

A WELCOA | Expert Interview



Joe Quatrochi, PhD

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# When Illness Comes

## A Remarkable Story of One Man's Persistence In His Battle With Cancer... And How It May Have Saved His Life.

**R**ecently, Dr. Joe Quatrochi, Professor of Human Performance and Sport at the Metropolitan State College of Denver sat down with WELCOA President, Dr. David Hunnicutt to discuss what happens when illness comes and what you can do to address it.

**Q** Joe, you have a great story and experience from the standpoint that cancer has affected your life. Tell us a little bit about the story and what happened.

I found myself in a situation in 2000 where I was probably the healthiest guy I knew, engaging in all the behaviors that I know would be health promoting and disease preventing. I was regularly physically active, watching what I ate, trying to manage my stress, and out of nowhere I got this pain in my pelvic area that was very foreign to me. When I got home that evening I did a self-exam, and sure enough I found a lump in my left testes, and it was very concerning to me. So I went to the doctor right away, and he examined me and said, "You know, Joe, I really think this is an inflammation from an infection. Don't worry about it. You'll need to



*Dr. Joe Quatrochi, Professor of Human Performance and Sport  
at the Metropolitan State College of Denver*



see the urologist and he'll look you over."

I went into the urologist and he pretty much said the same thing, but he warned me that I would need an ultrasound to kind of confirm his suspicion that it was an infection—and if the ultrasound was equivocal that I was going to need surgery. Now that's a very sobering thought when you're 38 years old and somebody talks about doing surgery in that part of your body. But I thought, okay, we'll see what happens.

So sure enough I went in for the ultrasound and I could read the body language of the tech — that she knew something was wrong, and I told her I had planned to handcarry the films right over to the doctor. She said, "Boy, that's a real good idea." So I knew right away that I was in for it. Shortly thereafter, I got a call from the doctor, and he said, "You need to cancel and clear your schedule for the next ten days because you're having surgery." So I did that and I found myself saying over and over again, "What's a guy going to do?" I mean it doesn't matter how well I took care of myself; this is something that can happen to anybody.

So I went in and had the surgery. They thought that everything was just fine and that I would be as good as new after a short period of time. My doctor told me that I could lower my risk after surgery; lower my risk of recurrence if they did a second surgery. I went into the urologist and he talked it over with me. He said, "Yeah, if we do lymph node dissection surgery, we can lower your risk from being 20% chance of recurrence to less than 1/2 of 1%." So I said, "Fine, sign me up." He said, "Not so fast, you'll want to learn about it. It's a difficult surgery and one

...they're going to try and kill that cancer, and in the process they bring you to within an inch of your life and then try and bring you back.

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that's going to require a lot of recovery. We need to essentially split you open right down the middle and take a good look to find all of those lymph nodes that are affecting or supplying that diseased testes and excise them and then put everything back in and zip you up." And again, I found myself saying, "Okay, what's a guy to do?" In my mind it was 20% versus 1/2 of 1%—so I said I'll do it.

What he didn't know at the time was that the cancer had spread to my lower abdomen and only through a subsequent pre-operative blood test did we determine that my tumor markers were really high. After surgery, they should have been normal — I just had the tumor removed. And because those tumor markers were high and my CT scans and chest x-rays were all normal, that meant that I didn't have any large tumors,

even a centimeter or larger. But I must have had hundreds of thousands of microscopic cells growing in my lower abdomen, and that would require chemotherapy. Surgery wouldn't do any good; you wouldn't be able to identify those cells.

So now I'm in the predicament of trying to understand what chemotherapy is all about. And I talked to the doctor and he reassured me and said that I was strong and I would get through it. He said, "it will be difficult; they're going to try and kill that cancer, and in the process they bring you to within an inch of your life and then try and bring you back."

So again, what's a guy to do? You can't say no. You can't go cry about it. You have to do what you have to do. So I went through all the pre-chemo counseling and learned all about what I was in for, and gosh

## About The Wellness Council of America [WELCOA]



Based in Omaha, NE, WELCOA was founded in 1987 as a national non-profit membership organization dedicated to promoting healthier life styles for all Americans, especially through health promotion initiatives at the worksite. Organizationally, WELCOA serves as an umbrella, linking communities and coalitions together into a supportive network that includes locally affiliated Wellness Councils, Well City initiatives, Well Workplaces, and individual and corporate members throughout the United States.

**Working Well** — Specifically, WELCOA focuses on building Well Workplaces—organizations that are dedicated to the health of their employees. The Well Workplace process provides business leaders and members with a structure or blue print to help their organizations build results-oriented wellness programs. Ultimately these programs help employees make better lifestyle choices, and positively impact the organization's bottom line. To date, over 700 companies have received the prestigious Well Workplace award. In addition, eight cities have been designated as Well Cities—Jacksonville, FL; Omaha, NE; Chattanooga, TN; Hobart, IN; Lincoln, NE; Kearney, NE; Kanawha Valley, WV; and Gainesville, FL and Bangor, ME—while several other cities have made the commitment to join this exclusive group.

**Leading Edge Wellness Information** — In addition to helping organizations build structurally sound wellness programs, WELCOA serves as a national clearinghouse and information center on worksite wellness. WELCOA responds to thousands of requests for information and materials by publishing a number of source books, a monthly newsletter read by approximately three million readers, an extensive line of brochures, as well as conducting numerous training seminars.

### Wellness Council of America [WELCOA]

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that's a very sobering situation to find yourself in. But I was resolute that I was going to be a good chemo patient, so I showed up. I had all the preliminary work done. I had a Mediport implanted in my artery. I had all the pre-chemo tests done to make sure that they'd have a baseline for me to know if anything was going wrong. Then, I went to the infusion center and sat in the infusion chair. Day after day, I would be there from eight in the morning until about three in the afternoon when they would administer one bag of IV drugs after another.

Well, the interesting part of the story, David, is that about a week into my surgery, I was reading Lance

Armstrong's book called *It's Not About The Bike*. As you know, I'm an avid cyclist and I'd say four or five of my friends gave me that book. They thought it would be inspirational to me. What I didn't realize when I was reading the book was that it was going to change my course of treatment and change my life. Had I not read that, I would be a different guy today, especially from a quality of life perspective. That's because Lance wrote in his book that when he was being treated in Austin, his doctor recommended they move him from there because they were not the best doctors in the world to treat testicular cancer. He had a very aggressive form of cancer. They told

him that he really needed to go up to the University of Indiana and see Dr. Lawrence Einhorn, who really was the absolute pioneer in the field of chemotherapy for testicular cancer. When he was a young doctor, the survival probability was only ten percent. And this is a cancer that affects young men 15-35 or so.

Well, he concocted this chemo regimen, this combination of drugs that changed the survival probability from only 10% to 90%. So when Lance went up there, he examined him. And the first thing he said was "Lance, your disease is very advanced. We need to change the chemo regimen that you're on, because if we can eradicate this cancer, those chemo drugs will absolutely decimate your lung function and your aerobic capacity and you'll never race your bike again."

Well, knowing a little bit about physiology, I was reading that book with great interest, because all the things that I like to do, recreationally, involve a superior aerobic capacity. I ride my bike and climb mountains and do those sorts of things. What was ironic, was that the combination of drugs that Lance needed to get off of were the drugs that I was being treated with. So as I'm reading, I'm thinking, gosh, I'm not Lance Armstrong, but what about my quality of life if I persist on these drugs?

So I immediately went to my doctor and explained that I was reading the book and (I asked...) will this drug affect my lung function, and do I need to think about an alternative strategy for my chemotherapy? He got just a little bit perturbed with me and said, "You know, Joe, I know you're a Ph.D. and you're a researcher and you come to



me with questions quite often and I'm happy to answer them." But he said, "This isn't a medical journal you're asking me about this time. This isn't anything other than a novel." So I said, "That's fair enough, but I really need the answer to that question — if I persist with this treatment, will it cause cumulative toxicity and fibrosis in my lungs and affect my aerobic capacity?" And he said, "I really don't know. What I do know is that this is what we need to do to treat you and to cure your cancer."

Well, that was very sobering and I walked away unsatisfied. So I started to do a lot of research to see if I could determine whether or not there might be literature that would direct me and answer my questions more directly. And I poked around and prodded on the Web and all the research journal databases that I could get my hands on. I just couldn't find the answer

to the question. So I thought maybe I can do some searching about this fellow Einhorn to see about his writings and maybe some things that he's published or said that might direct me. After an exhaustive search, I ran across a Web site where he was on the Board of Directors. And I ran across his e-mail address and I sent him an e-mail just very briefly describing my profile that I'm an athlete and I'm a professor and I have testicular cancer. I gave him a little bit of my medical history, told him that I read the book, and just asked for help. Then I inserted a paragraph that said, "Listen, I know who you are. You're the most important oncologist in the world in terms of testicular cancer. You probably don't read your own e-mail. I don't know who's reading this, but whoever you are, please have a little pity on me and send me some information, a url or an article."

Well, believe it or not, that physician did read his own e-mail and sent me a reply right away and invited me to call him in his office. There's more to the story. It would take a while to explain, but I can tell you that after a couple of attempts to reach him, I got him, and he assured me that not only did I not need to worry about this toxicity, I was going to be cured with just a few courses, three courses of this chemotherapy regimen. He went on to explain how much different my case was than Lance Armstrong's. And I was just exasperated, I was so excited to be talking to this most important physician. I was trying to get as much information as I could, knowing that he must be busy; and he calmed me down and said, "Listen, Joe, I've got time. I want to tell you about Armstrong and how you're different from him." He went on to invite me to call him back. And he told me that if



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my doctor wanted to “over treat” me, in his words, that he would intervene and all I needed to do was call him.

Well, sure enough, I went into my doctor, and explained what was going on. He was absolutely floored that I was able to speak to this most important oncologist, and my doctor said, while he didn’t mind I contacted him and he’d be happy to try and call him, he told me he believed I left out some clinically relevant details and that I shouldn’t get my hopes up.

So I was in an awkward position. I thanked my doctor and told him how much I appreciated his humility and I wasn’t trying to go over his head. I was just trying to be a good consumer and trying to help myself. But I really appreciate the fact that he would agree

to talk to Dr. Einhorn and we’d make an appointment and at the end of my third course of chemotherapy; if Dr. Einhorn felt that I was finished and that I would be as good as new, that my doctor wouldn’t stand in my way.

So sure enough, I went through all the treatments and there were so many ups and downs during that chemotherapy regimen that I was on, — many, many lessons I learned, along with many trials and tribulations. But I counted the hours to the day where we were going to meet with my physician and he would have spoken to Dr. Einhorn and I’d learn my fate. Either I’d be finished with chemotherapy or I would have to undergo additional chemotherapy which Dr. Einhorn

explained if I did more than three courses, that’s when that cumulative toxicity would occur. He explained to me and said, “Joe, you’ll never ride your bike up a mountain again. Your aerobic capacity is going to be that of a 70-75-year-old man.”

So I was really, really excited to have this meeting after all my test results were in and my physician would’ve spoken to Dr. Einhorn. I really believed that I was going to be off the hook. When I got into his office, he examined me and congratulated me and said how well I was doing and how proud he was of me. But he said, “You know, Joe, that guy Einhorn is very busy and I couldn’t reach him. So really nothing in my mind has changed. You need to start that fourth course of chemotherapy on Monday morning.”

It was devastating. I was completely caught unprepared. I was ready for him to say, “I spoke to Dr. Einhorn and you’re off the hook. You’re cured. You’re going to be as good as new.” I was also ready, not excited about it, but ready for him to say, “Dr. Einhorn and I collectively agree that you really need more of these drugs to cure you. And it’s unfortunate but we’re going to have to take our chances with the results and the side effects.” I wasn’t ready for my physician to say he hadn’t spoken to him (Dr. Einhorn).

So I took a minute to collect my thoughts; and then I kind of went out on a limb, and I explained to the doctor. I said, “I want to preface what I’m going to say by first of all, thanking you for all you’ve done for me and by acknowledging that I know you want the best for me and you’re trying to help me, trying to cure me. But I also know that if our



“Joe, if it wasn’t for your persistence, I would be over-treating all of the testicular cancer patients who come before me. And all of those folks owe a debt of gratitude to you because I’m a better doctor because of what you did.”

—Dr. Quatrochi’s Physician, after finding out that there is a better method for treating testicular cancer.

roles were reversed, I really believe you would say this to me. I said to him, “There’s no way in the world I’m starting that fourth course of chemotherapy on Monday. I’ve done all the research. I know there’s no difference in treatment outcome when we look at three versus four courses of chemotherapy. I know I have a 98% cure rate with my level of tumor marker. I just can’t do it.”

Well, he was flabbergasted and asked me what in the world I was talking about and that I must start on Monday. I said, “I can’t do it.” He said, “Joe, you’ve done all the research and you know that all these survival probabilities are based on the precise timing of the administration of these drugs. And if you don’t start on Monday, I can’t verify what’s going to happen. If we “under treat” you and the cancer comes back, you’re going to be resistant to the drugs.” So I said, “I’m sorry, I just can’t do it.” Well, he told me I was a damn fool and walked out of the room. The problem was he was going to be out of the country for the next ten days and unavailable to talk to Dr. Einhorn, so I said I’d have to meet with him in two weeks. Immediately, I got on the

horn to Dr. Einhorn’s office to find out whether I could kind of broker this conversation. There are a lot of elements to the story I’ll have to leave out, but the short version of the story is I did facilitate that. The head oncology nurse did get my doctor to call Dr. Einhorn at the appointed time when he was available. And sure enough, I got a phone call that day from my doc saying, “It took a lot of convincing, Joe, but you’re cured. Dr. Einhorn said you don’t need anything else. There’s no higher authority to appeal to. So I just need to congratulate you.”

It was the most uplifting conversation in my entire life, Dave, because I was really, really afraid of what my quality of life was going to be like after chemotherapy. To bring the story to closure, I just want to explain that when I had my first post-chemotherapy appointment with the doctor, just a routine follow-up, it was about a month after I had finished chemotherapy. I got into the office and the doctor looked me over and he said, “Listen, I need to start this conversation by thanking you. Joe, if it wasn’t for your persistence, I would be over-treating all of the testicular cancer patients who come before me.

And all of those folks owe a debt of gratitude to you because I’m a better doctor because of what you did.”

So I really feel like things worked out the way they should. I wasn’t trying to play doctor myself. I wasn’t trying to demean my physician, and he understood that and came full circle to understand that I was trying to act on my own behalf and that it was not only going to help me but it might help people who he treats subsequently. So that’s the short version of my story.

**Q Joe, it’s a really remarkable story. Let me ask you this. After all is said and done, what did you learn through the whole process?**

Gosh, I learned so many different things. One thing I think that stands out is that people have no idea what sort of support system they have and how they fit into this web of social support until they are confronted with some sort of an illness—and that there’s so much to be gained by relying on people who care about you. You don’t realize it until something like this happens. I learned that your support system is very, very strong, and oftentimes we don’t think about it and we don’t take advantage of it.

I also learned, maybe equally as importantly, that people in the health care industry are incredibly compassionate and they are such highly qualified, wonderful, professional people. My mother was a nurse, so I think I knew that already, but I also realized that they're overworked and that they are fallible, and that they have the best interest of their patients in mind, but there are only so many hours in a day to do professional development. And there are only so many hours in a day to care for the people they have to care for. So it's not a slap in the face if there's somebody looking after a patient who's not on the medical side of things to make sure there aren't mistakes — just common sense sorts of observations about medications being taken, dosages, and timing, these sorts of things. I just learned that you have to be very vigilant.

I learned that...it was reinforced to me the importance of having a positive attitude. I've known for a long time from the research that I've done that there's plenty of research to verify the authenticity of the claim that positive attitude leads to improved immune function. That's not just conjecture. I never really had a chance to put that into practice, but I'll tell you when I found myself ill, the first thing I said to myself is there's no way...I refuse to contribute to my own demise by being negative about this. And I'm going to do my best to maintain positivity because it can only help me. So those are some of things that stick out.

**Q As a result of this whole process, how is your life different today than your pre-cancer life?**

Well, on the very practical side of things, David, my professional career

has been devoted to prevention, and I feel like I'm very well versed in wellness models and the extent to which behaviors contribute to prevention of disease and promotion of health. I really wasn't very much in tune with the wellness dimensions that occur when you're in treatment for some sort of a disease. I think from a professional perspective my previous professional presentations and research interests were on disease prevention but mostly about heart disease. I didn't know much about cancer. I didn't think much about it. I was kind of snob, as a matter of fact, about cancer in my own life because I didn't believe I was at high risk. I didn't have family history of that disease. I do have family history of heart disease, so I spent a lot of time researching that and trying to spread the word about cardiovascular disease prevention.

So I think my life is different now because I try to look at what can I take from my experience and make that a positive situation. I think sharing my story with other individuals is a way to do that. I think understanding the big picture is important. It's easy to understand how *self-responsibility* and *prevention* of disease are closely linked. However, I learned, firsthand, that the importance of self-responsibility doesn't diminish during *treatment!* You can still practice self-responsibility after you acquire a disease. As a matter of fact, I think had I not done that my life would be completely different. Had I only listened to the first few medical professionals who I came in contact with, I wouldn't be doing the sorts of leisure time activities that I so enjoy. I wouldn't be able to participate in the leisure time activities that I enjoy with my kids.

So I think my life is different in a couple of ways. Number one, professionally I've taken a different track in terms of my professional goals as they relate to helping individuals promote health. But, also, I'd be lying if I didn't say I treat every day as a gift and I have a renewed perspective on just how precious life is and just how important it is to try and live every minute as fully as you can.

**Q When you think about other people and spreading the message that you've been exposed to in your personal experience, it's a hard question, but what would be the single most important piece of advice that you would give someone who has been newly diagnosed with cancer?**

The single most important piece of advice that I would say is to adopt a positive attitude and that requires some explanation, because that's easier said than done. But I can tell you that when I knew that I had cancer, I knew that I was going to fight it and that nothing could get in my way in terms of my energy and directing my energy toward fighting that disease. The other thing that came of that positive attitude is I had no idea at the beginning I was going to undergo chemotherapy. I knew nothing about it, had never experienced that with even a family member or a friend; and when I learned all about chemotherapy and all the different side effects and how vigilant you have to be to make sure that the physicians, the medical professionals with whom you're working are abreast of whatever symptoms you're getting, it was just mind boggling. But what



I said to myself, and I think this was an extension of the positive attitude, is that I will never anticipate feeling badly when I wake up in the morning. It doesn't matter how many pages of side effects they ask me to study that I need to keep track of that I may get from these drugs, I am not going to wake up in the morning and say this is going to be a bad day; I'm going to feel badly today. I said to myself, if I feel badly, if I get any of these symptoms, I'm going to embrace them, because it's going to tell me that these drugs that are trying to kill the cancer are causing these side effects. And I'm going to use it to my advantage. So I would say again, with a positive attitude, no one can calculate the positive impact of having a fighter's attitude. I firmly believe that treatment outcomes are different and they can be partitioned on whether or not a person was a fighter or a person was more passive in their response to their treatment and recovery.

**Q You know, so much of cancer is based on the quality of the support group and the support mechanism that you're surrounded with. There are a lot of people who are in the lives of cancer patients. What would you tell someone who is part of a support group and wants to be as helpful as they possibly can for someone who has cancer?**

I'm really glad you asked that question, because I think there's so much that can be done. I think people who haven't encountered, or maybe they haven't succumbed to some sort of major health problem in their own lives, they may not realize the stress involved with

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that sort of a diagnosis and how it can cloud your judgment. I feel fortunate that I felt relatively clear mentally during my situation, but there were plenty of times when I felt like I was less than my best, cognitively. I would say caregivers and family members and friends can really help that cancer patient by helping them make good decisions, because they may not be thinking as clearly in light of all the stress and all the newness and the complexity of what they're dealing with. It's overwhelming, and just having somebody there who has a little bit more of an objective perspective to listen to what's going on, listen to what's being said by the medical professionals, I think that'll go an awful long way towards helping somebody to recover and to be treated in the best way possible.

Just a couple of examples — I mentioned before, paying attention to what the dosage and administration of drugs is supposed to be like so that when that patient is taking those drugs, they may be affected. One of the side effects may be their mental acuity. It may be that they're not going to know whether the timing or the dosage of the drugs are appropriate. In addition to that they may not be in a position to make a good decision about whether a second opinion might be warranted, maybe whether or not questions should be asked about natural or integrative treatment options. These sorts of things I think are absolutely of paramount importance to the cancer patient. If they have somebody in their support network who's willing to just come and listen and ask logical questions, I think that that can be very, very helpful.



*“ I tried to keep myself physically active. There were days...I would try to get up and exercise every day; even before chemotherapy, there were days when I could run for a mile before I went to the infusion center and there were days I couldn't go a minute. ”*

*—Dr. Joe Quatrochi, Professor of Human Performance and Sport at the Metropolitan State College of Denver*

**Q** You mentioned this a little bit throughout the discussion that we've been having, but you talked about some more holistic kinds of things that may help to enhance the outcome, especially when you're going through such a rigorous treatment such as chemotherapy. What kind of holistic things did you participate in and how important was that to the process?

Well, it's interesting because people tend to classify cancer as if it's a single disease. As we know, it's really an umbrella term for many, many types of cancer, and not every type of cancer responds the same

way to a treatment. For example, the drug therapy that I was on for testicular cancer would be ineffective for someone who has breast cancer. I think the same thing is true of more holistic or complementary therapies. I was given a book when I was sick that was written by a German physician, Dr. Max Gerson. He pioneered a treatment strategy, I think in the 50s, that involved nothing more than organically fruits and vegetables that were taken in combination in juice form to treat a multitude of different cancers. He has a case study book...I think there are 50 different case studies where he published his actual notes and treatment outcomes on these patients who were basically forsaken by the traditional methods. They had either

had radiation or chemotherapy or both and they were essentially left to die, and he documented their change in survival probability and treatment outcome from undergoing this sort of nutritional intervention. So I studied that really diligently, and I looked for health care practitioners who were trained in this method. He died, I think, 10 or 20 years ago. There are many physicians still practicing in that area. But when I did the research, it indicated that people with my type of cancer, testicular cancer, it's so fast growing that that wasn't a treatment option.

So with that example in mind, I can tell you personally I really tried to pay attention to my nutrition just from a practical perspective. I tried to make sure that I was taking enough calories, because oftentimes you don't feel like eating anything. I tried to practice as much stress management as I could, a little bit of meditation. And I tried to keep myself physically active. There were days...I would try to get up and exercise every day; even before chemotherapy, there were days when I could run for a mile before I went to the infusion center and there were days I couldn't go a minute.

In addition to that, it was really critical for me to try and maintain some sense of normalcy. I don't know what other category to put this in other than sort of a holistic, under the umbrella of holistic care, but I tried to continue to work, which I did. I made up my mind that I was never going to take an elevator unless I was absolutely too sick to walk the three flights of stairs to get to the infusion center. And these sorts of attitude tools I think really helped me in addition to trying to maintain my activity level and good nutrition and manage my stress.



**Q You know, perhaps the hardest thing in the equation to really wrestle with is the interaction that you had with your physician. Obviously, that had to take some intestinal fortitude and it had to take some kid gloves to be able to kind of manage the process with backbone and heart. How hard was that to manage your physician and to really work through the process without alienating him or limiting your options?**

Well, I should preface it by saying that...you asked me a while ago what did I learn? One of the things I learned was just how incredibly compassionate people in the health care industry are. I had a good idea because my mom was a nurse, but I hadn't really been in a treatment situation. Everyone I encountered from the oncology nurses to my physician to the emergency room personnel whom I had to see to the hearing specialist who had to check my hearing, everyone treated me as if I were a celebrity. It was that level of compassion that I will never forget. So going into this whole thing, I really believe that my physician had my best interest in mind and I believe that he really, truly wanted to cure me, and he was doing everything that he could. So I

didn't feel like it was an adversarial relationship. I really didn't anticipate coming to the end of that last round of chemotherapy, after he had time to review all of my results, my CT scans, my chest x-rays, my tumor markers — I wasn't expecting him to say he hadn't spoken to Dr. Einhorn. So really it was just an off-the-cuff-I'm-in-this-situation, what am I going to do? I think a lot of people can relate to being in a situation where they're awaiting some decision or outcome and it could go one way or another, really favorably for them or really badly for them, and they prepare themselves for the worst but really hope for the best. That's where I was. But I wasn't really ready for him...for neither of those to be the option. So I just tried to speak from the heart. And it was a difficult decision because I didn't want to counteract all the good that had been done with my chemotherapy by delaying things, but I felt like I was armed with enough information that it was the appropriate decision and it turned out to be probably the best decision I ever made. I just tried to come from a place of integrity and come from the heart and it worked out the right way.

Dr. Joe Quatrochi is healthy and well and living in Denver Colorado, he can be reached at [drjoe@joequatrochi.com](mailto:drjoe@joequatrochi.com) or 303-556-2898.

### About Joe Quatrochi, PhD



**Dr. Joe Quatrochi** is a dynamic speaker and consultant who utilizes his years of teaching and research experience to promote optimal health and wellness. He is a renowned professional speaker, highly regarded for his keynote and breakout presentations at conferences and workshops. He engages audiences with thought-provoking questions and provides common-sense health recommendations for participants using an energetic style. Dr. Quatrochi currently holds a position as Professor of Human Performance and Sport at the Metropolitan State College of Denver. He has coordinated the Adult Fitness and Exercise Science emphasis area in the HPS department for the past 10 years, training pre-service personal trainers and allied health professionals. His academic preparation includes an undergraduate degree in Physical Education, and post-graduate degrees in Exercise Physiology (M.S.) and Health Promotion (Ph.D.). He maintains a Health/Fitness Instructor Certification from the American College of Sports Medicine. Dr. Quatrochi's primary research interest lies in the area of physical activity for the promotion of health and the prevention of disease.

His professional experiences include extensive activity in worksite health promotion and physical activity programs for adults, seniors/retirees, athletes and public service professionals (firefighters, security inspectors). He has published several articles and chapters in books. In addition, Dr. Quatrochi has delivered many presentations to various professional, private and public groups on numerous health/fitness/wellness topics. Most recently, Dr. Quatrochi has shared his experiences as a (testicular) cancer survivor. Specifically, his motivational speeches now integrate the lessons learned in his struggle with cancer with common sense lifestyle recommendations to promote leadership, self-responsibility and wellness.

His consulting experience includes work with private industry (programming and risk management for health clubs and corporate wellness centers — both nationally and internationally) and non-profit groups (the American Heart Association and Colorado's 9 News Health Fair). Dr. Quatrochi has served in numerous positions in state, regional and national professional organizations including the American College of Sports Medicine, WELCOA (Wellness Councils of America) and the American Alliance for Health, Physical Education, Recreation and Dance.

In addition to being an award-winning professor, he has received numerous awards for other professional contributions. Dr. Quatrochi is frequently contacted to provide expertise on contemporary health issues and has granted many interviews for both print and electronic media. Finally, his avocational interests include various outdoor sports, especially off-road cycling.

Dr. Quatrochi can be contacted at [drjoe@joequatrochi.com](mailto:drjoe@joequatrochi.com) or 303-556-2898

### David Hunnicutt, PhD | President, Wellness Council of America



Dr. David Hunnicutt is the President of the Wellness Councils of America.

Over the last ten years he has interviewed a variety of business and health leaders. This interview was originally conducted in January 2007 and was released in June 2007. To read other interviews please visit [www.welcoa.org](http://www.welcoa.org).



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