

*Get Moving is a book that focuses on improving movement pattern problems. From this, the author gives the reader a solution to address these concerns through a series of illustrated pictures on how to live and move better.*

## **GET MOVING! Moving With a Purpose**

By Michael K. Butler

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# **GET MOVING!**

**MOVING WITH A PURPOSE**



**MICHAEL K BUTLER**

**B.A.;P.T.A.;CSCS\*D;RSCC\*D;PES**



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***Michael K. Butler***

***BA, PTA, CSCS\*D, RSCC\*E, PES***

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This book provides content related to topics physical and/or mental health issues. As such, use of this book implies your acceptance of this disclaimer.

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## A LOOK AHEAD!

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As you dive into this book, you will notice that I set it up in a way that is simple to understand. The book is all about movement and the many factors that will impede our ability to stay active. I discuss many of our issues as a society, back them up with statistics, and show how we must move more to stay healthy. You will see as you read deeper into the book how everything we are made of, what we do, and how we function is all about movement, and yet our current lifestyle has created a stagnant society. Incidence of disease as well as mental and physical sickness is on the rise. There is much more we can do to either slow this down or eliminate it all together.

When people aren't feeling well, they stop moving! When life happens (and it will) the mental energy it takes to succumb to many of life's problems affects the body as a whole. In order to combat this we must move - not just physically, but by hydrating and nourishing our bodies in a healthy way. Water and food provide energy which takes movement to process.

At the end of the book there will be movement exercises to choose from that will give you more energy, better mental clarity; and a better and healthier outlook on your life. It will require you to commit 30 minutes a day, 7 days a week, but the rewards are life changing!

Enjoy the book!

With Love and Chi,

Michael K. Butler



# A SERIOUS GLOBAL PROBLEM: BACK PAIN

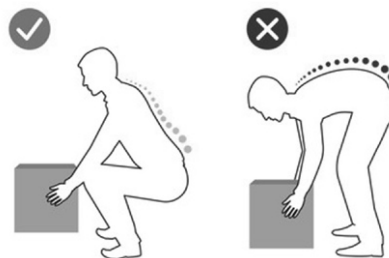
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## Lumbar Disc Pressures as a % Of Standing, In Various Postures

1. Laying flat on back with legs straight.....25%
2. Laying on back with feet elevated on chair...35%
3. Standing.....100%
4. Sitting.....140%
5. Sitting bent forward.....185%
6. Sitting bent forward with weight in hands...275%

Back pain can be very debilitating, serious and keep us on the couch. This is one of the top ten reasons why people are inactive and don't want to move!

Back pain across the globe is a very serious condition and is the major cause of disability. Back pain comes in three stages: acute, sub-acute and chronic. A person's overall weight, height, age, mood and overall health can all be contributors to this ailment. Back pain is the number one cause for physical limitation around the world and costs companies multi-millions of dollars every year due to work absence. **Because many jobs require the individual to stay seated, back pain and disability becomes a very front running problem not only in the work place but also at home.**



**Think before you act!**

## *GET MOVING!*

When back pain occurs, inflammation sets in and can last for up to three weeks. When a person becomes increasingly physically inactive, the back stiffens up as oxygen and blood is reduced to that area, which leads to compensation and the mental protection for the body kicks in. The desire to move more quickly loses its appeal. This vicious circle can take several weeks to improve as the body needs time to repair itself.

In the United States approximately **80%** of Americans will experience back problems sometime during their lives. It is said that **34%** of back pain is caused by stress, and that number continues to rise each year as the world becomes a tougher more competitive place to live. As a nation, United States citizens spend **50 billion dollars** a year annually treating back pain. What people don't realize is that if you allow the back to settle down and don't try to overdo it, within six weeks the back pain is usually resolved.

I have researched dozens of credible sites and the statistics were alarming! The United States Bureau of Labor in 2012 said that more than half the jobs required some level of technology skills. By 2020, that number rose to 77%. An independent survey was taken by the Ergotron Commission and found nearly 75% of Americans hated sitting, yet nearly 86% were required to sit all day/everyday. Across Europe nearly 40% of jobs required sitting all day/everyday.

More companies around the world need to have work hardening programs set up before the business day starts. In the 1990's I was involved with running some of these programs for big companies in Los Angeles. Having this system in place reduced work force injuries by 40%. If the workers first knew about these statistics and the forces that are placed on their spines everyday it might encourage them to pay closer attention to how they are managing their work day and their health.

No matter who we are talking about, injuries can be greatly diminished by moving the body every day. It's important to get this information out to the working people since most of these injuries can be prevented and I have always believed that knowledge is power. For example, take a person who is sitting, bent forward with say a 10# box in their hands, that's at least 175% more disc pressure on their spine than just standing. This is shocking! So if you aren't using the right body mechanics, and you do this movement every day, you are asking to get hurt.

## **GET MOVING!**

## UNDERSTANDING GAIT: MOVE STRONG

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Gait is defined as a person's manner of walking. When we walk it should be a subconscious thought, but when we are injured we consciously pay attention to every step. In terms of functional movement, walking is an essential activity that we do every day and is a very healthy activity. But when we have movement disorders it can be uncomfortable and painful at times just to walk for 15 minutes.

A proper gait sequence is one that follows an imaginary line, with each leg on either side of it. As you walk forward the heel should strike the ground first and then roll off the toes. There should always be a slight bend in the joints as you follow-through. During a normal gait cycle, approximately **60%** of the time is spent in stance (foot in contact with the ground) and the other **40%** in swing (the time in which the foot is not in contact with the ground, but the opposite foot does strike the ground).

Over the years I have seen many styles of gait, and some are truly dysfunctional. The following are the different types of abnormal gait patterns:

1. **Antalgic Gait** (painful walking) - The true sign of having this type of gait is the amount of time in the stance phase. When people are having pain on one side of the body, they don't want to spend any more time than they have to on it. Another sign is a decrease in stride length, or very short steps.
2. **High Steppage Gait** - This form of gait is seen in clients who have anterior compartment palsy (muscles in front of the leg do not function properly or at all). Clients usually present with drop foot.
3. **Diplegic Gait** – This is a form of paralysis that affects similar body parts on both sides of the body.
4. **Ataxic gait**- This type of gait looks uncoordinated and staggered throughout walking. The cerebellum (the part of the brain that controls muscle coordination) is affected. This is often seen as a result of strokes, alcohol misuse, cerebral palsy, and multiple sclerosis.

This figure shows significant coordination impairment and speed deficiency issues with the **cerebellar** balance dysfunction patient.

5. **Trendelenburg Gait** - This is often seen with clients who have very weak gluteal muscles on one side of the body most notably the Gluteus Medius. Most often seen after a hip replacement.



When people are compensating do to an injury or impairment they tend to shuffle when they walk. This is often seen with knee and hip patients. They do not want to follow through with the heel/toe cycle (afraid to straighten the knee).

These are just some of the typical gait problems that I see quite often, and for the most part, with hard work they can be helped and corrected. Working on the gait cycle is critical for movement to occur without problems. When we are young, there is no fear to trying new things - we just speed through life taking risks and not worrying about the consequences. But as we get older and wiser, aches and pains start to creep in and stop some of the wild behavior that we had when we were younger. This is true for walking! Walking seems so simple and effortless until there is an injury, and then it becomes difficult and complex!

## **Hey! Just Move!**

Now that we understand gait and what lack of movement can do to the body, we will talk about our Active Daily Living Duties and see if we are doing these tasks correctly and pain free! You can bet the bank that if we aren't walking efficiently, we probably aren't doing everyday tasks right either. Movement deficiencies can disrupt most simple movements and cause anguish in our lives.

It can become more time consuming when we can't do the simplest tasks without stopping, thinking and planning before we do something. An aching back or a painful knee or hip can keep us from doing most tasks; which puts a strain on one or more family members.

We all have good days and bad days - no two days will be alike. Some days we will feel great and move freely, while other days it's hard just to get out of bed. There will be days when we will feel like doing nothing, and just lying in bed feels like a great idea. In reality, it is the worst thing you can do to yourself.

Some people keep themselves accountable by wearing a smart watch that keeps track of their daily steps. Reminding them that 10,000 steps is an attainable goal, and that you need to repeat this every day.

Doing our daily tasks at home can seem like a chore... well, it is! But if we did nothing we could live in a very unclean/dirty home. This is life and we need to understand how to do these daily tasks correctly, efficiently and pain free!

When we can move pain free it feels so inviting to do this every day for the rest of our lives, but when the reverse happens and we are in pain all the time, the last thing we are thinking about is exercise.

Exercise doesn't need to be hard, or it can, depending on where you set your goals. Moving everyday can be running errands, and then taking a long walk on the beach. It can also mean going to the gym at 5 in the morning before your work day starts, but you feel motivated because it makes you feel good.

The key here is just move and move often! You will continue to hear me say this, maybe I will say it so much that you won't forget it. These words might save your life someday or they might motivate you to get off the couch. Whatever it does for you can only be positive.

## MOVEMENT THERAPY SUGGESTIONS

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Along with your wellness program there should be a movement therapy program to assist in keeping muscles, soft tissue and organs flowing with nutrient rich blood and oxygen. Below you will find a list of services that are cutting edge in research and effectiveness. Please review and research for yourself what the best option for you would be.

**Active Release Therapy-** One of the best therapies on the market today - it's a game changer. A myofascial technique invented by world renowned chiropractor Michael P. Leahy. By shortening and lengthening tissues in the body it helps to restore motion, ease pain and reduce inflammation. Because it's an active movement type of therapy, muscles, fascia, tendons and ligaments can have full range of motion restored by this painless application. You can find a skilled practitioner by going to [activerelasetherapy.com](http://activerelasetherapy.com).

**Tune & Heal Cellular Resonance Therapy** - Created by Dr. Barbra Angel, a world-renowned healer, teacher and creator of her Tune & Heal method for healing. Using the premise that everything in the world vibrates and humans are no exception, she uses her specifically designed tuning forks to make significant changes in the Mind, Body and Spirit by allowing natural healing to occur. For further information you can visit her website at [barbraangel.com](http://barbraangel.com).

**Muscle Activation Technique** – This is an approach to help correct muscle imbalances, joint instability, and range of motion throughout the body. By assessing muscles and finding where the root of the problem is coming from, the goal from there is to have muscle contractile efficiency. You can go to [muscleactivation.com](http://muscleactivation.com) for more information.

**Quantum Touch** - This is a powerful technique used to reduce pain and promote optimal wellness by restoring the "Life Energy" and the flow of energy back into the system. It helps to realign the structure, balance organs, glands and systems, healing injuries and burns. Its non-invasive and comfortable, and the results are amazing and sometimes life-changing. You can go to [Quantumtouch.com](http://Quantumtouch.com) for more information.

**Fascial Stretch Therapy** - Developed by Ann Frederick, who was the first flexibility therapist to work with athletes at the Olympics. It is said to give you a feeling of relaxation and rejuvenation that no other Swedish massage could ever do. The technique works by moving the joint along the fascial plane along with the surrounding tissues to help the fascia and muscles relax. Go to [stretchtowin.com](http://stretchtowin.com) for further information.

**Reiki** - Reiki means “spiritually guided life force energy,” and is a Japanese technique for stress reduction, relaxation and the promotion of healing. The therapist delivers a life force energy back into the body (it is a form of spiritual healing). When your energy is low, you are more apt to become sick. This technique brings life back into the cells to help restore energy that might have been lost.



All of these techniques are movement-based therapies: blood flow and oxygen are enhanced to deliver nutrients to tissues to optimize healing. Even if you are just lying there, the therapist is providing a therapy that "moves" tissues and slows down stagnation to organs and surrounding structures.

## REFERENCES

---

- Abraham, G.E. 1974 Ovarian and Adrenal Contribution to Peripheral Androgens During the Menstrual Cycle. *Journal of Clinical Endocrinology and Metabolism* 39; 340-346.
- Adams PF, Kirzinger WK, Martinez ME. Summary Health Statistics for the U.S. Population: National Health Interview Survey, 2011. *Vital Health Stat* 10. 2012 Dec;(255):1-110. [PubMed]
- Ballard-Barbash, Rachel, et al. Physical Activity, Biomarkers, and Disease Outcomes in Cancer Survivors: A Systematic Review. *Journal of the National Cancer Institute* 104.11 (2012): 815-840.
- Bandura, A. 1977 Self Efficacy Toward Unifying Theory and Behavioral Change; *Psychological Review* 84;191-215.
- Behm, D. G., & Sale, D. G. (1993). Intended rather than actual movement velocity determines velocity-specific training response. *Journal of Applied Physiology*, 74(1), 359-368.
- Bell, G. J., Petersen, S. R., Quinney, H. A., & Wenger, H. A. (1989). The effect of velocity-specific strength training on peak torque and anaerobic rowing power. *Journal of Sports Sciences*, 7(3), 205-214.
- Cahn-Weiner DA, Boyle PA, Malloy PF. Tests of executive function predict instrumental activities of daily living in community-dwelling older individuals. *Appl Neuropsychol*. 2002;9(3):187-91. [PubMed]
- Caiozzo, V. J., Perrine, J. J., & Edgerton, V. R. (1981). Training-induced alterations of the in vivo force-velocity relationship of human muscle. *Journal of Applied Physiology*, 51(3), 750-754. Callaway, Ewen. "Male voices reveal owner's strength." *New Scientist*. June 16, 2010. (Nov. 28, 2012) <http://www.newscientist.com/article/dn19045-male-voices-reveal-owners-strength.html>.
- Cash SW, Duncan GE, Beresford SAA, McTiernan A, Patrick DL. Increases in physical activity may affect quality of life differently in men and women: The PACE project. *Quality of life research: an international journal of quality of life aspects of treatment, care and rehabilitation*. 2013;22(9):10.1007/s11136-013-0389-6. doi:10.1007/s11136-013-0389-6.
- Chiu LZ & Burkhardt E. A teaching progression for squatting exercises. *Strength Cond J* 2011;33:46-54.
- Coyle, E. F., Feiring, D. C., Rotkis, T. C., Cote, R. W., Roby, F. B., Lee, W., & Wilmore, J. H. (1981).
- Costenoble A, Knoop V, Vermeiren S, Vella RA, Debain A, Rossi G, Bautmans I, Verté D, Gorus E, De Vriendt P., Gerontopole Brussels Study Group. A Comprehensive Overview of Activities of Daily Living in Existing Frailty Instruments: A Systematic Literature Search. *Gerontologist*. 2019 Dec 17; [PubMed]
- Cross Fit. "Basic Strength Standards." 2006. (Nov. 28, 2012) <http://www.crossfit.com/cf-jo> Crowther, Greg. "Gender and endurance performance." University of Washington. August 2001. (Nov. 28, 2012) <http://faculty.washington.edu/crowther/Misc/RBC/gender.shtml.pdf>.

Cuk, I., Markovic, M., Nedeljkovic, A., Ugarkovic, D., Kukolj, M., & Jaric, S. (2014). Force-velocity relationship of leg extensors obtained from loaded and unloaded vertical jumps. *European journal of applied physiology*, 114(8), 1703-1714.[[PubMed](#)]

Cruz, R. F. (2001). Perspectives on the profession of dance/movement therapy: past, present, and future. *Bulletin of Psychology and the Arts*, 2(2), 74-78. Retrieved from <http://dtaa.org.au/wp-content/uploads/2014/07/WingsofSupport.pdf>.

Dillner, Luisa. "Men, take note: women are the stronger sex." *The Guardian*. Oct. 30, 2010. (Nov. 28, 2012) <http://www.guardian.co.uk/science/2010/oct/31/women-ageing-genes>.

Driss, T., Vandewalle, H., Chevalier, J. M. L., & Monod, H. (2002). Force-velocity relationship on a cycle ergometer and knee-extensor strength indices. *Canadian Journal of Applied Physiology*, 27(3), 250-262.[[PubMed](#)]

Duncan, Michael J. and Michelle Stanley. Functional movement is negatively associated with weight status and positively associated with physical activity in British primary school children. *Journal of Obesity* 2012, Article ID 697563. doi:10.1155/2012/697563.

Ewing Jr, J. L., Wolfe, D. R., Rogers, M. A., Amundson, M. L., & Stull, G. A. (1990). Effects of velocity of isokinetic training on strength, power, and quadriceps muscle fiber characteristics. *European Journal of Applied Physiology and Occupational Physiology*, 61(1-2), 159-162.

Farthing, J. P., & Chilibeck, P. D. (2003). The effects of eccentric and concentric training at different velocities on muscle hypertrophy. *European Journal of Applied Physiology*, 89(6), 578-586.

Fenn, W. O., & Marsh, B. S. (1935). Muscular force at different speeds of shortening. *The Journal of Physiology*, 85(3), 277-297.[[PubMed](#)]

Frost, D. M., Cronin, J. B., & Newton, R. U. (2008). A comparison of the kinematics, kinetics and muscle activity between pneumatic and free weight resistance. *European Journal of Applied Physiology*, 104(6), 937-956.[[PubMed](#)]

Frost, D. M., Bronson, S., Cronin, J. B., & Newton, R. U. (2016). Changes in Maximal Strength, Velocity, and Power After 8 Weeks of Training with Pneumatic or Free Weight Resistance. *The Journal of Strength & Conditioning Research*, 30(4), 934.

García-Ramos, A., Jaric, S., Padial, P., & Feriche, B. (2015). Force-Velocity Relationship of Upper-Body Muscles: Traditional vs. Ballistic Bench Press. *Journal of applied biomechanics*.

Garnica, R. A. (1986). Muscular Power in Young Women After Slow and Fast Isokinetic Training. *Journal of Orthopaedic & Sports Physical Therapy*, 8(1), 1-9.

George JW, et al. (2006). The effects of active release technique on carpal tunnel patients: A pilot study. DOI: [10.1016/S0899-3467\(07\)60143-8](https://doi.org/10.1016/S0899-3467(07)60143-8).

Goodill, S., Cruz, R., Armeniox, L., Kirschenmann, A., Kornblum, R., & Mandlawitz, M. (2013, April). *Dance/Movement therapy and obesity in children and adolescents*. Retrieved from <http://www.adta.org/Resources/Documents/DMT%20and%20Childhood%20Obesity%20White%20Paper%2008-13.pdf>.

Hahn, D., Herzog, W., & Schwirtz, A. (2014). *Interdependence of torque, joint angle, angular velocity and muscle action during human multi-joint leg extension*. *European journal of applied physiology*, 114(8), 1691-1702.[Pub Med]

Hardy, Karen, Jennie Brand Miller, Katherine D Brown, Mark G Thomas, and Les Copeland. "The Importance of Dietary Carbohydrate in Human Evolution" *Quarterly review of biology* 90,no.3 (September 2015) 251-68.

Hill, A. V. (1938). *The heat of shortening and the dynamic constants of muscle*. *Proceedings of the Royal Society of London B: Biological Sciences*, 126(843), 136-195.

Hortobágyi, T., & Katch, F. I. (1990). *Role of concentric force in limiting improvement in muscular strength*. *Journal of Applied Physiology* (Bethesda, Md.: 1985), 68(2), 650.

Ingebrigtsen, J., Holtermann, A., & Roeleveld, K. (2009). *Effects of load and contraction velocity during three-week biceps curls training on isometric and isokinetic performance*. *The Journal of Strength & Conditioning Research*, 23(6), 1670-1676.

Kirkwood, Thomas. "Why Women Live Longer." *Scientific American*. Oct. 21, 2010. (Nov. 28, 2012) <http://www.scientificamerican.com/article.cfm?id=why-women-live-longer>.

Leyk, D et al. "Hand-grip strength of young men, women and highly trained female athletes." *European Journal of Applied Physiology*. Vol. 99, No.04. March 1999. (Nov 28,2012). <http://www.ncbi.nlm.nih.gov/pubmed/17186303>.

Mc Nair DM, Loor M, Droppleman LF, *Profile Of Mood States*, San Diego Ca; Educational and Industry Testing Service; 1981.

Miller, A.E.J. et al. "Gender differences in strength and muscle fiber characteristics." *European Journal of Applied Physiology and Occupational Physiology*. Vol. 66, Issue 03. March 1993. (Nov. 28, 2012) <http://link.springer.com/article/10.1007%2FBBF00235103>.

Moffroid, M. T., & Whipple, R. H. (1970). *Specificity of speed of exercise*. *Physical Therapy*,50(12), 1692-1700.

Morin, J. B., Samozino, P., Bonnefoy, R., Edouard, P., & Belli, A. (2010). *Direct measurement of power during one single sprint on treadmill*. *Journal of biomechanics*, 43(10), 1970-1975.[PubMed]

Nikolaidis, P. (2012). *Age-and sex-related differences in force-velocity characteristics of upper and lower limbs of competitive adolescent swimmers*. *Journal of human kinetics*, 32, 87-95.[PubMed]

O'Keefe, James H., Robert Vogel, Carl J. Lavie and Loren Cordain. *Exercise Like a Hunter-Gatherer: A Prescription for Organic Physical Fitness*. *Progress in Cardiovascular Diseases* 53 (2011) 471–479.

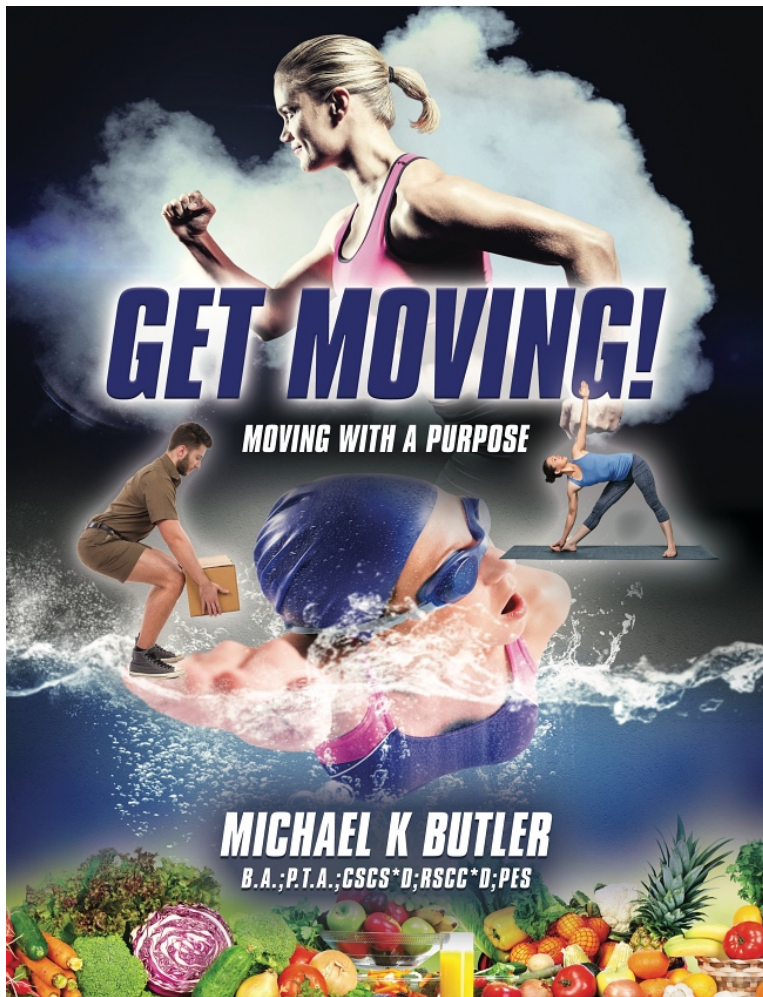
Rahmani, A., Viale, F., Dalleau, G., & Lacour, J. R. (2001). Force/velocity and power/velocity relationships in squat exercise. *European journal of applied physiology*, 84(3), 227-232. [[PubMed](#)]

Scott D, Daly RM, Sanders KM, Ebeling PR. Fall and Fracture Risk in Sarcopenia and Dynapenia With and Without Obesity: the Role of Lifestyle Interventions. *Curr Osteoporos Rep*. 2015 Aug;13(4):235-44. doi: 10.1007/s11914-015-0274-z.

Sleep chart for Babies, Toddlers, Kids, Teens and Adults, [www.sleepaidresource.com/sleep-chart.html](http://www.sleepaidresource.com/sleep-chart.html).

Sowers, Stankie. *A primer on branch chain amino acids*. Huntington College of Health Sciences, 2009,2214-215.

Velamuri K. Upper airway resistance syndrome. *Sleep medical clinics* 2006;1: 475-82



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