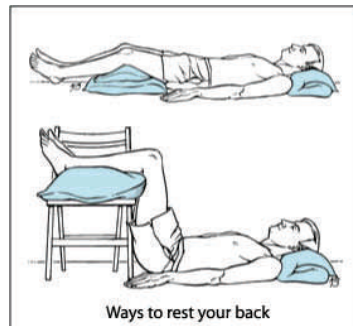
Many things can cause low back injuries--muscle strain or spasm, sprains of ligaments (which attach bone to bone), joint problems or a "slipped disk." The most common cause is using your back muscles in activities you're not used to, like lifting heavy furniture or doing yard work.

A slipped disk happens when the disk between the bones bulges and presses on nerves. This is often caused by twisting while lifting. But many people won't know what caused their slipped disk



### What can I do for relief when I've hurt my lower back?

The best position for relief when your back hurts is to lie on your back on the floor with pillows under your knees, with your hips and knees bent and your feet on a chair, or just with your hips and knees bent. This takes the pressure and weight off your back.



If you're resting a hurt back, you may need 1 to 2 days of this sort of rest. Resting longer than this can cause your muscles to weaken, which can slow your recovery. Even if it hurts, walk around for a few minutes every hour.

### What else can I do for relief?

Heating pads can help to relax painful muscle spasms. Use heat for 20 to 30 minutes at a time. Ice packs and massages may also give relief. Nonprescription medicines that reduce pain or swelling include aspirin, acetaminophen (brand name: Tylenol), naproxen (brand name: Aleve), ketoprofen

(brand name: Orudis), and ibuprofen (brand name: Motrin)

### Call your family doctor if:

- Pain goes down your leg below your knee.
- Your leg, foot, groin or rectal area feels numb.
- You have fever, nausea or vomiting, stomach-ache, weakness or sweating.
- You lose control over going to the bathroom.
- Your pain was caused by an injury.
- Your pain is so intense you can't move around.
- Your pain doesn't seem to be getting better after 2 to 3 weeks.

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### What's the best way to sit?

Sit in chairs with straight backs or low-back support. Keep your knees a little higher than your hips. Adjust the seat or use a low stool to prop your feet on. Turn by moving your whole body rather than by twisting at your waist.

When driving, sit straight and move the seat forward. This helps you not lean forward to reach the controls. You may want to put a small pillow or rolled towel behind your lower back if you must drive or sit for a long time.

### What's the best position for standing?

If you must stand for long periods, rest 1 foot on a low stool to relieve pressure on your lower back. Every 5 to 15 minutes, switch the foot you're resting on the stool. Maintain good posture: Keep your ears, shoulders and hips in a straight line, with your head up and your stomach pulled in.

### What's the best position for sleeping?

The best way to sleep is on your side with your knees bent. You may put a pillow under your head to support your neck. You may also put a pillow between your knees.

If you sleep on your back, put pillows under your knees and a small pillow under your lower back. Don't sleep on your stomach unless you put a pillow under your hips.

Use a firm mattress. If your mattress is too soft, use a board of 1/2-inch plywood under the mattress to add support