



Effect of oral creatine supplementation on upper extremity anaerobic response in females
by Karyn Hamilton Ward

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Science in
Health and Human Development

Montana State University

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Abstract:

Most oral creatine monohydrate (CrH₂O) research has been focused on lower body strength and power in males. The purpose of this study was to investigate the influence of standard doses of oral CrH₂O on muscular performance during elbow flexion (EF) and shoulder internal rotation (IR) in females. Following written informed consent, 24 females involved in overhand sports were pair-matched on lean body mass, % body fat, height, weight (Wt), and age, and assigned to either placebo (P) (n=13) or CrH₂O (n=11) groups in a randomized, double-blind fashion. Peak concentric (CON) and eccentric (ECC) isokinetic (IK) torque, isotonic (IT) one repetition maximum (1RM), and muscular fatigue (FAT) during EF, and IT 1RM, FAT, and peak velocity (V) during IR were evaluated. Following habituation, subjects consumed either P or 25 g CrH₂O/day for a seven day dietary phase. All subjects were weighed and tested before and after the dietary phase. Repeated measures MANOVAs revealed a significant interaction between treatment and trial for EF ($F_{419}=5.30$, $p=0.005$) but not for IR ($F_{319}=0.06$, $p=0.98$) or Wt ($F_{123}=0.66$, $p=0.43$). Post hoc univariate analysis indicated a significantly ($p=0.006$) greater change in EF Fat following CrH₂O than following P. Results suggest oral CrH₂O did not influence peak EF or IR strength, IR work to fatigue, or peak IR velocity in strength-trained, female athletes. Therefore, CrH₂O supplementation may be of benefit for enhancing strength conditioning but not performance of overhand sports.

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**A thesis submitted in partial fulfillment
of the requirements for the degree**

of

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Michael C. Meyers, PhD, MS, FACSM
Chairperson, Graduate Committee

Michael C. Meyers 11-30-96
(Signature) Date

William A., Skelly, PhD
Co-chair, Graduate Committee

W. A. Skelly 12-2-96
(Signature) Date

Robert J. Marley, PhD
Graduate Committee Member

Robert J. Marley 12-2-96
(Signature) Date

Approved for the Department of Health and Human Development

Ellen Kreighbaum, PhD
Department Head

Ellen Kreighbaum 12/2/96
(Signature) Date

Approved for the College of Graduate Studies

Robert Brown, PhD
Interim Graduate Dean

Robert Brown 12/10/96
(Signature) Date

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ABSTRACT

Most oral creatine monohydrate (CrH_2O) research has been focused on lower body strength and power in males. The purpose of this study was to investigate the influence of standard doses of oral CrH_2O on muscular performance during elbow flexion (EF) and shoulder internal rotation (IR) in females. Following written informed consent, 24 females involved in overhand sports were pair-matched on lean body mass, % body fat, height, weight (Wt), and age, and assigned to either placebo (P) ($n=13$) or CrH_2O ($n=11$) groups in a randomized, double-blind fashion. Peak concentric (CON) and eccentric (ECC) isokinetic (IK) torque, isotonic (IT) one repetition maximum (1RM), and muscular fatigue (FAT) during EF, and IT 1RM, FAT, and peak velocity (V) during IR were evaluated. Following habituation, subjects consumed either P or 25 g CrH_2O /day for a seven day dietary phase. All subjects were weighed and tested before and after the dietary phase. Repeated measures MANOVAs revealed a significant interaction between treatment and trial for EF ($F_{4,19}=5.30$, $p=0.005$) but not for IR ($F_{3,19}=0.06$, $p=0.98$) or Wt ($F_{1,23}=0.66$, $p=0.43$). Post hoc univariate analysis indicated a significantly ($p=0.006$) greater change in EF_{FAT} following CrH_2O than following P. Results suggest oral CrH_2O did not influence peak EF or IR strength, IR work to fatigue, or peak IR velocity in strength-trained, female athletes. Therefore, CrH_2O supplementation may be of benefit for enhancing strength conditioning but not performance of overhand sports.

CHAPTER I

INTRODUCTION

The use of an ergogenic substance refers to the application of a pharmacological, nutritional, physiological, psychological, or mechanical aid which is perceived to enhance athletic performance by improving strength, speed, endurance, or recovery of an athlete (McArdle, Katch, & Katch, 1991). Ergogenic aids may exert their effects by directly acting on muscle tissue, supplying fuel necessary for muscle contraction, or minimizing effects of metabolic by-products. Enhancing cardiovascular and circulatory response and stimulating the central nervous system are two additional routes through which ergogenics may act (Berglund & Hemmingsson, 1982; Chandler & Blair, 1980; Fox, Bowers, & Foss, 1993).

Enhancement of athletic performance with the use of ergogenic aids is a topic of international controversy. The use of anabolic steroids, amphetamines, and blood doping, for example, is prohibited by national and international sports medicine groups and governing bodies including the American College of Sports Medicine, the International Olympic Committee, the United States Olympic Committee, and the American Medical Association (American College of Sports Medicine, 1987a; American College of Sports Medicine, 1987b; United States Olympic Committee, 1989). However, the application of other ergogenics, such as training, dietary manipulation, nutritional supplements, and high performance equipment, is deemed acceptable at this time.

Athletes striving for a "competitive edge" constitute a vulnerable population typically targeted for ergogenic sales (Karpovich, 1971; McArdle et al., 1991). With a growing number of people participating in recreational and amateur sports, production and sales of ergogenic aids has become a lucrative industry with a steady increase in the number and variety of new

products marketed annually. One such product is creatine monohydrate (CrH_2O). When taken orally during training, CrH_2O is purported to enhance fuel supply for working muscles, ultimately resulting in improved strength, endurance, and fat-free mass (Balsom, Ekblom, Soderlund, Sjodin, & Hultman, 1993a; Bleue & Goodman, 1995; Greenhaff et al., 1993b; Lemon et al., 1995).

The majority of research conducted on the efficacy of CrH_2O , though somewhat equivocal, includes compelling findings with regard to improved lower extremity strength and anaerobic capacity primarily in males of varying fitness classifications (Balsom et al., 1993a; Bleue & Goodman, 1995; Greenhaff et al., 1993b; Lemon et al., 1995). However, information on the effects of CrH_2O on upper body strength and anaerobic power is limited. In addition, since the majority of research has included primarily male subjects, little is known concerning the physiological response of females following CrH_2O supplementation. Therefore, the purpose of this study was to quantify the effects of CrH_2O supplementation on the upper extremity anaerobic response of females. The results of this study should be of value to female athletes who are using or considering the use of oral creatine supplements for the purpose of enhancing upper body strength. Exercise scientists, coaches, and athletic trainers should also benefit through a greater knowledge of nutritional supplementation when counseling athletes.

Statement of the Problem

The purpose of this study was to quantify the effects of oral creatine monohydrate on upper extremity isokinetic and isotonic strength and velocity in females.

Research Objectives

The investigation attempted to fulfill the following objectives:

1. Quantify the efficacy of oral creatine supplementation on upper extremity isotonic peak torque and velocity in females.

2. Quantify the efficacy of oral creatine supplementation on upper extremity isokinetic peak torque in females.

Hypotheses

The following null hypotheses were tested:

1. Oral creatine supplementation will have no effect on upper extremity isotonic peak torque and velocity in females.
2. Oral creatine supplementation will have no effect on upper extremity isokinetic peak torque in females.

Assumptions

1. Subjects were adequately informed and trained on all procedures and phases of the investigation to facilitate optimal completion of the study.
2. Subjects put forth maximal effort for optimal physiological response to achieve a maximal level of upper extremity strength, endurance, and biomechanical efficiency.

Limitations

1. Results were generalizable only to college-aged, strength-trained females participating in competitive or recreational overhand sports.
2. Results were derived within a laboratory setting rather than during performance in an actual sport-specific environment.

Delimitations

1. Inference was made only to college-aged, strength-trained females participating in overhand sports.
2. Subjects were tested using sport-specific movements to simulate a sport environment.

CHAPTER II

REVIEW OF THE LITERATURE

Anaerobic Energy Production

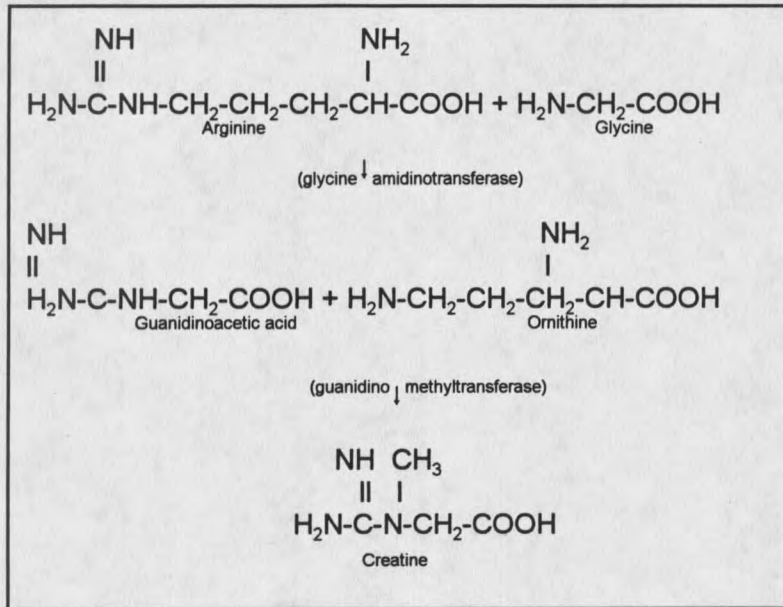
Muscular work is dependent on availability of energy derived from dephosphorylation of adenosine triphosphate (ATP) (diPrampero, 1976; Marechal, 1981; Rall, 1988). Work requiring efforts of maximal intensity, but of short duration, depends highly on anaerobic production of energy through only two processes: (1) the adenosine triphosphate-phosphocreatine (ATP-PC) system, and (2) glycolysis, i.e., the lactic acid system (diPrampero, 1976; Newsholme, 1981). The ATP-PC system is a metabolic process which provides immediate, high power, short-term energy for muscle contraction (Davies, 1965; Hultman, 1967; Karlsson, 1971). The lactic acid system provides energy for up to approximately two to three minutes resulting in lactate accumulation which can contribute to a decline in blood pH (diPrampero, 1976; Fox et al., 1993).

Phosphocreatine Availability, Storage, and Degradation

An understanding of the availability, storage, and breakdown of phosphocreatine (PC) is imperative for an appreciation of its physiological roles. Creatine (Cr), the unphosphorylated form of PC, is available both from dietary intake of meat and fish (which provide about 5 g Cr/kg or an estimated average daily Cr intake of 1 g/day) and via biosynthesis in the liver, pancreas, and kidneys from the non-essential amino acids arginine and glycine (see Figure 1; Balsom, Soderlund, & Ekblom, 1994; Devlin, 1982; Hoogwerf, Laine, & Greene, 1986; Lykken, Jacob, Munoz, & Sandstead, 1980; Walker, 1960). Biosynthesis, alone, appears to be capable of supplying adequate amounts of Cr in normal

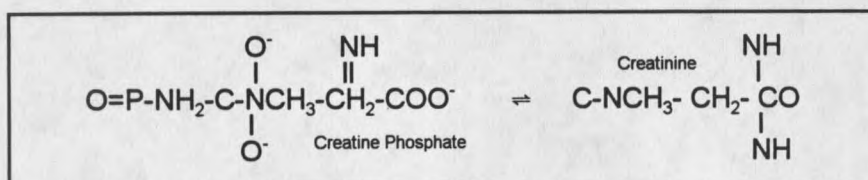
individuals as demonstrated by normal muscle Cr concentrations in vegetarian subjects (Harris, Soderlund, & Hultman, 1992). Regardless of its origin, Cr is transported by the blood

Figure 1. Biosynthesis of Cr From Arginine and Glycine



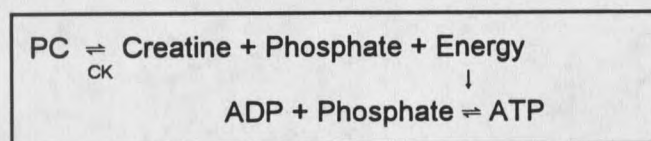
and either phosphorylated and stored directly in muscle cells, the fate of approximately 95% of Cr, or spontaneously converted to creatinine for excretion in the urine (approximately 2 g/day; see Figure 2) (Balsom et al., 1994; Delanghe et al., 1989; Hoberman, Sims, & Peters, 1948; Hunter, 1928; Zubay, 1988). Creatine gains entry into muscle cells via a sodium-dependent transporter (Guimbal & Kilimann, 1993). The body's total Cr pool is estimated to be approximately 120 g in a 70 kg human or approximately 124 mmol/kg dry muscle (Harris, Hultman, & Nordesjo, 1974; Walker, 1960).

Figure 2. Interconversion of PC and Creatinine



Phosphocreatine provides energy for muscular contraction via continual storage and degradation. Though ATP is the major energy source for muscular work, ATP storage in muscle is very limited with an estimated total energy availability of only 1.2-1.8 kcal/kg muscle used, assuming 10 kcal/mole of ATP and 30 kg of muscle in a 70 kg man (Hultman, 1967; Karlsson, 1971). Since the demand for ATP greatly exceeds its storage, working skeletal muscle must rely on other substrates for energy. As one of the first stored forms of high energy phosphate to be discovered, PC is an energy reservoir for the resynthesis of ATP (Fiske & Subbarow, 1929). Estimated PC availability is 4.5-5.1 kcal/kg muscle (Hultman, 1967; Karlsson, 1971; McArdle et al., 1991). When PC is dephosphorylated through enzymatic action of creatine kinase (CK), a large amount of energy is liberated and used to rephosphorylate adenosine diphosphate (ADP), a precursor to ATP (see Figure 3; Davies, 1965; McArdle et al., 1991).

Figure 3. Utilization of PC for Resynthesis of ATP



Buffering and Phosphocreatine

In addition to its role of rapidly regenerating ATP, PC may also play a role in shuttling energy and buffering environmental changes at sites of high energy utilization during muscle contraction (Davies, 1965; McArdle et al., 1991; Wallimann, Wyss, Brdiczka, Nicolay, & Eppenberger, 1992). Phosphocreatine and Cr are capable of "shuttling" high energy phosphates between the mitochondria and the myofibrils (Bessman & Geiger, 1981; Jacobus & Lehninger, 1973; Meyer, Sweeney, & Kushmerick, 1984; Savabi, Carpenter, Mohan, &

Bessman, 1988; Wallimann et al., 1992). The "PC shuttle" is a communicator and energy carrier between locations of high energy production and locations of high energy utilization. Three sites at which the PC shuttle operates have been proposed: (1) at the myosin heads during muscle contraction, (2) in the mitochondria, and (3) between these two areas of energy production and utilization (Bessman & Carpenter, 1985; Wallimann et al., 1992).

At sites of accelerated energy utilization near the contractile proteins, PC buffers changes in concentrations of ATP, ADP, and protons via CK (Figure 3). Low pH resulting from H^+ accumulation is thought to contribute to muscle fatigue via direct action on skeletal muscle contractile proteins and by disturbing the equilibrium of key enzymes such as myosin phosphofructokinase (PFK), phosphorylase, ATP-ase, and CK (Fabiato & Fabiato, 1978). Because regeneration of ATP from ADP involves acceptance of a proton (H^+), the CK reaction may help minimize H^+ accumulation, thus, delaying a decrease in pH and the subsequent onset of fatigue (Iyengar, 1984; Iyengar, Fluellen, & Iyengar, 1982; Wallimann et al., 1992). Following regeneration of ATP, the free Cr can then be transported back to the mitochondria, undergo rephosphorylation by CK, and be shuttled back to areas of high energy utilization (Bessman & Geiger, 1981; Jacobus & Lehninger, 1973; Meyer et al., 1984; Wallimann et al., 1992).

The role of PC may be important from the onset of high-intensity exercise through early recovery. Muscle PC concentration rapidly declines within the first two minutes of intense physical work as PC is utilized for ATP regeneration, and then stabilizes unless work loads exceed maximal capacity for steady state (Greenhaff, Soderlund, Ren, & Hultman, 1993c; Harris, et al., 1976; Hultman, Bergstrom, & McLennan-Anderson, 1967). The "PC shuttle" carries essential energy from locations of synthesis and storage to areas of intense muscle contraction (Bessman & Geiger, 1981; Jacobus & Lehninger, 1973; Meyer et al., 1984; Wallimann et al., 1992). PC's buffering functions may be particularly important during high-intensity exercise when anaerobic glycolysis predominates, and increases in lactic acid, H^+ ,

and fatigue are observed (Wallimann et al., 1992). With supramaximal workloads, muscle PC concentration can decrease rapidly to near zero with subsequent cessation of muscle contraction. Whether cessation of muscle contraction occurs voluntarily or as a result of depleted PC stores is still speculative.

Phosphocreatine and Fatigue

During high-intensity exercise, muscle fatigue may be related to PC depletion (Hultman et al., 1967). Decreased sprinting speed may be related to a decline in energy production resulting from depletion of high energy phosphate bonds (Hirvonen, Rehuman, Rusko, & Harkonen, 1987). Type II muscle fibers, the type used predominantly during high-intensity activities, exhibit higher PC concentrations, accelerated rates of utilization, and slower recovery than type I fibers (Edstrom, Hultman, Sahlin, & Sjoholm, 1982; Greenhaff et al., 1994b; Soderlund, Greenhaff, & Hultman, 1992). It has been hypothesized that higher PC utilization and slower repletion characteristic of type II fibers may promote a reduction in force and contribute to the onset of fatigue during high-intensity exercise (Hultman & Greenhaff, 1991).

Phosphofructokinase, an important enzyme in the glycolytic pathway, may be another factor that links PC concentrations and the onset of fatigue. Phosphofructokinase appears to be inhibited by normal concentrations of PC (Storey & Hochachka, 1974). While PC cleavage and anaerobic glycolysis occur simultaneously during high intensity-exercise, PC is depleted more rapidly than glycogen forcing the contracting muscles to rely predominantly on anaerobic glycolysis for continued energy supply (Hirvonen et al., 1987; Hultman et al., 1967; Spriet, Soderlund, Bergstrom, & Hultman, 1987). When PC concentrations decline during high-intensity exercise, PFK inhibition may be released allowing accelerated glycolytic flux and greater ATP availability for continued muscle contraction. It has, therefore, been proposed that supplemental Cr may spare glycolytic substrates during predominantly

anaerobic activity. The resultant reduction in lactate accumulation and maintenance of a favorable pH could, theoretically, delay the onset of fatigue (Balsom et al., 1994; Storey & Hochachka, 1974).

Creatine Supplementation

Given the extensive roles and limited storage capacity of PC during exercise performance, supercompensation using oral Cr has become an area of interest to researchers, athletes, and manufacturers. Several companies currently market oral CrH_2O , a compound consisting of Cr stabilized with a water molecule. The product is accompanied by claims of increased peak strength, muscular endurance, body weight, and fat-free mass within a week of supplementation.

Biochemical Effects of Creatine Supplementation

Interest in the potential benefit of supercompensation with oral CrH_2O has led to investigation of tissue level effects. Oral CrH_2O supplementation has been shown to result in increases in the body's Cr pool (Chanutin, 1926; Crim, Calloway, & Margen, 1976; Hoberman et al., 1948). Increases in both plasma and total muscle Cr concentration, as determined by quadriceps femoris muscle biopsies, have been reported following CrH_2O ingestion (Harris et al., 1992). Muscle biopsies of subjects with varying, unquantified fitness levels, given CrH_2O in 5 g doses (each dose providing the Cr equivalent of approximately 1 kg uncooked beef) varying from 70 g over 3.5 days to 330 g over 21 days, revealed that Cr uptake was greatest within the first two to three days of supplementation. Increases in Cr were most substantial in subjects with the lowest initial total muscle Cr concentrations (Harris et al., 1992).

Similar oral doses of CrH_2O (20 g/day for five days) have also resulted in increased muscle PC concentration (Greenhaff et al., 1993a), and an increase in the rate of muscle PC

resynthesis following recovery from electrically evoked isometric contraction (Greenhaff, Bodin, Soderlund, & Hultman, 1994a). Further investigation, using comparable doses of CrH_2O , revealed an increase in muscle Cr resynthesis as determined by magnetic resonance spectroscopy (MRS) of the anterior tibialis muscle and quadriceps femoris muscle biopsies following 20 intense, percutaneous electrically-evoked isometric contractions (Greenhaff et al., 1993a). Muscle energetics were similarly investigated using MRS during thirty-second isometric MVCs of the ankle extensors before and after CrH_2O supplementation (Lemon et al., 1995). Results indicated increases in pre-exercise Cr/ATP ratios, total and maximal force production, glycolytic rate, and rate of oxidative phosphorylation.

Effects of Creatine Supplementation on Exercise Performance

Over the last few years, the effects of CrH_2O on exercise performance has become an area of substantial research. Following CrH_2O supplementation in moderately trained subjects given four daily doses of 5 g CrH_2O for five days, muscle torque was sustained longer without a significant change in blood lactate accumulation during repeated bouts of maximal isokinetic contractions (Greenhaff et al., 1993b). The same group of investigators observed significantly improved running times in 300 and 1000 m track events following CrH_2O ingestion (Harris, Viru, Greenhaff, & Hultman, 1993). Further research, however, indicated no significant increase in running velocity through three testing zones using the 60 m sprint (20-30 m, 40-50 m, and 50-60 m) following ingestion of 25 g CrH_2O /day for seven days (Redondo et al., 1995). More recently, peak power output during repeated sets of jump squats was increased in active males following CrH_2O supplementation. No difference in post-exercise lactate concentration, however, was observed (Volek et al., 1996).

Studies of athletes performing high-intensity, intermittent cycle exercise indicated that subjects maintained higher pedal frequency following CrH_2O ingestion (Balsom et al., 1993a). Researchers postulated a change in energy sources and a decrease in adenine nucleotide

degradation. Further investigation using the widely accepted Wingate anaerobic test (Ayalon, Inbar, & Bar-Or, 1974; Bar-Or, 1987), revealed an increase in total work output following 14 days of supplementation with 20 g of CrH_2O /day (Earnest, Snell, Rodriguez, Almada, & Mitchell, 1995b). In another study of athletes performing repeated bouts of high-intensity, intermittent cycling, investigators found that during the first two exercise bouts, peak power, mean power, and total work output increased following CrH_2O supplementation though no difference in peak lactate was observed (Birch, Noble, & Greenhaff, 1994). Similar increases in anaerobic work capacity were also attributed to CrH_2O supplementation following four bouts of cycling exercise at work rates designed to elicit fatigue within one to ten minutes (Hall, Smith, Stephens, Snell, & Earnest, 1995). However, peak power, mean power, and rate of power decline during maximal cycling exercise were not significantly altered by CrH_2O ingestion despite significantly increased total muscle Cr concentration (Ruden et al., 1996). The outcome of this investigation may have been influenced by the cross-over design with a 14-day wash-out period which may have been inadequate for ensuring complete removal of supplemental Cr (Greenhaff, 1995).

During continuous exercise there are brief periods of high-intensity efforts during which time anaerobic systems are used such as at the start of a race or during a hill climb (Fox et al., 1993). Therefore, the potential ergogenic effect of CrH_2O on continuous exercise was investigated. In one study, no significant improvements in performance times, relative oxygen consumption (VO_2), or blood lactate were documented following a CrH_2O -supplemented exhaustive treadmill run or during a 6 km run on a forest track with variable terrain (Balsom, Harridge, Soderlund, Sjodin, & Ekblom, 1993b). Time to exhaustion and blood lactate accumulation during intermediate length treadmill runs, designed to fatigue subjects within 90 seconds, were also unaffected by CrH_2O supplementation (Earnest, Rash, Snell, Almada, & Mitchell, 1995a). Performance and energy metabolism during intermittent submaximal treadmill runs were, similarly, unaffected in subjects of varying fitness levels

ingesting CrH_2O (Green et al., 1994).

While it appears that CrH_2O supplementation may improve performance of short-term anaerobic work that primarily utilizes large muscle groups of the lower body, the effects of CrH_2O on activities that rely primarily on upper body movement has gained only minimal attention. Only five investigations addressing oral CrH_2O supplementation and upper body anaerobic performance have been published. Two of these five studies addressed sports involving whole body anaerobic performance rather than predominantly upper extremity strength. Supplemental CrH_2O given to elite swimmers resulted in no improvement in velocity of 25, 50, and 100 m swim sprints (Burke, Pyne, & Telford, 1995). Similarly, in a study of competitive rowers, CrH_2O supplementation did not result in significantly improved rowing times (Rossiter, Cannel, & Jakeman, 1996). Weight-trained male subjects ingesting daily doses of a high carbohydrate, high protein supplement with 20 g CrH_2O /day, experienced no significant enhancement of average peak power, peak force, or mean force during maximal bench press repetitions (Grindstaff et al., 1995). Absolute peak power, however, was significantly increased following supplementation. Following three more weeks of the same regimen (28 days total), improvements in absolute and relative power and force and in total work output were evident in both placebo and supplemented groups suggesting a training effect rather than an ergogenic influence (Almada et al., 1995). In a recent investigation of normally-active males taking either a placebo or CrH_2O , a significant improvement in the total number of bench press repetitions was observed following CrH_2O (Volek et al., 1996).

To date, no research has been published regarding the effect of oral CrH_2O on explosive, upper body, sport-specific movements such as overhand throwing, swinging a bat or racquet, or spiking/serving a volleyball. In addition, the majority of existing studies regarding CrH_2O have focused primarily on exercise response of males with limited comparison between gender (Brees et al., 1994; Ruden et al., 1996). While research on gender-specific effects

of Cr supplementation on athletic performance is lacking, there is evidence of higher total muscle Cr/PC content in female versus male non-athletes (Forsberg, Nilsson, Werneman, Bergstrom, & Hultman, 1991). It is unknown, however, whether the relative quantity of PC stored in muscle relates to efficacy of CrH₂O supercompensation. Because of inherent gender differences in lean body mass (McArdle et al., 1991) and the possible gender difference in Cr/PC muscle content relative to tissue weight, the efficacy of Cr supplementation on the exercise response of females should be quantified.

In summary, the effects of Cr supercompensation on exercise performance remain equivocal. Supplementation with CrH₂O appears to alter muscle energetics possibly resulting in more efficient use of metabolic fuels and a delay in muscle fatigue (Greenhaff, et al., 1993a, 1993b; Lemon et al., 1995). It appears that supplementation with 25-30 g of CrH₂O daily for five to seven days may improve performance of high-intensity, short-term, anaerobic work utilizing large muscle groups (Balsom et al., 1993a; Earnest et al., 1995b; Hall et al., 1995; Harris et al., 1993). There is little evidence, however, that supplementation with CrH₂O has any buffering effect during anaerobic activities (Birch et al., 1994; Greenhaff et al., 1993b; Volek et al., 1996). It also remains unclear whether oral CrH₂O can improve high-intensity performance of the upper extremities or whether similar effects are observed in females. Furthermore, there remains a strong reliance on published abstracts with limited peer-reviewed, exercise performance-related publications in existence (Balsom et al., 1993a, 1993b, 1994; Earnest et al., 1995a, 1995b; Greenhaff, 1995; Greenhaff et al., 1993b; Maughan, 1995; Volek & Kraemer, 1996). Therefore, investigation on the effects of CrH₂O supplementation on upper body anaerobic response in females is warranted.

CHAPTER III

EXPERIMENTAL PROCEDURES

Description of Subjects and Movements Tested

Following written informed consent and approval from the Montana State University-Bozeman Human Subjects Committee, 24 college-aged females, who met the inclusion criteria of participation in upper extremity strength training and either recreational or competitive overhand sports, took part in this study. Inclusion criteria were based on prior research indicating overall strength and biomechanical differences between throwing athletes and non-throwing athletes (Brown, Niehues, & Harrah, 1988; Cook, Gray, & Savinar-Nogue, 1987; Ellenbecker, Davies, & Rowinski, 1988; Ng & Kramer, 1991; Perrin, Robertson, & Ray, 1987; Wooden, Greenfield, & Johanson, 1992). Subjects met criteria for involvement in overhand sport based on reported frequency of participation in such sports and on observed throwing accuracy. All testing was conducted at the Montana State University-Bozeman Human Performance and Ergonomics Laboratory.

Testing included two movements, elbow flexion (EF) and shoulder internal rotation (IR). Elbow flexion is commonly used to evaluate concentric (CON) and eccentric (ECC) strength of the biceps brachii, brachioradialis, and brachialis muscles (Adams, 1994; Rutherford & Corbin, 1994). The movement is also commonly used as a component of strength conditioning programs (Adams, 1994; DeLorme & Watkins, 1951; Fox et al., 1993; Heywood, 1991; Wilmore & Costill, 1988; Withers, 1970). Therefore, EF was selected to evaluate the efficacy of CrH₂O supplementation in strength conditioning of the upper extremities.

In contrast to EF, which incorporates a finite number of muscles, an overhand throwing motion utilizes numerous muscle groups of the upper body (Bartlett, Storey, & Simons,

1989). The muscles responsible for rotating the shoulder internally, a movement dominant in the overhand throw, are active during the upper extremity projectile motions used in a variety of sport movements such as the baseball pitch, tennis serve, volleyball spike and serve, water polo throw, and javelin throw (Cohen, Mont, Campbell, Vogelstein, & Loewy, 1994). The acceleration of such movements is dependent upon explosive contraction of the internal rotators (coracobrachialis, biceps-short head, subscapularis, teres major, latissimus dorsi, anterior deltoid, and pectoralis major) which may either provide the power for the movement, stabilize the glenohumoral joint during the movement, or both (Atwater, 1979; Cohen et al., 1994; Perry, 1983; Toyoshima & Hoshikawa, 1974). Additionally, upper extremity peak torque has been shown to be positively correlated with throwing speed in competitive athletes (Bartlett et al., 1989; Pedegana, Elsner, & Roberts, 1982). Thus, shoulder IR was selected to evaluate the potential use of CrH_2O supplementation in a variety of overhand throwing skills.

Pre-testing Procedures

Prior to initiation of testing, supine, hyperventilation, and standing modified Mason-Likar twelve-lead electrocardiogram (ECG) recordings (Dubin, 1989; Marquette Max-1, Marquette Electronics Inc., Milwaukee, WI), heart rates, and blood pressures were obtained from each subject to identify any contraindications to participation (American College of Sports Medicine, 1995). Height (Ht; cm) and weight (Wt; kg) were determined using a calibrated Detecto physician's beam scale (Cardinal Scale Manufacturing Co., Webb City, MO). Body composition was evaluated via the seven-site skinfold technique (Brozek, Grande, Anderson, & Keys, 1963; Jackson & Pollock, 1977; Pollock, Schmidt, & Jackson, 1980) using a Lange skinfold caliper (Cambridge Scientific Industries, Inc., Cambridge, MD). After obtaining three measurements at each site using appropriate landmarks on the right side of the body, the mean measurement at each site was used to calculate percent body fat (BF; %) and lean

body mass (LBM; kg) via the following equations:

$$\text{Eq. 1} \quad D_b = 1.0979 - 0.0004697(\text{sum of 7 sites}) + 0.00000056(\text{sum of 7 sites})^2 - 0.00012828(\text{age})$$

Where:

D_b	= body density
1.0979	= regression coefficient for variance in body circumference
0.0004697	= regression coefficient for variance in sum of skinfolds
0.00000056	= regression coefficient for variance in squared sum of skinfolds
0.00012828	= regression coefficient for variance in age

$$\text{Eq. 2} \quad \%BF = \frac{4.570}{D_b} - 4.142 \times 100$$

Where:

4.57	= constant for density of fat tissue
4.142	= constant for density of fat-free tissue

$$\text{Eq. 3} \quad LBM = (100 - \%BF) \times Wt \text{ (kg)}$$

Testing

The study included five testing sessions (Figure 4). The first three sessions were conducted for the purpose of habituation; the last two sessions constituted data collection.

Figure 4. Time Line for Completion of the Five Testing Sessions

<u>Day 1: Test 1</u> <i>Neither CrH₂O nor P was delivered</i>	<u>Day 3: Test 2</u> <i>Neither CrH₂O nor P was delivered</i>	<u>Day 6: Test 3</u> <i>7-day dietary habituation began following testing</i>	<u>Day 13: Test 4</u> <i>CrH₂O or P began following testing</i>	<u>Day 20: Test 5</u> <i>CrH₂O or P was completed prior to testing</i>
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At each session, peak strength during EF and IR was evaluated using the one repetition maximum (1RM), one of the most operational definitions for strength (Eq. 4; DeLorme & Watkins, 1951). One repetition maximum was expressed as the isotonic resistance (Nm) at which each subject could only complete one repetition. Strength was also expressed as the

total number of repetitions that could be completed at 70% of 1RM, a workload selected to

$$\text{Eq. 4} \quad 1\text{RM (Nm)} = \text{Nm at RM between 2-20 repetitions} / [100\% - (\text{RM} \times 2)]$$

facilitate sport-specific testing, with nine to twelve repetitions per set typically employed in resistance programs designed to achieve both strength and endurance gains (Dons, Bollerup, Bonde-Petersen, & Hancke, 1979; Withers, 1970). All testing was conducted using a LIDO WorkSET™ dynamometer (Loredan Biomedical, Inc., West Sacramento, CA). The LIDO WorkSET™ facilitates isokinetic (IK), isotonic (IT), and isometric evaluation throughout concentric (CON), eccentric (ECC), and continuous passive motion modes. Modes utilized in this study included IK (CON/ECC) and IT (CON). The LIDO WorkSET™ dynamometer has been found to have test-retest reliabilities of 0.82-0.96 for peak torque and average peak torque and a high degree of internal validity ($R^2=1$) with regard to torque, power, and work (Matheson et al., 1992). Test-retest reliability coefficients for this study were determined via intraclass correlation which employs ANOVA for calculation of R (see Appendix C, Table 1). The LIDO was interfaced with a personal computer via a digital to analog board and Labtech Notebook (version 6) software (Laboratory Technologies Corporation, Wilmington, MA) to facilitate collection of position and torque data at a sampling rate of 150 Hz. Isotonic strength testing was performed to facilitate measurement not only of EF and IR strength, but also of velocity throughout the execution of shoulder IR (Adams, 1994). Inclusion of IK strength testing enabled measurement of torque throughout the active EF range of motion (ROM) while the dynamometer maintained a constant angular velocity (Hislop & Perrine, 1967).

Torque "overshoot" or impact torque, evidenced by prominent initial and terminal spikes in torque output curves, was disregarded in the determination of peak IK torque (Perrine & Edgerton, 1978; Sapega, Nicholas, Sokolow, & Saraniti, 1982). It is thought that these spikes do not represent intermittent surges of muscular contractile force but, rather, forces

associated with the initial accelerations, final decelerations, and subsequent velocity fluctuations of an initially overspeeding lever system (Sapega et al., 1982). Compensation for the effect of gravity on the LIDO lever arms was accomplished internally by the dynamometer except during IK testing. Compensation for gravity during IK testing was made by hand calculation based on torque caused by gravity on the lever arm in the position approximating that for peak torque during EF.

Habituation Phase

The first three of the five total testing sessions were designed to obtain proper equipment settings, familiarize subjects with the procedures for testing and supplementation, and promote biomechanical efficiency during execution of both movements tested. Appropriate settings for EF on the LIDO were obtained and recorded after instructing subjects on proper positioning. Positioning for EF testing required standing with the feet shoulder width apart, stabilizing the elbow against the iliac crest, and keeping the shoulders back and the head facing straight forward. Range of motion for EF testing was measured from the point of maximal flexion to that of maximal extension. The lateral epicondyle of the dominant limb was located and aligned with the center of rotation on the lever arm of the LIDO. Proper lower body positioning for testing shoulder IR was determined by measuring the distance between the leading and trailing foot at the point of ball release during a typical overhand throw. This measured distance was marked on the floor parallel to the LIDO to facilitate lower body positioning during testing of IR that duplicated that during the subject's overhand throw. With the dominant arm in 90° of elbow flexion, 90° of shoulder abduction, and approximately 20° of forward flexion to facilitate testing in the scapular plane (Ellenbecker, Feiring, & DeHart, 1992), the olecranon process of the dominant arm was located and aligned with the center of rotation on the lever arm of the LIDO. Internal rotation was evaluated from each subject's point of maximal external rotation, with the arm in 90° of

shoulder abduction and 90° of elbow flexion, through horizontal forward (forearm parallel with the ground; Hinton, 1988). Shoulder IR was evaluated without immobilizing the lower extremity or the torso. Aggressive verbal cues were provided to minimize involvement of muscles other than those responsible for IR.

Following determination of appropriate settings, habituation testing sessions were conducted. On the day of the third habituation testing session, all subjects began consumption of 6 oz herbal tea, five times daily for one week to become familiar with supplementation procedures. Following habituation testing sessions, subjects were pair-matched based on Ht, Wt, BF, LBM, and age (years), and randomly assigned to receive either CrH₂O (n=11) treatment or P (n=13).

Testing Sessions

Subjects began each of the five testing sessions by warming-up with three submaximal EF IK CON/ECC contractions (approximately 50% of maximal voluntary contraction, MVC) on the dominant side at 90°/s in a standing position (Adams, 1994; Morris, Lussier, Bell, & Dooley, 1983; Osternig, 1986; Sale, 1991; Stafford & Grana, 1984). Following a standard two-minute rest period, subjects completed one MVC and the peak CON and ECC torques were recorded as EF IK_{CON} (Nm) and EF IK_{ECC} (Nm), respectively.

Evaluation of EF_{1RM} began with a warm-up of three submaximal CON contractions using approximately 50% of estimated EF_{1RM} (or 50% of previously determined 1RM) on the dominant side. Approximation of EF_{1RM} was made based on the linear relationship between the intensity and the number of repetitions performed (see Eq. 4; DeLorme & Watkins, 1951; Hoeger, Barette, Hale, & Hopkins, 1987; Landers, 1985). Approximated EF_{1RM} was then verified by counting the number of repetitions that could be completed at the calculated load. Load adjustments were made as necessary, until EF_{1RM} (Nm) was determined. Subjects then completed successive EF repetitions in the IT mode at 70% of 1RM until volitional

fatigue (FAT; Osternig, 1986; Perrine & Edgerton, 1978). The number of repetitions was recorded as EF_{FAT} . All EF tests were separated by standard two-minute rest periods.

Evaluation of shoulder IR began with a warm-up of 3 submaximal IT repetitions using 50% of estimated IR_{1RM} (or 50% of previously determined IR_{1RM}). Approximated IR_{1RM} was verified by counting the number of repetitions that could be completed by the subject at the calculated load. Load adjustments were made as necessary to determine IR_{1RM} . Subjects then performed successive IR repetitions at 70% of 1RM to the point of volitional fatigue. The number of repetitions was recorded as IR_{FAT} . Finally, velocity during IR (IRV ; °/sec) was determined as each subject completed one repetition as rapidly as possible at 25% of 1RM. All IR tests were separated by two-minute rest periods.

Testing sessions for each subject were conducted at similar times of the day (± 1 hour). Subjects were required to exert maximal effort. Verbal encouragement was provided using a standardized script and every effort was made to maintain a consistent testing environment with all subjects. Throughout data collection, subjects were instructed to maintain upper extremity strength conditioning without progressing the resistance to facilitate accurate evaluation of treatment effects without the positive influence of progressive resistance exercise (PRE; Hellebrandt & Houtz, 1956; Pearson & Costill, 1988). Each subject's physical activity was quantified by the investigator (average estimated METS per day) using the 7-day physical activity recall method (Blair, 1984) on days one and seven of the dietary phase (see Appendix A).

Dietary Phase

Following pair-matching and subsequent randomization into treatment groups, subjects began consuming either CrH_2O or P for seven days (Table 1). Treatment doses were consumed in the presence of the investigator in the Human Performance and Ergonomics Laboratory. All subjects were blind to the treatment received.

Table 1

Composition of Dietary Supplements

Group	Composition	Cr Content	CHO Content	Frequency
CrH ₂ O	5 g CrH ₂ O ^a + 2 g sucrose	30 g	2 g	5 x/day
P	2.12 g Polycose®	0 g	2 g	5 x/day

^a Harris et al., 1992

Each supplement dosage was dissolved in approximately 6 oz of warm-to-hot caffeine-free herbal tea to facilitate dissolution without formation of creatinine (Harris et al., 1992). Herbal tea was chosen as a pleasant-tasting medium for delivery of CrH₂O that did not appreciably increase caffeine or simple carbohydrate intake and was not likely to have interfered with CrH₂O stability (Harris et al., 1992). The dosage was then consumed by the subjects within ten minutes of mixing. Subjects were not permitted to see the supplement being prepared. The dietary doses were administered a minimum of one hour apart and one hour before/after meals to maximize supplement absorption. Pre-treatment testing sessions were conducted within an hour prior to beginning supplementation. Post-treatment testing was conducted approximately 12 hours following completion of the dietary phase.

Though it is unlikely that small differences in the amount of Cr derived from the average non-vegetarian diet would influence the utilization or exercise performance effects of supplemental CrH₂O (Brees et al., 1994), all subjects were instructed to eat a non-vegetarian diet. Subjects were asked to eat three balanced meals daily, consisting of approximately six ounces of meat, six to eight servings of complex carbohydrates, two servings of fruit or fruit juice, one serving of milk or equivalent, and non-starchy vegetables and non-caloric beverages ad lib. Vegetarians were excluded from the study due to reports of increased Cr uptake by skeletal muscle in subjects with lower initial muscular Cr concentration (Harris et al., 1992), and lower normal serum Cr reference values reported for vegetarians (Delanghe

et al., 1989). Food frequency questionnaires (see Appendix A), completed during pre- and post-treatment testing, were analyzed using a nutritional analysis software package (Food and Diet Analyzer, Fitness Technologies Press, Ann Arbor, MI) to quantify meat, fish, and poultry consumption (kg) for estimation of dietary Cr intake (g).

Statistical Analyses

Data were grouped by movement (EF or IR) and subjected to test-retest reliability procedures. Multivariate analysis was performed on pair-matching variables to verify efficacy of matching procedures. Separate multivariate analyses were performed on the EF and IR groups of variables using the General Linear Model (GLM) procedure of the SAS^R Proprietary Software Version 6.08 (SAS Institute, Carey, NC) running on a VAX/VMS platform. Variables were assessed with regard to unequal sample size, multivariate normality, linearity, outliers, homogeneity of variance, multicollinearity, and singularity (Tabachnick & Fidell, 1989). An experiment-wise type I error rate of 0.05 was established a priori and the Bonferroni method of multiple comparisons was used where appropriate (Tabachnick & Fidell, 1989). Subjects were stratified according to anthropometric variables and age, and treated statistically as a random effect. The model used was

$$Y_{ijkl} = \mu + \beta_k + \pi_{l(k)} + \alpha_j + \alpha\beta_{jk} + \epsilon_{ijkl}$$

where μ represents a mean, β_k represents the treatment effect, $\pi_{l(k)}$ represents subjects nested within treatment, α_j represents the trial effect, $\alpha\beta_{jk}$ represents the trial by treatment interaction, and ϵ_{ijkl} represents the residual term. Wilks' criterion was used to identify significant effects and, when significant effects were observed, univariate F statistics were examined to identify the importance of individual variables.

CHAPTER IV

RESULTS

Initial Wt, LBM, BF, Ht, age, estimated weekly meat intake, and estimated weekly physical activity are shown in Table 2. Using Wilks' criterion, no significant differences existed between groups with respect to anthropometric parameters and age. Mean Wt, Ht, and BF for the sample were consistent with United States averages for females in this age group. No significant differences ($p>0.05$) existed between the groups with respect to estimated average Cr intake from meat (kg/wk; 1 kg providing approximately 5 g Cr; ($F_{1,22}=1.254$, $p=0.29$), or estimated average physical activity (METS/wk; $F_{1,22}=0.06$, $p=0.81$) during the dietary phase.

Table 2

Comparison of Subjects by Treatment Group

Variable	Placebo		CrH ₂ O	
	Mean $\pm$ SEM	Range	Mean $\pm$ SEM	Range
Initial Wt (kg)	65.4 $\pm$ 3.5	50.0-95.9	65.1 $\pm$ 2.2	54.1-79.1
LBM (kg)	49.7 $\pm$ 1.6	40.3-58.0	51.4 $\pm$ 1.3	44.3-60.3
BF (%)	22.2 $\pm$ 2.6	11.7-48.0	20.1 $\pm$ 1.6	12.9-31.0
Ht (cm)	166.7 $\pm$ 1.9	152.4-177.8	165.8 $\pm$ 1.2	160.0-172.7
Age (yrs)	23.9 $\pm$ 0.9	21.0-33.0	22.5 $\pm$ 0.8	19.0-29.0
METS/wk	66.9 $\pm$ 9.9	40.0-101.3	62.5 $\pm$ 13.9	24.9-113.5
Meat (kg/wk)	0.8 $\pm$ 0.1	0.4-1.1	1.0 $\pm$ 0.2	0.6-1.9

Pre- and post-treatment Wt and muscle response are summarized in Table 3. With respect to Wt, CrH₂O supplementation resulted in no significant treatment effect ($F_{1,22}=0.72$,

$p=0.41$), a significant trial effect ($F_{1,22}=5.75$, $p=0.03$), and no significant treatment by trial interaction ($F_{1,22}=0.66$, $p=0.43$). These findings indicate that while body weight did change over time, the change did not differ significantly between treatment groups. Weight increased by 0.6% and 1.2% from pre- to post-treatment in P and CrH₂O groups respectively.

Table 3

Body Weight and Muscle Response By Trial and Treatment Group

Variable	Placebo ^a		CrH ₂ O ^a	
	Pre	Post	Pre	Post
Wt (kg)	65.3 ± 3.5	65.7 ± 3.5	64.9 ± 2.2	65.7 ± 2.2
EF IK _{CON} (Nm)	42.9 ± 2.9	42.1 ± 2.5	44.2 ± 2.0	46.6 ± 1.6
EF IK _{ECC} (Nm)	55.2 ± 3.5	56.3 ± 4.2	62.0 ± 2.7	64.8 ± 5.1
EF _{1RM} (Nm)	34.4 ± 2.5	35.0 ± 2.6	36.2 ± 1.8	37.8 ± 1.7
EF _{FAT} (reps) ^b	17.0 ± 1.5	15.0 ± 0.8	12.8 ± 1.0	16.4 ± 1.5
IR _{1RM} (Nm)	35.4 ± 2.1	36.7 ± 2.1	34.1 ± 1.6	35.6 ± 1.5
IR _{FAT} (reps)	38.3 ± 8.0	47.5 ± 9.7	36.5 ± 6.3	47.3 ± 9.3
IRV (°/sec)	292.1 ± 8.0	287.9 ± 7.4	291.1 ± 4.3	286.5 ± 8.1

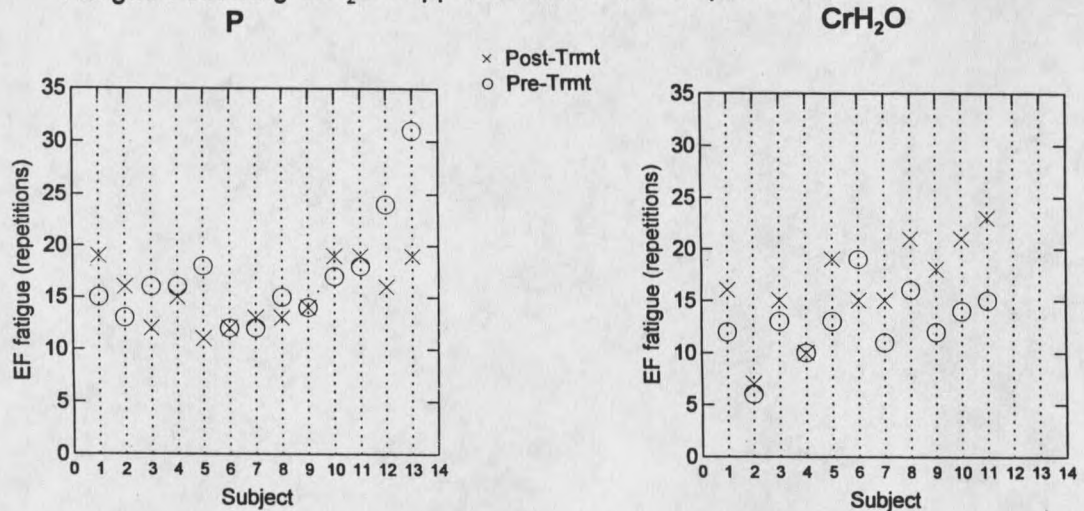
^a Mean ± SEM

^b The difference from pre- to post-treatment was significantly different ($p<0.05$) between treatment groups.

Analysis of EF using Wilks' criterion revealed a significant treatment by trial interaction ($F_{4,19}=5.30$, $p=0.005$) and a significant treatment effect ($F_{4,19}=6.71$, $p=0.0015$). In the absence of interaction, significant univariate treatment effects for EF IK_{CON} ($F_{1,22}=13.39$, $p=0.001$), EF IK_{ECC} ($F_{1,22}=16.76$, $p=0.0005$), and EF_{1RM} ($F_{1,22}=18.08$, $p=0.0003$) are not indicative of significant differences between treatment group responses. Treatment effects may be reflective of pre-existing strength differences and/or similar changes in strength between the groups following treatment. However, a significant treatment by trial interaction for EF_{FAT} ($F_{1,22}=9.42$, $p=0.006$), depicted in Figure 5, indicates that the increase in the number of

repetitions completed prior to volitional fatigue following CrH_2O supplementation was significantly greater than that following P ingestion. Analysis of EF data revealed no significant trial effects. Internal rotation analysis revealed no significant interaction, a significant treatment effect ($F_{3,19}=10.12$, $p=0.0003$), and a significant trial effect using Wilks' criterion ($F_{3,19}=9.93$, $p=0.0004$). The significant univariate treatment effect for $\text{IR}_{1\text{RM}}$ ($F_{1,21}=10.12$, $p=0.0003$), without significant treatment by trial interaction, cannot be interpreted as a significantly different response between treatment groups. Significant univariate trial effects for $\text{IR}_{1\text{RM}}$ ($F_{1,21}=11.13$, $p=0.003$) and IR_{FAT} ($F_{1,21}=7.65$, $p=0.01$) indicate that peak IR strength and IR repetitions to fatigue improved over time but with no significant differences between treatment groups.

Figure 5. Scatter Plots Depicting a Significantly Greater Increase in EF Repetitions to Fatigue Following CrH_2O Supplementation as Compared to P



Nonsignificant trends in muscle response are compared in Figure 6. Peak IT EF strength remained essentially unchanged or decreased following P in 70% of subjects, whereas 45% of subjects in the CrH_2O group experienced improvement in $\text{EF}_{1\text{RM}}$. Recalling that subjects were asked to discontinue progression of their resistance training during the study and assuming subject compliance was adequate, one should consider the possibility that

detraining occurred in the P group but was prevented in the CrH₂O group. Peak EF IK_{CON} improved in 23% and 54% of subjects following P and CrH₂O, respectively; EF IK_{ECC} improved in 30% and 45% of subjects following P and CrH₂O, respectively. Following P, 30% experienced increased peak IR torques while 45% of those supplemented with CrH₂O increased IR_{1RM}. The majority of subjects, regardless of treatment group, experienced decreased velocity during IR. Improvements in IR repetitions to fatigue, experienced by 54% of subjects, occurred equally in both treatment groups.

Figure 6. Scatter Plots Comparing Trends of Nonsignificant Changes in Muscle Response Pre- and Post-Dietary Phase Across Treatment Groups

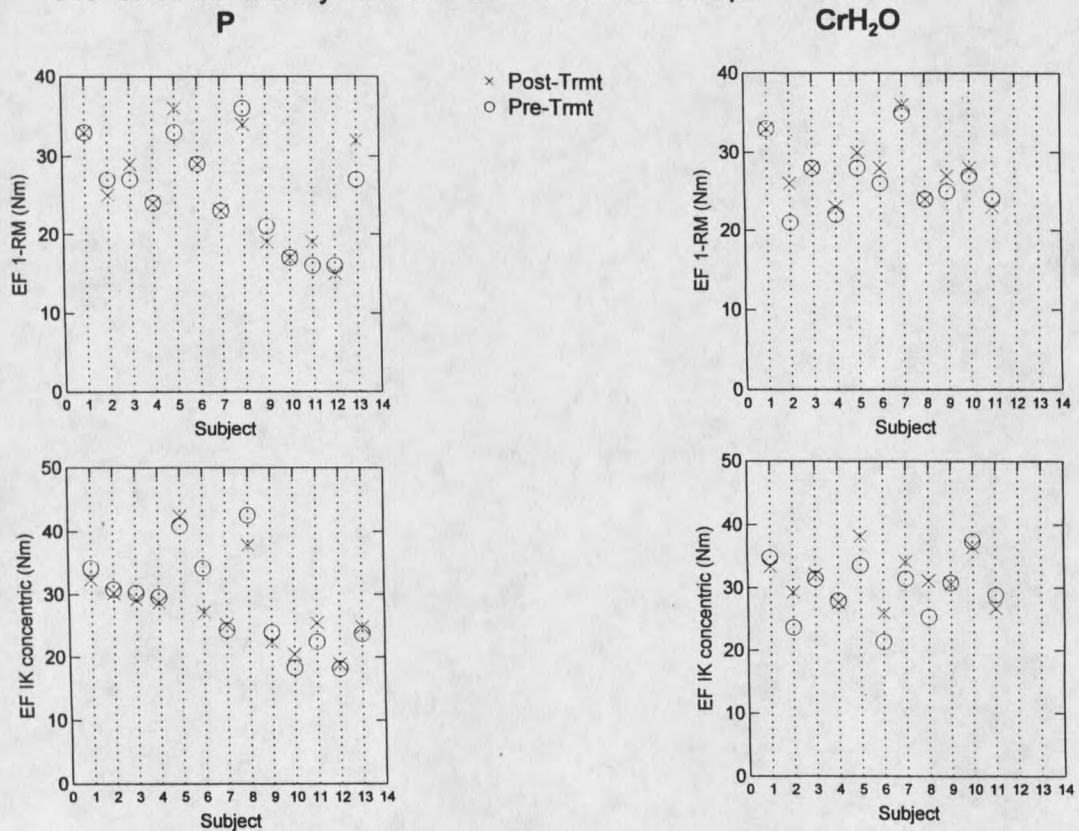
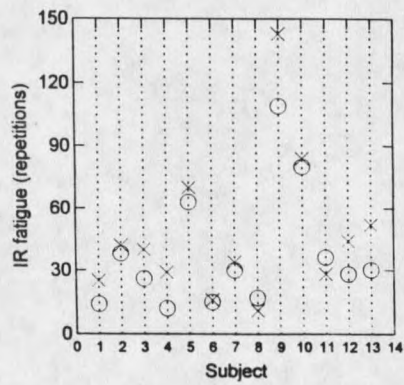
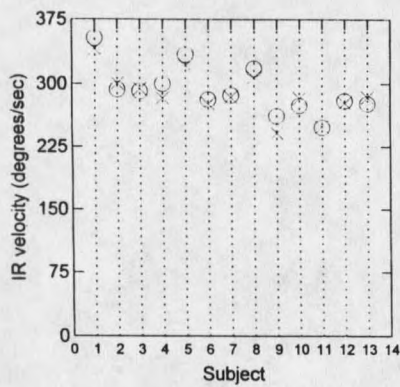
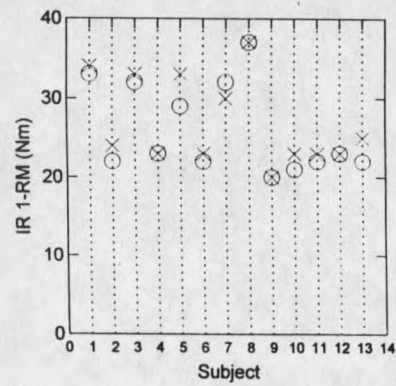
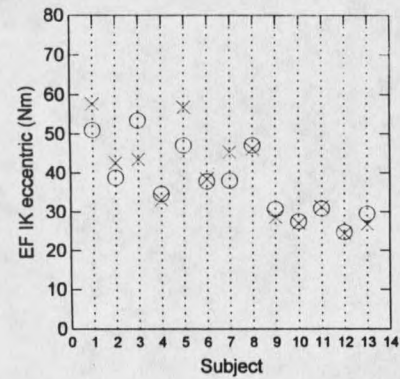
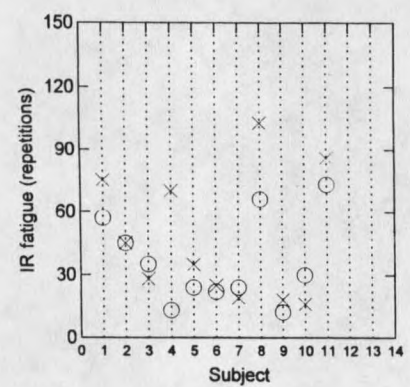
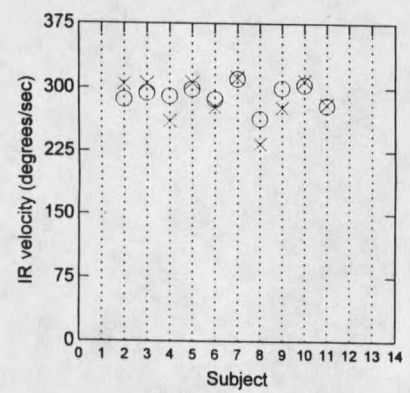
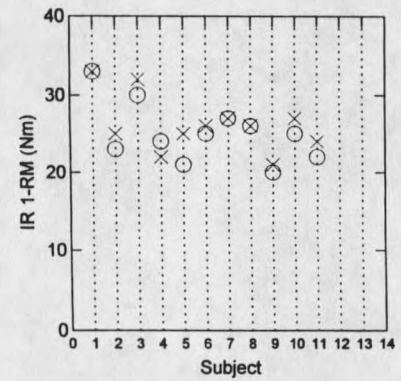
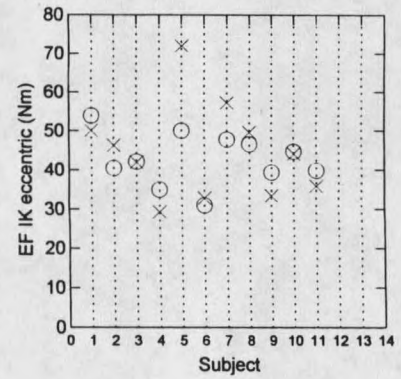


Figure 6. (cont'd) P

CrH₂O

CHAPTER V

GENERAL DISCUSSION AND SUMMARY

The purpose of this study was to quantify the effects of oral Cr supplementation on upper extremity anaerobic response in females. An examination of four EF and three shoulder IR variables revealed a significant gain only in IT work to fatigue during EF. Overall tolerance to CrH_2O was adequate with only two isolated reports of gastrointestinal discomfort for which termination of supplementation did not become necessary. Supplement preparation in warm herbal tea facilitated delivery of CrH_2O in a pleasant-tasting medium that did not increase simple carbohydrate or caffeine intake.

Elbow Flexion

Average peak IK and IT EF torque observed in this investigation exceeded published values (Rutherford & Corbin, 1994). The results of this study suggest a role for CrH_2O supplementation in enhancing IT work to fatigue in female athletes during upper extremity conditioning movements such as the biceps curl. This finding of increased IT work to fatigue following CrH_2O ingestion is in agreement with previous findings applicable to lower body anaerobic work efforts (Balsom et al., 1993a; Birch et al., 1994; Earnest et al., 1995b; Hall et al., 1995) and upper body strength training (Volek et al., 1996).

Both EF IK_{CON} and EF IK_{ECC} increased to a greater extent in the CrH_2O group than in the P group (EF IK_{CON} : decreased 1.9% and increased 5.4% in P and CrH_2O groups respectively; EF IK_{ECC} : increased 1.1% and 4.5% in P and CrH_2O groups respectively). Therefore, while no significant interaction existed for IK peak CON and ECC torque during EF, the significant treatment effects for these variables may lend credence to an effect of Cr supplementation

in increasing peak IK strength. Limited information in the literature exists concerning the effect of CrH_2O on IK performance. A previous investigation of Cr supplementation and IK lower body work revealed improvement in work capacity but did not include an evaluation of peak IK strength (Greenhaff et al., 1993b).

Shoulder Internal Rotation

Average peak IR torque equaled or exceeded published IR normal values for the same age and gender (Ivey, Calhoun, Rusche, & Bierschenk, 1985). No significant improvements were seen in any of the shoulder IR parameters suggesting that CrH_2O does not enhance performance of sports involving explosive overhand movement in female athletes. While this is the first study to examine the potential effects of CrH_2O on performance of overhand sports, previous investigations of upper extremity sports such as swimming and rowing have revealed no significant performance enhancement following CrH_2O ingestion (Burke et al., 1995; Rossiter et al., 1996).

Body Mass

In the present study, there was no significant change in body weight following CrH_2O ingestion. This contradicts the majority of existing literature which reports increases in body mass related to CrH_2O use (Balsom et al., 1993a, 1993b; Chanutin, 1926; Greenhaff et al., 1994a; Soderlund et al., 1994; Volek et al., 1996). Because treatment duration for CrH_2O studies is typically five to seven days, a time period during which changes in body composition are generally undetectable, the nature of the CrH_2O -related weight gain is unknown. The mechanisms by which CrH_2O may lead to weight gain are also unknown. It is possible that cessation of progressive resistance exercise may have counteracted any possibility of Cr-induced LBM gains in this investigation.

Physical Activity

No significant difference in estimated amount of physical activity existed between dietary groups. The subjects in this study were instructed to continue their current physical training but without progressive resistance. The majority of past research, however, does not include an indication of whether subjects were instructed to continue versus change their normal training. If no restrictions are placed on physical training during the supplementation period, it becomes difficult to ascertain whether improvements in performance are due to an ergogenic action of CrH_2O or merely to the effects of progressive resistance training. In a study comparing changes in skeletal muscle Cr concentration following CrH_2O supplementation in subjects engaged in normal physical activity versus those performing maximal one-legged exercise, investigators reported a significantly greater increase in muscle Cr concentration following exercise (Harris et al., 1992). Given the evidence that Cr uptake is accelerated when supplemented during participation in high-intensity exercise, the most beneficial method for evaluating the efficacy of CrH_2O becomes difficult to ascertain.

Dietary Creatine

Estimated average daily Cr intake from meat was slightly less than normal, regardless of treatment group. Based on renal creatinine excretion, an average 70 kg male requires approximately 2 g Cr/day, 50% of which is normally provided by the diet. The portion of the requirement not provided by the diet is met via biosynthesis which likely operates via a feedback system. That is, when dietary Cr decreases, biosynthesis increases. Thus, it is unlikely that fluctuations in dietary Cr necessarily deem an individual Cr deficient at the tissue level (Harris et al., 1992). While this, theoretically, may have influenced supplemental Cr metabolism, one should also be aware of the tendency to underreport food intake on food frequency questionnaires (Pekkarin, 1970; Young, Hagan, Tucker, & Foster, 1952).

Direction for Future Research

The influence of CrH_2O on repeated intermittent bouts of EF, particularly in the IK mode comparing CON and ECC work, should be investigated. As this study did not address the potential value of CrH_2O for enhancing intermittent bouts of shoulder IR in female or male athletes, further investigation is warranted. Such an investigation should be designed to be as sport specific as possible, for example, having tennis athletes do the same number of bouts of shoulder exercise as would occur during the average rally in a tennis match. Biomechanical techniques, such as measuring ball velocity and employing motion analysis for evaluation of throwing kinematics during overhand sports, may be another valuable avenue to pursue for the assessment of possible ergogenic-related changes.

The mechanisms by which CrH_2O may contribute to increased body mass should be investigated. Balsom et al. (1993a) have proposed that weight gain results from an accelerated uptake of water by skeletal muscle cells due to osmotic action of increased intracellular Cr. A study of patients with choroid and retinal gyrate atrophy given Cr supplements lends some support to the theory of cellular swelling resulting in weight gain (Sipila, Rapola, Simell, & Vannas, 1981). These patients, whose disease is attributed to a defect in Cr biosynthesis, experienced an increase in the diameter of type II muscle fibers in the vastus lateralis. Another theory attempting to account for weight gain associated with CrH_2O supplementation is based on Cr functioning as a signal for increased contractile protein synthesis (Ingwall, Weiner, Morales, Davis, & Stockdale, 1974). A recently published investigation was the first to employ CrH_2O dosing based on kg of body mass (Rossiter et al., 1996). Utilizing 0.25 g CrH_2O /kg body mass dosing, investigators effectively increased whole-body Cr stores as estimated by measurement of urinary creatinine and Cr concentrations. This information may be valuable for evaluating the influence of LBM on the efficacy of CrH_2O . Research efforts should be aimed at clarifying the mechanisms of action

by which supplemental Cr interacts with and influences skeletal muscle cells and whether this interaction causes a change in body mass.

Further clarification of the effects of training volume on CrH₂O efficacy is needed. Few efforts have been made to control or manipulate physical activity during experimental Cr supplementation. Well-designed, highly controlled training studies that explore the relationship between CrH₂O efficacy and training volume could provide valuable information regarding the practical application of this potential ergogen.

Future investigation should also be focused on determining the exact mechanism(s) by which supplemental Cr may increase PC resynthesis and/or delay fatigue. Type II fibers have been shown to have higher PC concentration and turnover than type I fibers, yet slower PC resynthesis following high-intensity exercise, owing to the apparent correlation of PC concentration with muscle fatigability (Edstrom et al., 1982; Greenhaff et al., 1994a; Soderlund et al., 1992; Tesch, Thorsson, & Fujitsuka, 1989). It is also well documented that following high-intensity activity with short recovery periods, performance is impaired (Balsom, Seger, Sjodin, & Ekblom, 1992a, 1992b). Hypotheses follow that inadequate PC resynthesis may be a causal factor in this performance impairment. There is growing support for the ability of Cr supplementation to accelerate the rate of PC resynthesis following intermittent exercise, yet it is still not clear if this enhanced resynthesis results in delayed fatigue (Greenhaff et al., 1993a, 1994b).

Because the time course of Cr degradation following supplementation has yet to be quantified, a cross-over design is contraindicated. Investigation of Cr degradation following supplementation at doses similar to those in the current study is in progress (Greenhaff, 1995). Current research suggests that supplemental Cr may remain in skeletal muscle longer than one month following supplementation (Benedict & Osterberg, 1923; Chanutin, 1926; Lemon et al., 1995). While care was taken to ensure that treatment groups were anthropometrically similar, utilization of a cross-over design would have been optimal for

counterbalancing the effects of increased testing experience, time of day, maturation effects, and the interaction of any of these effects with selection by enabling each subject to serve as her own control. Until more conclusive insight into the half-life of supplemental Cr is gained, experimental design will continue to be a concern in CrH₂O research.

As the mechanisms by which CrH₂O may exert ergogenic effects are still unclear, efforts to discover whether other substances may further enhance any ergogenic capabilities of CrH₂O are being pursued. Investigation into the effect of insulin and glucose on Cr uptake by myocytes, first investigated over 20 years ago, is re-emerging (Haugland & Chang, 1975; Koszalka, & Andrew, 1972). Vitamin E deficiency may inhibit Cr metabolism (Gerber, Gerber, Koszalka, & Emmel, 1962) as may the concurrent use of drugs such as digoxin (Bennet, Bevington, & Walls, 1994). Cr supplementation in conjunction with chromium or with vanadyl sulfate, a substance which binds phosphate compounds and freely enters and accumulates in cells, is also currently under investigation.

Other areas in need of research are with regard to the biochemical and performance effects of long-term CrH₂O supplementation. Few investigators have pursued measurement of the effects of CrH₂O ingestion beyond an average of seven days of supplementation (Almada et al., 1995; Sipila et al., 1981). As the mechanisms by which CrH₂O acts may be related to the extent of muscle uptake which may, in turn, be related to LBM and physical training, investigation into the appropriate dosage and timing of supplementation with respect to training may be of value. This value may extend beyond the sporting environment into the clinical setting as a treatment for atrophy-related disease.

In summary, Cr is important in regulation of skeletal muscle metabolism. While the roles of endogenous Cr are reasonably well defined, the influence of supplemental CrH₂O is not. It is well accepted that both muscle and plasma Cr concentrations can be elevated by providing exogenous Cr without any apparent ill effects. Beyond this point, however, both biochemical and performance effects resulting from exogenous Cr supercompensation

become less definitive. The exact mechanisms by which exogenous Cr invades skeletal muscle, in addition to the course of action that ensues once intracellular Cr concentrations are elevated, remain unknown. The value of CrH_2O supplementation for the athlete is currently limited to possible enhancement of short-duration, high-intensity, intermittent physical activity including powerful activities of both the lower and upper extremities. The practical application of CrH_2O for athletes wishing to significantly enhance sport performance is yet ill-defined. The results of this study indicate that oral CrH_2O supplementation has a positive effect on isotonic, upper extremity work to fatigue. Results further indicate that CrH_2O has no effect on isotonic, upper extremity peak strength, isotonic velocity, or isokinetic peak CON and ECC strength.

GLOSSARY

Adenosine triphosphate (ATP): A nucleotide formed with the energy released from food and the energy stored in cells, particularly muscle cells.

Anaerobic capacity: The amount of energy accessible for work in the absence of oxygen.

Anaerobic power: The maximum amount of energy that can be produced during maximal exertion per unit of time.

Buffer: A substance that reduces the change in hydrogen ion (H^+) concentration by binding or releasing H^+ in solution (Ganong, 1993).

Carbohydrate (CHO): A group of chemical compounds (including sugars, starches, and cellulose) containing carbon, hydrogen, and oxygen (Fox et al., 1993).

Creatine (α -methylguanidinoacetate; Cr): An amino-acid derived compound, stored primarily in skeletal muscle, serving as a reservoir of high-energy phosphate groups.

Creatine kinase (CK): An enzyme responsible for catalyzing the reversible phosphorylation of creatine to phosphocreatine.

Glycogen: The storage form of glucose; primarily stored in the liver and muscle tissue.

Glycolysis: The catabolic conversion of carbohydrate (glycogen or glucose) to pyruvate.

Isokinetic (IK): A contraction in which constant maximal tension is developed by a muscle while moving at a constant speed or velocity through a joint's full range of motion.

Isometric (IM): A contraction during which there is no change in the length of the muscle.

Isotonic (IT): A contraction in which a resistance is moved without changing velocity.

Lactic acid or lactate: A metabolic by-product resulting from the catabolism of carbohydrate in the absence of oxygen.

Mitochondrion (singular); Mitochondria (plural): Membranous structures found in the cytoplasm of all cells in which ATP is manufactured (Tortora & Anagnostakos, 1987).

Myofibril: The part of a muscle fiber containing actin, myosin, troponin, and tropomyosin filaments (Ganong, 1993).

Polycose®: Powdered glucose polymers (Abbott Laboratories, Columbus, OH).

Work: A force exerted with displacement but without respect to time (Fox et al., 1993).

LITERATURE CITED

Adams, G.M. (1994). Exercise physiology laboratory manual (2nd ed.) (pp. 25-31, 40-44). Dubuque, IA: W.C. Brown & Benchmark Publishers.

Almada, A., Kreider, R., Weiss, L., Fry, A., Wood, L., Bullen, D., Mijayi, M., Grindstaff, P., Ramsey, L., & Li, Y. (1995). Effects of ingesting a supplement containing creatine monohydrate for 28 days on isokinetic performance. Medicine and Science in Sports and Exercise, 27, S146.

American College of Sports Medicine. (1987a). ACSM position stand on the use of anabolic-androgenic steroids in sports. Medicine and Science in Sports and Exercise, 19, 534-539.

American College of Sports Medicine. (1987b). ACSM position stand on blood doping as an ergogenic aid. Medicine and Science in Sports and Exercise, 19, 540-543.

American College of Sports Medicine. (1995). ACSM's guidelines for exercise testing and prescription. (5th ed.) (p. 42). Philadelphia, PA: Williams & Wilkins.

Atwater, A.E. (1979). Biomechanics of overarm throwing movement and of throwing injuries. Exercise and Sport Sciences Reviews, 7, 43-85.

Ayalon, A., Inbar, O., & Bar-Or, O. (1974). Relationships among measurements of explosive strength and anaerobic power. In R.C. Nelson & C.A. Morehouse (Eds.), International series on sport sciences: Vol. 1. Biomechanics, IV: Proceedings from the fourth international seminar on biomechanics. Baltimore, MD: University Park Press.

Balsom, P.D., Ekblom, B., Soderlund, K., Sjodin, B., & Hultman, E. (1993a). Creatine supplementation and dynamic high-intensity intermittent exercise. Scandinavian Journal of Medicine and Science in Sports, 3, 143-149.

Balsom, P.D., Harridge, S.D.R., Soderlund, K., Sjodin, B., & Ekblom, B. (1993b). Creatine supplementation *per se* does not enhance endurance exercise performance. Acta Physiologica Scandinavica, 149, 521-523.

Balsom, P.D., Seger, J.Y., Sjodin, B., & Ekblom, B. (1992a). Maximal intensity intermittent exercise: Effect of recovery duration. Journal of Sports Medicine, 13, 528-533.

Balsom, P.D., Seger, J.Y., Sjodin, B., & Ekblom, B. (1992b). Physiological responses to maximal intensity intermittent exercise. European Journal of Applied Physiology, 65, 144-149.

Balsom, P.D., Soderlund, K., & Ekblom, B. (1994). Creatine in humans with special reference to creatine supplementation. Sports Medicine, 18, 268-280.

Bar-Or, O. (1987). The Wingate anaerobic test: An update on methodology, reliability, and validity. Sports Medicine, 4, 381-386.

Bartlett, L.R., Storey, M.D., & Simons, B.D. (1989). Measurement of upper extremity torque production and its relationship to throwing speed in the competitive athlete. American

Journal of Sports Medicine, 17, 89-91.

Benedict, S.R., & Osterberg, E. (1923). The metabolism of creatine. Journal of Biological Chemistry, 56, 229-230.

Bennett, S.E., Bevington, A., & Walls, J. (1994). Regulation of intracellular creatine in erythrocytes and myoblasts: Influence of uraemia and inhibition of Na, K-ATPase. Cell Biochemistry and Function, 12, 99-106.

Berglund, B., & Hemmingsson, P. (1982). Effects of caffeine ingestion on exercise performance at low and high altitudes in cross-country skiers. International Journal of Sports Medicine, 3, 234-238.

Bessman, S.P., & Carpenter, C.L. (1985). The creatine-creatine phosphate energy shuttle. Annual Reviews in Biochemistry, 54, 831-862.

Bessman, S.P., & Geiger, P.J. (1981). Transport of energy in muscle. The phosphorylcreatine shuttle. Science, 211, 448-452.

Birch, R., Noble, D., & Greenhaff, P.L. (1994). The influence of dietary creatine supplementation on performance during repeated bouts of maximal isokinetic cycling in man. European Journal of Applied Physiology, 69, 268-270.

Blair, S.N. (1984). How to assess exercise habits and physical fitness. In J.D. Matarazzo (Ed.), Behavioral health. (pp. 233-244). Baltimore, MD: John Wiley & Sons.

Bleue, S., & Goodman, J. (1995). Creatine ingestion increases maximal accumulated oxygen deficit and anaerobic exercise capacity. Medicine and Science in Sports and Exercise, 27, S204.

Brees, A.J., Cordain, L., Harris, M., Smith, M.J., Fahrney, D., Gotshall, R., & Devoe, D. (1994). Creatine ingestion does not influence leg extension power in meat eating and vegetarian females. Federation of American Societies for Experimental Biology, 8, A308.

Brozek, J., Grande, J., Anderson, P., & Keys, A. (1963). Densitometric analysis of body composition: Revision of some quantitative assumptions. Annals of the New York Academy of Sciences, 110, 113-140.

Brown, L.P., Niehues, S.L., & Harrah, A. (1988). Upper extremity range of motion and isokinetic strength of the internal and external shoulder rotators in major league baseball players. American Journal of Sports Medicine, 16, 577-585.

Burke, L.M., Pyne, D.B., & Telford, R.D. (1995). Oral creatine supplementation does not improve sprint performance in elite swimmers. Medicine and Science in Sports and Exercise, 27, S146.

Chandler, J.V., & Blair, S.N. (1980). The effect of amphetamines on selected physiological components related to athletic success. Medicine and Science in Sports, 12, 65-68.

Chanutin, A. (1926). The fate of creatine when administered to man. Journal of

Biological Chemistry, 67, 29-34.

Cohen, D.B., Mont, M.A., Campbell, K.R., Vogelstein, B.N., & Loewy, J.W. (1994). Upper extremity physical factors affecting tennis serve velocity. American Journal of Sports Medicine, 22, 746-750.

Cook, E.E., Gray, V.L., & Savinar-Nogue, E. (1987). Shoulder antagonistic strength ratios: A comparison between college-level baseball pitchers and nonpitchers. Journal of Orthopedics and Sports Physical Therapy, 8, 451-461.

Crim, M.C., Calloway, D.H., & Margen, S. (1976). Creatine metabolism in men: Creatine pool turnover in relation to creatine intake. Journal of Nutrition, 106, 371-381.

Davies, R.E. (1965). On the mechanism of muscular contraction. In P.N. Campbell & G.D. Greville (Eds.), Essays in biochemistry (pp. 29-55). New York, NY: Academic Press.

Delanghe, J., DeSlypere, J. P., DeBuyzere, M., Robberecht, J., Wieme, R., & Vermeulen, A. (1989). Normal reference values for creatine, creatinine, and carnitine are lower for vegetarians. Clinical Chemistry, 35, 1802-1803.

DeLorme, T.L., & Watkins, A.L. (1951). Progressive resistance exercise. New York, NY: Appleton-Century-Crofts.

Devlin, T.M. (1982). Textbook of biochemistry with clinical correlations (pp. 608-609, 785, 101, 198, 268). New York, NY: John Wiley & Sons.

diPrampiero, P.E. (1976). Energy stores and supply in exercise. In E. Jokl & M. Hebbelink (Eds.), Medicine and sport, vol. 9: Advances in exercise physiology (pp. 132-146). Munchen, Germany: S. Karger, Basel.

Dons, B., Bollerup, K., Bonde-Petersen, F., & Hancke, S. (1979). The effects of weight-lifting exercise related to muscle fiber composition and muscle cross-sectional area in humans. European Journal of Applied Physiology, 40, 95-106.

Dubin, D. (1989). Rapid interpretation of EKG's (4th ed.) (pp. 36-40). Tampa, FL: Cover Publishing.

Earnest, C.P., Rash, J., Snell, P.G., Almada, A.L., & Mitchell, T.L. (1995a). Effect of creatine monohydrate ingestion on intermediate length anaerobic treadmill running to exhaustion. Medicine and Science in Sports and Exercise, 27, S14.

Earnest, C.P., Snell, P.G., Rodriguez, A.L., Almada, A.L., & Mitchell, T.L. (1995b). Effect of creatine monohydrate ingestion on anaerobic power indices, muscular strength, and body composition. Acta Physiologica Scandinavica, 153, 207-209.

Edstrom, L., Hultman, E., Sahlin, K., & Sjoholm, H. (1982). The contents of high energy phosphates in different fibre types in skeletal muscles from rats, guinea pig and man. Journal of Physiology, 332, 47-58.

Ellenbecker, T.S., Davies, G.J., & Rowinski, M.J. (1988). Concentric versus eccentric isokinetic strengthening of the rotator cuff. Objective data versus function test.

American Journal of Sports Medicine, 16, 64-69.

Ellenbecker, T.S., Feiring, D.C., & DeHart, R.L. (1992). Isokinetic shoulder strength: Coronal versus scapular plane testing in upper extremity unilaterally dominant athletes. Physical Therapy, 72, S80-S81.

Fabiato, A., & Fabiato, F. (1978). Effect of pH on the myofilaments and the sarcoplasmic reticulum of skinned cells from cardiac and skeletal muscles. Journal of Physiology, 276, 233-255.

Fiske, C.H., & Subbarow, Y. (1929). [Letter to the editor]. Journal of Biological Chemistry, 81, 629.

Forsberg, A.M., Nilsson, E., Werneman, J., Bergstrom, J., & Hultman, E. (1991). Muscle composition in relation to age and sex. Clinical Science, 81, 249-256.

Fox, E.L., Bowers, R.W., & Foss, M.L. (1993). The physiological basis for exercise and sport (5th ed.) (pp. 16-18, 30-37, 368-408, 675-694). Dubuque, IA: W.C. Brown Publishers.

Ganong, W.F. (1993). Review of medical physiology (16th ed.) (p. 4). East Norwalk, CT: Appleton & Lange.

Gerber, G.B., Gerber, G., Koszalka, T.R., & Emmel, V.M. (1962). Creatine metabolism in vitamin E deficiency in the rat. American Journal of Physiology, 202, 453-460.

Green, A.L., Greenhaff, P.L., MacDonald, I.A., Bell, D., Holliman, D., & Stroud, M.A. (1994). The influence of oral creatine supplementation on metabolism during sub-maximal incremental treadmill exercise. Proceedings. Nutrition Society, 53, 84A.

Greenhaff, P.L. (1995). Creatine and its application as an ergogenic aid. International Journal of Sport Nutrition, 5, S100-S110.

Greenhaff, P.L., Bodin, K., Harris, R.C., Hultman, E., Jones, D.A., McIntyre, D.B., Soderlund, K., & Turner, D.L. (1993a). The influence of oral creatine supplementation on muscle phosphocreatine resynthesis following intense contraction in man. Journal of Physiology, 467, 75P.

Greenhaff, P.L., Bodin, K., Soderlund, K., & Hultman, E. (1994a). Effect of oral creatine supplementation on skeletal muscle phosphocreatine resynthesis. American Journal of Physiology, 266, E725-E730.

Greenhaff, P.L., Casey, A., Short, A.H., Harris, R.C., Soderlund, K., & Hultman, E. (1993b). Influence of oral creatine supplementation on muscle torque during repeated bouts of maximal voluntary exercise in man. Clinical Science, 84, 565-571.

Greenhaff, P.L., Nevill, M.E., Soderlund, K., Bodin, K., Boobis, L.H., Williams, C., & Hultman, E. (1994b). The metabolic responses of human type I and II muscle fibres during maximal treadmill sprinting. Journal of Physiology, 478, 149-155.

Greenhaff, P.L., Soderlund, K., Ren, J.M., & Hultman, E. (1993c). Energy

metabolism in single human muscle fibres during intermittent contraction with occluded circulation. Journal of Physiology, 460, 443-453.

Grindstaff, P., Kreider, R., Weiss, L., Fry, A., Wood, L., Bullen, M., Miyaji, M., Ramsey, L., & Almada, A. (1995). Effects of ingesting a supplement containing creatine monohydrate for 7 days on isokinetic performance. Medicine and Science in Sports and Exercise, 27, S146.

Guimbal, C., & Kilimann, M.W. (1993). A Na⁺-dependent creatine transporter in rabbit brain, muscle, heart, and kidney. Journal of Biological Chemistry, 268, 8418-8421.

Hall, E.L., Smith, J.C., Stephens, D.P., Snell, P.G., & Earnest, C.P. (1995). Effect of oral ingestion of creatine monohydrate on parameters of the work-time relationship. Medicine and Science in Sports and Exercise, 27, S15.

Harris, R.C., Edwards, R.H.T., Hultman, E., Nordesjo, L. O., Nylind, B., & Sahlin, K. (1976). The time course of phosphorylcreatine resynthesis during recovery of the quadriceps muscle in man. Pflugers Archives, 367, 137-142.

Harris, R.C., Hultman, E., & Nordesjo, L.O. (1974). Glycogen, glycolytic intermediates, and high-energy phosphates determined in biopsy samples of musculus quadriceps femoris of man at rest. Scandinavian Journal of Clinical Laboratory Investigation, 33, 109-120.

Harris, R.C., Soderlund, K., & Hultman, E. (1992). Elevation of creatine in resting and exercised muscle of normal subjects by creatine supplementation. Clinical Science, 83, 367-374.

Harris, R.C., Viru, M., Greenhaff, P.L., & Hultman, E. (1993). The effect of oral creatine supplementation on running performance during maximal short term exercise in man. Journal of Physiology, 467, 74P.

Haugland, R.B., & Chang, D.T. (1975). Insulin effect on creatine transport in skeletal muscle. Proceedings. Society for Experimental Biology and Medicine, 148, 1-4.

Hellebrandt, F., & Houtz, S. (1956). Mechanisms of muscle training in man: Experimental demonstration of the overload principle. Physical Therapy Reviews, 36, 371-383.

Heywood, V.H. (1991). Advanced fitness assessment and exercise prescription. Champaign, IL: Human Kinetics.

Hinton, R.Y. (1988). Isokinetic evaluation of shoulder rotational strength in high school baseball pitchers. American Journal of Sports Medicine, 16, 274-279.

Hirvonen, J.S., Rehuman, H., Rusko, H., & Harkonen, M. (1987). Breakdown of high-energy phosphate compounds and lactate accumulation during short supramaximal exercise. European Journal of Applied Physiology, 56, 253-259.

Hislop, H.J., & Perrine, J.J. (1967). The isokinetic concept of exercise. Physical Therapy, 47, 114-117.

Hoberman, H.D., Sims, E.A.H., & Peters, J.H. (1948). Creatine and creatinine metabolism in the normal male adult studied with the aid of isotopic nitrogen. Journal of Biological Chemistry, 172, 45-51.

Hoeger, W.K., Barette, S.L., Hale, D.F., & Hopkins, D.R. (1987). Relationship between repetitions and selected percentage of one repetition maximum. Journal of Applied Sports Science Research, 1, 11-13.

Hoogwerf, B.J., Laine, D.C., & Greene, E. (1986). Urine C-peptide and creatinine (Jaffe method) excretion in healthy young adults on varied diets: Sustained effects of varied carbohydrate, protein, and meat content. American Journal of Clinical Nutrition, 43, 350-360.

Hultman, E. (1967). Studies on muscle metabolism of glycogen and active phosphate in man with special reference to exercise and diet. Scandinavian Journal of Clinical Laboratory Investigation, 19, 1-63.

Hultman, E., Bergstrom, J., & McLennan-Anderson, N. (1967). Breakdown and resynthesis of phosphocreatine and adenosine triphosphate in connection with muscular work in man. Scandinavian Journal of Clinical Laboratory Investigation, 19, 55-66.

Hultman, E., & Greenhaff, P.L. (1991). Skeletal muscle energy metabolism and fatigue during intense exercise in man. Science Progress, 75, 361-370.

Hunter, A. (1928). Creatine and creatinine. London, England: Longmans, Green and Co. Ltd.

Ingwall, J.S., Weiner, C.D., Morales, M.F., Davis, E., & Stockdale, F.E. (1974). Specificity of creatine in the control of muscle protein synthesis. Journal of Cellular Biology, 63, 145-151.

Ivey, F.M., Calhoun, J.H., Rusche, K., & Bierschenk, J. (1985). Isokinetic testing of shoulder strength: Normal values. Archives of Physical Medicine and Rehabilitation, 66, 384-386.

Iyengar, M.R. (1984). Creatine kinase as an intracellular regulator. Journal of Muscle Research and Cell Motility, 5, 527-534.

Iyengar, M.R., Fluellen, C.E., & Iyengar, C. (1982). Creatine kinase from the bovine myometrium: Purification and characterization. Journal of Muscle Research and Cell Motility, 3, 231-246.

Jackson, A.S., & Pollock, M.L. (1977). Prediction of body density, lean body weight, and total body volume equations. Medicine and Science in Sports, 9, 197-210.

Jacobus, W.E., & Lehninger, A.L. (1973). Creatine kinase of rat heart mitochondria. Journal of Biological Chemistry, 248, 4803-4810.

Karlsson, J. (1971). Lactate and phosphagen concentrations in working muscle of man. Acta Physiologica Scandinavica, 358 (Suppl.), 1-72.

Karpovich, P.V. (1971). Encyclopedia of sport sciences and medicine (pp. 14-16).

New York, NY: Macmillan.

Koszalka, T.R., & Andrew, C.L. (1972). Effect of insulin on the uptake of creatine-1-C by skeletal muscle in normal and X-irradiated rats. Proceedings. Society for Experimental Biology and Medicine, 139, 1265-1271.

Landers, J. (1985). Maximum based on repetitions. National Strength and Conditioning Association Journal, 6, 60-61.

Lemon, P., Boska, M., Bredle, D., Rogers, M., Ziegenfuss, T., & Newcomer, B. (1995). Effect of oral creatine supplementation on energetics during repeated maximal muscle contraction. Medicine and Science in Sports and Exercise, 27, S204.

Lykken, G.I., Jacob, R.A., Munoz, J.M., & Sandstead, H.H. (1980). Mathematical model of creatine metabolism in normal males—cooperation between theory and experiment. American Journal of Clinical Nutrition, 33, 2674-2685.

Marechal, G. (1981). Immediate energy sources in muscle contraction. In E. Jokl & M. Hebbelinck (Eds.), Medicine and sport, vol. 13: Physiological chemistry of exercise and training (pp. 1-9). Munchen, Germany: S. Karger, Basel.

Matheson, L.N., Mangseth, G., Segal, J.H., Grant, J.E., Comisso, K., & Westing, S. (1992). Validity and reliability of a new device to simulate upper extremity work demands. Journal of Occupational Rehabilitation, 2, 109-122.

Maughan, R.J. (1995). Creatine supplementation and exercise performance. International Journal of Sport Nutrition, 5, 94-101.

McArdle, W.D., Katch, F.I., & Katch, V.L. (1991). Exercise physiology: Energy, nutrition, and human performance (3rd ed.) (pp. 102-103, 456-459, 481-484, 497, 600-603). Philadelphia, PA: Lea & Febiger.

Meyer, R.A., Sweeney, H.L., & Kushmerick, M.J. (1984). A simple analysis of the "phosphocreatine shuttle." American Journal of Physiology, 246, C365-C377.

Morris, A.F., Lussier, L., Bell, G., & Dooley, J. (1983). Hamstrings/quadriceps strength ratios in collegiate middle-distance and distance runners. The Physician and Sportsmedicine, 71, 75-77.

Newsholme, E.A. (1981). Control of carbohydrate utilization in muscle in relation to energy demand and its involvement in fatigue. In E. Jokl & M. Hebbelinck (Eds.), Medicine and sport, vol. 13: Physiological chemistry of exercise and training (pp. 53-62). Munchen, Germany: S. Karger, Basel.

Ng, L.R., & Kramer, J.S. (1991). Shoulder rotator torques in female tennis and nontennis players. Journal of Sports Physical Therapy, 13, 40-46.

Osternig, L.R. (1986). Isokinetic dynamometry: Implications for muscle testing and rehabilitation. In K.B. Pandolf (Ed.), Exercise and sport sciences reviews, vol. 14 (pp. 45-80). New York, NY: MacMillan.

Pearson, D.R., & Costill, D.L. (1988). The effects of constant external resistance exercise and isokinetic exercise training on work-induced hypertrophy. Journal of Applied Sport Science Research, 2, 39-41.

Pedegana, L.R., Elsner, R.C., & Roberts, D. (1982). The relationship up upper extremity strength to throwing speed. American Journal of Sports Medicine, 10, 352-354.

Pekkarin, M. (1970). Methodology in the collection of food consumption data. World Review of Nutrition and Dietetics, 12, 145-171.

Perrin, D.H., Robertson, R.J., & Ray, R.L. (1987). Bilateral isokinetic peak torque, torque acceleration energy, power, and work relationships in athletes and nonathletes. Journal of Orthopedic and Sports Physical Therapy, 9, 184-189.

Perrine, J.J., & Edgerton, V.R. (1978). Muscle force-velocity and power-velocity relationships under isokinetic loading. Medicine and Science in Sports, 10, 159-166.

Perry, J. (1983). Anatomy and biomechanics of the shoulder in throwing, swimming, gymnastics, and tennis. Clinical Sports Medicine, 2, 247-270.

Pollock, M.L., Schmidt, D.H., & Jackson, A.S. (1980). Measurement of cardiorespiratory fitness and body composition in the clinical setting. Comprehensive Therapy, 6, 12-27.

Rall, J.A. (1988). Molecular aspects of muscular contraction. In J.R. Poortmans, M. Hebbelinck, & R.J. Shephard (Eds.), Medicine and sport science: Principles of exercise biochemistry (pp. 1-21). Munchen, Germany: S. Karger, Basel.

Redondo, D., Williams, M., Dowling, E., Graham, B., Jones, S., & Almada, A. (1995). The effect of oral creatine monohydrate supplementation on running velocity. Medicine and Science in Sports and Exercise, 27, S146.

Rossiter, H.B., Cannell, E.R., & Jakeman, P.M. (1996). The effect of oral creatine supplementation on the 1000-m performance of competitive rowers. Journal of Sports Sciences, 14, 175-179.

Ruden, T.M., Ray, A.C., Parcell, M.L., Moss, K.A., Semler, J.L., Sharp, R.L., Rolfs, G.W., & King, D.S. (1996). Effects of oral creatine supplementation on performance and muscle metabolism during maximal exercise. Medicine and Science in Sports and Exercise, 28, S484.

Rutherford, W.J., & Corbin, C.B. (1994). Validation of criterion-referenced standards for tests of arm and shoulder girdle strength and endurance. Research Quarterly for Exercise and Sport, 65, 110-119.

Sale, D.G. (1991). Testing strength and power. In J.D. MacDougall, H.A. Wenger, & H.J. Green (Eds.), Physiological testing of the high performance athlete (pp. 21-106). Champaign, IL: Human Kinetics.

Sapega, A.A., Nicholas, J.A., Sokolow, D., & Saraniti, A. (1982). The nature of torque "overshoot" in Cybex isokinetic dynamometry. Medicine and Science in Sports and

Exercise, 14, 368-375.

The SAS^R system. (1990). Carey, NC: SAS Institute.

Savabi, F., Carpenter, C.L., Mohan, C., & Bessman, S.P. (1988). The polysome as a terminal for the creatine phosphate energy shuttle. Biochemical Medicine and Metabolic Biology, 40, 291-298.

Sipila, I. Rapola, O., Simell, O., & Vannas, A. (1981). Supplementary creatine as a treatment for gyrate atrophy of the choroid and retina. New England Journal of Medicine, 304, 867-870.

Soderlund, K., Balsom, P.D., & Ekblom, P. (1994). Creatine supplementation and high-intensity exercise: Influence on performance and muscle metabolism. Clinical Science, 87(Suppl.), 120-121.

Soderlund, K., Greenhaff, P., & Hultman, E. (1992). Energy metabolism in type I and type II muscle fibres during short term electrical stimulation at different frequencies. Acta Physiologica Scandinavica, 144, 15-22.

Spriet, L.L., Soderlund, K., Bergstrom, M., & Hultman, E. (1987). Anaerobic energy release in skeletal muscle during electrical stimulation in men. Journal of Applied Physiology, 62, 611-615.

Stafford, M.G., & Grana, W.A. (1984). Hamstring/quadriceps ratios in college football players. A high velocity relationship. American Journal of Sports Medicine, 12, 290-311.

Storey, K.B., & Hochachka, P.W. (1974). Activation of muscle glycolysis: A role for creatine phosphate in phosphofructokinase regulation. Federation of European Biochemical Societies Letters, 62, 337-339.

Tabachnick, B.G., & Fidell, L.S. (1989). Using multivariate statistics (2nd ed.) (pp. 52, 371-406). New York, NY: Harper & Row Publishers.

Tesch, P.A., Thorsson, A., & Fujitsuka, N. (1989). Creatine phosphate in fiber types of skeletal muscle before and after exhaustive exercise. Journal of Applied Physiology, 66, 1756-1759.

Tortora, G.J., & Anagnostakos, N.P. (1987). Principles of anatomy and physiology (5th ed.) (pp. G7-G56). New York, NY: Harper & Row Publishers.

Toyoshima, S., & Hoshikawa, T. (1974). Contribution of the body parts to throwing performance. In R.C. Nelson & C.A. Morehouse (Eds.), International series on sport sciences: Vol. 1. Biomechanics. IV: Proceedings from the fourth international seminar on biomechanics. Baltimore, MD: University Park Press.

United States Olympic Committee. (1989). Drug free: U.S. Olympic committee drug education handbook--1989-92 (pp. 20). Colorado Springs, CO.

Volek, J.S., & Kraemer, W.J. (1996). Creatine supplementation: Its effect on human

muscular performance and body composition. Journal of Strength and Conditioning Research, 10(3), 200-210.

Volek, J.S., Kraemer, W.J., Bush, J.A., Boetes, M., Incledon, T., Clark, K.L., Lynch, J.M., & Knuttgen, H.G. (1996). Creatine supplementation enhances muscular performance during high-intensity resistance exercise. Medicine and Science in Sports and Exercise, 28, S482.

Walker, J.B. (1960). Metabolic control of creatine biosynthesis: Effect of dietary creatine. Journal of Biological Chemistry, 235, 2357-2361.

Wallimann, T., Wyss, M., Brdiczka, D., Nicolay, K., & Eppenberger, H.M. (1992). Intracellular compartmentation, structure, and function of creatine kinase isoenzymes in tissues with high and fluctuating energy demands: The 'phosphocreatine circuit' for cellular energy homeostasis. Biochemistry Journal, 281, 21-40.

Wilmore, J.H., & Costill, D.L. (1988). Training for sport and activity (pp. 88-90, 251-257). Dubuque, IA: W.C. Brown & Benchmark Publishers.

Withers, R.T. (1970). Effect of varied weight-training loads on the strength of university freshman. Research Quarterly, 41, 110-114.

Wooden, M.J., Greenfield, B., & Johanson, M. (1992). Effects of strength training on throwing velocity and shoulder muscle performance in teenage baseball players. Journal of Sports Physical Therapy, 15, 223-228.

Young, C.M., Hagan, G.C., Tucker, R.E., & Foster, W.D. (1952). A comparison of dietary study methods, II. Dietary history vs. seven-day record vs. 24-hour recall. Journal of the American Dietetic Association, 28, 220-226.

Zubay, G. (1988). Biochemistry (2nd ed.) (pp. 801-802). New York, NY: MacMillan Publishing Co.

APPENDICES

APPENDIX A

FORMS USED IN THIS STUDY

SUBJECT CONSENT FORM
Wellness & Sport Testing Program
Human Performance and Ergonomics Laboratory
Montana State University

1. The procedures to be followed, including those which are experimental:

You are being asked to participate in a study to investigate the physiologic response to a nutritional supplement. The supplement is not investigational and is available commercially. As a participant, you may receive the supplement itself or a placebo.

The subject for this study is _____. This subject exhibits no known cardiovascular or pulmonary disease, pregnancy, metabolic disorders (i.e., diabetes), or contraindications to exercise.

Physiologic measurements will include an initial evaluation of electrical activity of the heart (ECG), anthropometric measurements (total body weight, height, percent body fat, and lean mass), and upper body isokinetic and isotonic strength.

2. Participant time requirements:

The amount of total time that the subject will be asked to participate in this study is 20 days (see Fig. 1). During the 20 day study, the subject must attend 5 testing sessions, in the Human Performance and Ergonomics Laboratory (HPEL), for approximately 1 hour each. Additionally, during 14 days of the 20 day study, the subject will be required to report to the HPEL 5 times daily (total of 5 minutes/day) to consume the supplement or placebo.

Figure 1: Experimental Time Line

Day 1: Testing	Day 3: Testing	Day 6: Testing	Day 13: Testing	Day 20: Testing
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Cross-hatches indicate that no supplement /placebo will be consumed; shading indicates that oral supplement/placebo will be consumed 5 times daily.

3. The participant discomforts and risks:

a. Electrocardiographic (ECG) evaluation- The preparatory phase for the ECG will involve roughing the skin with a piece of gauze and alcohol to optimize adhesion and conduction of the electrodes. Cardiac responses will be monitored through an electrocardiograph device (ECG) and blood pressures will be taken during supine (lying down), hyperventilation (breathing rapidly and deeply in a sitting position), and standing. The ECG preparation may cause slight discomfort in the areas of electrode placement which may sting slightly, similar to a rug burn, but the discomfort should subside within two days. Some discomforts associated with the testing procedure may include occasional abnormal blood pressure response, syncope (light-headedness), dysrhythmia (disturbance in normal heart rhythm), severe dyspnea (shortness of breath), and in very rare instances, heart attack. Every effort will be made to minimize these inherent risks through preliminary examination and observations during testing by trained personnel according to the American College of Sports Medicine guidelines for testing procedures. The overall procedural risk in this study is very small and the associated discomforts and risks will be reviewed just prior to the evaluation.

b. Upper body muscular strength- Each testing session will involve evaluation of strength through two movements: elbow flexion/extension (biceps curl) and internal rotation of the shoulder (simulated overhand throw). Strength will be evaluated in 2 modes; isokinetic (speed is controlled but resistance varies) and isotonic (resistance is constant but speed can vary). The subject will be asked to exert maximal effort during each testing mode and movement. Tests will be separated with two minute rest periods. Associated risks during these procedures are minimal since these movements are experienced in competitive sporting events and routine strength conditioning; however,

tests will be performed in a controlled situation. Given the nature of the subject, and prior warm-up and stretching procedures, the risks are minimal. The most common discomfort incurred may be temporary muscular soreness due to the maximal effort exerted.

c. Consumption of nutritional supplement- Few side effects associated with consumption of the supplement have been reported. They include occasional transient gastrointestinal discomfort (i.e., mild nausea, diarrhea) and temporary fluid retention.

d. Determination of lean body mass- The skinfold procedure, which involves measuring the width of a surface skinfold at particular sites on the body using a caliper, does not present a risk to the subject.

4. Psychological assessment

The subject will be asked to complete a widely-accepted psychometric inventory called the *Profile of Mood States (POMS)* which evaluates typical mood states including tension, depression, anger, vigor, fatigue, and confusion. The POMS will be completed 3 times during the 20 day study.

5. The benefits expected:

Initial ECG evaluation and upper body strength values may serve as an index of general cardiac health status, athletic performance potential, and physical well-being. Results should specifically be of value to female athletes who are using or considering the use of this nutritional supplement for the purpose of enhancing upper body strength and/or power.

6. Statement of understanding:

I, _____ (please print), should benefit from this study by receiving information related to my cardiac health. I understand that the procedures are those which will offer the minimal amount of risk to me while allowing the collection of significant and relevant data.

If I desire, I will be given a copy of the results of my ECG evaluation and muscular strength/power. I understand there will be no monetary compensation for my participation in this study.

I have been offered an answer to any inquiries concerning the procedures prior to signing voluntarily this consent form and I expect that future inquiries will be answered to my satisfaction. I understand that I am free to withdraw my consent and to discontinue my participation in this study at any time and for any reason. Should I choose to do so, this will be without prejudice and what results were obtained will still be reported to me upon request.

I understand that participation in this study is voluntary and have been assured that steps will be taken to ensure the confidentiality of my individual results which will not be shared with anyone or will not affect my status on any team. The only information available to individuals other than myself will be in average and statistical form. Neither my name nor any other personal descriptor will be associated with publication or presentation of the results of this project.

I have not been requested to waive or release the institution, its agents, or sponsors from liability for the negligence of its agents or employees.

I, the undersigned, have understood the above explanations and give my consent to my voluntary participation in this research project.

If I have additional questions about my rights as a subject or the manner in which this research is conducted I can contact Dr. Stephen Guggenheim, Chair Human Subjects Committee at 406-994-4411.

I ☐ do ☐ do not (please check one) consent to being videotaped or photographed at some time during my testing sessions.

Participant Signature: _____ Witness Signature: _____

Date: _____ Please contact the following individuals if you have further questions.

Michael C. Meyers, PhD, MS, FACSM
Assistant Professor, Exercise Physiology
(406) 994-6324

Karyn H. Ward, RD
Lab Technician; Graduate student
(406) 994-6325

Montana State University
Human Performance and Ergonomics Laboratory
Medical History Form--All Information Is Private And Confidential

General Information

___Mr. ___Ms. ___Miss ___Mrs. ___Dr. Sex ___M ___F Date ___/___/___

Name (Last, First, MI): _____

Address _____

Phone () _____ SSN - - DOB ___/___/___ City, State Zip

Physician

Dr. _____ Phone () _____

Address _____

Number and Street City, State Zip

Marital Status ___Single ___Married ___Divorced ___Widowed ___Separated

Education (Check highest level attained)

___Grade School ___Jr. High ___High School ___2-yr college (or 4-yr not completed)

___College Graduate ___Postgraduate School

Occupation _____ **Employer** _____

Employer Address _____ City, State Zip Phone

Women Only check all that apply:

___ Currently pregnant (if yes: _____ weeks) No. of pregnancies _____

___ Taking oral contraceptives No. of children _____

___ Menstrual problems (comment below if yes) 1st day of last menstruation _____

___ Recurrent itching/discharge Date last pelvic exam _____

___ Childbirth complication (comment below if yes) results: _____nl. _____abnl.

___ Breast discharge/lumps

___ Urinary incontinence

Comments: _____

Men and Women answer the following:

List any prescribed *and* any self-prescribed medications and dietary supplements you are taking:

Date of last complete physical examination: _____

results: _____nl. _____abnl. (please comment: _____)

Date of last chest x-ray (if ever): _____

results: _____nl. _____abnl. (please comment: _____)

Date of last electrocardiogram (if ever): _____

results: _____nl. _____abnl. (please comment: _____)

Date of last dental examination: _____

results: _____nl. _____abnl. (please comment: _____)

List any other medical or diagnostic tests you have had in the past 5 yrs:

List hospitalizations (include dates and purpose for hospitalization):

List any drug or food allergies:

Please explain the purpose for your visit to this laboratory:

- ☐ To participate in a research study
- ☐ To determine current level of fitness/receive recommendations for an exercise program
- ☐ Other (please explain): _____

Present Health

Check only those conditions that apply to you. Makes comments below if further explanation needed.

- ☐ High blood pressure
- ☐ Low blood pressure
- ☐ Chest pain
- ☐ "Thumping" or "racing" of the heart
- ☐ Heart skips a beat or seems to have extra beats
- ☐ Ankles that tend to swell
- ☐ Hands and feet that are often cold even in warm weather
- ☐ Leg cramps
- ☐ Difficulty breathing
- ☐ Shortness of breath
- ☐ Out of breath while sitting or laying down
- ☐ High cholesterol
- ☐ Chronic or recurrent morning cough
- ☐ One or more episodes of coughing up blood
- ☐ Anxiety or depression
- ☐ Chronic fatigue, difficulty sleeping, and/or increased irritability
- ☐ Migraine or recurrent headaches
- ☐ My joints are swollen, stiff, or painful
- ☐ Leg pain even after walking only a short distance
- ☐ Back pain
- ☐ Men only: Prostate trouble
- ☐ Stomach or intestinal problems (heartburn, ulcers, constipation, diarrhea, etc.)
- ☐ Vision or hearing problems
- ☐ Recent change in a wart or mole

Comments: _____

Please indicate if you've had any history of the following conditions:

- | | |
|---|---|
| ☐ Heart attack | ☐ Broken bones |
| ☐ How long ago? _____ | ☐ Jaundice or gallbladder problems |
| ☐ Heart murmur | ☐ Kidney or urinary problems |
| ☐ Diseases of the arteries | ☐ Polio |
| ☐ Other heart problems | ☐ Epilepsy or seizures |
| ☐ Varicose veins | ☐ Stroke |
| ☐ Arthritis in legs or arms | ☐ Diphtheria |
| ☐ Diabetes or abnl. blood sugar test | ☐ Scarlet Fever |
| ☐ Phlebitis | ☐ Infectious Mononucleosis |
| ☐ Dizziness or fainting spells | ☐ Anemia |
| ☐ Thyroid problems | ☐ Nervous or emotional problems |
| ☐ Pneumonia | Comments: _____ |
| ☐ Bronchitis | _____ |
| ☐ Asthma | _____ |
| ☐ Abnl. chest x-ray | _____ |
| ☐ Other lung diseases | |
| ☐ Injuries to back, arms, legs, joints | |

Family Medical History

Father: ☐ Alive ☐ current age: yrs general health: ☐ excellent ☐ good ☐ fair ☐ poor

☐ Deceased at age: yrs cause of death:

Mother: ☐ Alive ☐ current age: yrs general health: ☐ excellent ☐ good ☐ fair ☐ poor

☐ Deceased at age: yrs cause of death:

Siblings: No. of brothers: No. of sisters: Age range:

Health problems:

If your parents, siblings, grandparents, aunts, or uncles have had any of the following, please indicate with a check mark and comment below as needed:

☐ Heart attacks under age 50

☐ Congenital heart disease

☐ Strokes under age 50

☐ Heart operations

☐ High blood pressure

☐ Glaucoma

☐ Elevated cholesterol

☐ Obesity (20 or more lbs. overweight)

☐ Diabetes

☐ Leukemia or cancer under age 60

☐ Asthma or hay fever

Comments:

Additional Cardiac Risk Factor Assessment**SMOKING**

Have you ever smoked (cigarettes, cigars, or a pipe)? ☐ yes ☐ no (go to WEIGHT)

Do you currently smoke? ☐ yes ☐ no

If you do/did smoke, how many per day? cigarettes cigars pipe Age started:

If you have quit smoking, when was your last (month/year)?

WEIGHT

What do you consider a good weight for yourself? lbs.

Most you've ever weighed (indicate if it is pregnancy weight)? lbs. @ age

Current weight: lbs.; Weight 1 yr. ago: lbs.; Weight @ age 21: lbs.

NUTRITIONAL INTAKE

The following is a food frequency list. Please indicate the average number of times you consume each food item per week.

Eggs

Beef

Pork

Fowl

Fish

Fried foods

Desserts

Coffee/Tea

Whole milk

Low fat milk

Skim milk

What is your usual intake of the following alcoholic beverages?

Beer ☐ none ☐ occ ☐ often (#/wk:) Wine ☐ none ☐ occ ☐ often (#/week:)

Hard liquor ☐ none ☐ occ ☐ often (#/week:)

Has your intake of alcoholic beverages changed recently?

EXERCISE

Are you currently involved in a regular exercise program? ☐ yes ☐ no

Do you regularly walk or run one or more miles continuously? ☐ yes ☐ no

If yes, avg no. of miles you walk/run per workout or day: Avg time/mile:

Do you lift weights or do calisthenics? ☐ yes ☐ no

Are you involved in an aerobic exercise program (e.g. aerobics class)? ☐ yes ☐ no

Have you recently taken any "fitness tests?" ☐ yes ☐ no If yes, please describe (include results):

Do you frequently participate in competitive sports? ☐ yes ☐ no If yes, please list (include frequency):

Please list any high school or collegiate sports in which you participated:

ELECTROCARDIOGRAPHY REPORT

RESTING ECG:

Supine:

Rate _____ PR Interval _____ QRS Duration _____
 QT Interval _____ Axis _____ Rhythm _____ ST Segment _____
 Remarks _____

Hypervent:

Rate _____ PR Interval _____ QRS Duration _____
 QT Interval _____ Axis _____ Rhythm _____ ST Segment _____
 Remarks _____

Standing:

Rate _____ PR Interval _____ QRS Duration _____
 QT Interval _____ Axis _____ Rhythm _____ ST Segment _____
 Remarks _____

IMPRESSION: Normal _____ Equivocal _____ Abnormal _____

EXERCISE ECG:

Protocol _____ MAX BP _____ / _____ MAX HR _____
 Duration of test _____

IMPRESSION:

_____ Normal
 _____ Inconclusive test
 _____ Submaximal _____ Mechanical Failure
 _____ Drug Effect (Name) _____
 _____ Other _____
 _____ Remarks _____
 _____ Equivocal
 _____ ST Segment Depression/Elev(.5-1 mm Amp, $\geq .08$ sec)
 _____ PVCs (10-20%/min)
 _____ Excessive Hypertension
 _____ T Wave Changes
 _____ Other: _____
 _____ Abnormal
 _____ ST Changes ≥ 1 mm
 _____ Depression _____ Elevation
 _____ Downslope _____ Upslope
 _____ Horizontal
 _____ Angina _____
 _____ LBBB (induced) _____
 _____ Hypotension _____
 _____ R on T PVCs: #/min _____
 _____ Exercise Induced 2 or 3° Block _____
 _____ Uniform PVCs (>20-30%)
 _____ A Couplet (with known CHD)
 _____ Multiformal PVCs: #/min _____
 _____ Ventricular Tachycardia _____
 _____ RBBB (Induced) _____
 _____ Supraventricular Tachycardia _____
 _____ Other _____

REMARKS: _____

Supervisor's Signature

Date

Physician's Signature

Date

SKINFOLD ASSESSMENT

Name _____

Date _____

Age _____ Gender _____
 Wt _____ lbs _____ kg
 Ht _____ in _____ cm

I. Seven-Site Skinfold

Trial:	1	2	3	Avg
Chest	_____	_____	_____	_____
Axilla	_____	_____	_____	_____
Tricep	_____	_____	_____	_____
Subscapular	_____	_____	_____	_____
Abdominal	_____	_____	_____	_____
Suprailium	_____	_____	_____	_____
Thigh	_____	_____	_____	_____

Sum of 7 sites _____

II. Generalized Regression Equations

A. Body Density (D_b) (Jackson & Pollock, 1977; Jackson, Pollock, & Ward, 1980)

Male ($\Sigma 7$): $D_b = 1.112 - 0.00043499[\text{sum of 7-sites}(\text{_____})] +$
 $0.00000055[\text{sum of 7-sites}^2(\text{_____})^2] - 0.00028826[\text{age}(\text{_____})] = \text{_____}$

Female ($\Sigma 7$): $D_b = 1.0979 - 0.0004697[\text{sum of 7-sites}(\text{_____})] +$
 $0.00000056[\text{sum of 7-sites}^2(\text{_____})^2] - 0.00012828[\text{age}(\text{_____})] = \text{_____}$

B. Body Fat Percentage (Brozek et al., 1963)

% body fat = $\frac{4.570}{D_b} - 4.142 \times 100 = \text{_____}\%$

III. Body Composition

A. Fat Mass = Wt. (lbs) x % Body Fat/100 = _____ lbs

B. Lean Body Mass = Wt. (lbs) - Fat Mass (lbs) = _____ lbs

C. % Lean Body Mass = Lean Body Mass/Body Wt. x 100 = _____ %

FOOD FREQUENCY QUESTIONNAIRE

The following is a list of foods grouped into 22 categories which include Baby Foods, Beverages, Breads, Breakfast Cereals, Combination Foods, Dairy Products, Desserts, Eggs, Fast Foods, Fats & Oils, Fish, Frozen Dinners, Fruits, Grains, Meats, Miscellaneous, Nuts & Seeds, Poultry, Sauces & Dips, Soups, Sugars & Sweets, and Vegetables. Please read through the lists and do the following:

1. Circle the food items that you normally consume on a weekly basis:

Crackers-Ritz

2. Indicate with a number to the side how many times each week you normally consume a serving of the food item:

2 Crackers-Ritz

3. On the last page, list any foods not appearing on the list that you consume weekly.

When completing this Food Frequency Questionnaire, be as accurate as you can when you estimate the frequency with which you consume each of the food items during an average week. Remember to include between-meal snacks in addition to regular meals. Thank you for your participation.

BABY FOODS

Baby Food-cereal-barley-milk
 Baby Food-cereal-egg yolks
 Baby Food-cereal-mixed-milk -USDA
 Baby Food-cereal-oatmeal-milk
 Baby Food-cereal-rice-milk
 Baby Food-cottage cheese + pineapple
 Baby Food-dessert-apple betty
 Baby Food-dessert-arrowroot cookie
 Baby Food-dessert-bananas & tapioca
 Baby Food-dessert-cookies-enrich
 Baby Food-dessert-custard choc-USDA
 Baby Food-dessert-custard-vanilla
 Baby Food-dessert-dutch apple
 Baby Food-dessert-fruit-str
 Baby Food-dessert-mango/tapioca
 Baby Food-dessert-orange pudding
 Baby Food-papaya/apple/tapioca
 Baby Food-dessert-peach cobbler-str
 Baby Food-dessert-plums & tapioca
 Baby Food-dessert-prunes & tapioca
 Baby Food-egg yolks
 Baby Food-fruit juice-apple
 Baby Food-fruit juice-apple blueberry
 Baby Food-fruit juice-apple peach
 Baby Food-fruit juice-apple prune
 Baby Food-fruit juice-mixed fruit
 Baby Food-fruit juice-orange
 Baby Food-fruit juice-orange apple
 Baby Food-fruit juice-orange apricot
 Baby Food-fruit juice-orange prune
 Baby Food-fruit-applesauce
 Baby Food-fruit-peaches
 Baby Food-fruit-pears

Baby Food-fruit-pears & pineapple
 Baby Food-macaroni & cheese
 Baby Food-meat-beef
 Baby Food-meat-beef & egg noodles
 Baby Food-meat-beef lasagna
 Baby Food-meat-beef stew
 Baby Food-meat-beef-macr+tomato
 Baby Food-meat-chicken
 Baby Food-meat-chicken & noodles
 Baby Food-meat-chicken stew-str
 Baby Food-meat-ham
 Baby Food-meat-lamb
 Baby Food-meat-liver
 Baby Food-meat-pork
 Baby Food-meat-turkey
 Baby Food-meat-turkey & rice
 Baby Food-meat-veal
 Baby Food-meat-veal /vegetables
 Baby Food-pretzels-enrich
 Baby Food-soup-cream of chicken
 Baby Food-teething biscuits
 Baby Food-vegetable-beef
 Baby Food-vegetable-beef-liver
 Baby Food-vegetables-beans-green
 Baby Food-vegetables-beans-green/bu
 Baby Food-vegetables-beets-str
 Baby Food-vegetables-carrots-str
 Baby Food-vegetables-corn-crm-str
 Baby Food-vegetables-garden
 Baby Food-vegetables-mixed
 Baby Food-vegetables-peas
 Baby Food-vegetables-peas-crm-str
 Baby Food-vegetables-spinach-crm
 Baby Food-vegetables-squash
 Baby Food-vegetables-sweet potato
 Baby Food-zwieback cookies

BEVERAGES

Ale-mild-American
 Beer-Budweiser
 Beer-light
 Beer-Michelob
 Beer-Natural light
 Beer-reg
 Br+Y-california
 Br+Y-cognac-pony
 Camation inst breakfast-choc
 Camation inst breakfast-eggnog
 Camation inst breakfast-vanilla
 Champagne-domestic-glassful
 Choc beverage powd-dry milk add
 Choc beverage powd-no dry milk
 Cider-fermented
 Cocktail-daiquiri
 Cocktail-eggnog
 Cocktail-gin rickey
 Cocktail-highball
 Cocktail-manchattan-frozen
 Cocktail-martini-frozen
 Cocktail-mint julep
 Cocktail-old fashioned
 Cocktail-pina colada-home recipe
 Cocktail-planters punch
 Cocktail-rum sour
 Cocktail-tom collins-foz
 Coffee substitute-made
 Coffee-brewed
 Coffee-decaffeinated-Sanka-made
 Coffee-inst-made
 Cordials/liqueur-54 proof
 Fruit punch drink-can
 Fruit punch-powd-made + water

Gatorade-thirst quenching drink
 Hot Cocoa-made + milk-home recipe
 Liqueurs-anisette
 Liqueurs-apricot br+y
 Liqueurs-benedictine
 Liqueurs-creme de menthe
 Liqueurs-curacao
 Ovaltine-choc flavor-made/milk
 Ovaltine-malt flavor-made + milk
 Postum-inst grain beverage-dry mix
 Soda-club-carbonate
 Soda-cola type-carbonate
 Soda-cream flavored-carbonate
 Soda-diet cola-nutraswt-carbonate
 Soda-Dr. Pepper type cola-carbonate
 Soda-ginger ale-carbonate
 Soda-grape-carbonate
 Soda-lemon lime/7Up-carbonate
 Soda-root beer-carbonate
 Soda-tab-lo calorie cola-carbonate
 Soda-tonic water/quinine-carbonate
 Tang-inst break drink-orange-dry
 Tea-brewed
 Tea-herbal-brewed
 Tea-inst-made-sweetened
 Tea-inst-made-unsweet
 Water-mineral-Perrier
 Water-municipal tap
 Whiskey/gin/um/vodka-100 proof
 Whiskey/gin/um/vodka-80 proof
 Whiskey/gin/um/vodka-86 proof
 Whiskey/gin/um/vodka-90 proof
 Whiskey/gin/um/vodka-94 proof
 Wine-cooler-white wine + 7up
 Wine-california/red-glassful
 Wine-dessert
 Wine-madeira-glassful
 Wine-muscatel/port-glassful
 Wine-red-table
 Wine-rose-table
 Wine-sauterne-glassful
 Wine-sherry-dry-glassful
 Wine-vermouth-dry-glassful
 Wine-vermouth-sweet-glassful
 Wine-white-table

Breads

Bagel-egg-3.5"
 Bagel-water-3 inch diameter
 Biscuit-baking powd-home recipe
 Biscuit-baking powd-made from mix
 Bread-stick-vienna type
 Bread-boston brown-can
 Bread-cracked wheat-enr
 Bread-crisp-breakfast-wasa
 Bread-crisp-whole grain-wasa
 Bread-french
 Bread-italian
 Bread-melba toast-plain

Bread-melba toast-wheat
 Bread-melba toast-wheat-unsalted
 Bread-mixed grain
 Bread-mixed grain-toasted
 Bread-oat bran-no chol-monterey
 Bread-oatmeal + bran-oatmeal
 Bread-pita-white
 Bread-pumpnickel
 Bread-raisin
 Bread-rye-american-light
 Bread-vienna
 Bread-wheat-firm-enrich-toasted
 Bread-wheat-soft-enrich-toasted
 Bread-wheat-toasted/home recipe
 Bread-white-comm prep
 Bread-white-firm-enrich
 Bread-white-firm-enrich-toasted
 Bread-white-soft-enrich-crumbs
 Bread-white-soft-enrich-cubes
 Bread-white-soft-toasted
 Bread-whole wheat-firm-enrich
 Bread-whole wheat-home rec
 Bread-whole wheat-soft-enrich
 Breadcrumbs-dry-grated-enrich
 Combread-homerecipe/whole milk
 Cracker-animal-Ralston
 Cracker-cheddar snacks-Ralston
 Cracker-cheese
 Cracker-cheese + chives-Ralston
 Cracker-cheese snacks-Ralston
 Cracker-graham-plain
 Cracker-graham-sugar-honey
 Cracker-oyster-Ralston
 Cracker-rich + crisp-Ralston
 Cracker-Ritz
 Cracker Rye Krisp-natural-Ralston
 Cracker-Rye Krisp-seasoned-Ralston
 Cracker-Rye Krisp-sesame-Ralston
 Cracker-Rye Snacks-Ralston
 Cracker-Rye wafers
 Cracker-saltines
 Cracker-sesame + wheat-Ralston
 Cracker-snackers-Ralston
 Cracker-Triscuits
 Cracker-wheat snacks
 Cracker-Wheat Thins
 Cracker-whole wheat-lo Na
 Cracker-whole wheat-Na free
 French toast-from froz-Campbells
 French toast-from home recipe
 French toast + butter
 Muffin-blueberry bran-health val
 Muffin-blueberry-from home recipe
 Muffin-bran-from home recipe
 Muffin-corn-from home recipe
 Muffin-corn-from mix
 Muffin-english-plain-toasted
 Muffin-english-plain-untoasted
 Muffin-home recipe-plain-each

Muffin-raisin oat bran-health val
 Muffin-soy
 Pancakes-buckwheat-from mix
 Pancakes-plain-from mix
 Pancakes-plain-home recipe
 Pancakes-soybean-25% soy flour
 Roll-brown & serve-enrich
 Roll-cinnamon
 Roll-cloverleaf-from home recipe
 Roll-cloverleaf/pan-enriched
 Roll-croissant-sara lee
 Roll-hamburger-plain
 Roll-hard
 Roll-submarine/hoagie-enrich
 Roll-whole wheat-homemade
 Waffles-enrich-from home recipe
 Waffles-enrich-from mix-egg & milk
 Waffles-froz-each
 Waffles-oat bran-no chol-eggo

Breakfast Cereals

Cereal-100% bran
 Cereal-100% natural-plain
 Cereal-40% bran flakes-Kelloggs
 Cereal-40% Bran flakes-post
 Cereal-All Bran-USA
 Cereal-Alpha bits-USA
 Cereal-Apple Jacks-USA
 Cereal-Bran Buds-USA
 Cereal-Bran Chex
 Cereal-Bran Flakes-Ralston
 Cereal-C.W. Post-plain
 Cereal-C.W. Post + raisins
 Cereal-Cap'n Crunch-crunchberries
 Cereal-cap'n crunch-USA
 Cereal-Cheerios-USA
 Cereal-Cocoa Krispies
 Cereal-Cocoa Pebbles-USA
 Cereal-Corn Bran-USA
 Cereal-Corn Chex
 Cereal-corn flakes-Kelloggs-USA
 Cereal-corn Flakes-lo Na
 Cereal-corn Flakes-Ralston
 Cereal-corn Grits-white-enr-cooked
 Cereal-corn Grits-white-unenr-ckd
 Cereal-corn-shredded-add sugar
 Cereal-cracklin bran-USA
 Cereal-Cracklin oat bran-Kelloggs
 Cereal-Cream of rice-cooked
 Cereal-Cream of wheat-inst
 Cereal-Cream of wheat-pac size
 Cereal-Cream of wheat-reg-hot
 Cereal-Crisp rice-lo Na
 Cereal-Crispy rice
 Cereal-Crispy wheats + raisins
 Cereal-farina-enr-cooked/salt
 Cereal-farina-enr-dry
 Cereal-fortified oat flakes
 Cereal-fruit Loops-Gen Mills
 Cereal-frosted flakes-Kellogg

Cereal-frosted flakes-Ralston
 Cereal-frosted mini wheats-Kelloggs
 Cereal-frosted rice krispies-Kelloggs
 Cereal- Granola-homemade
 Cereal- Granola-nature val
 Cereal- Grape nuts flakes-Post-USDA
 Cereal- Grape nuts-Post-USDA
 Cereal- Heartl+ natural-plain
 Cereal- Honey bran
 Cereal- Honey nut cheerios-Gen Mills
 Cereal- Honeycomb-Post
 Cereal- King Vitamin
 Cereal- Kix
 Cereal- Life-plain/cinnamon
 Cereal- Lucky charms-USDA
 Cereal- Malt O meal-cooked
 Cereal- Maypo-cooked-hot
 Cereal- Nutri Grain-barley
 Cereal- Nutri Grain-corn
 Cereal- Nutri Grain-rye
 Cereal- Nutri Grain-wheat
 Cereal- Oat Bran-cooked
 Cereal- Oat Bran-Kelloggs
 Cereal- Oat Bran-Quaker
 Cereal- Oat Bran-raisin/spice-hot
 Cereal- Oatmeal-cooked
 Cereal- Oatmeal-raw
 Cereal- oats-apple/cinnamon-Quaker
 Cereal-oats-bran/raisin-Quaker-pac
 Cereal-oats-cinnamon/spice-Quaker
 Cereal-oats-maple/sugar-Quaker-pac
 Cereal-oats-plain-Quaker-inst-pac
 Cereal-oats-puffed-add sugar
 Cereal-oats-reg-dry
 Cereal-Product 19-Kelloggs
 Cereal-Raisin bran-Kelloggs
 Cereal-Raisin Bran-Post
 Cereal-Raisin Bran-Ralston
 Cereal-Ralston-cooked-hot
 Cereal-Rice Chex
 Cereal-Rice Krispies-Kelloggs
 Cereal-rice-puffed-add sugar
 Cereal-rice-puffed-plain
 Cereal-roman meal-cooked
 Cereal-Special K-Kelloggs
 Cereal-Sugar Corn Pops-Kelloggs
 Cereal-Sugar Smacks-Kelloggs
 Cereal-Super Sugar Crisp-Post
 Cereal-Tastecos
 Cereal-Team-USDA
 Cereal-Toasties-Post
 Cereal-Total-Gen Mills
 Cereal-Trix-Gen Mills
 Cereal-Wheat Chex
 Cereal-wheat flakes-add sugar
 Cereal-wheat germ-sugar/honey
 Cereal-wheat germ-toasted
 Cereal-wheat-puffed-add sugar
 Cereal-wheat-puffed-plain
 Cereal-wheat-rolled-cooked-hot

Cereal-wheat-shredded-biscuit
 Cereal-wheat-whole meal-cooked-hot
 Cereal-Wheatena-cooked
 Cereal-Wheaties
 Cereal-whole wheat natural

Combination Foods

Beef potpie-home recipe-1/3 of 9" pie
 Beef stew+ vegetables
 Beef-ravolioli-can + meat sauce
 Burrito-beans + cheese
 Cheese souffle-home recipe
 Chicken a la king-cooked-home
 Chicken + noodles-cooked-recipe
 Chicken chow mein-can
 Chicken chow mein-home recipe
 Chicken potpie-baked-home recipe
 Chili con carne w/beans-can
 Chili + beans-can
 Chimichanga-beef
 Chop suey+ beef + pork-home recipe
 Corn dog-plain
 Corned beef hash-can
 Enchilada-cheese
 Enchinito-cheese/beef/bean
 Frijoles-beans + cheese
 Hamburger-single meat/cheese/bacon
 Hot dog-plain + bun-generic
 Macaroni & cheese-enrich-can
 Macaroni & cheese-enrich-recipe
 Meatloaf+ celery + onions
 Nachos-cheese
 Omelet-two eggs-ham + cheese
 Pizza-cheese-baked
 Pizza-cheese/meat/vegetable
 Pizza-pepperoni-baked
 Pork/Beans + frankfurters-can
 Pork/Beans + sweet sauce-can
 Pork/Beans + tomato sauce-can
 Salad-carrot raisin-home recipe
 Salad-chef+ ham + cheese
 Salad-chicken
 Salad-coleslaw
 Salad-crab
 Salad-fruit-can-juice pack
 Salad-fruit-can-water pack
 Salad-green salad-tossed
 Salad-macaroni
 Salad-m+arin orange gelatin
 Salad-potato
 Salad-taco
 Salad-three bean-Alex
 Salad-three bean-can-Del Monte
 Salad-tuna/celery/mayo/pickle/egg
 Salad-waldorf gelatin
 S+Wich-blt+ mayo
 S+Wich-club
 S+Wich-ham + cheese
 S+Wich-roast beef + cheese
 S+Wich-roast beef-plain

S+Wich-steak
 S+Wich-submarine-roast beef
 S+Wich-submarine+ coldcuts
 Spaghetti/tomato/cheese-can
 Spaghetti/tomato/cheese/home recipe
 Spaghetti/tomato/meat-can
 Spaghetti/tomato/meat/home recipe
 Spinach souffle
 Taco

Dairy Products

Cheese food-american-pasteur
 Cheese spread-american-processed
 Cheese-american-pasteur process
 Cheese-blue
 Cheese-blue-crumbled-unpacked
 Cheese-brick
 Cheese-brie
 Cheese-camembert-wedge
 Cheese-caraway
 Cheese-cheddar-cut pieces
 Cheese-cheddar-inch cubes
 Cheese-cheddar-lo fat-lo Na
 Cheese-cheddar-shredded
 Cheese-cheshire
 Cheese-colby
 Cheese-cottage-1% lofat-unpacked
 Cheese-cottage-2% lofat-unpacked
 Cheese-cottage-4% fat-lg curd
 Cheese-cottage-4% fat-sm curd
 Cheese-cottage-dry curd-uncreamed
 Cheese-cottage+ fruit-unpacked
 Cheese-cream
 Cheese-edam
 Cheese-feta-ounce
 Cheese-fontina
 Cheese-garlic-lofat-lo Na-pauly
 Cheese-gjetost
 Cheese-gouda
 Cheese-gruyere
 Cheese-limburger
 Cheese-monterey jack
 Cheese-monterey jack-lofat-lo Na
 Cheese-mozzarella-from skim milk
 Cheese-mozzarella-made whole milk
 Cheese-muenster
 Cheese-neufchatel
 Cheese-parmesan-grated
 Cheese-pimento-processed
 Cheese-port du salut
 Cheese-provolone
 Cheese-ricotta-made + part skim milk
 Cheese-ricotta-made + whole milk
 Cheese-romano
 Cheese-rocket
 Cheese-swiss
 Cheese-swiss-lofat-lo na-pauly
 Cheese-swiss-pasteur process
 Cheese-tilsit
 Cream-coffee-table-light-fluid

Cream-half & half-milk + cream-fluid
 Cream-imitation-liq-non dairy-froz
 Cream-imitation-non dairy-powd
 Cream-sour-cultured
 Cream-sour-half & half
 Cream-sour-imitation
 Cream-sour-imitation-nf dry milk add
 Cream-whipped-imit-non dairy-froz
 Cream-whipped-imit-non dairy-powd
 Cream-whipped-imitation-pressurized
 Cream-whipped-imitation-pressurized
 Cream-whipping-heavy-unwhipped-fluid
 Cream-whipping-light-unwhipped-fluid
 Milk-1% fat-lofat-fluid
 Milk-1% fat-nonfat milk solids add
 Milk-1% fat-protein fortified
 Milk-2% fat-fluid-protein fortified
 Milk-2% fat-lofat-fluid
 Milk-2% fat-nonfat milk solids add
 Milk-buttermilk-cultured-fluid
 Milk-buttermilk-dried-sweet cream
 Milk-choc-1% fat-fluid
 Milk-choc-2% fat-fluid
 Milk-choc-whole-vit d
 Milk-condensed-sweetened-can
 Milk-eggnog-commercial
 Milk-evaporated-skim-can
 Milk-evaporated-whole-can
 Milk-goat-whole-fluid
 Milk-human-whole-mature
 Milk-imitation
 Milk-indian buffalo-whole
 Milk-malted-choc flavor-made
 Milk-malted-natural flavor-made
 Milk-nonfat/skim-fluid
 Milk-nonfat/skim-instized-dried
 Milk-nonfat/skim-instized-envelope
 Milk-nonfat/skim-milk solids add
 Milk-nonfat/skim-protein fortified
 Milk-soy-fluid
 Milk-whole-dry
 Milk-whole-lo Na
 Milk-whole-reg-3.3% fat-fluid
 Milkshake-choc-thick
 Milkshake-vanilla-thick
 Mocha mix-non dairy
 Whey-acid-dry
 Whey-acid-fluid
 Whey-sweet-dry
 Whey-sweet-fluid
 Yogurt-fruit flav-lofat-add solids
 Yogurt-coffee-lofat-Dannon
 Yogurt-plain-lofat-milk solids add
 Yogurt-plain-nonfat-milk solids add
 Yogurt-plain-whole milk-no solids

Desserts

Brownie-choc icing-from froz
 Brownie-comm prep-1-3/4x3/4"
 Brownie-+ nuts-home recipe

Cake-angel food-dry mix-prep
 Cake-coffee-made from mix
 Cake-devils food + icing-from mix
 Cake-gingerbread-made from mix
 Cake-pineapple upside down-recipe
 Cake-pound-butter-home recipe
 Cake-sheet-no icing-home recipe
 Cake-sheet-plain-uncook white icing
 Cake-sponge-home recipe
 Cake-strawberry shortcake
 Cake-streusel type-+ icing-from mix
 Cake-white/choc icing-home recipe
 Cake-yello/choc icing-home recipe
 Cheesecake-comm prep
 Cheesecake-Wt Watchers-froz
 Cobbler-Wt Watchers-froz
 Cookie-choc chip-from home recipe
 Cookie-choc chip-from mix
 Cookie-choc chip-lo Na
 Cookie-fig bar
 Cookie-fudge-lo Na
 Cookie-gingersnap/home recipe
 Cookie-macaron
 Cookie-oatmeal/raisin-from mix
 Cookie-peanut butter-from mix
 Cookie-plain-made from mix
 Cookie-s+wich-choc/vanilla
 Cookie-sugar-from mix
 Cookie-vanilla wafer
 Cupcake + choc icing
 Cupcake-devils food + choc icing
 Cupcake-no icing
 Custard-baked
 Danish pastry-apple
 Danish pastry-cheese
 Danish pastry-cinnamon-enr
 Danish pastry-plain
 Doughnut-cake
 Doughnuts-yeast-glazed
 Eclair-custard + choc icing
 Froz yogurt-fruit varieties
 Fruit bar-oat bran-nuts-Health Val
 Fruit pie-fried
 Fruitcake-dark-home recipe
 Gelatin-dessert-made
 Gelatin-d zerta-lo calorie-made
 Gelatin-Jello-sugar free-made
 Granola bar
 Granola clusters-Nature Val
 Ice cream sundae-caramel
 Ice cream sundae-hot fudge
 Ice cream sundae-strawberry
 Ice cream-french vanilla-soft serve
 Ice cream-vanilla-hardened-10% fat
 Ice cream-vanilla-rich-hard-16% fat
 Ice milk-vanilla-hardened
 Ice milk-vanilla-soft serve
 Pie crust-baked-from home recipe
 Pie crust-baked-made from mix
 Pie-apple-home recipe

Pie-banana cream-home recipe
 Pie-blueberry-home recipe
 Pie-boston cream-home recipe
 Pie-cherry-home recipe
 Pie-choc cream-home recipe
 Pie-custard-home recipe
 Pie-lemon meringue-home recipe
 Pie-mince-home recipe
 Pie-peach-from home recipe
 Pie-pecan-home recipe
 Pie-pumpkin-home recipe
 Popsicle
 Pudding-banana cream-inst mix-Jello
 Pudding-butterscotch-inst mix-Jello
 Pudding-choc-cooked/mix & milk
 Pudding-choc-home recipe-starch
 Pudding-choc-inst-from mix
 Pudding-choc-sugar free-2% milk
 Pudding-coconut cream-inst mix-Jello
 Pudding-corn
 Pudding-lemon-inst mix-Jello
 Pudding-rice + raisins
 Pudding-tapioca cream-home recipe
 Pudding-vanilla (blancmange)
 Pudding-vanilla-sugar free-+ 2% milk
 Sherbet-orange
 Toaster pastries/pop tarts
 Turnover-apple
 Turnover-cherry
 Turnover-lemon
 Twinkie-Hostess

Eggs

Egg substitute-froz
 Egg substitute-liq
 Egg substitute-powd
 Egg-duck-whole-fresh-raw
 Egg-fried in butter-whole-lg-chicken
 Egg-hard cooked-no shell-lg-chicken
 Egg-poached-whole-lg-chicken
 Egg-raw-white-lg-chicken
 Egg-raw-whole-lg-chicken
 Egg-raw-yolk-lg-chicken
 Egg-scrambled/milk/butter

Fast Foods

Arby's-beef + cheese s+wich
 Arby's-chicken breast s+wich
 Arby's-club s+wich
 Arby's-ham + cheese s+wich
 Arby's-roast beef s+wich
 Arby's-super roast beef s+wich
 Arby's-turkey deluxe
 Arthur Treacher-chicken s+wich
 Burger King-croissant-egg + cheese
 Burger King-croissant-egg/chese/ham
 Burger King-Whopper hamburger
 Chicken-breast + wing-breaded-fried
 Chicken-drumstick+thigh-bread-fried
 Church's chicken-white meat

Dairy Queen-banana split
 Dairy Queen-dip ice cream cone-reg
 Dairy Queen-float
 Dairy Queen-ice cream cone-reg
 Dairy Queen-ice cream sundae-reg
 Dairy Queen-malt-reg
 Jack In the Box-breakfast jack+wich
 Jack In the Box-jumbo jack cheseburg
 Jack In the Box-jumbo jack hamburg
 Jack In the Box-moby jack s+wich
 Jack In the Box-onion rings-bag
 McDonalds-apple danish
 McDonalds-Big Mac hamburger
 McDonalds-cheeseburger
 McDonalds-chicken McNuggets-6 piece
 McDonalds-cinnamon + raisin danish
 McDonalds-Egg McMuffin
 McDonalds-filet o fish
 McDonalds-french fries-reg order
 McDonalds-hamburger
 McDonalds-hashbrown potato
 McDonalds-hot cakes + syrup
 McDonalds-mcdlt hamburger
 McDonalds-quarter lb cheeseburger
 McDonalds-quarter pounder burger
 McDonalds-raspberry danish
 McDonalds-sausage + egg biscuit
 McDonalds-sausage biscuit
 McDonalds-sausage McMuffin
 McDonalds-sausage McMuffin + egg
 McDonalds-scrambled eggs
 Subway/ham + cheese sandwich/wheat
 Taco Bell-bean burrito
 Taco Bell-beef burrito
 Taco Bell-beefy tostada
 Taco Bell-burrito supreme
 Taco Bell-double beef burrito
 Taco Bell-enchirito
 Taco Bell-mexican pizza
 Taco Bell-nachos
 Taco Bell-nachos bellgr+e
 Taco Bell-pintos & cheese
 Taco Bell-soft taco
 Taco Bell-taco bellgr+e
 Taco Bell-taco light
 Taco Bell-taco salad + salsa/no shell
 Taco Bell-taco salad + salsa/shell
 Taco Bell-taco salad-no salsa/shell
 Taco Bell-taco-reg
 Taco Bell-tostada-reg
 Wendys-double hamburger
 Wendys-single hamburger-plain
 Wendys-triple hamburger

Fats & Oils

Butter-almond-plain
 Butter-reg-pat
 Butter-reg-stick
 Butter-reg-tablespoon
 Butter-unsalted-pat

Butter-whipped-pat
 Butter-whipped-stick
 Butter-whipped-tablespoon
 Butter-whipped-unsalted-pat
 Fat-animal-chicken-for cooking
 Fat-animal-lard (pork)
 Marg-corn-reg-hydrog-hard
 Marg-corn-reg-soft
 Marg-corn/soybean-unsalted
 Marg-diet/lo calorie-Mazola
 Marg-imitation-40% fat
 Marg-imitation-spread-60% fat
 Marg-liq-reg-soybean
 Marg-no stick-spray-Mazola
 Marg-reg-hard-unsalted
 Marg-reg-soft-unsalted
 Marg-reg-unspecified oils-pat
 Marg-reg-unspecified oils-stick
 Marg-reg-unspecified oils-tbsp
 Marg-safflower-reg-soft-tub
 Marg-safflower/soybean-hydrog
 Marg-soybean-soft-tub-unsalted
 Marg-unspecified oils-soft-tbsp
 Marg-unspecified oils-soft-tub
 Marg-whipped
 Mayo-imitation-milk cream
 Mayo-imitation-soybean
 Mayo-imitation-soybean-cholesterol free
 Mayo-light-lo calorie-kraft
 Mayo-soybean-commercial
 Oil-vegetable-corn
 Oil-vegetable-olive
 Oil-vegetable-peanut
 Oil-vegetable-rice bran
 Oil-vegetable-safflower
 Oil-vegetable-sesame
 Oil-vegetable-soybean
 Oil-vegetable-soybean/cottonseed
 Salad dressing-blue cheese
 Salad dressing-blue cheese-lo calorie
 Salad dressing-caesar
 Salad dressing-french
 Salad dressing-french-lo calorie
 Salad dressing-garlic-made from mix
 Salad dressing-green goddess
 Salad dressing-home recipe-cooked
 Salad dressing-Italian
 Salad dressing-Italian-lo calorie
 Salad dressing-mayo type
 Salad dressing-mayo-lo calorie
 Salad dressing-miracle whip light
 Salad dressing-oil/vinegar-recipe
 Salad dressing-ranch style
 Salad dressing-Russian
 Salad dressing-Russian-lo calorie
 Salad dressing-sesame seed
 Salad dressing-sweet + sour
 Salad dressing-thous+ isl+
 Salad dressing-thous+ lo calorie
 S+Wich spread-commercial

Shortening-veg-soybean/cottonseed
 Vegetable spray-Pam-butter flavored
 Vegetable spray-Pam-unflavored

Fish

Crab cake
 Fish eggs-carp/cod/pike/shad-ro-e-raw
 Fish eggs-caviar-sturgeon-granular
 Fish sticks-breaded-froz-cooked
 Fish-abalone-cooked-fried
 Fish-abalone-raw
 Fish-anchovy-fillet-can
 Fish-bass-black-baked
 Fish-bass-striped-broiled
 Fish-bass-striped-oven fried
 Fish-bluefish
 Fish-bluefish-baked + butter
 Fish-carp-cooked-dry heat
 Fish-catfish-breaded-fried
 Fish-clams-breaded-fried
 Fish-clams-can-solids + liqs
 Fish-clams-cooked-moist heat
 Fish-clams-raw-meat only
 Fish-cod-atlantic-cooked-dry heat
 Fish-crab meat-king-can-unpacked
 Fish-crab-Alaska king-raw
 Fish-crab-blue-can
 Fish-crab-blue-cooked-moist heat
 Fish-crab-deviled
 Fish-crab-dungeness-raw
 Fish-crab-imitation-surimi
 Fish-crab-imperial
 Fish-crab-steamed-pieces
 Fish-crayfish-cooked-moist heat
 Fish-croaker-breaded-fried
 Fish-eel-cooked-dry heat
 Fish-flatfish-cooked-dry heat
 Fish-gefiltefish-commercial++ broth
 Fish-grouper-cooked-dry heat
 Fish-haddock-breaded-fried
 Fish-haddock-broiled
 Fish-halibut-all types-broiled/butter
 Fish-halibut-cooked-broiled
 Fish-herring-atlantic-broiled
 Fish-herring-atlantic-raw
 Fish-herring-can-solids + liqs
 Fish-herring-pickled-bismarck type
 Fish-lobster newburg
 Fish-lobster thermidor
 Fish-lobster-cooked-moist heat
 Fish-lobster-northern-raw
 Fish-mackerel-atlantic-can
 Fish-mackerel-atlantic-raw
 Fish-mackerel-cooked-dry heat
 Fish-mullet-cooked-dry heat
 Fish-mussel-blue-cooked-moist heat
 Fish-mussel-blue-raw
 Fish-mussels-atlantic/pacific-meat
 Fish-ocean perch-breaded-fried
 Fish-ocean perch-cooked-dry heat

Fish-octopus-raw
 Fish-oyster-eastern-can
 Fish-oyster-eastern-cooked-moist
 Fish-oyster-eastern-raw
 Fish-oyster-pacific-raw
 Fish-oysters-breaded-fried
 Fish-perch-cooked-dry heat
 Fish-pike-cooked-dry heat
 Fish-pollock-atlantic-raw
 Fish-pollock-cooked-dry heat
 Fish-pompano-cooked-dry heat
 Fish-red snapper-cooked-dry heat
 Fish-red snapper-raw
 Fish-rockfish-cooked-dry heat
 Fish-salmon rice loaf
 Fish-salmon-broiled/baked + butter
 Fish-salmon-cooked-moist heat
 Fish-salmon-pink-can-solids & liqs
 Fish-salmon-smoked
 Fish-sardine-atlantic-can in oil
 Fish-sardine-can in tomato sauce
 Fish-scallop-raw
 Fish-scallops-bay + sea-steamed
 Fish-scallops-froz-breaded-fried
 Fish-sea bass-cooked-dry heat
 Fish-shad-baked-butter & bacon
 Fish-shark-raw
 Fish-shrimp-can meat
 Fish-shrimp-cooked-moist heat
 Fish-shrimp-french-fried
 Fish-smelt-atlantic-can
 Fish-smelt-cooked-dry heat
 Fish-sole/flounder-baked
 Fish-squid-cooked-fried
 Fish-squid-raw
 Fish-sturgeon-steamed
 Fish-surimi
 Fish-swordfish-broiled-butter/marg
 Fish-swordfish-cooked-dry heat
 Fish-tilefish-cooked-dry heat
 Fish-trout-brook-cooked
 Fish-trout-rainbow-cooked-dry heat
 Fish-tuna-bluefin-cooked-dry heat
 Fish-tuna-dietetic-lo Na-drain
 Fish-tuna-light-can in oil-drain
 Fish-tuna-light-can in water-drain
 Fish-tuna-white-albacore-can/water
 Fish-tuna-yellowfin-raw
 Fish-white perch-fried filet
 Fish-whitefish-lake-baked-stuffed
 Fish-whiting-cooked-dry heat

Formulas

Formula-alementum + iron-Ross labs
 Formula-criticare hi nitrogen-Mead
 Formula-enrich-Ross labs
 Formula-ensure hn-Ross labs
 Formula-ensure plus hn-Ross labs
 Formula-ensure plus-Ross labs

Formula-ensure pudding vanilla-Ross
 Formula-ensure-Ross labs
 Formula-forta shake-skim milk-Ross
 Formula-high nitrogen-Ross labs
 Formula-isocal hcn-Mead J.
 Formula-isocal-Mead J.
 Formula-isotein hn-s+oz
 Formula-jevity-Ross labs
 Formula-lonlac-Mead J.
 Formula-osmolite hn-Ross labs
 Formula-osmolite-Ross labs
 Formula-pedialyte-Ross labs
 Formula-pediasure + iron-Ross labs
 Formula-phenyl free-Mead J.
 Formula-polydose-Ross labs
 Formula-portagen 30 calorie-Mead J.
 Formula-portagen 60 calorie-Mead J.
 Formula-promod-Ross labs
 Formula-pulmocare-Ross labs
 Formula-resource liq-s+oz
 Formula-Ross surgical liq diet
 Formula-similac-Ross labs
 Formula-sustacal hc-Mead J.
 Formula-sustacal powd-van-mead
 Formula-sustacal powd-vanilla/milk
 Formula-sustacal pudding-Mead J.
 Formula-sustacal-Mead J.
 Formula-sustagen-Mead J.
 Formula-traum aid hbc powd-Mcgraw
 Formula-traumacal-Mead J.
 Formula-vivonex high nitr-Norwich
 Formula-vivonex st+ard-Norwich
 Formula-vivonex ten-Norwich

Frozen Dinners

Barbecued chicken-light + elegant
 Beef + green peppers-Stouffer dinner
 Beef + spinach pasta shells-Stouffer
 Beef burgundy-froz dinner-efficienc
 Beef burgundy-light + elegant dinner
 Beef cubes in wine sauce-Hormel
 Beef dinner-Swanson froz dinner
 Beef julienne-light + elegant dinner
 Beef short ribs/barb sauce-Hormel
 Beef sirloin tips-Le Menu froz dinner
 Beef stew-Hormel entree
 Beef stroganoff-froz din-ner
 Beef stroganoff-light + elegant dinner
 Beef teriyaki-light + elegant
 Cabbage rolls/tomato sauce-Hormel
 Cabbage rolls-froz dinner-efficienc
 Cheese pasta shells/meat sauce-Stouffer
 Chicken + broccoli-light + elegant
 Chicken + dumplings + gravy-Hormel
 Chicken burgundy-classic lite dinner
 Chicken cacciatore-Stouffer dinner
 Chicken chow mein-Lean Cuisine dinner
 Chick crepes/mushroom sauce-Stouffer
 Chicken dinner-Swanson froz dinner

Chicken divan-Stouffer froz dinner
 Chicken florentine-Le Menu froz
 Chicken kiev-Le Menu froz dinner
 Chicken parmigiana-Le Menu froz
 Chicken parmigiana-light + elegant
 Chicken pasta shells-Stouffer dinner
 Chicken-glazed+ rice-Lean Cuisine
 Chicken-sweet + sour-Budget Gourmet
 Chicken-sweet + sour-Le Menu dinner
 Corn souffle-Stouffer froz side dish
 Cream chipped beef-Stouffer dinner
 Creamed spinach-Stouffer side dish
 Egg roll-beef + shrimp-froz-La Choy
 Fettucini alfredo-Stouffer froz
 Fettucini-chicken-Budget Gourmet
 Filet of fish divan-Lean Cuisine dinner
 Filet of fish florentine-Lean Cuisine
 Fish + chips-Van de Camps dinner
 Flounder filet-Le Menu froz dinner
 Glazed chicken-light + elegant
 Ham + swiss cheese crepes-Stouffer
 Ham-Banquet froz dinner
 Lasagna florentine-light + elegant
 Lasagna-3 cheese-Budget Gourmet
 Lasagna-sausage-Budget Gourmet
 Lasagna-Stouffer froz dinner
 Linguini + clam sauce-Stouffer dinner
 Lobster newburg-Stouffer froz
 Macaroni + cheese-light + elegant
 Manicotti-cheese-Le Menu froz dinner
 Manicotti-cheese/meat-Budget Gourmet
 Meatball stew-Lean Cuisine froz
 Meatballs + noodles-Stouffer dinner
 Meatloaf-banquet froz dinner
 Mexican dinner-Swanson froz dinner
 Noodles romanoff-Stouffer froz
 Ocean fish almondine-efficienc entree
 Ocean fish + lemon sauce-efficienc
 Oriental beef-Lean Cuisine froz dinner
 Pepper steak + rice-Budget Gourmet
 Pepper steak-Le Menu froz dinner
 Pizza-combination-Wt Watchers-froz
 Pork loin + gravy-Hormel entree
 Quiche lorraine-froz-Mrs Smiths
 Ratatouille-Stouffer froz side dish
 Salisbury steak-Banquet froz dinner
 Salisbury steak-Lean Cuisine
 Sausage + gravy-Hormel entree
 Scalloped potato + ham-Hormel
 Scallops + shrimp marinier-Stouffer
 Scallops/vegetables/rice-Lean Cuisine
 Seafood gumbo-Hormel entree
 Seafood newberg-Budget Gourmet
 Shrimp creole-Light + Elegant
 Sirloin tip/veg-Budget Gourmet
 Sole-light-Van de Camp's froz dinner
 Spaghetti-beef + mushroom-Lean Cuisine
 Spaghetti-Light + Elegant
 Spinach crepes/cheese sauce-Stouffer
 Swedish meatball in sauce-Hormel

Swiss steak in gravy-Hormel entree
 Tuna noodle casserole-Stouffer
 Turf + surf-Classic Lite froz dinner
 Turkey & gravy-froz
 Turkey a la king/rice-Budget Gourmet
 Turkey breast-Le Menu froz dinner
 Turkey dinner-swanson froz dinner
 Turkey pie-Stouffer froz dinner
 Turkey tetrazzini-Stouffer froz
 Turkey-sliced-light + elegant
 Veal parmigiana-efficiency entree
 Veal steak-Classic Lite froz dinner
 Vegetable lasagna-Le Menu froz
 Yankee pot roast-Le Menu froz dinner
 Zucchini lasagna-Lean Cuisine
 Zucchini romano-Le Menu froz dinner

Fruits

Apples-can-sweet-heated
 Apples-dried-cooked-unsweet
 Apples-dried-uncooked
 Apples-froz-unsweet-heated
 Apples-froz-unsweet-unheated
 Apples-raw-peeled
 Apples-raw-peeled-boiled
 Apples-raw-sliced + skin
 Apples-raw + skin-2 3/4 inch diameter

Apricot-raw + out pit
 Apricots-can-heavy syrup + skin
 Apricots-can-juice pack
 Apricots-can-light syrup pack
 Apricots-can-water pack
 Apricots-dried-sulfur-cook-no sugar
 Apricots-dried-sulfured-uncooked
 Apricots-froz-sweetened
 Apricots-halves + skin-can-water
 Avocado-raw-california
 Avocado-raw-florida
 Banana flakes-dehydrated or powd
 Banana-raw-peeled
 Blackberries-can-heavy syrup pack
 Blackberries-froz-unsweet
 Blackberries-raw
 Blueberries-can-heavy syrup pack
 Blueberries-froz-unsweet
 Blueberries-raw
 Boysenberries-can-heavy syrup pack
 Boysenberries-froz-unsweet
 Breadfruit-raw
 Carambola-raw
 Carissa-raw
 Cherimoya-raw
 Cherries-sour-can-water pack
 Cherries-sour-froz-unsweet
 Cherries-sour-red-can in heavy syrup
 Cherries-sweet-can-juice pack
 Cherries-sweet-can-water pack
 Cherries-sweet-froz-sweetened

Cherries-sweet-raw
 Coconut-dried-shredded
 Cranberry sauce-can-sweetened
 Dates-domestic-natural + dry-chopped
 Dates-domestic-natural + dry-whole
 Elderberries-raw
 Figs-can-heavy syrup pack
 Figs-can-water pack
 Figs-dried-uncooked
 Figs-raw
 Fruit cocktail-can in heavy syrup
 Fruit cocktail-can-juice pack
 Fruit cocktail-can-water pack
 Fruit cocktail-can-water-dietetic
 Gooseberries-can-heavy syrup pack
 Gooseberries-raw
 Grape drink-can
 Grapefruit-can in light syrup
 Grapefruit-can-juice pack
 Grapefruit-can-water pack
 Grapefruit-pink & red-raw
 Grapefruit-white-raw
 Grapes-raw-adherent skin type
 Grapes-raw-slip skin (american) type
 Grapes-thompson-can-heavy syrup
 Grapes-thompson-can-water pack
 Guavas-common-raw
 Guavas-strawberry-raw
 Juice apple-can or bottled
 Juice-apple-froz-diluted
 Juice-apricot nectar-can
 Juice-cranapple-can
 Juice-cranapple-ocean spray
 Juice-cranberry cocktail-bottled
 Juice-cranberry-ocean spray
 Juice-grape-can & bottled
 Juice-grape-froz conc
 Juice-grape-froz-diluted
 Juice-grapefruit-can-sweetened
 Juice-grapefruit-can-unsweet
 Juice-grapefruit-dehydrated-made
 Juice-grapefruit-froz conc
 Juice-grapefruit-froz-diluted
 Juice-grapefruit-raw
 Juice-lemon-can & bottled
 Juice-lemon-froz-single strength
 Juice-lemon-raw
 Juice-lime-can & bottled
 Juice-lime-raw
 Juice-limeade-can-froz conc
 Juice-limeade-froz conc-diluted
 Juice-orange grapefruit-can
 Juice-orange grapefruit-froz-diluted
 Juice-orange-can
 Juice-orange-can-froz conc
 Juice-orange-dehydrated-made
 Juice-orange-froz conc-diluted
 Juice-orange-raw
 Juice-passion fruit-purple
 Juice-passion fruit-yellow

Juice-pineapple-can
 Juice-pineapple-froz-diluted
 Juice-prune-can & bottled
 Juice-tangerine-can-sweetened
 Juice-tangerine-raw
 Kiwifruit-raw
 Kumquats-raw
 Lemon peel-raw
 Lemon-raw-unpeeled
 Lemon-raw + out peel
 Lemonade-can-froz conc
 Lemonade-froz conc-diluted
 Lime-raw
 Loganberries-froz
 Longans-raw
 Loquats-raw
 Lychee-raw
 Mango-raw
 Melon balls-froz
 Melons-cantaloupe-raw-cubed pieces
 Melons-casaba-raw
 Melons-honeydew-raw-cubed pieces
 Mixed fruit-can-heavy syrup pack
 Mixed fruit-froz-sweetened
 Mulberries-raw
 Nectarines-raw
 Orange-raw-all varieties-whole
 Orange-raw-sections + out membranes
 Papaya nectar-can
 Papaya-raw
 Passion fruit-purple-raw
 Peach nectar-can
 Peaches-can-heavy syrup pack
 Peaches-can-water pack
 Peaches-dried-cook-sulfur-no sugar
 Peaches-dried-uncooked-sulfured
 Peaches-froz-sliced-sweetened
 Peaches-halved-can in water-dietetic
 Peaches-raw-sliced
 Peaches-raw-whole
 Peaches-sliced-can in water-dietetic
 Peaches-spiced-can-heavy syrup pack
 Pear nectar-can
 Pears-can-heavy syrup pack
 Pears-can-juice pack
 Pears-can-water pack
 Pears-dried-uncooked
 Pears-halved-can in water-dietetic
 Pears-raw-bartlett + skin
 Pears-raw-bosc + skin
 Pears-raw-d'anjou + skin
 Persimmons-japanese-dried
 Persimmons-japanese-raw
 Persimmons-native-raw
 Pineapple grapefruit drink
 Pineapple orange drink
 Pineapple-bits-can in syrup
 Pineapple-bits-can-water pack
 Pineapple-can-juice pack-USA
 Pineapple-froz-sweetened

Pineapple-raw-diced
 Pineapple-sliced-dietetic-can/water
 Pitanga-raw
 Plantains-cooked
 Plantains-raw
 Plums-purple-can-heavy syrup pack
 Plums-purple-can-juice pack
 Plums-purple-can-water pack
 Plums-raw-japanese & hybrid
 Plums-raw-prune type
 Pomegranates-raw
 Pricklypears-raw
 Prunes-can-heavy syrup pack
 Prunes-dried-cooked-+ sugar
 Prunes-dried-cooked-+out sugar
 Prunes-dried-uncooked-USDA
 Pun: melo-sections-raw
 Quinces-raw
 Raisins-seedless
 Raisins-seedless-pac
 Raspberries-can-heavy syrup pack
 Raspberries-froz-sweetened
 Raspberries-raw
 Rhubarb-cooked from froz + sugar
 Rhubarb-cooked from raw + sugar
 Roselle-raw
 Sapodilla-raw
 Sapotes-raw
 Soursop-raw-pulp
 Strawberries-can-heavy syrup pack
 Strawberries-froz-sweetened-sliced
 Strawberries-froz-sweetened-whole
 Strawberries-froz-unsweet-USDA
 Strawberries-raw-whole
 Tamarinds-raw
 Tangerines-can-juice pack
 Tangerines-can-light syrup pack
 Tangerines-raw-peeled
 Watermelon-raw

Grains

Barley-dry-uncooked
 Barley-pearled-light-cooked
 Barley-pearled-light-uncooked
 Buckwheat groats-roasted-cooked
 Buckwheat groats-roasted-dry
 Buckwheat-raw-whole
 Bulgur-can-seasoned
 Bulgur-cooked
 Bulgur-dry-commercial
 Corn bran-crude
 Corn chips
 Corn germ-toasted
 Corn grits-dry
 Corn kernels-whole grain
 Cornmeal-degermed-enrich-cooked
 Cornmeal-degermed-enrich-dry
 Cornmeal-degermed-unenrich-cooked
 Cornmeal-degermed-unenrich-dry

Cornmeal-self rising-degermed
 Cornmeal-whole grain-bolted
 Cornmeal-whole grain-dry
 Cornstarch
 Couscous-cooked
 Couscous-dry
 Croutons-herb seasoned
 Flour-arrowroot
 Flour-barley
 Flour-buckwheat-whole groat
 Flour-carob
 Flour-corn-masa-sifted
 Flour-corn-whole grain
 Flour-potato
 Flour-rice-brown
 Flour-rice-white
 Flour-rye-dark
 Flour-rye-light
 Flour-sesame-lofat
 Flour-soybean-lofat
 Flour-triticale-whole grain
 Flour-wheat-enrich-sifted
 Flour-wheat-enrich-unsifted
 Flour-wheat-white-cake/pastry
 Flour-wheat-white-for bread
 Flour-wheat-white-self rising-enrich
 Flour-wheat-white-tortilla mix
 Flour-wheat-whole grain-stirred
 Matzos-amer crackers-Manischewitz
 Matzos-daily thin tea-Manischewitz
 Matzos-matzo meal-Manischewitz
 Millet-cooked
 Millet-raw
 Oat bran-raw
 Oats-whole grain-uncooked
 Pasta-corn-cooked
 Pasta-fresh-plain-cooked
 Pasta-fresh-spinach-cooked
 Pasta-homemade-+ egg-cooked
 Pasta-homemade-+out egg-cooked
 Pasta-macaroni-cooked-firm-hot
 Pasta-macaroni-cooked-tender-cold
 Pasta-macaroni-cooked-tendere-hot
 Pasta-macaroni-vegetable-cooked
 Pasta-macaroni-whole wheat-cooked
 Pasta-noodles/long rice-dry
 Pasta-noodles-chow mein-enrich
 Pasta-noodles-egg-cooked
 Pasta-noodles-egg-enrich-cooked
 Pasta-noodles-egg-spinach-cooked
 Pasta-noodles-ramen-oriental
 Pasta-noodles-soba-buckwheat-dry
 Pasta-noodles-somen-wheat-dry
 Pasta-spaghetti-ckd-al dente
 Pasta-spaghetti-ckd-tender
 Popcorn-popped-oil & salt
 Popcorn-popped-plain
 Popcorn-popped-sugar coated
 Pretzel-dutch-twisted

Pretzel-thin-stick
 Pretzel-thin-twisted
 Quinoa-whole or ground
 Rice bran
 Rice bran-crude
 Rice cakes-lo na
 Rice cakes-reg
 Rice-brown-long grain-cooked
 Rice-brown-long grain-raw
 Rice-brown-uncle ben's
 Rice-spanish-home recipe
 Rice-white-inst-hot
 Rice-white-long grain-enr-cooked
 Rice-white-long grain-raw
 Rice-white-parboiled-cooked
 Rice-white-short grain-enr-cooked
 Rice-white-+ pasta-cooked
 Rice-wild-cooked
 Rye-whole-dry
 Semolina
 Shake 'n bake-package-Gen foods
 Sorghum-whole-dry
 Stuffing mix-chicken-Gen foods
 Stuffing mix-dry form
 Stuffing mix-made
 Taco shell-baked
 Tortilla chips-Doritos
 Tortilla-corn
 Tortilla-flour
 Wheat Bran-crude
 Wheat germ-crude
 Wheat-durum
 Wheat-hard red-spring
 Wheat-hard red-winter
 Wheat-hard white
 Wheat-soft red-winter
 Wheat-soft white
 Wheat-sprouted

Infant Formulas

Formula-Enfamil-lo iron-Mead J.
 Formula-Enfamil-no iron-Mead J.
 Formula-Isomil sf-add iron-Ross
 Formula-Isomil-add iron-Ross
 Formula-lo methionine-Mead J.
 Formula-lo phenylalanine/tyrosine
 Formula-Lofenalac-Mead J.
 Formula-mono/disac free-Mead J.
 Formula-msud-add iron-Mead J.
 Formula-Nursoy-+ add iron-Wyeth
 Formula-Nutramigen-Mead J.
 Formula-Portagen-20 calorie-Mead J.
 Formula-Preigestimil-Mead J.
 Formula-Prosobee-Mead J.
 Formula-Ross carbohydrate free
 Formula-Similac lbw-24 calorie-Ross
 Formula-Similac natural care-Ross
 Formula-Similac pm 60/40-Ross
 Formula-Similac special care-20-Ross
 Formula-Similac special care-24-Ross

Formula-Similac + whey + iron-Ross
 Formula-Similac-13 calorie-Ross
 Formula-Similac-20 calorie-Ross
 Formula-Similac-24 calorie-Ross
 Formula-Similac-27 calorie-Ross
 Formula-sma + iron-wyeth

Meats

Bacon bits
 Bacon-pork-broiled/pan-fried/roasted
 Barbecue loaf-pork/beef
 Beef Cuts-lean + fat-simmered/roasted
 Beef Cuts-lean only-simmered/roasted
 Beef-bottom round roast-cook-lean
 Beef-bottom round roast-lean + fat
 Beef-brisket-lean-cooked
 Beef-corned beef loaf-jellied
 Beef-corned-can
 Beef-dried-cured-chipped
 Beef-ground-patty-broiled-lean
 Beef-ground-patty-broiled-lean
 Beef-ground-reg-baked
 Beef-ground-reg-fried
 Beef-heart-cooked-simmered
 Beef-liver-fried in marg
 Beef-pot roast-chuck-arm cut-cooked
 Beef-pot roast-chuck-cooked
 Beef-rib roast-broiled-lean + fat
 Beef-rib roast-broiled-lean only
 Beef-rib steak-cooked
 Beef-steak-chicken fried
 Beef-steak-sirloin-broiled-lean + fat
 Beef-steak-sirloin-broiled-lean only
 Beef-steak-top round-broiled-lean
 Beef-steak-top round-broil-lean/fat
 Beef-tenderloin steak-broiled
 Beerwurst-beer salami-beef-4x1/8" slice
 Beerwurst-beer salami-pork
 Bockwurst-raw-pork-link
 Bologna-cured pork-4 by 1/8 in slice
 Bratwurst-pork-cooked-link
 Braunschweiger-liver sausage-pork
 Cheesefurter-pork + beef
 Chitterlings-pork-simmered
 Chorizo-pork/beef 4" links
 Frankfurter-no bun-beef+pork
 Frog Legs-fried-flour coated
 Ham + cheese loaf/roll
 Ham + cheese spread
 Ham salad spread
 Ham-boiled-reg-11% fat-luncheon
 Ham-can-chopped-luncheon meat
 Ham-can-extra lean-4% fat
 Ham-can-pork-roasted-13% fat
 Ham-deviled-can-luncheon meat
 Ham-extra lean-5% fat-roasted
 Ham-lean only-roasted
 Ham-minced-pork
 Ham-roasted-reg-11% fat-boneless

Headcheese-pork
 Italian sausage-pork-link
 Kielbasa-pork + beef
 Knockwurst-pork + beef-link
 Lamb chop-rib-broiled-lean + fat
 Lamb chop-rib-broiled-lean only
 Lamb-leg-roasted-lean + fat
 Lamb-leg-roasted-lean only
 Lamb-shoulder-roasted-lean + fat
 Lamb-shoulder-roasted-lean only
 Liver cheese-pork
 Liverwurst-liver sausage-pork
 Mortadella-beef/pork
 Pepperoni-pork/beef 1/8" slice
 Polish sausage-pork
 Pork chop-loin-broiled-lean + fat
 Pork chop-loin-broiled-lean only
 Pork-canadian bacon-grilled
 Pork-center loin-roasted-lean + fat
 Pork-center loin-roasted-lean only
 Pork-feet-pickled
 Pork-feet-simmered
 Pork-kidneys-braised
 Pork-liver-braised
 Pork-olive loaf
 Pork-pickle/pimiento loaf
 Pork-shoulder-roasted-lean only
 Pork-spareribs-braised
 Pork-tenderloin-roasted-lean only
 Pork-tongue-braised
 Potted meat-can-beef/chicken/turkey
 Rabbit-stewed-boneless-skinless
 Salami-cooked-beef-4 by 1/8 inch slice
 Salami-dry or hard-pork-slice
 Sausage-pork-link-cooked
 Sausage-pork-patty-cooked
 Sausage-vienna-can-beef + pork
 Thuringer/cervelat-pork
 Turkey-pastrami
 Veal-rib-separable lean-braised
 Veal-shoulder-arm-lean-roasted
 Veal-sweetbreads-braised
 Venison-dried-salted
 Venison-roasted

MISCELLANEOUS

Baking powder-lo Na
 Baking powder-no calcium sulfate
 Baking powder-straight phosphate
 Baking powder+ calcium sulfate
 Baking soda
 Gelatin-dry-envelope
 Vinegar-cider
 Vinegar-distilled
 Vitamin-Centrum-advanced formula
 Vitamin-Flintstone-childrens
 Vitamin-Geritol complete
 Vitamin-Nature Made-multi
 Vitamin-One A Day-maximum formula

Vitamin-One A Day-stressgard
 Vitamin-Safeway-daily plus iron
 Vitamin-Safeway-one tab daily
 Vitamin-Shaklee-vita lea
 Vitamin-Stresstabs 600
 Yeast-baker's-dry-active-package
 Yeast-brewer's-dry

Nuts & Seeds

Nut-almonds-shelled-chopped
 Nut-almonds-shelled-slivered
 Nut-beechnuts-dried
 Nut-brazil-dried-shelled
 Nut-butternuts-dried
 Nut-cashews-dry roasted
 Nut-cashews-oil roasted
 Nut-coconut-dried-flaked-can
 Nut-coconut-raw-shredded
 Nut-filbert/hazel-dried-chopped
 Nut-hickory-dried
 Nut-macadamia-dried
 Nut-macadamia-oil roasted
 Nut-mixed-dry roasted
 Nut-mixed-oil roasted
 Nut-peanuts-oil roasted
 Nut-peanuts-oil roasted-salted
 Nut-peanuts-spanish-dried
 Nut-pecans-dried-halves
 Nut-pecans-oil roasted
 Nut-pistachio-dried
 Nut-pistachio-dry roasted
 Nut-soybean kernels-roasted
 Nut-walnut-black-dried-chopped
 Nut-walnut-persian/english
 Nut-walnuts-finely ground
 Peanut butter-chunk style
 Peanut butter-lo Na-Peter Pan
 Peanut butter-old fashioned
 Peanut butter-smooth type
 Seed-breadfruit-roasted
 Seed-pumpkin/squash-dried
 Seed-pumpkin/squash-roasted
 Seed-sesame-dried-whole
 Seed-sesame-roasted-whole
 Seed-Sunflower-dried
 Seed-Sunflower-oil roasted

Poultry

Chicken frankfurter
 Chicken roll-light
 Chicken spread-can
 Chicken-back-fried-flour coated
 Chicken-back-stewed
 Chicken-breast-no skin-fried
 Chicken-breast-no skin-roast/broil
 Chicken-breast-roast/broil
 Chicken-breast-stewed
 Chicken-breast+ skin-fried in butter
 Chicken-breast+ skin-fried in flour
 Chicken-can-boneless+ broth

Chicken-capon-roast/broil
 Chicken-drumstick + skin-fried/flour
 Chicken-giblets-fried-flour coated
 Chicken-giblets-simmered
 Chicken-gizzard-simmered
 Chicken-heart-simmered
 Chicken-leg-no skin-roast/broil
 Chicken-leg-no skin-stewed
 Chicken-leg-roast/broil
 Chicken-liver pate-can
 Chicken-liver-simmered
 Chicken-thigh-fried-flour coated
 Chicken-thigh-no skin-roast/broil
 Chicken-thin sliced-smoked
 Chicken-wing-fried-flour coated
 Chicken-wing-roast/broil
 Chicken-wing-stewed
 Duck-flesh & skin-roasted
 Duck-no skin-roasted
 Goose-flesh & skin-roasted
 Goose-liver pate-smoked-can
 Goose-no skin-roasted
 Turkey ham-cured thigh meat
 Turkey loaf-breast
 Turkey roll-light
 Turkey roll-light + dark
 Turkey-breast-no skin-roasted
 Turkey-dark meat-no skin-roasted
 Turkey-giblets-simmered
 Turkey-gizzard-simmered
 Turkey-light meat-no skin-roasted
 Turkey-light/dark meat-no skin-roast
 Turkey-liver-simmered
 Turkey-thin sliced-smoked

Sauces & Dips

Catsup-tomato-Heinz lite
 Catsup-tomato-lo Na-Heinz
 Catsup-tomato-reg
 Dip-bacon + horseradish-Kraft
 Dip-buttermilk-Kraft
 Dip-clam-Kraft
 Dip-french onion-Kraft
 Dip-garlic-Kraft
 Dip-green onion-Kraft
 Dip-guacamole-Kraft
 Dip-jalapeno bean-fritos
 Dip-jalapeno pepper-Kraft
 Gravy-beef-can
 Gravy-brown-from dry-made + water
 Gravy-chicken-can
 Gravy-mushroom-can
 Gravy-pork-from dry-made + water
 Gravy-turkey-can
 Guava-sauce-cooked
 Horseradish-made
 Mustard-brown-made
 Mustard-lo Na-featherwt
 Mustard-yellow-made

Pickle relish-hamburger-Heinz
 Pickle relish-hot dog-Heinz
 Pickle relish-sweet
 Sauce-barbecue-ready to serve
 Sauce-bearnaise/dry mix-milk/butter
 Sauce-cheese-from dry-milk/butter
 Sauce-chili-bottled
 Sauce-chili-lo Na
 Sauce-curry-from dry mix-made + milk
 Sauce-holl+aise-dry mix-made + milk
 Sauce-marinara-can
 Sauce-mushroom-dry mix-made + milk
 Sauce-picante-can
 Sauce-salsa + green chilies-can
 Sauce-sour cream-from mix-+ milk
 Sauce-soy
 Sauce-soy-tamari
 Sauce-spaghetti-tomato based-can
 Sauce-steak-Heinz 57
 Sauce-stroganoff-from mix-made
 Sauce-sweet/sour-from mix-made
 Sauce-tabasco
 Sauce-taco-can
 Sauce-tartar-reg
 Sauce-teriyaki-bottled-ready serve
 Sauce-teriyaki-from mix-made-water
 Sauce-tomato-can-lo Na-S&W
 Sauce-tomato-can-salt add
 Sauce-tomato-spanish-can
 Sauce-tomato + herbs/cheese-can
 Sauce-tomato + mushrooms-can
 Sauce-tomato + onions-can
 Sauce-white-dehydrated-made-milk
 Sauce-white-medium + enrich flour
 Sauce-worcestershire-USA

Soups

Soup-bean + bacon-can + water
 Soup-beef broth-can-ready to eat
 Soup-beef broth-dehydrated-cubed
 Soup-beef noodle-can-made-water
 Soup-beef-chunky-can-ready to serve
 Soup-black bean-can-made-water
 Soup-cheese-can-made + milk
 Soup-chicken + dumplings-can-milk
 Soup-chicken broth-can-made-water
 Soup-chicken noodle-can + water
 Soup-chicken noodle-lo Na
 Soup-chicken noodle-made from dry
 Soup-chicken-chunky-can-ready eat
 Soup-chicken-chunky-lo Na
 Soup-chicken/rice-can-ready to serve
 Soup-chili-beef-can-made-water
 Soup-clam chowder-manchattan-water
 Soup-clam chowder-new engl+ + milk
 Soup-clam chowder-new engl+ water
 Soup-consomme-can-made + water
 Soup-corn-can-lo Na-campbells
 Soup-crab-can-ready to serve

Soup-cream of asparagus-can + milk
 Soup-cream of celery-can + milk
 Soup-cream of chicken-can + milk
 Soup-cream of chicken-can + water
 Soup-cream of mushroom-can + milk
 Soup-cream of mushroom-can + water
 Soup-cream of potato-can + milk
 Soup-cream of shrimp-can + milk
 Soup-escarole-can-ready to serve
 Soup-gazpacho-can-ready to serve
 Soup-lentil + ham-can-ready to eat
 Soup-minestrone-can-made-water
 Soup-onion-can-made + water
 Soup-onion-dehydrated-pac
 Soup-onion-dehydrated-made-water
 Soup-oyster stew-can-made-milk
 Soup-oyster stew-can-made-water
 Soup-pea green-can-made + milk
 Soup-pea green-can-made-water
 Soup-pea green-lo Na-can-water
 Soup-pea-split-can-made-water
 Soup-pepperpot-can-made-water
 Soup-tomato beef & noodle-can/water
 Soup-tomato bisque-can-made/milk
 Soup-tomato bisque-lo Na + water
 Soup-tomato rice-can-made/water
 Soup-tomato vegetable-made from dry
 Soup-tomato-can-made + milk
 Soup-tomato-can-made + water
 Soup-turkey noodle-can-made/water
 Soup-turkey noodle-lo Na + water
 Soup-turkey vegetable-can-water
 Soup-turkey-chunky-ready to serve
 Soup-vegetable beef-can-lo Na
 Soup-vegetable beef-can + water
 Soup-vegetable-can-lo Na
 Soup-vegetarian-can-made-water
 Soup-vichyssoise-can-made/milk

Spices & Herbs

Allspice-ground
 Basil-ground
 Bay leaf-crumbled
 Chervil-dried
 Chili powder
 Cinnamon-ground
 Cloves-ground
 Coriander leaf-dried
 Curry powder
 Dill weed-dried
 Garlic powder
 Garlic salt-Frenchs
 Ginger-ground
 Mace-ground
 Marjoram-dried
 Nutmeg-ground
 Onion powder
 Oregano-ground
 Paprika

Parsley-dried
 Pepper-black
 Pepper-red or cayenne
 Pepper-white
 Poultry seasoning
 Pumpkin pie spice
 Rosemary-dried
 Sage-ground
 Salt-table salt
 Savory-ground
 Seeds-anise
 Seeds-caraway
 Seeds-celery
 Seeds-cori+er
 Seeds-cumin
 Seeds-dill
 Seeds-fennel
 Seeds-fenugreek
 Seeds-mustard-yellow
 Seeds-poppy
 Seeds-sesame-decoricated
 Tarragon-ground
 Thyme-ground
 Turmeric-ground
 Vanilla-pure

Sugars & Sweets

Apple butter
 C+Y-almond joy
 C+Y-bit o honey
 C+Y-caramels-plain/choc
 C+Y-choc coated peanuts
 C+Y-choc-semisweet
 C+Y-fondant-uncoated
 C+Y-fudge-choc-plain
 C+Y-gum drops
 C+Y-hard
 C+Y-jelly beans
 C+Y-kit kat bar
 C+Y-Life Savers
 C+Y-lollipop
 C+Y-M & M-plain-package
 C+Y-milk choc bar-no sugar
 C+Y-milk choc + almonds
 C+Y-milk choc + peanuts
 C+Y-milk choc-plain
 C+Y-Milky Way bar
 C+Y-peanut brittle
 C+Y-peanut butter cup
 C+Y-snickers bar
 Chewing gum-c+y coated
 Chewing gum-Wrigleys
 Choc-bitter-for baking
 Coconut cream-raw
 Coconut milk-raw
 Honey-strained/extracted
 Icing-cake-choc-made from mix
 Icing-cake-fudge-made/mix/water
 Icing-cake-white-boiled

Icing-cake-white-uncooked
 Icing-cake-white/coconut-boiled
 Jam/preserves-reg
 Jam/preserves-reg-pac size
 Jam/preserves-strawberry-lo cal
 Jelly-reg
 Jelly-reg-pac size
 Marshmallows
 Molasses-cane-blackstrap
 Molasses-cane-light
 Sorghum
 Sugar-brown-packed
 Sugar-Equal-pac size
 Sugar-Sweet & Lo-pac size
 Sugar-white-granulated
 Sugar-white-powder-sifted
 Syrup-choc flavored-fudge-thick
 Syrup-choc flavored-thin
 Syrup-corn-blends-light + dark
 Syrup-pancake-Karo
 Syrup-pancake-light-Aunt Jem.

Vegetables

Alfalfa seeds-sprouted-raw
 Amaranth-boiled-drain
 Amaranth-raw
 Artichokes-boiled-drain
 Asparagus-can-dietary pack-lo Na
 Asparagus-can-spears-drain solids
 Asparagus-froz-boiled-drain-spears
 Asparagus-froz-boiled-drain-tips
 Asparagus-raw-boiled-drain-spears
 Asparagus-raw-boiled-drain-tips
 Balsam pear-leafy tips-boiled-drain
 Balsam pear-pods-boiled-drain
 Bamboo shoots-boiled-drain
 Bamboo shoots-can-drain
 Bamboo shoots-raw
 Beans-adzuki-boiled
 Beans-adzuki-can-sweetened
 Beans-baked beans-can
 Beans-baked beans-home recipe
 Beans-black-cooked-boiled
 Beans-french-cooked-boiled
 Beans-garbanzo-can-reconstituted
 Beans-garbanzo-dry-raw
 Beans-dry-cooked-drain
 Beans-green-can-dietary-lo Na
 Beans-green-froz-boiled-french style
 Beans-kidney-can-dietary-lo Na
 Beans-lima-baby-froz-boiled-drain
 Beans-lima-can-dietary-lo Na
 Beans-lima-can-solids & liqs
 Beans-lima-froz-boiled-drain
 Beans-lima-raw-boiled-drain
 Beans-mung-sprouted-boiled
 Beans-mung-sprouted-raw
 Beans-navy pea-dry-cooked-drain
 Beans-navy-sprouted-boiled

Beans-pinto-froz-boiled
 Beans-red kidney-can-solids & liqs
 Beans-refried
 Beans-refried-can-sausage-Old El Paso
 Beans-shellie-can
 Beans-snap-green-can-drain-cuts
 Beans-snap-green-dietetic-lo Na
 Beans-snap-green-froz-boiled
 Beans-snap-green-raw-boiled
 Beans-snap-yellow/wax-can
 Beans-snap-yellow/wax-froz-boiled
 Beans-snap-yellow/wax-raw-boiled
 Beans-white-small-boiled
 Beet Greens-boiled-drain
 Beets-can-dietary pack-lo Na
 Beets-sliced-boiled-drain
 Beets-sliced-can-drain
 Beets-whole-boiled-drain
 Beets-whole-can
 Broccoli-froz-boiled-drain
 Broccoli-raw
 Broccoli-raw-boiled-drain
 Brussels sprouts-froz-boiled
 Brussels sprouts-raw-boiled
 Burdock root-boiled-drain
 Cabbage-celery-raw
 Cabbage-common-boiled-drain
 Cabbage-common-raw-shredded
 Cabbage-common-raw-sliced
 Cabbage-red-raw-shredded
 Cabbage-savoy-raw-shredded
 Cabbage-white mustard-boiled
 Cabbage-white mustard-raw
 Carrot juice-can
 Carrot-raw-scraped-shredded
 Carrot-raw-scraped-whole
 Carrots-boiled-drain-sliced
 Carrots-can-dietary pack-lo Na
 Carrots-can-sliced-drain
 Carrots-froz-boiled-drain
 Caulifloer-froz-boiled
 Caulifloer-raw-boiled-drain
 Caulifloer-raw-chopped
 Celery-pascal-raw-diced
 Celery-pascal-raw-stalk
 Chard-swiss-boiled-drain
 Chard-swiss-raw
 Chestnuts-chinese-dried
 Chestnuts-chinese-raw
 Chestnuts-roasted
 Chicory greens-raw-chopped
 Chicory roots-raw
 Chives-freeze dried
 Chives-raw
 Collards-froz-boiled-drain
 Collards-raw-boiled-drain
 Corn Fritter
 Corn-creamed-can-dietary-lo Na
 Corn-ear-froz-boiled-drain

- Corn-froz-boiled-drain-kernels
- Corn-kernels/one ear-boiled-drain
- Corn-sweet-can-drain
- Corn-sweet-can-lo Na
- Corn-sweet-can-vacuum packed
- Corn-sweet-cream style-can
- Corn-+ red + green peppers-can
- Cress-garden-raw
- Cucumber-raw-sliced
- Cucumber-raw-whole
- D+Elion greens-boiled
- Eggplant-boiled-drain
- Endive-raw-chopped
- Garlic-raw-clove
- Ginger root-raw-sliced
- Gourd-white floored-boiled
- Hominy-can
- Hummus
- Jerusalem artichokes-raw
- Kale-froz-boiled-drain
- Kale-raw-boiled-drain
- Kohlrabi-boiled-drain
- Kohlrabi-raw
- Leeks-boiled-drain
- Leeks-raw
- Lentils-sprouted-raw
- Lentils-whole-cooked
- Lettuce-butterhead-head
- Lettuce-butterhead-leaves
- Lettuce-iceberg-raw-chopped
- Lettuce-iceberg-raw-head
- Lettuce-iceberg-raw-leaves
- Lettuce-looseleaf-raw
- Lettuce-romaine-raw-shredded
- Lotus root-boiled-drain
- Lotus root-raw
- Miso-fermented soybeans
- Mixed-can-drain
- Mixed-froz-boiled
- Mushrooms-boiled-drain
- Mushrooms-can-drain
- Mushrooms-raw-chopped
- Mustard greens-boiled-drain
- Natto-fermented soybeans
- Okra-raw-boiled-drain
- Olives-green-pickled-can
- Olives-mission-ripe-can
- Onion rings-froz-made-heated
- Onions-mature-boiled-drain
- Onions-mature-raw-chopped
- Onions-young green
- Parsley-raw-cup
- Parsnips-sliced-boiled-drain
- Peas & carrots-can
- Peas & carrots-can-dietary-lo Na
- Peas & carrots-froz-boiled
- Peas & onions-can
- Peas & onions-froz-boiled
- Peas-blackeye/cowpeas-boiled-drain
- Peas-blackeye/cowpeas-froz-boiled
- Peas-blackeye/cowpeas-raw-boiled
- Peas-edible podded-raw
- Peas-green-can-dietary-lo Na
- Peas-green-can-drain
- Peas-green-froz-boiled-drain
- Peas-split-dry-cooked
- Peas-sweet-can in water-dietetic
- Peppers-hot chili-can
- Peppers-hot chili-raw
- Peppers-hot-red-dried
- Peppers-jalapeno-can-chopped
- Peppers-sweet-boiled-drain
- Peppers-sweet-raw
- Pickle-dill-cucumber-medium sized
- Pickle-fresh pack-cucumber-sliced
- Pickle-sweet/gherkin-small-whole
- Pimientos-4 ounce can or jar
- Poi-taro root product
- Potato chips-salt add
- Potato pancakes-home recipe
- Potato puffs-froz-heated
- Potato skin-baked
- Potato-au gratin-home recipe
- Potato-au gratin-made from mix
- Potato-baked-flesh & skin-whole
- Potato-baked-peeled after baking
- Potato-boiled-peeled after boiling
- Potato-boiled-peeled before boiling
- Potato-can-drain
- Potato-french fried-made from froz
- Potato-french fried-made from raw
- Potato-hash brown-made from raw
- Potato-hashed brown/from froz
- Potato-hush puppies
- Potato-mashed/dchhydrated-+ milk
- Potato-mashed-from raw-+ milk
- Potato-mash/home recipe-milk/butter
- Potato-o'brien-home recipe
- Potato-scalloped-home recipe
- Potato-scalloped-made from mix
- Pumpkin pie mix-can
- Pumpkin-boiled-drain-mashed
- Pumpkin-can
- Pumpkin-raw-cubed
- Radish-daikon-sliced-boiled-drain
- Radishes-raw
- Rutabagas-boiled-drain-cubes
- Sauerkraut-can
- Seaweed-agar-dried
- Seaweed-irishmoss-raw
- Seaweed-kelp (kombu)-raw
- Seaweed-laver (nori)-raw
- Seaweed-spirulina-dried
- Seaweed-wakame-raw
- Shallots-freeze dried
- Shallots-raw
- Soybeans-dry-cooked
- Soybeans-green-boiled-drain
- Soybeans-sprouted-steamed
- Spinach-can-dietary pack-lo Na
- Spinach-can-drain
- Spinach-can-solids + liqs
- Spinach-froz-boiled-chopped
- Spinach-leaf-froz-boiled-drain
- Spinach-raw-boiled-drain
- Spinach-raw-chopped
- Squash-acorn-baked
- Squash-butternut-baked
- Squash-hubbard-boiled-mashed
- Squash-summer-boiled-sliced
- Squash-winter-bake-mashed
- Squash-zucchini-froz-boiled
- Squash-zucchini-italian style can
- Squash-zucchini-raw-boiled
- Squash-zucchini-raw-sliced
- Succotash-boiled-drain
- Sweet potato-baked-peeled
- Sweet potato-boiled-mashed
- Sweet potato-c+ried
- Sweet potato-can-mashed
- Sweet potato-can-vacuum pack
- Taro Root-raw-sliced
- Taro-cooked-sliced
- Tempeh-soybean product
- Tofu-fried
- Tofu-okara
- Tofu-raw-firm
- Tofu-soybean curd-raw-reg
- Tomato juice-can
- Tomato juice-lo Na
- Tomato paste-can-lo Na
- Tomato paste-can-salt add
- Tomato powder
- Tomato puree-can-lo Na
- Tomato puree-can-salt add
- Tomato-can-dietary pack-lo Na
- Tomato-cooked-stewed-home recipe
- Tomato-green-raw
- Tomato-red-can-stewed
- Tomato-red-can-whole
- Tomato-red-can-+ green chilies
- Tomato-red-raw-boiled
- Tomato-red-ripe-raw
- Turnip greens-froz-boiled
- Turnip greens-raw-boiled
- Turnips-boiled-drain-diced
- Vegetable juice-can
- Vegetable juice-snap e tom-tomato
- Vegetable juice v8 cocktail-low Na
- Vegetable juice-v8-reg
- Waterchestnuts-chinese-can
- Waterchestnuts-chinese-raw
- Watercress-raw
- Yam-mountain-Hawaii-steamed
- Yams-boiled or baked-drain

ADDITIONAL FOODS NOT FOUND IN LISTS

Foods lists used in this Food Frequency Questionnaire are from the *Student Study Guide and Workbook*, Fitness Technologies Press, 1132 Lincoln Street, Ann Arbor, MI 48104.

SEVEN DAY PHYSICAL ACTIVITY RECALL

Subject # _____ Date _____

Activity/Intensity	Time (hr:min)	MET Value	kcal/kg/week	kcal/week
Very Hard				
Hard				
Moderate				
Light				
Sleep				

Very Hard

running
canoeing/rowing
handball
squash
football
singles tennis
Nordic skiing
stair climbing
mountain climbing

Hard

backpacking
dancing
hiking
health club
jogging
walking
water skiing
swimming
golf (no cart)
racquetball

lawn mowing
snow shoveling
scuba diving/snorkeling
alpine skiing
skating
doubles tennis
softball
soccer
basketball

Moderate

walking-pleasure
walking-transportation
biking-pleasure
home exercise
weight lifting
raking
bowling
volleyball
table tennis
fishing
hunting

Others (please list):

APPENDIX B
ANOVA TABLES

Table 4

Analysis of Variance for Anthropometric Variables and Age By Treatment Group

Multivariate				Univariate			
Source	df	F	p	Variable	df	F	p
Trmt	5/18	0.72	0.61	LBM	1/22	0.75	0.40
				BF	1/22	0.42	0.52
				Wt	1/22	0.00	0.95
				Ht	1/22	0.14	0.71
				Age	1/22	1.48	0.24

Table 5

Analysis of Variance for Estimated Average Physical Activity (METS/week)

Source	df	Sum of Squares	Mean Square	F	p
Trmt	1	62.96	62.96	0.06	0.81
Error	23	11127.03	1011.55		
Total	24	11189.99			

Table 6

Analysis of Variance for Estimated Creatine Intake From Meat

Source	df	Sum of Squares	Mean Square	F	p
Trmt	1	212.35	212.35	1.25	0.29
Error	23	1862.73	169.34		
Total	24	2075.08			

Table 7

Analysis of Variance for Weight Across Trials

Source	df	Sum of Squares	Mean Square	F	p
Trmt	1	5139.97	223.48	0.72	0.41
Subj(Trmt)	22	4848.48	220.39	361.90	0.0001
Trial	1	13.65	0.59	5.75	0.03
Trial x Trmt	1	0.38	0.38	0.66	0.43

Table 8

Analyses of Variance for Elbow Flexion

Multivariate				Univariate			
Source	df	F	p	DV	df	F	p
Trmt	4/19	6.71	0.0015	EF IK _{ECC}	1/22	16.76	0.0005
				EF IK _{CON}	1/22	13.39	0.001
				EF _{1RM}	1/22	18.05	0.0003
				EF _{FAT}	1/22	3.10	0.09
Subj(Trmt)	88/77.6	7.68	0.0001	EF IK _{ECC}	1/22	8.19	0.0001
				EF IK _{CON}	1/22	17.08	0.0001
				EF _{1RM}	1/22	34.03	0.0001
				EF _{FAT}	1/22	2.99	0.007
Trial	4/19	2.18	0.11	EF IK _{ECC}	1/22	1.06	0.32
				EF IK _{CON}	1/22	0.88	0.36
				EF _{1RM}	1/22	4.27	0.05
				EF _{FAT}	1/22	1.05	0.32
Trial x Trmt	4/19	5.30	0.005	EF IK _{ECC}	1/22	0.18	0.67
				EF IK _{CON}	1/22	4.05	0.06
				EF _{1RM}	1/22	0.82	0.37
				EF _{FAT}	1/22	9.42	0.006

Table 9

Analyses of Variance for Shoulder Internal Rotation

Multivariate				Univariate			
Source	df	F	p	DV	df	F	p
Trmt	3/19	10.12	0.0003	IR _{1RM}	1/21	23.56	0.0001
				IR _{FAT}	1/21	0.99	0.33
				IRV	1/21	0.17	0.69
Subj(Trmt)	63/57.6	16.65	0.0001	IR _{1RM}	1/21	34.99	0.0001
				IR _{FAT}	1/21	11.94	0.0001
				IRV	1/21	12.51	0.0001
Trial	3/19	9.93	0.0004	IR _{1RM}	1/21	11.06	0.003
				IR _{FAT}	1/21	7.69	0.01
				IRV	1/21	2.41	0.14
Trial x Trmt	3/19	0.06	0.98	IR _{1RM}	1/21	0.09	0.76
				IR _{FAT}	1/21	0.02	0.90
				IRV	1/21	0.01	0.94

APPENDIX C

TEST-RETEST CORRELATION COEFFICIENTS

Table 10

Test-Retest Correlation Coefficients

Variable	<i>r</i>
EF IK _{CON} (Nm)	0.92
EF IK _{ECC} (Nm)	0.95
EF _{1RM} (Nm)	0.97
EF _{FAT} (reps)	0.67
IR _{1RM} (Nm)	0.96
IR _{FAT} (reps)	0.92
IRV (°/sec)	0.85

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