



Finally, A Way Paraplegics Can Work Out At Home To Stay Healthy And Independent

Four years ago, Shane was in a car accident that left him paralyzed from the chest down. He spent about six weeks in physical therapy at a specialized gym where they strapped and taped weights to his hands and helped him in and out of the various equipment. Then they sent him home.

Shane says so many paraplegics give up at this point. They can't really go to a regular gym and there's not a lot of exercises they can do at home to keep their shoulders and muscles in shape. So they start allowing others to do more and more things for them, end up losing what muscle ability they did have because they don't work out, and it spirals down from there. They become completely dependent.

But fortunately for Shane, his mother brought out her old set of Heavyhands from the closet. These weights have been around since the 1970s, and because of their unique design, Shane is able to shove his hand through the grip and work out, despite not having mobility in his fingers.

No taping or strapping involved. It's amazing the wide range of exercises he can do with them. They keep his shoulders and forearms strong, making everyday activities like using his wheelchair and transferring from it much

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easier. He says it's the best he's felt since before his accident. And in this audio, you'll hear all about his amazing story and how he uses Heavyhands to make it happen.

You'll Also Hear...

- The real difference between Heavyhands and regular weights – and why Shane says if paraplegics tried to use regular weights, they'd get hurt
- **The scary “use-or-lose” reason it's so important for paraplegics to keep muscles and mobility going as much as possible**
- The number one injury paraplegics sustain all the time just from using their wheelchairs and transferring themselves – but how Shane says Heavyhands prevents that from happening
- **The amazing goals Shane has for his life and why he's sure Heavyhands will help him get there**
- A quick look at spinal cord injuries – how they happen, what the different numbering means, and why no two paraplegics are alike
- **An insider's peek at what Heavyhands looks like today (still manufactured and updated, now as Weighted Hands) and the many upgrades that have been made**

Shane doesn't know of any other workout equipment that's this easy for paraplegics to put on and off. He can even move his wheelchair around with them on.

And, he can change the weights out himself for a heavier more challenging workout. He's so excited he's found a way to lift weights independently at home that he can't wait to share it with others in the paraplegic community. And in this audio, you'll hear all about it

Shane: Hello?

Michael: Hey, Shane, it's Michael Senoff here with the Heavy Hands.

Michael: Tell me your story. How did you sustain your injury?

Shane: It was a car wreck a little over four years ago.

Michael: How old are you?

Shane: I'm 43.

Michael: And where are you located?

Shane: Kentucky.

Michael: Can you explain the injury?

Shane: It was a standard car accident, nothing weird, just was bad weather and bad tires, and I broke my neck. I don't know exactly how I broke my neck, but when they took me to the hospital I was...it took them a while to get to me and stuff, and I was designated a complete C6, 7, 8 - I think I messed up my 6, 7, and 8. All it really is whatever you have at the top of whatever level, and I went to Fraizer Rehab, which is supposed to be one of the best. It happens to be located in Kentucky, close to where I was, which is Louisville, Kentucky, and they had a really good physical therapy program. They put you up

on a treadmill, they hang you on a harness in basically a parachute kind of belt, kind of system, and you have people move your legs and stuff, and they also have a gym there that you have to pay membership to, but you can work out and stuff.

Before my injury, I was always an active guy. I played sports back when I was younger, and I just continued to work out. It was a way of my life. I wasn't a huge professional of anything, but I care about stuff, you know. I was one of the guys that would always do something every day, working out kind of wise. You know, I'm kind of an engineer. I've done a lot with computers, I've done everything. I have an engineer's way of thinking and going, "There has to be something better," or "That's pretty cool," or whatever. I saw all of what Fraizer had, and the best thing I saw were these little football things that were pretty good, but they wouldn't stay on my hands very good.

Shane: Sometimes I'm too much detail, so I tend to go on. But, what that means when you're a cervical level, that's what "C" stands for, cervical, and at level 6, you typically are paralyzed from the nipples down, and you don't have any finger function. You have your wrists, but you don't have your fingers.

Michael: So you can bend your hand at the wrist?

Shane: Oh yeah. I got full wrists.

Michael: And is it strong?

Shane: No, of course not. I call it the fence line. They're on the property line, the fence line of the injury. Anything on that property line,

where that spinal cord lost it's blood, and that's basically it. Very few people have it severed, most of it just gets some blood cut off. I got all of my blood cut off for a couple of hours, and that was all she wrote. The spinal cord was dead from there down for forever.

Michael: Do your forearms and you biceps and triceps atrophy, or are those still...?

Shane: Of course, of course. You think about it, you know, this is where I think we could work together. If you want a business opportunity, I'm looking for business opportunities.

Michael: Okay.

Shane: I think we could work good together, because I used to work out. I had gym memberships forever, and I know stuff, you know.

Michael: Yeah.

Shane: If you think about it, once you lose your fingers, I hate it. I've got this big chest, I've got these arms, and I've got these little damn hands, because I can't do anything with them.

Michael: Yeah.

Shane: And so you can't grab ahold of anything, and what happens is, you just don't do anything with them. Your forehands become little, you know, your arms become little.

Michael: Yeah, because you can't work your...you need your hands to grab onto something, to give it some resistance.

Shane: Everything. If you start using regular weights, you're just going to get hurt, you're going to drop it.

Michael: I mean, but how could you? You couldn't use a regular weight, could you?

Shane: No. No, you can't. You have those...I hate them, but the Velcro stuff, you Velcro them to your wrist.

Michael: Yes.

Shane: And here's the difference. That extra distance is the difference.

Michael: That's right.

Shane: Moving from the wrist to the knuckles and the fingers, because I'm going to the fingers, really. I use my hands a lot, because I tinker with stuff, so people think I'm a para - it's like a magic trick. My hands are so limber because I use them for so much stuff, because I work on computers and I work on wood stuff, you know, that's how I stay healthy. So, these things, my hands, are just fantastic, and I've been putting off using them

because I've been doing other stuff. I just now reached a point in my life, I guess, where I can start focusing on this and when I start using them, I can make you videos, you know, I can try to sell these things. I love them. I would sell them just to find out more about them and maybe buy some.

Michael: Sure.

Shane: I don't have that much money - hell, I'm just trying to get my life back together.

Michael: I understand.

Shane: I could go to these...Fraizer, we have a lot of places around here, and I know the people that work at the gyms. I swear by these things. If they are...the rehabilitation places that I've been. I also went to another physical therapy place that was kind of a sister place to Fraizer. That was the University of Louisville, where Fraizer was at, and it's always good to get a second physical therapist or occupational therapist and run through them for a while. These people weren't even spinal injury cord related, because I was trying to get my hands - as much function back as I could with my hands. These guys were more hand specialists, and they didn't even have these things. You know, my mom pulled them out of a closet and these are the old ones I was telling you about, that are kind of the foam, bluish-green.

Michael: Yep, I know what you're talking about.

Shane: Okay, and they had the plastic rubber, they have twos, so I guess they're half pounds.

Michael: That's right.

Shane: I'm way stronger than that now.

Michael: Okay, so tell me. You put those on your hand. Can you wrap your fingers around the bar?

Shane: No. No, my fingers do not move at all.

Michael: They don't move at all.

Shane: The only way to move them is through this way...it's called tenodesis, and don't even ask me how to spell it, but it's pronounced tenodesis. If you Google it, I'm sure you could find it.

Michael: I read about it. It's where you move your ligaments.

Shane: Yeah, and I didn't have any kind of surgery or anything, no. Because you can have some advanced surgery where they shorten...I didn't do any of that kind of stuff. I'm just good at bending my wrist and my hand will close pretty well.

Michael: Yeah, okay.

Shane: And so I have just the right amount of limber, but yet still rigid enough to grab stuff. I just push my hand through it. My fingers just kind of naturally wrap around it. I can bend over. I'm in a manual chair, and I can bend over. One of the best exercises is I just bend over rows, they're called, you know?

Michael: Yeah.

Shane: I got to say, I love dumbbells, barbells. When I was up in my prime, when I was in maybe my early 30s, I was working out pretty heavy with some guys. I never bench pressed 350. I always wanted 350, I could never get it. I could squat 405 and I could bend 405, to give you an idea where I was at. I'm familiar with weights.

Michael: Yeah.

Shane: So, when I put these things on, because they are a help since back when I was working out like normal, and I just love them.

Michael: Alright, so it gave you the ability, I mean I know you only have two pounds, and that's not a lot, but you could put additional weight on there as long as you could do your row and have it not slip off your hands.

Shane: And it doesn't, because I use my wrist. I tilt my wrist up, and so probably the best exercise of them all when it comes down to it is just sitting there watching TV and I can have these things on and just work my wrists up and down.

Michael: Yeah.

Shane: Working my forearms up, working my forearms on the bottom, and that's the main thing that somebody like me, you know, would want to do with these things, at the very minimum, because it makes you have so much more ability to grab things, to do things, to transfer, you know. I think when you leave the hospital, you should be given these things, to be honest with you. If you are [Inaudible 00:13:43] and you don't have these things, you don't use them every day, you're silly. You're missing out.

Michael: Okay.

Shane: I could even like...you can even take the weights off yourself. I can. All I do is put my mouth on it and kind of turn it and wedge it up. I would like all of the weights to be rubber-coated, personally. I don't know if...that's one thing I wanted to ask you, because I saw your new weights now are...

Michael: Yeah, they're metal. Okay. Rubber-coated, so you can maybe get them in your mouth, or they have some grip to them?

Shane: Yeah. That's exactly right. I do a lot of things with my mouth and with my chin, I put stuff on. Metal would probably hurt my legs.

Michael: Yeah.

Shane: So any sharp edges and metal don't go good with my legs. That's what happens, I end up leaving these in my lap when I'm doing something, and I worry about my gonads and my...

Michael: Yeah, that makes sense. So, they would have to be kind of soft so you could work with them.

Shane: They don't have to be, but it would make things more pleasant.

Michael: Yeah, I understand. Okay.

Shane: Is there an option to put a rubber-coating on them? Like a rubber-coating on the weights you already have, would be fine.

Michael: Sure.

Shane: It would make them a little heavier, but that would be fine too. I personally wouldn't care if it was a little off on the weight, and you take the weights you have and put a little more weight by the rubber-coating, I think it would be fine just for special needs.

Michael: Yeah.

Shane: Special needs type stuff. But, like, we've got...what made me get these out of the closet is that it's so easy for people to do stuff for you. That's what happens to most people in my position, and it takes so long to do everything and it's so hard to do everything, you usually end up having someone do something for you, because everybody is in a hurry, and they

just want to do it for you, you know. “Here, let me get that for you.” I’m trying to get my life back together, trying to figure out what to do now, and I had this epiphany to go and play wheelchair rugby, you know. I said heck, I’m going to do it. I’m going to move to Austin, Texas, and I want to get myself in shape. I know with the shape that I’m in, that I can go there and I can get on that team. I’m learning the point systems, how the rugby wheelchair system works and stuff. There’s a point system. It’s based on your level of disability.

Michael: Yeah.

Shane: I know it burns like hell, but I can go there with a little bit of physical conditioning of my own, I guarantee I can make that team and even be a good player on that team. That’s what I’m going to do. So, that’s why I got these weights out and I swear, with these weights, I don’t know what else...let me back up a little bit, because I’ve been at these gyms at Fraizer, and that gym has special equipment from Europe someplace. It wasn’t Germany...I want to say Germany, but someplace like that, like Scandinavia. It was special wheelchair, disabled people equipment, type stuff. Still, I couldn’t halfway get into any of the stuff, you had to have someone still help you to adjust it. I mean, I went over to the cable pools, I found these things you could put around your wrists, these rings.

Michael: Yeah, for the cable pools?

Shane: Yep, and so I spend a lot of time doing that, but still. I got to the point where I could get onto it and hook myself up to it, but look how cumbersome it is, and look how hard it is. You start to have a gym. Who is going to buy that kind of equipment, you know, if you have it at your house? I literally could not figure out

what to do to work out, and then my Mom brought these things out. I didn't really take them serious, and once I did, I was like, "These things are beautiful!"

Michael: Because not only can you work your wrist, but you can do your whole upper - you can do your shoulders, wherever you can move your arms.

Shane: Here's the thing. I do military presses with them individually, and I get...my shoulders are on fire. The shoulders are my new everything.

Michael: Yeah.

Shane: Because my shoulders connect me to my chair, connect me to everything I do.

Michael: What do you mean by that, they connect you to your chair?

Shane: Well, they do everything. Like, when you grab...if you're in a wheelchair by yourself and your hands work, when you grab your wheels, you grab them, and you have a grip on them.

Michael: Yeah.

Shane: It's completely different. Your biceps can do stuff, your triceps can do stuff, your wrists can do things. Try this. Take a 2x4 using a chopstick. Try pushing your wheelchair with a 2x4 or a chopstick. You're not really grabbing it.

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Michael: Yeah.

Shane: It is so hard on your shoulder, because you almost have...all that friction of whatever you're pushing with has to come from your shoulder.

Michael: I see. So, you're using like the palm by your wrist to push off with your arm and shoulder?

Shane: Exactly. Whatever I can get leverage on, you know, if I can't grip it...my wheel has a rubber-coating on it to give me a little more grip, and that's what wheelchair people do. They have a spray that they spray on their hands when they touch stuff to give them extra grip and all that kind of stuff. The thing is, my shoulders are my million dollar body part now. I guess that's what I was trying to say.

Michael: Yeah.

Shane: And how these guys hurt their shoulders is they'll spend all day doing nothing and then they'll want to go transfer to the bed or transfer to their car, and they're going to rip their shoulders apart. These things right here will prevent that.

Michael: So, that happens a lot?

Shane: Oh yeah. That's usually the death - not the death, I just say that figuratively, but...

Michael: The death of mobility.

Shane: Yeah, you either have a shoulder injury, and then how do you ever repair that? You end up going into an electric chair or you go into a bed, and then, you can't move around because it's your shoulder, and once you go back into your chair, your shoulder hurts, and you can't do this and you can't do that. I've always believed in physical therapy. People tell me, "Oh, my back hurts and I'm going to go to the doctor." I'm like, "No. Go exercise. Get up off the couch. Go outside."

Michael: Yeah.

Shane: You know, that is the best preventative, is exercise. I've always said, an active back is a happy back. I've always said that to people.

Michael: Yeah. So, tell me how many times did you see this shoulder injury and when did you start realizing that this is a really common place?

Shane: Oh, they tell you about it. There happened to be, the year I got out of inpatient, it was...I had my accident in basically the beginning of 2013, the end of 2012, so I was...in 2013-2014, Louisville, Kentucky hosted the national championships for the quad rugby teams for the United States, and so I got to see a lot of guys that had made I guess...had done something different. Most guys just go home and do nothing, you know. After something like this, they give up, they don't really do anything. People at home take care of them and they just die. If

you start trying to do stuff, what happens is, usually, I hate to be short and blunt, but people are too stupid and they end up hurting their shoulders.

Michael: Yeah.

Shane: That's why I got these. I had a powerchair because I started out even weaker. In addition to my spinal cord injury, I also had a shoulder injury that happened at the same time but it was unrelated. It was called a brachial plexus stretch, which is basically the nerves that come out of your spine that go down to your shoulder, mine got stretched real bad, but those grow back.

Michael: Okay.

Shane: So basically, I had no right triceps - I was right handed, and I had no right triceps and no right wrist pulling up. Like, if you turn your hand, like your palm upward, I had no wrist going upward. I had my wrist going backwards, like my knuckles up. That injury heals at about a centimeter a month, a natural healing.

Michael: Yep.

Shane: So, you have to get used to it. I got my tricep back a couple years ago and I've been working it, and now I'm starting to get that wrist back. I'm using your Heavy Hands now that that right wrist is coming back, and it's made a difference. You end up not using it because you couldn't use it.

Michael: Yeah.

Shane: You put something on there - I don't know anything else like this that you can put on your hand like that, that's this easy to put on. You don't have to tape it, you don't have to stretch a belt, I just lay my hand in it. I'll leave it on. I can even move my wheelchair with this thing on. I'll leave them on, I'll take them off to do other stuff.

Michael: Okay. Alright, that is interesting. Do you have any idea how many spinal injuries similar to yours there are?

Shane: Oh, jeez. You would not believe. Fraizer is a place, one of the big ones. Fraizer, Kessler, oh God, there's a bunch. When I was in there myself, there's an entire floor of this hospital. It's called the tenth floor, and there's how many rooms? At least 20 rooms on floor of all spinal cord injuries.

Michael: Yeah.

Shane: It was full of people at all times. I was lucky to get in there. I had to fight to get in there.

Michael: How many months were you there?

Shane: They don't keep you over five or six unless it's special. They want to get you in and get you into outpatient, so you're usually there maybe four months - I'm sorry, four weeks. So, they usually keep you there four, five, or six weeks.

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Michael: And do they put you through classes to try to retrain you how to...?

Shane: They have a gym there. There's so many opportunities that I cannot believe these Heavy Hands are not in there yet, to be honest with you. There's so many opportunities for these to be there along the way, because there's a little gym outside of the inpatients, there's a gym inside the outpatients, a completely separate floor. There's a gym that's on an entire different floor that you pay for. You pay 50 bucks a month to join. They have a gym on the sixth floor for other things. I mean, there's a gym, gym, gym. I swear to you, if I go up there with these, the people I know up there, I swear to God I could sell them.

Michael: Okay.

Shane: I don't know how I couldn't. It's one of these things that would sell themselves, you know? I love them that much.

Michael: Let me ask you this. Is there a way...Let me ask you this. Since your injury, did you get on any kind of mailing list where you're sent direct mail for spinal injury-related services or benefits or anything like...? Are there people out there who are targeting people who have had spinal cord injuries specifically, where you've seen marketing towards yourself through direct mail?

Shane: Not that I know of. I don't really get direct mail. I don't know if I'm the right person to answer that question.

Michael: No, I'm just wondering if you ever got anything in the mail and you're like, "Hey, how the hell do they know I have a spinal cord injury?" You know what I mean? Just off the top of your head.

Shane: I don't get much mail. I really don't.

Michael: Alright.

Shane: So honestly, I would have to say no, but I don't know if that's because I just don't get much mail.

Michael: Okay.

Shane: Now, I know there's a lot of things out there. I see them posted places that people are trying to do things and whatever. I pretty much keep my information to myself.

Michael: Okay.

Shane: I don't give my information out.

Michael: Alright. So, let me try and understand. Let's just say I'm the buyer of...let's say I'm at the hospital and I'm the guy that owns the gym, and you're going to come up and see me and you're going to show me these things. What would you say to me? Just in your normal conversation, you're going to say, "Hey." How would you pitch it to me, just based on what you know about your injury and all the injuries of the guys coming into that gym. What would you say?

Shane: I would have one of these in my lap and just hold it out in front of me and ask them if they've ever seen it before. If anybody knows anything about physical exercise and knows anything about somebody that is a spinal cord injury, this thing will sell itself. That's the first thing. I would have this in my lap, I would show it to them, I'd say, "This thing will revolutionize your physical therapy. I guarantee my name to it." That's what I would tell them.

Michael: Alright. So if I were to say, "Shane, what is it?" Let's say I don't know much about spinal cord injury, and I say, "Shane, what's so special about that and why is it going to help my patient?"

Shane: I'd show them. I'd put it on and show them. The proof is in the pudding. They can look at my hands. They can look at my forearms, and I would say, "This is what did it," because there's nothing else in the world that can do it. You know, what I was doing before this was I was using one hand on top of the other hand, just using that as friction, weight, and I was trying to think, "How the heck can I do this easier?" I don't know why...I kicked myself I hadn't pulled it off the shelf sooner.

Michael: Because if you don't have any weight in your hand, you can't work your forearms.

Shane: No. That's exactly right. Your forearms get weaker and smaller.

Michael: I'm just thinking, is there any other way to work your forearm if you don't have any resistance in your hand?

Shane: When I'm doing push-ups, it's kind of working them.

Michael: Yeah, but that's not really...

Shane: Yeah, it's more balance. Then, when I'm picking things up. I have to pick things up by lifting my wrist with my knuckles towards the ceiling because that's usually a better way to pick things up because you can kind of make a proper angle. So really, you're not. It's like you don't use them very much and your arms get weaker, they get smaller, and then you do less. It's just...I'll tell somebody, "Do you want to decompose? Do you want to waste away to nothing? Do you want your mom to always have to do this for you? Then if you do, then don't use these. You don't need it. If you want to actually be independent and to pick up things on your own and you want to be able to transfer to your car, you want to be able to transfer to the toilet, then use these."

Michael: Yeah. You've got to, because the only thing you've got left is your arms.

Shane: These things aren't...I don't have to sell these things to the people. I mean, if you show these to anybody...I guess if you show these to a market where people have hands, I don't know.

Michael: Yeah.

Shane: But I call it the people who just don't have hands, and they put these things on, or anybody, if their mother puts them on, or if their brother puts them on, or...they're going to be like, "Holy crap!"

Michael: So you gave me an idea of an improvement based on your situation because you sometimes need to use your chin and your mouth to change the weights. What other...how else...you're a tinkerer. How else would you improve this for your specific use?

Shane: The only ones I have are the ones I told you about.

Michael: Yeah.

Shane: They're AMS.

Michael: AMS, yeah.

Shane: Right. It seems like the handle is a little bit flexible, so I can make it a little tighter and looser just by kind of pushing it inward and outward. That's a great feature if it's able to do that. You see what I'm saying? Because people's hands are going to be different sizes, and even my hands. It's going to get bigger and smaller and it starts sliding down. If you can push that handle together to make it kind of a little bit tighter and then push your hand through, that would be great because you're going to have adolescents, you're going to have big old men, you're going to have females, you know. Some way to adjust that tension on that handle.

Michael: Yeah.

Shane: I think what makes this thing so revolutionary, so beautiful, is it's so easy to use. You slide your hand in it and you use it. Why would you not?

Michael: Alright. Did you go to my website, <http://www.WeightedHands.com>?

Shane: I looked under Heavy Hands. Here's a funny story.

Michael: Yeah.

Shane: Actually, when I was first given these, I didn't even have my computer. I think I was given these in the hospital. I've got to give my mom credit, I think she brought them to me in the hospital. I was looking up Heavy Hands then and I kind of put it on the backburner because I couldn't figure out what I wanted to figure out. Now that I got them back off the shelf, I was able to get on my computer and look at this stuff, but yeah, I went to Heavy Hands and I saw where it had your number a couple times, and I saw that it had your name and your number.

Michael: See, I upgraded the product from what you have. I have an upgrade with the...

Shane: Yeah, with the ergonomic...

Michael: Yeah, you saw that? You saw the ergonomic grip and that backhand strap?

Shane: I don't know if I noticed the strap, because is it fiber or...?

Michael: It's different. It's like it's flexible, so it wraps. First of all, there's some give to it. Now, I custom make it for the users hands, so I ask, "Do you have extra small hands, small hands, medium, large?" So, I custom cut that back strap to fit your hands. So, what you have, inside that foam is a piece of aluminum. It's hard, you know? And I have...mine is flexible. There's a piece of metal in there, but it's flexible, so when you slide your hand into it, it's covering evenly the back of your hand so I can get you a really tight fit, where it's holding onto more of your hand rather than what you have, maybe there's more pressure at the top of your hand rather than on the sides. If you go back to the site, you can look at how my strap is different and how it works.

Shane: Okay, I'll do that.

Michael: So, I'm thinking, someone in your situation, you want these things obviously with the...you push your hand in there, and once it's behind your knuckles that's going to help them stay on, but if you wanted to add some additional weight, let's say you had ten pounds, or five pounds on each side, so you've got 11 pounds in each hand, and you can't really grip, but I mean...would you think if you had 11 pounds on those you could do your rows with them and do some stuff?

Shane: Absolutely. I'd use my wrist angled up toward the ceiling and slide them off. That's what I have to do, with any weight that they have.

Michael: Okay.

Shane: Except for the kind that Velcro around your wrist.

Michael: The wrist weights, right.

Shane: I just don't like those. They're not down far enough, they slide, you know. I just...my arms are longer. I'm 6'3", so you put those things on your arms, they slide down, and you're not really getting the leverage and stuff.

Michael: Yeah.

Shane: And you're not getting - not you, when I say the word "you," I don't mean you, but the people. People would be missing the whole point when they...I don't know what the comparison is, to be honest with you. Like those Velcro ankle weight things that you have at most places, they're not on your...they're connected to a different part of the body. It may seem like it's only a couple of inches, but it's a couple of joints. It's a wrist, it's a knuckle. It's a big difference between...the further you can put them out on your hand like that and secure the grip, the better.

Michael: Alright, so check this out. I want to read you this email that I got from this guy. It was sent three days ago. So his name is Shawn Hogan, okay? So he goes,

"Hello Michael. My name is Shawn and I'm interested in getting a set of Weighted Hands. I'm a C6,C7 quadriplegic which is to say that I have movement of my arms, but not voluntary movement of my fingers - no grip. I've been using a set of Heavy Hands which has worked great, but I'm interested in your product for two reasons. One, I need more weight than my

set came with, and two, I volunteer at a rehab hospital for spinal cord injuries, CSI, and I would like to try your product out before endorsing it for the hospital. If it works like I think it will, this system of weights could significantly enhance rehabilitation and the effectiveness of exercise for those with SCI. The material that the Weighted Hands are made of...”

Shane: Mike, are you there?

Michael: Oh, can you hear me now? Can you hear me?

Shane: I lost you there.

Michael: Can you hear me now?

Shane: I can hear you now.

Michael: Alright, okay.

Shane: As your point of...yeah, when he was saying that they worked out...

Michael: Yeah, so he volunteers at a rehab hospital for spinal cord injuries, CSI.

“I’d like to try your product before endorsing it to the hospital. If it works like I think it will, this system of weights could significantly enhance rehabilitation and the effectiveness of exercise those with CSI. I also think that the material the Weighted Hands are made of would be better than the foam-

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like coating that is on other weights since it is necessary to clean equipment periodically in a hospital environment, something you can't do with products like Heavy Hands. Please let me know if you have any input.

Shane: I agree. Let me pause you. I agree with that foam part wholeheartedly. You know, the foam is not going to...it's not a clean, hospital-type material, and he did a great job finding the words. Yeah, I agree with everything he said.

Michael: Have you heard of CSI?

Shane: SCI?

Michael: Oh, SCI. Spinal cord...my bad, I thought that was an actual rehabilitation place. Okay, spinal cord injuries. Got it.

Shane: I think that's what he meant. I don't know.

Michael: Okay. Interesting. Okay, okay. Wow, this is definitely very interesting. Alright, so what are you thinking of? What do you want to do? You've got two pounds in each hand, what would you ideally like to do?

Shane: You know, like I said Michael, the only thing I want to do is to call you because I was interested in maybe...if you want to do more, we can do whatever you want to do.

Michael: Yeah. So when are you planning on moving?

Shane: Well, now, where I'm at right now in Kentucky, I already have an in at the place because I was there. I was there in therapy and I know the people. One of the guys that was the main guy there that was in the actual therapy when I was on the treadmill, that was doing the stepping, he's been there for like 15 years, and he's moved up. He's head of the gym now.

Michael: Okay.

Shane: And he's, like I said, kind of my buddy. I don't know why he wouldn't buy them. I don't know why he wouldn't. I would have...I know Fraizer, I know I could sell some. If I couldn't sell some, I don't know where I'd be wrong. But now, at the very minimum, I just want to get a couple of pounds for myself for the ones I have, you know. If that's the bare minimum I have to do today, I'm willing to buy some for this.

Michael: Okay.

Shane: I'm stronger than these.

Michael: Okay.

Shane: So, at the bare minimum, if you wanted me to demo something, like your new handle with some weights, I would definitely be receptive.

Michael: Okay. Alright. Why don't you do this. Tell you what. You've got two pounds in each hand. If you could get one weight, one additional weight increment, what would you like? Three

pounds, four pounds in each hand? Five pounds in each hand?
What's ideal?

Shane: I don't want to bite off more than I can chew. I don't know.

Michael: Well, you're at two pounds in each hand. I mean, do you think you've got to work it up incrementally?

Shane: No, because there's so many different exercises.

Michael: I know. You could have...I mean, unless you're doing a lot of reps, and that's a good way to go. Even with two pounds, if you keep doing your overhead press, you're going to feel the burn, you know what I mean?

Shane: Oh, especially when I do a single arm. What happens with my spine is...it's probably consistent with other guys' spines too. When your spine starts moving left and right, you start getting spasms.

Michael: Yeah.

Shane: Your body starts going kind of crazy. So, I can be in my chair and I'll put my left arm up to the ceiling and I'll put my right arm down. I'll do it vice versa, like a stair-stepper kind of thing.

Michael: Yeah.

Shane: I get a cardiovascular workout you wouldn't believe. So, the two pounds I have now are great. They're not going to be useless. I'm just wanting to do some things that can be...like my biceps, my triceps. They're a lot stronger than the two pounds, so that's why. You're talking about individual weights, like four pounds?

Michael: No, I'm just talking...you think in terms of pounds in each hand, so just relate it. You've got two pounds in each hand now.

Shane: Right.

Michael: So, if I set you up with a set of my ergonomic grips, which are a pound and a half, so if I set you up with a set of ergonomic grips and some one pounders, that would give you three and a half pounds in each hand, or I could give you one and a half pound weights, which would give you four and a half pounds in each hand. I think you could do it. I mean, you should be able to do four and a half...

Shane: I don't think I'll have any problems.

Michael: No, you're better off going heavier than lighter, because you just do less of them.

Shane: I think you're right, because I'm going to grow. Like, what I was telling you, my belief of the physical body is that my muscles are there, I just have to wake them up. I've had four years of atrophy, pretty much, and I need to wake my body up. I'm going to outgrow, hopefully, whatever it is pretty soon. So, I guess whatever you think. Push me a little bit.

Michael: Alright.

Shane: I guess the only thing...I want to take this with me to Fraizer, so I don't want them too heavy for me to carry, but I want them...I'm kind of thinking out loud here.

Michael: Well, if I send you some grips, you can always put...unscrew, or get someone to help you unscrew the number twos that you have on there, and put them on my grips. So, what I'm willing to do, I'll send you a set of my grips, I'll send you a set of one and a half pound weights, okay?

Shane: Okay.

Michael: You get them. I want you to promise me you'll shoot me some video of you using them, okay? And I want you to tell me how they feel, and I'd like you to physically take them up to Fraizer, and if you can sell, I'll give you a pricing sheet and give you an idea of what you can sell them for, I'll pay you a commission on anything you sell. And, if you want, you're welcome...if you like that and that's something you want to do, whether you get on the phone, you've got my website as a tool, you know, you're talking their language when you call the physical therapist or when you call the gym owner or whoever is handling rehabilitation, you know? You say your name, you say you're a quadriplegic and you've just discovered a device that is helping you mentally and you want to share it with, and sell it. You're intelligent. You just share it, and if you want to work on a commission basis, I think there's a lot of money to be made, and I'll supply the orders and work with you.

Shane: I'll tell you what Michael. I am not a salesman, but there's things in life that I'm passionate about.

Michael: Right. You don't have to be a salesman. You just share it, that's all.

Shane: Right. This is one of the few things that I think if I don't take the opportunity, because I know there's a hole, there's a market for this, that I love it so much. I'm just out of rehab. I want to go to these places and sell it. It'd be ridiculous if I didn't. They need it, and I know somebody's going to do it. It might as well be me.

Michael: Alright.

Shane: I think it'd be a great opportunity for [Inaudible 00:44:51] and the people...I think there'd be so much benefit from it at the rehab places. I swear by it. I never could understand why they didn't have anything. Maybe they just didn't know.

Michael: They may just not know. So in rehab, what were their ideas for you as a patient to maintain your muscle mass in your forearm?

Shane: The only thing that they had were these kind of...well, they had the wrist weights, and then they had the regular barbells, and typically what they did with those little barbells, they would take some tape and tape them to your hands.

Michael: You're kidding. They'd tape them?

Shane: Yeah, They'd tape them to your hands.

Michael: Okay.

Shane: They'd wallow, kind of wallow around, or fell off. It was ridiculous. It was kind of a joke. And like I said, there were these footballs that were weighted that kind of fit in your hand pretty good. They were just big old footballs. Heavy Hands does it much, much, much better.

Michael: Okay. So, they'd put a weighted football in your hand and tell you to work with those, right?

Shane: Yeah, right. And they had a little strap that you would strap to your hands, I think they were Velcro, and they weren't very good. It wouldn't stay on my hand for anything.

Michael: Wow. That's pretty lame, huh?

Shane: They didn't have anything. They really didn't. And any of the equipment, you really need your hands to work it.

Michael: Yeah.

Shane: You don't need equipment for somebody like an SCI, a spinal cord injury. I'm a believer of free weights. I think...you have stabilizers, you trigger a lot of muscles, not just your biceps, you know? So, I don't really agree with us getting in...with

spinal cord injuries getting in these machines, because I think it limits our range of motion.

Michael: Yeah.

Shane: And plus, how do you have machines fit every different wheelchair and every different person? You can't. But these things, who could they not fit? You know what I'm saying? If you have your hands, if you anatomically have your hands, they will fit. You can get a great workout. Every single exercise imaginable. There's nothing you can't do. There's no body part you can't work. Backs, abs. Wonderful. Pecs, chest exercises.

Michael: Yeah.

Shane: I do these things, I call them whip exercises, with my biceps and my wrists. I kind of...I whip my arms down and up like a whip, it's great for my back.

Michael: Alright, so listen. I'm going to invest a few hundred dollars in these, because these are pretty expensive. So, when you get them, could you have somebody videotape, do some videos with your iPhone of you doing some of the exercises?

Shane: Yes. I'll do that. I've already thought about that. I want to help. I'd love to go to my church. And this is before I even thought of the Heavy Hands. I wanted to start a little exercise kind of thing at my church.

Michael: Yeah.

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Shane: I want to help people. I feel like it's all in the attitude, you have to share with people.

Michael: Yeah, absolutely.

Shane: There's this lady there who's about 20 years older than me who's going to a surgery and she's overweight and I said all she needs to do is have a way, and it's a mentality, you know, paradigms, and just make it a way of life. That's what I think about the Heavy Hands, is they're sitting on my bed right now. I can take them to bed with me. I can put them in my chair with me. They make me feel so much stronger, they're so easy to use. That's what I was trying to say earlier. I'm not a salesman when it comes to things. These things, I just believe...if you want to be healthy, I mean, it's kind of what I was saying. I can't imagine not using them.

Michael: I mean, I'm just thinking. You're going through physical therapy, what the hell, what physical therapy could a spinal cord patient actually do, you know, that's substantial, if you have no grip work?

Shane: Like I was telling you, I got myself in a position....I was able to hook myself up. There were these Velcro wrist straps that had a D-ring on them, and I hooked myself to the cable crossovers, and that's about the only thing that I could do that was worth any kind of weight.

Michael: I got you. So, listen. So, the sad thing is, you have spinal cord injury patients who give up because they don't believe there's

any kind of exercise they can do because they've lost the use of their hand, and what they end up ultimately doing is going home and just sitting and atrophying and they become reliant on someone to take care of them for the rest of their life.

Shane: That's exactly right.

Michael: So it doesn't have to be like that. So, now there's a tool that any spinal cord patient - I say your situation - who loses the ability of his hand, can now maintain and exercise his forearm and bicep and shoulders and lats and do all the range of exercises and stay strong and healthy and be not dependent on anyone and take care of themselves for the rest of their life.

Shane: Exactly right, Michael.

Michael: That's the difference. One tool.

Shane: You know, that's what the thing is. I don't know why there can't be a paradigm shift in the physical therapy world. There is a grandeur...we're talking a kind of grandeur, but I really love the Heavy Hands. I'm an engineer by trade, I'm a computer geek, I know stuff, I research stuff, and I can foresee things. I kind of know when things happen.

Michael: Yeah.

Shane: All that equipment they had in those therapy rooms, what good are they? They don't want us there. They want us to go home so the next patient can come through, right?

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Michael: Yeah.

Shane: But what do we do when we go home? Insurance is not going to buy...if you're over 21, insurance will not buy you stuff. [Inaudible 00:51:50] is the only thing that insurance will buy if you're under 21. It's a thing you stand in that you get into, it helps you stand up.

Michael: Yeah.

Shane: You can kind of exercise in it, but that's about the only thing they'll buy. It's good, but for people like me, we can't have that stuff, so we go home, and unless we go to a gym...and we don't want to go to a gym, because nobody...people stare at us, we can't use the equipment. That kind of stuff.

Michael: Yeah.

Shane: And who has the money to buy their own, and how do you use it? So, when you're at home, what do you do? I've just been doing push-ups over my bed, like I'll lean over in my wheelchair and do push-ups off my bed. I'll pick up some things and do some curls that will go over me, like with a shopping bag, I'll pick up a shopping bag.

Michael: Yeah.

Shane: Stuff like that. It hurts my system.

Michael: Alright, sorry to interrupt. I'm just thinking, so you're C4, C5, C6, so what...

Shane: I'm the other direction, C6, C7, C8, but yeah.

Michael: Oh, C6, 7, 8. So, what spinal cord injuries would these not work for? I guess someone who loses the ability of their arms, right?

Shane: 6, where I am, I'm 6, and I've lost, you know, a little bit of wrist I guess you can say, I'm starting to go up through my arms. I don't feel my tricep. I don't feel them, but I can use them. I can feel my biceps. If I hold my hands straight out, with my thumbs towards the ceiling, and you take a pencil and you go down the middle of my arms, the middle of my hand, and across my nipples, that's kind of where my property line is, and that's dictated by spinal cord injury level. If you're even like a half inch higher, I would have lost my wrists completely, I probably would have lost my triceps completely, I would have maintained my biceps. So, I think a C5, which is a level above me, I think, I don't know this, but they still have biceps but not triceps. What happens is too, you get incomplete, and so it's hard to answer that question fully.

Michael: Okay.

Shane: You can get someone that has a higher level, C4, but they're incomplete and they can do more stuff than me. So, they would benefit from it even though they're technically a higher level of injury, but they didn't get all the blood cut off to it, they didn't injure their spinal cord as much. But, yeah, to answer your

question, you know, honestly, some guys do push-ups with just their shoulders. They don't even have any biceps or triceps. They use just their shoulders to do stuff. So, I guess even if you didn't have biceps and triceps you could still benefit from these things, their shoulders.

Michael: Okay. Alright, great. So why don't you...so, you have a computer now and you're emailing? You're able to email and everything, or is it just...?

Shane: No, yeah, I'm a computer junkie.

Michael: Okay, so why don't you...I want you to send me an email with all your information, your shipping address and everything, okay?

Shane: Okay.

Michael: And I'll get you some gear out, I'll get it to you, and once you get it, let's talk on the phone and we'll see how it fits, and we'll just take it from there.

Shane: I'm excited. I think it'll be good for both of us.

Michael: Alright, great. I'm willing to give it a go.

Shane: I appreciate it. I appreciate the opportunity.

Michael: Well, thank you for the opportunity and sharing your story. I really appreciate it. So look, you go to...go check out my <http://www.WeightedHands.com>. That's my main website. There's this big old muscle there. Yeah, go to my <http://www.WeightedHands.com> website.

Shane: I'm still here, I can hear you now though.

Michael: How about now, can you hear me now? Can you hear me now?

Shane: You are back. You are back.

Michael: Okay. Go to my <http://www.WeightedHands.com> website.

Shane: Okay.

Michael: Shane, give me your email address.

Shane: That's probably the easiest. I've got a real easy email address. I got my own DNS name. My first name's Shane, and it's @, full letters, KMSR.

Michael: M as in Michael?

Shane: Yes.

Michael: KMSR.

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Shane: I picked...actually, it was my mother's initials and my initials.

Michael: Okay.

Shane: But yeah. KMSR.net. I couldn't find a .com.

Michael: That's okay. I got it. Alright, now I'll shoot you an email with a link to my Weighted Hands, and then you reply back with your mailing address, okay?

Shane: Okay. Can I have a little bit of time? I have to use the restroom again.

Michael: Yeah, whenever you are ready. Whenever. Later, tonight, whenever. I'm going to email you now, and you'll have my email.

Shane: Great.

Michael: Alright, man.

Shane: I'm going to give you a little bite to eat.

Michael: Okay.

Shane: My whole life, trying to be independent, it takes my whole life just trying to support myself, I swear. But, I don't want to overstate it, but I swear, these Heavy Hands make everything I do easier.

Michael: Alright.

Shane: Getting in the refrigerator, because like, my shoulders hold my whole body up. Everything I do, it's like a three-point...anytime I lean over, I'm holding myself up with my hands, because like I say, it's a magic trick of sorts. After a while, I can be at a dining room table for a while, and my shoulders just start to lean. The whole thing is is that normal people, and this is what I should be telling you, is that normal spinal cord injuries, they hurt their shoulders because they're doing static pressure all the time, they're not getting a proper range of motion.

Michael: Yeah.

Shane: When you use Heavy Hands, you turn your shoulders that are problematic. People think, "Oh, I've been working my shoulders all day." I'm like, "No you haven't. You've been abusing them all day." Put these Heavy Hands on and get proper range of motion, and get blood and stuff into your shoulders, and you'll have much stronger and better shoulders. Anyway.

Michael: No, that's well-stated. That's important. Any other ideas you have man, just email them to me. If you get a brain idea on your mind, just hop on and email me. I'm emailing you right now, so the subject line says, "Shane, get me your mailing address," and you'll have all my information down there, my number and my email and my website and all that, okay?

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Shane: I'm excited, Michael. I know we've been talking for an hour, I've got to pee.

Michael: Alright, go. I'm excited too.

Shane: I'm going to Texas, and if those guys...I can't see how in a training camp for wheelchair rugby, why these would not be extremely important.

Michael: Oh, yeah. Oh, absolutely.

Shane: Alright Michael.

Michael: Alright, thank you. Alright Shane, take it easy.

[END OF RECORDED AUDIO]

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