
Aging Happily Without Pain

Learn Secrets For People Aged 50+ to Stay Active &
Avoid Slowing Down... Using Natural Solutions to
Help You Have More Energy & Confidence to Do
The Things You Love As You Age

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What Others Are Saying About *The Physio Revolution*

"I had been dealing with knee problems for several years and they offered a long term solution that is more promising than injections or pain medications. My knees and joints continue to improve with each session. Also, the attitude at The Physio Revolution is extremely positive - they have been upbeat and cheerful at every visit!" - Jack

"The Physio Revolution made a huge difference in my recovery. My friend had only the best things to say about Brooke and her team of Doctors at The Physio Revolution. I had a nasty fall that left me with a broken back. I lost half of T10 and damaged T9 as well. My recovery was slow at first with other PT agencies but once I signed up with Physio Revolution my healing improved very quickly. If you suffer from back, joint pain, taking too many painkillers, etc., they can help and they will bring healing to you via the natural healing of the body. If you are looking for assistance and guidance in your healing, I recommend you contact them and make an appointment for an evaluation and they will create a custom plan for you. I highly recommend them." - Mark

"This is the first place that has truly helped my body change and improve! They have helped me find the root of my problem and not just say to work on my leg muscles. They are kind and personal in each and every interaction. I have done many things to try to get my body and knees better. THIS is working and I do believe it will be for good because I have learned so much and my body has too! If you have been struggling with knee or back issues, or any other body issues, please give them a call. They will meet with you and be honest about your needs to help you!" - Janine

"In four weeks my pain is 95% gone. I am strengthening all of the muscles that are related to my specific issue, and I feel so great. No painkillers, no muscle relaxers, to mask my pain. I have figured out the root cause of my pain and are treating me from the inside out, so far so good I am pain-free and getting stronger every day. Thank you, you are changing my life!" - Marybeth

"Dr. Brooke, a talented and intuitive professional, is also a wonderful human being. I've seen physical therapists and/or chiropractors since middle school as an athlete at an early age and someone who taught himself how to workout, sometimes improperly, and typically pretty intensely. Dr. Brooke has helped me live pain free from lower back issues that went on for many years, at times, making basic movement a problem. A number of previous experts I worked with failed, for years, to help me make lasting changes. If you need help, you found it here." - JJ

"The team at The Physio Revolution are amazing! They are so knowledgeable and caring and want pain free patients as much as the patient wants to be pain free. They not only cater to you as an individual with unique strengths and weaknesses, but they are there to cheer you on emotionally as well as physically!! Pain is a lot of emotional healing as well and The TPR Team & Dr. Brooke know exactly what that means to a patient. They don't just hand you a drawing of exercises to do and send you on your way. They talk through the struggles with you and then work with you physically until you feel like a different person than who entered through the door! The entire

experience at The Physio Revolution has been nothing but encouraging and successful in the healing process. Pain meds and surgery are not an option anymore!” - Karen

“I am so grateful for this practice. I was diagnosed with a severe rotator cuff tear and was scheduled for surgery. I decided to seek other alternatives. I am SO glad I did!! I have learned so much. Through the exercises I was able to become pain free and am back to doing all the activities I enjoyed before my injury. My experience with The Physio Revolution has truly been life changing. I am forever grateful for this great group of people.” - Dawn

“After spending 5+ years and upwards of \$10,000 on doctors bills, massage, trainers, new bedding, etc, I was lucky enough to find Dr. Brooke at The Physio Revolution. Brooke took my back pain seriously and had targeted strategies to not just give me relief, but give me the skills to prevent future pain and injury. Brooke worked tirelessly to address my pain and mobility and got me to a place that I am now pain free! Aside from their outstanding skill and knowledge, Brooke and her team are professional, kind, and passionate about this work. Look no further for an improved quality of life in the Denver area!” - Valerie

“After multiple car accidents and some sports injuries I was in need of great care to get back to feeling normal. I worked with many physical therapists and massage therapists but nothing seemed to help me or give me the focus and recovery I needed. Then I found The Physio Revolution. I am doing so much better and can't believe some of the things I needed to be working on had never been told to me before. The Physio Revolution looks at the whole body and how everything is working together--unlike other PT's I have worked with before. If you are looking to get back to what you love, The Physio Revolution is the place to go. You won't be disappointed. Big thank you to the whole team!” - Will

*“Whether you think you can, or think you can’t - you’re right.” -
Henry Ford*

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DEDICATION

To All Of Our Clients – thank you for the trust you've placed in us and for giving us the opportunity to help you. It means the world to us. We wish that this book impacts your life as much as those who read it.

To the 50+ year old who is dedicated to living an active and independent lifestyle even as he/she ages well into their late 80's & 90's; to you who continues to push for more for yourself and to make a more significant impact on those around you – this is for you.

About The Authors

Dr. Brooke & Dr. Annie, both doctors of physical therapy, started this journey together helping their clients receive better care many years ago. With nearly 2 decades combined experience, they find true success is defined not by not only resolution of pain, but also by seeing clients start living the lives they dream of again – even as they age. For that very reason, this book was born.

Both Dr. Brooke Olsen, PT, DPT & Dr. Annie Brodsky, PT, DPT, co-founders of Denver's leading specialist physical therapy practice *The Physio Revolution*, received their doctorate in physical therapy from Nova Southeastern University in Fort Lauderdale, FL.

Frustrated with the mainstream advice and level of care provided elsewhere, Dr. Brooke & Dr. Annie decided to open their own practice to bring to the community a place where experts look at each person as a whole using their unique and proven approach that works. Together, they've been on a mission to help people make better decisions about their health while giving them a world class experience of what they believe healthcare, especially physical therapy, should look like: thorough, family-like, unique, individualized, and empowering... all while taking the time to truly understand each person's story and what is important for them... plus having lots of laughs and fun in the process! This is how their specialty physical therapy practice, *The Physio Revolution*, was born back in 2017.

Enjoy the new methods and strategies they've used to impact 1,000's of lives and... learn how you can help yourself happily age without pain holding you back or slowing you down. This book will impact your life from this day forth...

Introduction

What if we told you that there was a secret code, hidden deep inside you...

And that once you discover it, you can literally get past any pain or ache you have?

We really do mean anything...

There is an argument to say that if you take care of yourself, yourself will take care of you.

And we agree.

Think about it: if you are stressed, you can destress by doing activities to lower your stress level. If you have low energy, it can be fixed by doing activities that produce more energy: you can fuel your body with the right nutrition that will bring you energy. If you are in pain, feel stiff and achy, or you're slowing down, it can be fixed by hiring the right person to figure out what's going on and what needs to be done to fix it.

Ultimately, you can age without pain and have confidence that your body will be able to keep up with your loved ones even as you age. You can enjoy living without the worry, concern, or struggles... to live your best life after 50.

But, here's the thing: taking care of yourself only works if you know what problem you actually have. Most people don't know that, and instead they spend time fixing the wrong things, that is, usually symptoms of the real problems: masking pain with pain pills, resorting to quick fixes such as injections or massages, or opting for dangerous surgery before exhausting all other options.

What most people in their 50's and beyond describe as pain, stiffness, and slowing down, is often a symptom of the root problem, the nature of which is often poorly understood. Most people chalk it up to the wrong problem.

For example, is the problem that you have arthritis in your knees or is it that the only physical activity you do is walking?

Is the problem that you have a “bad back”, like your dad, or is it because you have never gotten down to the root cause or understood why it's happening?

Is the problem that you are trying to fix your pain with generic exercises you got from a class or *Youtube/Google* – hoping they help, yet you don't know which ones actually help as opposed to worsening the problem?

Is the problem that you are getting old and stiff or is it that your habits created stiffness and then you got old?

Is the problem that you have been diagnosed with diseases you never really understood: arthritis, bone on bone, or degenerative disease? Or is it that these are just normal wear and tear issues but you've been told that they are why you have pain?

Or, is the biggest problem of all that no one has taken the adequate amount of time to truly understand what is going on, listened to your story in depth, and looked at your body as a whole in a natural and holistic way?

The mainstream advice for getting out of pain and keeping active without pain beyond your 50's are leading people down a path of X-rays and MRI's, injections, surgery, and pain pills, AND that is flat out wrong.

We put it to you that the #1 obstacle for people aged 50 + to get out of pain and stay active, independent, and mobile is not knowing what their real problems are (and what to do about them). That's why we are so happy you picked up this when you did.

This book was created for people aged 50+ who want to get out of pain naturally and want permanent solutions so they can avoid slowing down and have confidence in their bodies even as they age to enjoy the second half of their lives. And if that's you, we wrote this book for you.

Because over the years we've come to realize that pain management isn't about a life without pain... it's about getting back to a life full of the things that pain has taken from you.

The traditional advice for aging is that if you walk, eat well, don't do too much, and take it easy, you'll be okay. I don't know about you, but our clients imagine a whole lot more than that for their lives. They imagine a life beyond their life 50s as one that would allow them to live the realities of the dreams they have worked so hard to create. They tell us that they have worked hard to get to this point: they have grandchildren they enjoy spending time with and building relationships with; they love to travel all over, they love book clubs, volunteer, and they want to spend time with family; they want to *live* life and do the activities that make life worthwhile.

Alright, so not doing too much and slowing down may sound nice sometimes... but not when it comes at the expense of not knowing if you'll be able to tolerate a plane ride to see your daughter... or you lose the chance to watch your grandchild because you don't know if your back will hold up when you go to pick her up... or when know that you will miss out on another walk or hike with a friend because you're not sure your knee will make it...

Aging happily means having confidence in your body and your mind; knowing you can rely on both and have the freedom to choose what you want – and don't want to do. It should be based on a personal choice that's not dictated by whether or not your body or mind can keep up.

Be prepared: this book is unlike any other book you've read. In the pages ahead we will be presenting you with a radically different approach to staying active, helping you to avoid slowing down without the use of pain pills, injections, or surgery even if you are 50+. It is the same approach we used to help 100's of people find a permanent solution to end their pain, stay active, fit, and independent, and to allow them to do the things they love to do – happily – in the 2nd half of their lives.

(We understand that this book is not for everyone. If you value having multiple elective surgeries and taking nasty, addictive pain pills, have no

desire to heal your body in a natural way, or would rather unnatural, potentially harmful solutions, this book will not be for you.)

If you have tried other options to fix your pain without finding a real, long term solution, yet want to find a natural way to end your pain and are willing to read with an open mind, then read on because this book will be perfect for you.

Inside, you'll learn why imaging should be one of the last resorts to understand the root problem of your back, neck, shoulder, or knee pain.

You'll learn why arthritis is irrelevant to feeling better, less stiff, and isn't the cause for slowing down.

You'll learn how to get down to your root cause, as well as what you can do about it, so that you can continue to do the things you love with those you love, all without slowing down, pursuing surgery, ingesting pain pills, or taking injections.

You'll stop thinking that it's just your age and that you have no choice but to accept it.

Let us assure you, this book is NOT based on "theories".

It's also NOT based on "wishful thinking"...

Or even an "idea".

This is an accumulation of 17+ years of practice, reading research, understanding human behavior, client cases, and our own journeys through pain.

Ultimately, you are about to discover how people over the age of 50 can age happily, live pain-free, and continue to do so into their late 80's, 90's and beyond ...

If you are like most 50-somethings we meet, then we're pretty sure that, if you had a little more confidence in your body and in your mind, had a little more confidence in the decisions you make to help yourself, and if you knew what your real problems are, then you would be unstoppable in the 2nd half of your life.

Most importantly, you would live your life without the frustration, internal worry, fear, and stress that comes with losing your ability to do what you once did.

That is a painful and frustrating way to live and, sadly, most people live like that in the 2nd half of their lives. We hope this book acts as a start towards living your life the way you have always envisioned and believed possible for yourself.

Chapter 1: Could Everything You've Been Told About Getting Out of Pain Be Wrong?

Do you remember when women weren't supposed to do physical activity or "sweat" because it was un-lady like? Or what about how it was normal advice to drive in a car without a seat belt at 60mph down the highway, lay outside in the sun without sunscreen, or how doctors gave women the prescription drug 'speed' (amphetamine) for combatting depression and anxiety? If you look back in history, some popular belief or mainstream advice falls short of serving us in the long run. The same is true for advice nowadays, especially when it comes to getting out of pain as you age.

There is an underlying misconception that, as you age, things fall apart more frequently; you hurt more, you feel more stiff and achy, and you should take it easy (you'll last longer and have less pain that way). The irony in this is that when things do start to pop up, you *do* less but you begin to hurt *more*. Why? Because you are doing less...

And in the case of pain – whether it be knee, back, neck, shoulder etc. – you will naturally begin to worry about what's gone wrong. The biggest problem of all is how much concern, worry, and fear exists alongside having pain. These feelings alter how you make decisions about what best to do: you might begin by seeking a quick fix to just find any sort of relief, like doing a quick massage, having someone do an adjustment on you, or just taking a pain pill to mask the real problem. Or you might start by going to see your doctor who will want you to get an X-ray or MRI, try to get relief with more aggressive, addictive pain pills, or just try an injection to see if it works. Or, you'll try to solve it yourself by going online looking for answers and asking friends and family for advice on what to do... all of which doesn't actually help put an end to the pain, but just creates more frustration and worry.

Things which are "main stream", "status quo", and of popular belief can be the easy way in the short term, but not the very best way in the long term. This gets a lot of people who are in their 50's and above into trouble.

For example, many people tell us how they think if they are suffering with back pain that something is “wrong” inside their back and that it must get fixed with surgery. They need an X-ray or MRI to find out what's abnormal inside and why the pain is there... something must be bad and it needs to be fixed.

But the X-ray or MRI never takes into account the entire story of how pain began, that is, past life experiences, habits, and traumas. On the face of it, it is much easier and quicker to assume that where the pain is, the problem is. But, what if that's not the case?

It's much easier to have an injection, take some pills, rest, or to blame it on your genetics and old age than it is to get down to the real root problems as to why the pain or stiffness even came on in the first place. And what's more, the indecision and waiting is the cause of why so many people suffer as long as they do, as well as why pain pills, imaging, and injections are over prescribed . It is also why people are suffering with chronic pain or held back from activities they love for as long as they are.

If you've tried these things without finding a solution, you are not alone. This has been the advice that's been given for years and it's only getting worse. You can grab a surgery or a pill for anything that's painful or “wrong” these days, just like you can find a *Starbucks* coffee shop on every other block down the street.

For back pain, neck pain, ankle pain, hip pain, knee pain, and/or shoulder pain, mainstream care has become flawed with resorting to quick fixes. The reason we know this is because the methods and systems for managing this type of care have been around for years, yet chronic pain and musculoskeletal (muscle and joint) issues continue to be one of the top medical problems in our country.

Moreover, the shared collective mindset on aging in the western world is underscored by frailty, loneliness, and a worsening of physical and mental health. But, this doesn't have to be the case. We've seen 92 year olds running in races and jogging happily without pain. We've witnessed many people in their 70's easily lifting nearly 200 pounds in

the gym, all without pain or stiffness, and we've seen people in their 80's and 90's enjoying games of hide and seek with their grandchildren... while running around the house and getting on and off the floor without any help.

If you're like most people in the 2nd half of their lives, you've surely thought about what it's going to look like as you get older... about the concerns around having more aches and pains. You've most likely seen a loved one go through something – or you've heard stories of older individuals struggling – and at the same time you've most likely had your own knee or back pain that's popped up over the years. And of course, this can be concerning. The mistake is, however, you could be taking well-meaning advice that actually increases your pain and inability to keep up with family and friends as you age. Here's what we need to consider when it comes to what you are being told:

What If It's Not What You Actually Need?

She had a very concerned look on her face, almost as if she was ashamed of what she was told and was embarrassed about what she was about to say” “My surgeon told me that if anyone ever tries to tell me they can get me out of pain... I shouldn't believe them...”

“He told me it was the worst spine he had seen and that I would need surgery to feel better. I bet you're wondering why I'm even here. I am not a pill person and I don't want surgery if I don't have to have it. Do you think you can still help me?”

Amy was a mother to three amazing kids and prided herself on what a great family she had helped raise. She was an energetic lady in her late 50's who had been suffering with back pain for over 10 years now. She had tried everything you can think of, well, except surgery: injections, pills, massage, physical therapy, exercises, creams, inversion tables... you name it, she said she had tried it.

I told her we would figure out what the next best decision would be for her... together. All she asked was for us to be straightforward and to give her our honest opinion with complete transparency. She felt previously that the doctor rushed her visit and only gave her 15

minutes of his time, concluding that she needed surgery after barely watching her move or even coming close to touching her back... he just saw the image and said it was time for surgery.

After her first visit with us, she mentioned how it was the most detailed examination anyone had ever done for her in the past 10 years. No one had spent that much time with her or listened to her story as in depth before. On top of that, she couldn't believe that her pain was already down from a constant 7-8 out of ten to a 4-5... in just one visit.

Then we sat down together and had a real conversation about what the truth was – as if she was an aunt or a family member. We told her that this was a bit more complex of a case since she had been in pain for over 10 years and that it would take much more time to start feeling better...

She admitted she was still nervous and worried that this might not work just like the rest hadn't. She wasn't really sure if it was just one of the "placebo" things or wishful thinking... what if it was just today that she was having a better day? Unsure of how to feel about making a decision to work with us, she continued by saying that she would give it a shot and "see how it goes."

I gave her the whole picture of what the steps for her would look like and what it would take: if she was able to put in 100% of what we ask her to do and fully commit, there would be no question that she could get 70-80% better. But, that decision was completely up to her.

Her response was skeptical but hopeful: "You really think this can work?"

"Yes. We've seen similar cases before, but the truth is that it took time and lots of effort. It's not always as you expect, that is, that everything gets better right away and that you're just magically pain-free. It's a journey, not a sprint to the end."

"I'll do it. If you think it will help me, I'll do whatever it takes. I'd rather do a natural approach than get a surgery or have to be on these pills."

8 months later, this is what Amy said: “I can’t believe I was even contemplating getting a surgery. I was so scared of what my doctor was telling me at the beginning and honestly, because I had tried everything before, I didn’t think this would work. I’ve learned so much from this process and I can really say I’m a success story; I cancelled the surgery I had scheduled and am back to doing everything I want again. I know this is a journey for me to stay out of pain, but I’m doing so much better.”

This is just one story of 100’s of people who have come to us with concerns about their situation, many of whom were told that the only thing that would help them is an injection or surgery... yet they are now pain-free and doing what they love again.

One thing that’s important to note about Amy’s story is that everyone you take advice from will have biases towards what they think will help you. If that bias doesn’t align with what you want, or think that you want, then it is likely a sign that you should continue to look for more opinions. If a natural approach is a bias you have, then you’re in the right spot... and this book is going to be perfect for you.

Let’s look at how things like getting X-ray’s or MRI’s, just as in Amy’s case, doesn’t always tell us the whole picture...

Do You Need An Image (X-RAY/MRI) To Know What’s Wrong?

As human beings, we have an incessant need to fix things. When your son or daughter is in pain, you want to fix it. If your car has a small indent and paint scratch from an accident, you want to fix it. This incessant need to ‘fix ’is also seeping into our desire to immediately fix our joints and any sense of pain we experience... fast.

You have arthritis or bone on bone on an X-ray, fix it with cleaning it out or a replacement...

You have stenosis or narrowing of space between your back joints, fix it with rods and screws in a fusion.

This thought that we need to fix our joints right away and get instant relief can often do a lot more harm over a period of time.

Let me be clear: the advancement in medical technology, especially when it comes to life threatening situations, is remarkable! How amazing is it that we have scans to detect masses, tumors, or internal bleeds in our brains? However, the problem arises when we misuse this advancement for the treatment of simple muscle and joint pain, thereby making us susceptible to thinking that what we see on the image is bad, much like a brain tumor is. Simple things like cartilage breakdown or degenerative changes are being labelled as “abnormal”... and worse, that it’s the reason for pain. We now know this isn’t the case.

In our society as a whole, the use of imaging is over-utilized, especially when it comes to muscle and joint pain. Did you know that in 2019 there were over 119 million MRI’s or CT scans performed in the US alone, which contained a population size of 328 million people at that time? This is statistically saying that $\frac{1}{3}$ of the population will have some level of imaging done throughout a year, a number which most researchers and some physicians are starting to define as “overused.” They follow up by saying that “while information can be useful, too much information can create numerous problems.” We’ll cover more on what those problems are in the later chapters of this book.

Moral of the story: even though you are told you need an X-ray or MRI, in routine cases of pain that came on slowly, over time, and without traumatic events, it’s likely this could do more harm than good. With our combined experience, we have successfully helped 100’s of people – all of whom have had different types of joint pain which made it difficult for them to do the activities they love – get back to the lives they deserve without needing to consult any sort of imaging.

They Are Just “Wrinkles On the Inside” - Don’t Read This Section If You Enjoy Having Surgeries

What if what you are being told by well-meaning healthcare professionals is doing more harm to you than helping you?

Allow me to explain: have you ever left a medical office feeling worried or scared for what your future now held knowing what you were told? Maybe you had been diagnosed with high blood pressure and you needed to monitor it more closely and change your habits. Or maybe you were told you need to take a pill for the foreseeable future.

The way news is brought to us can not only impact how we feel about it, but also what we choose to do about it.

Let's imagine a doctor told you that you needed to get an MRI for recent neck pain you are experiencing...

So, you get your image taken and return to them. They tell you: "Wow! This is one of the worst MRI's I have ever seen in my 20 years of experience. You have disc bulges and disc degeneration – there's a lot going on in here that needs help. The only way to fix this is to do surgery. I recommend we do that immediately before this gets worse. You could end up pinching a nerve, thereby causing numbness or tingling down your arm, or even worse, paralyze you if you were to move wrong..."

On the other hand, what if the exact same MRI was brought to a different doctor who is also equally specialized in neck pain, yet instead, she says: "Well, the good news is that your neck looks much like everyone else I have seen before. You have some really great things going on that I see." She continues by saying that she notices some typical wear and tear in a particular area, but not to worry – this is normal and she sees it a lot in people your age.

Which one would you likely respond to with a more optimistic outlook for your neck's future? It's the same MRI, just two different perspectives.

This isn't a hypothetical situation. It actually happened to one of our clients: two different doctors with two very different opinions about what they "saw" on the MRI.

Now, let's imagine that you are 60 years old and you go to get an image taken on your neck right now, but you have absolutely no pain in your neck. Now, you might be saying to yourself, why would I go get an X-ray if I don't have neck pain? Exactly. This is part of the point.

We have come to conclude that the only way to determine why we have pain is by "seeing" what's wrong inside, but also by claiming that what we see is the actual problem. But, if we play devil's advocate, we should then make sure that, if we have no pain and there are no "abnormal" findings on the image, we should feel fine in return, right?

So in 2015, Nakashima and colleagues set out to do just this. They wanted to see if pain was associated with abnormal findings in the neck. The authors investigated the prevalence of abnormal findings of neck MRI's in people with no pain or symptoms. Their study included 1211 healthy volunteers with ages ranging from 20 to 70. What the results found is that "87.6% of people presented with disc bulging, which significantly increased with age in terms of frequency, severity, and number of levels (in the spine). Even most subjects in their 20s had bulging discs, with 73.3% and 78.0% of males and females, respectively."¹

These studies also suggest that many degenerative findings (disc degeneration & arthritic changes) on medical imaging are highly prevalent in individuals without pain as age increases. For example, nearly 90% of individuals will show signs of disc degeneration by 60 years of age.

This tells us one very important message: *Just because your image shows "things" on it (degenerative changes, disc bulging, arthritis, bone on bone, etc.) doesn't mean that it's something that is dangerous, needs to be fixed, or is the reason for discomfort. Quite simply, it means you are aging and you just have wrinkles on the inside.*

¹ Nakashima, et al., 2015, p.392

Wrinkles don't need to be fixed or treated. They don't require life changing surgeries. Sure, we might not like to look at them and decide to change them for cosmetic reasons, but it begs the question: why is there an underlying theme in society that these wrinkles on the inside need to be fixed or that they are the root of the problem? This is all well-meaning advice that needs to be questioned. Will your arthritis get worse or will degeneration happen as you get older? Yes. Is that a bad thing? No.

Why?

Because we know that this is a natural part of aging and it doesn't have to be painful or need to be fixed – just like wrinkles on the outside.

As you are about to discover, the overarching themes of this book will begin to help you see how robust and resilient our bodies really are, even as we age.

Are Your Friends and Family Helping or Hurting The Situation?

“You are the average of the five people you spend the most time with.”
- Jim Rohn.

I heard this many years ago and it never really occurred to me that I was being influenced by 5 of the most important people in my life at the time. When I was reflecting back on it, I thought about how I used to watch much more TV and not focus on reading books or learning. Or when I moved to Florida to go to school, how much more conscious I was of my exercise because I was around people who valued their health and personal growth.

Who are the 5 people that you hang around with the most? Is it your spouse? Sister? Friends? Dad?

There is an alternative quote which goes like this: “Show me your friends and I'll show you your future”. Our take on it is: “Show me your friends' health and I'll show you your future health”.

Taking advice from family and friends, albeit it well intentioned, can be detrimental and result in big mistakes when it comes to decision making regarding your health.

You trust the people who you surround yourself with, which makes sense as to why you would follow their advice. The problem is, though, that for the majority of the time, those friends aren't experts in health, nor do they know the specifics of the problem you're going through.

Most times it's just guess work when you tell your family and friends about your pains and aches... "Oh yeah! I've had that pain for a long time now. My doctor said it was the arthritis and that there's not much we can do but just deal with it. It's just part of getting older – things just hurt now." Or, "that sounds like what my friend Betty had – she had a replacement and is so much better now. I mean, the therapy and process was really awful afterwards, but now she can do short hikes at least. Her surgeon was fantastic. You should go see him."

Be careful not to fall into assuming your friends and family know what's going on just because they have had a pain in their back or knee... not all pain is the same. There's never been a single case of sciatica or knee pain that we've treated precisely the same. Why? The pain is different.

Take a look around you and make sure you're aware that many people are influencing you; just remember that it's your choice if you want to take that advice.

The Real Problem Is Never the Problem – Is The Diagnosis Correct?

As we've mentioned, most people think something is internally wrong with them if their bodies have arthritis or cartilage changes, bone on bone, degenerative conditions, etc. It's explained that this is the reason they are having pain. "My pain won't go away because I have a degeneration in my spine..."; "My arthritis causes my knee to hurt, so there's not much I can do about that..."

The truth is: the real problem is never the problem.

As we now both know, these aren't bad or horrible things inside your body. They are just part of our journey through life and are inevitably going to happen to every single one of us. As a wise teacher once told me, "What's not abnormal is that you have these things on your X-ray or MRI, it would be abnormal if you didn't have these things when you get older!"

So, a surgery to replace a joint for these types of things is not solving the real problem that a person has, and it certainly isn't getting down to the real root issue.

Why?

Well, that person will wake up after surgery and have the same or worse movement habits, alignment, and strength as they did the day before surgery happened. They will still do the same things that led them to the point of surgery, except now they are limping, in worse pain, and have to recover from it for months if not years. Surgery just simply covered up the real problem and underlying issues that were never fixed or addressed over the years.

The reality is that where you feel pain is just where the stress ends up... it's not where the stress is created.

This is the real problem with looking at knee pain as *just* knee pain or back pain as *just* back pain... when it could be coming from somewhere else. Alternately, it also explains why many people with back pain have it resolved when someone looks at their feet, mid-back, and hips.

It's also why it's imperative to take into consideration past injuries and how these play a large role in where root causes are coming from.

Sadly, this is also the reason why so many people still have pain or more breakdown years after a surgery that was supposed to take away their pain in the first place.

No one really looked elsewhere to where the pain could be coming from – they only looked at where the pain was being felt. This is the importance behind a holistic, whole body approach to finding the cause of pain.

But, in order to do that you need to be sure you are going to the right person, first...

Go to Just Any Doctor When Pain Happens...

When you are in pain or something doesn't feel right, who do you go see? Of course, the doctor. No matter what the problem, the family doctor will help – sinus infection, antibiotics, check-ups, etc.

It was and remains that your family doctor is supposed to be the first line of defense. We were always told by our parents and guardians that if something hurts... go see the doctor. This schooling ultimately led to the fact that now, if something is wrong, we still turn to the family doctor.

Here's the problem, though: when it comes to solving back pain, knee pain, or any joint or muscle pain, this isn't what he/she specializes in.

I want to take just a minute and preface a disclaimer to the entirety of this book. In no way do we mean for our comments about other professionals to be disrespectful or harmful to their profession. Our job inside this book is to help you find clarity on why these options may not have solved your problem. Our allegiance is to you and to providing you with knowledge and information to make the best decision for yourself. We are well aware that there are excellent clinicians in different fields, all of whom we respect and trust even our own clients with. Just as there are super sneaky car salesmen, there are also enjoyable salesmen in the car industry – every industry has these levels of care within them. And to be fair, we are very opinionated about our own profession, which you will see later in this book, and we don't hold back on it.

There's been clear research (done by The Virginia Mason Medical Center) that supports the fact that you'll save weeks of time and money by not going this route and instead heading straight to the specialist DPT (doctor of physical therapy) who knows how to treat these types of aches and joint pains.

The problem is that, when you go into a doctor's office these days, the focus is laser-like and only on the area that hurts; nowhere else above or below matters. The patient isn't seen as a whole person with fears, concerns, emotions and a past story. Then, you're more often referred to an orthopedic specialist or a surgeon who also only looks at the painful area...

I remember a call I got from a gentleman named John. He explained that he was having knee pain and all the primary care doctor did was look at his knee, literally looked down at it, and then started by offering him some pills to help. He was then referred him to an orthopedic specialist who specialized in surgeries.

The thing is, he had been told in the past by another specialist that "it's all connected", and to his surprise his doctor didn't touch his knee or move it to see what could be going on elsewhere. He asked him simply to get an X-ray, take some pills, and go see a surgeon. John understood this seemed odd, so why didn't his doctor?

In fact, when he followed up, the surgeon wanted him to start with an injection and, finally, talked about how John might need surgery to fix his pain. John was understandably shocked. All of this was not what he was hoping to hear, and on top of that, again, no one really touched his knee or observed his gait while he was walking or going up and down stairs... which was causing the knee pain to happen in the first place!

Instead, the doctor sat in a chair, looked at the images, and said that the only viable options were to start with an injection, and if that didn't work, then he'd need surgery.

Here's the kicker – John's pain wasn't going on that long and he was in his early 60's. An active guy all his life, the knee pain had just started a few weeks ago while he was "hobbling" trying to walk and using the railing more on the stairs; he didn't really have confidence in himself to figure it all out on his own. So, of course, he went to the doctor to get advice, just like he'd been told to do when he was younger.

The bigger problem is that John didn't need surgery to get out of this new knee pain. He needed to be looked at as a whole – something that his doctor didn't recommend trying first, or didn't have the time to give him. John became another knee pain statistic the minute he visited the doctor complaining of pain.

He happened to come across one of our writings in the newspaper and John felt empowered to gain some answers. He called us wondering if he should get a second opinion from one of our expert doctor of physical therapists who specialize in knee pain. He has never looked back since.

After a long discussion about what's been going on with John, including what he loves to do and what he desires to get back to, we knew he'd be successful if he followed the plan we had in store for him. No surgeries, no injections, no pills.

Three years later, John says it was the best decision he's ever made. He's been back to his old active self once again, loving life being pain-free and not having to hobble or use the railings anymore.

What's important is not treating the symptoms (knee pain), but digging deeper to find the root problem and fixing it step by step. If you do this, real change – long lasting change – will happen.

So, when you look at your situation, make sure you go to the right kind of doctor first...

One that can help reduce your pain right away, not simply give you pain medications, injections, or options of surgery.

The important thing is to get the information you need in order to make the right decisions for your health.

When it comes to having joint or muscle pain, your first option does not have to be a surgery or an injection. There are many options available to you. Your job is to educate yourself so as to make the right one for *you*.

“You Need To Slow Down” Or “Stop Doing So Much - You’re Overdoing It!”

As you're about to discover, in order to continue doing the activities you love as you age, it will require you to stop thinking that you *shouldn't* and start thinking that you *should* or that you *can*. You should continue to run, golf, play tennis, or ski with certainty and confidence even as you age.

For most, the fear of hurting yourself or making yourself worse is a deterrent. For others, it's the peer pressure from family or friends to stop, or the advice from a doctor that may have been miscommunicated, for example: “stop because you have a herniated disc and you could put yourself at risk”.

One of the worst things you can do is to stop the activities that you love. These activities de-stress you, help to make you feel good about yourself, keep you active and healthy, connect you with friends & family, and are activities you love to do. Stop those and you might as well start looking up nursing homes or finding a caregiver to live with you. If you get the advice to stop activities that you love, our advice is to run away, fast.

As we're about to teach you, the human body has an incredible ability to heal itself. With the right support, tools, environment, and guidance, people in the second half of their lives can continue, and should continue, to participate in the things they love.

We see a lot of older people make mistakes when it comes to staying active, independent and mobile after 50. In the next chapter, you'll learn about the top seven mistakes we see people make after 50, why they happen, and how you can avoid them.

As we have divided and conquered different areas at *The Physio Revolution* to make it flourish into our vision, we did so in this book. Moving into the next phase of the book, Dr. Brooke – leading physical therapist at *The Physio Revolution* – will take the reins in helping you understand how to overcome your pain and live a pain-free life. Both

will meet up again at the end of the book to regroup and wish you well on your journey to success.

So, if you're ready to make the change, become pain free, and live the active, mobile, independent life you were born to live, let's jump in and get started!

Chapter 2: The Biggest Mistakes People Make Trying To Get Out Of Pain

It's quite reasonable to assume that there might be a few things you're currently doing that are actually bad for your health. You might snack still on things you shouldn't – what happens to fall into your cart at the grocery store stays between you and the grocery store. You might even have a week or a month when you fall off of the wagon and just don't exercise like you should. Maybe you enjoy too many beverages once in a while. We all are guilty of doing these things now and again.

This chapter isn't about those once-in-a-blue-moon things... it's about the biggest mistakes people make when it comes to trying to get out of pain and their overall health, all of which may actually have detrimental effects further down the line, well beyond your 50s...

Taking A Few Pills Won't Cause Any Harm...

I remember playing with my 2 year old nephew in his front yard on a sunny day in the winter. He was just learning how to ride his bike. It was a little plastic bike with no peddles that had obviously been through some rough patches during his learning curve. In fact, the right handlebar had been cracked and was held together by duct tape, presumably until he transitioned to the next level bike.

In any event, as we were riding along and crossing a street together, he decided to go a little faster up a small curb. Instead of slowing down to do what most would do – pick the bike up and successfully get it on the sidewalk again – he charged forward with speed straight into the curb. I watched him tumble forward over his handlebars onto the concrete while his bike split into two and the handlebar came off. He didn't cry, but was pretty upset that I couldn't magically put his bike back together.

The truth was that it was just a matter of time before his bike fell apart again. Putting duct tape over it was only a temporary fix, not a long term solution.

The same is true for a lot of the ways people try to solve pain – pain pills, injections, foam rolling, creams, braces, to name a few. The underlying problem still exists. These things just help cover it up, that is, put it off to the side to deal with at a later date and time.

I remember Susan telling me: “I often take Advil 3 times a day to just get through a day and have less pain.”

It wasn’t going to be the real solution for Susan, but she really didn’t know what else to do.

She was busy – very busy – as a grandma to 3 adorable little grandchildren; she watched them on and off throughout the week in order to help out her son and daughter-in-law while they were at work. She also had a lot going on personally. Her husband needed a bit more help than usual and, because of this, she was needed at home more often to make sure he was okay.

So, grabbing the pill bottle to ease the pain was much easier for Susan than trying anything else: she just didn’t have the time needed to take care of her own back pain.

“I just kept telling myself that I’d do something about it later... next week or the week after.”

The problem was, though, that it went from just one pill a day to 4-6 pills to get through a day just a few weeks later.

When we first met, it wasn’t until she admitted how many tablets she took daily that it hit her: Susan said a lightbulb just went off: what she thought was just a simple back issue had now turned into a pain pill issue. She knew there was a bigger problem at hand now. For her, it was just easy and quick to pop a few pills to ease the pain, but the reality was that it wasn’t really helping her at all. It was just masking the pain.

She knew that she wasn’t one of those pill popper people and she always tried not to take pills all her life if she didn’t need them. It

wasn't like her, but she didn't know how to fix her back while not giving up so much of the little time she had available.

Susan mentioned her children were starting to notice because they were asking if she was okay and if she needed help; they would jump up to do the lifting or do more around her house for her husband. She could see the concern in their eyes. After asking if she needed to go get help, she shot it down saying, "Oh, it's nothing. I'm fine. You don't need to worry."

She told herself that she didn't have time to deal with going to see a specialist about her back pain – she would just deal with it at a later time.

And this is precisely the problem when it comes to taking pills or resorting to quick fixes: they only mask the deeper underlying issues. They'll get you through a day, but after days and weeks of this, you'll have a bigger problem. The pills will start working less effectively and you'll need to take more. The same is even truer for any heavier opioid or pain pill. And on a more sensitive subject – opioids are VERY addictive. Right now we are experiencing a crisis of addiction and reliance on these pills. We debated to say something in the book, but felt the need to be upfront and truthful about these types of pills. Most people who go through some level of addiction or dependence first started by saying that would never happen to them or they wouldn't let that happen. It's real and it's happening even today. In 2020 we have hit an all-time high of deaths related to opioid addiction. This is not something we take lightly.

Pills are a temporary, Band-Aid solutions. Not only that, but pain pills themselves do have side effects like, for example, impacting your stomach, your neurological system, your sleep, and much more. And if you're taking pills to cover up pain multiple times a day, what's going to happen in just a couple months from now? Let alone 2 years from now?

The reality is, the more you mask the pain with pills or injections, the longer and harder it is to unveil that mask and return to a time when you were doing all the activities you loved without them.

Susan was able to get to a point where she noticed that the pills weren't helping her back problem anymore, and eventually – with some guidance from us on what to do to alleviate her pain – she was able to completely get rid of them. She got back to giving her time to her family and loved ones just how she wanted again, playing with her three adorable grandkids on the floor without worry.

Afterwards, she said: “It wasn't like me to do that. I'm not a pill person, so that's when I knew I needed to get help from someone who could help me understand my back issue and what I needed to do.”

Now if you are someone who is looking to just get a little relief by using some over-the-counter anti-inflammatories temporarily and desire to create a long term plan to stay out of pain with something more natural, then well done! This is what a few of our clients start with to just get the ball rolling in the right direction so that they can start the process, too.

Now, on the other hand, if you're sitting and waiting, then this is one of the biggest mistakes you can make...

I Just Need To Rest And Give It Time...

What happens when time alone doesn't help? By now, you've likely heard of the R-I-C-E concept: Rest, Ice, Compress, Elevate. Most people advise you to do this for any type of pain you have.

But, what if you don't have inflammation (hot or red areas) or any evidence of swelling where you have pain? And what if it's your back or neck... how do you elevate it? Do you really need to elevate or compress your knee or shoulder if it's not swollen or injured? And let's be honest, why are we told to rest when doing nothing makes your body weaker and more prone to injury?

This is one of the biggest misconceptions when it comes to getting out of chronic pain and back to doing what you love again.

Resting and “giving it time” is one of the worst mistakes we see people make regularly, and one that can set people back months or even – in some cases – years.

The body was simply not meant to rest, it is designed to move. And if you give it the right environment to heal, it will, even as you continue to move and be active. Complete rest is never the right environment – it only makes things worse and there’s a cascade of events that start to unfold: joints aren’t lubricated, circulation decreases, thereby allowing less energy to circulate in the body, joints get achy and they feel stiff, you get weak with less muscle mass, and your feel-good hormones aren’t produced. We could go on and on about the downfall of not moving your body. The real key is finding the right kind of movement and how much is needed. Finding a balance between *not too much rest* and *not too much activity* is vital. It is both an art and a science to determine the ratio you need. Not doing anything allows time for bad habits and memories to creep into the body, which is exactly the opposite of what will take you closer to feeling better and healing.

Now you might feel better after lying down for a bit – initially – however, because the problem was not addressed from the start, it will pop up again further down the line... and usually it's worse than it was before.

This is why so many people are surprised when we tell them that they don’t have to stop the activities they love when they are in pain. Rather, they just need to modify or alter them slightly so that later, once everything is better, they can resume at 100% again. Sadly, this advice is not typically given. Most people will tell you to rest or to put your feet up, which is exactly the opposite of what people actually need.

And if you are hoping rest will solve the problem, but it doesn’t in a reasonable time frame, then what? You might start asking yourself questions like: “Is this my new normal? Do I just have to learn to live with it?” Or... “Maybe there’s something more serious going on...”

If you have a belief about your pain related to waiting and seeing, or that it will probably go away on its own... you could be setting yourself up for a long journey of suffering. The problem with this is that being

in pain, having stiffness, or slowing down a bit are just symptoms of the root cause. And what people fail to recognize is that the amount of internal worry, fear, and stress that begins to build while they're 'waiting' is far more toxic than the actual pain itself. The more time that passes, the more these emotions build inside the person's system and the longer it takes to undo. And let me be clear: the stress that builds up can wreak absolute havoc on your existing pain, thereby making it so much worse.

Making a decision to do something can be very challenging and stressful. Many procrastinate because it feels more comfortable to wait in pain or to have stiffness: it's much less painful than getting your hopes up only to be disappointed again.

Moreover, most people are afraid of making the wrong decision, not realizing that indecision is in fact the biggest mistake of all. Indecision compounded over 5, 10, and even 15 years means there are a lot of layers to go through in order to treat the root cause effectively. It can be done, but making a decision to do something for your health, right now, is a far better road to go down...

DIY'ing (Fixing) Your Own Pain

A giant ship engine carrying precious cargo failed to start. The ship's owners tried to fix it themselves and then hired one expert after another, but none of them could figure out how to fix the engine. One by one they continuously failed at getting the engine to start again.

Growing frustrated, and being on a time crunch to get the cargo out to sea, they brought in a very old man who had been fixing ships since he was a young boy. He carried a large bag of old, rusty tools with him, and when he arrived, he immediately went to investigate. He inspected the engine very carefully, top to bottom.

Two of the ship's owners were there, watching this man, hoping he would know what to do. After looking things over, the old man reached into his bag and pulled out a tiny, dinky hammer. He gently tapped something...

Instantly, the engine lurched into life and started running! He carefully put his hammer away. The engine was fixed!

The owners thanked him and they went their separate ways...

One week later, the owners received a bill from the old man for ten thousand dollars...

“What?!” the owners exclaimed. “He hardly did anything!”

So they wrote the old man a note saying, *“Please send us an itemized bill.”*

The man sent a bill that read:

Tapping with a hammer.....	\$ 2.00
Knowing where to tap.....	\$ 9,998.00

Effort is important, but knowing where to make an effort makes all the difference!

Have you or your spouse ever tried to do a project in your house that you royally screwed up?

After fumbling and tinkering trying to fix it, you finally give in and called the handyman; he’s able to just take care of the issue in less than 30 minutes. You don't know what you don't know. This can be a blessing and a curse.

This is what can happen when you try to DIY (do it yourself) your own pain. You think about trying many different options and none of them work as well as you need them to. Fussing around with options will only get you so far.

This is exactly why, when people tell us that they’ve “tried” exercises and failed, or that physical therapy didn’t work for them, that we urge them to think again. It was never the exercise. It was the fact that the investigation wasn’t likely done properly – for you.

For example, I have so many people tell me that they are told their glutes don’t work the way they should and that they should just do some bridges on the ground to fix this. So, they go do bridges, every

day, and yet experience no change in their back or knee pain. So, they keep doing more since that must not be enough... and still nothing is changing.

The problem was either diagnosed or dosed incorrectly. You could have a problem with actually activating your glutes in a bridge and so you're just strengthening the wrong muscles over and over... Or, you could be doing too low of a dosage of the exercise. Think of it like a prescription you get at the pharmacy. Exercises are meant to be dosed just like any medication you take. There is too much of some exercises and too little of others. What if you actually had a timing issue, like coordination, that when you tried to use your glutes they delayed in activating when you need them to?

This is why just throwing exercises at a wall to see if they stick is not going to help you. It's not finding out what the real, root problem is. DIY (fix) your house, yard, or your projects all you want, but when it comes to your health, it's best to get the best advice quicker so you can move on with your life and keep doing what you love ASAP.

If I Can See It, Then It Needs To Be Fixed...

I have a riddle for you to answer.

A lady walks into 10 different clinics to get 10 different MRI's on her lower back within a 3 week time period. How many different 'findings' were there on her results between the 10 different radiologists who read her scans?

Was your guess 10?!

Nope.

The real answer is 49! 49 different 'findings' were found on her results between 10 different radiologists all within 3 weeks of her walking in to get 10 MRI's in a row.

Each radiologist averaged 12 errors.

Now, that might come as a surprise to you, because we know many people think imaging can be very useful, much as it is for diagnosing fractures or cancer. However, that is not the place to start for back, neck, knee, or joint pain.

It's much easier for someone to simply order an image, look at it, and assume that's where the pain is coming from, than it is to take the time to physically assess the problem and the person.

It's already been mentioned how imaging like X-rays and MRI's can be more harmful than helpful, but it bears repeating here that this is one of the biggest misconceptions about getting back to an active, pain-free, and enjoyable lifestyle.

The reality is that imaging doesn't solve anything, nor does it get you closer to a pain free life. It's simply an image in a moment of time. Meaning, your image could – and does – change with time.

Is the information it provides useful to find out? Sure, to some degree. But, what if the findings you and the doctor saw on your image were indeed already there 5 months ago when you weren't experiencing pain?

I guess it's something you'll never know because you have nothing to compare that image to. Again, it's a big misconception to assume that these images are always helpful... when the reality is that they can actually be harmful in most cases of routine muscle or joint pain; they do nothing to actually start fixing your back, knee, neck, or shoulder pain. It's not like we jump off the table after an MRI and feel less pain – it's still the same.

It's not just a simple image that you are getting to see what's going on, it's more than that – it's your future based on the decisions you make. And as we now know, many times the results can be interpreted differently by different people. Whereas, if you had someone MOVE your body to find just what causes the pain and relieves the discomfort, this can be much more reliable and useful in understanding how to make your pain go away instead of exposing you to radiation or wasting your time and money. This should be the first line of defense, and

then, if something more sinister is going on with the pain that warrants further investigation, a simple referral to a specialized doctor will be the next step, not the first step.

Remember, MRI's or X-rays are simply a snapshot in time; they do not explain the whole story.

Am I Too Old To Get Out Of Pain?

Is it that you got old and stiff... or did you get stiff and then feel old? Or is it that you have had more time to let your bad habits take hold as you got older? The good news is it's likely the latter, which means it can be helped. If you're like most people we see, you value your health and want to do whatever you can to protect it.

But, one of the biggest mistakes is the mindset a person has around getting older, that is, how they reason through why they are slowing down, are stiff, and have aches or pain.

If you say things like, "I can't do that because I'm not young anymore..." or "these aches and pains are just part of getting older," then you're already giving up control to aging. It's basically like saying: "nothing can be done about it," which subconsciously lets you off the hook for being responsible and doing anything about it. We have an incredible ability to reason through things, thereby excusing us of any control.

Whereas, if for instance we say: "It's my lack of exercising or lack of knowing how I can make this better," it puts all the responsibility on us and holds us accountable to be in control of the change we want.

We had a client who was spending more time in a chair over the past year. Rich was in his late 70's and told us he wasn't able to do too much, especially when his grandkids came around. When asked about his situation, he revealed that he was starting to feel depressed and lonely. He felt like a bad grandfather, dad, and husband because he asked that his grandchildren don't come around as much. When they came over they wanted to jump on him and play out in the backyard with him... but, he couldn't do those things anymore and he felt bad

having to tell them “no” all the time. So, his response was to push the people he loved away so he didn’t hurt them more, rather than bringing them closer. Feeling misunderstood and like he was missing out on spending time with his family, he became grumpy with his wife and kids...

We told Rich about how we hear this story all the time, and how we help people get back to playing with their grandchildren so that they can be the fun and active grandparent they want to be again. Naturally, he pushed back and questioned: “How can you help with me getting older? I’m not in my 30’s anymore. I have arthritis and this pain is just part of getting old.”

Weeks later, we spoke to Rich again. In the interim, he had watched our online webinar and watched a story of someone we had helped who was similar to him. He said he had this epiphany that age or arthritis isn’t the problem – he liked the proof in the studies, how the person was of a similar of age to him, and how he got back to playing with his grandkids again.

Rich didn’t necessarily trust us yet and he didn’t have to – he just needed to give himself a shot at creating a better situation than he was in. He later said he only trusted us at the beginning because we didn’t back him in a corner; we gave him our *love it or leave it* guarantee, time on the phone, and a complimentary first session to “try” us out. He told us later that we were able to help him realize how getting older doesn’t mean you have to live in pain. He was able to gain confidence in himself with much less pain and with better balance... Rich was also able to get back to playing in the backyard with his grandkids and they love being able to jump on him again. He told us he felt proud of himself and he felt better, too – irrespective of his arthritis or the fact that he was getting older.

The mistake that people make is listening to the story they tell themselves... which will hold anyone back from getting out of pain. Time and time again things change as you age, but they don’t have to. You have the control to give yourself the best possible shot of not succumbing to the excuse that it’s just old age and nothing can be done about it. Getting older, if done with the right attitude and mindset,

creates room for the gratitude of being lucky enough to age.... Tim is a prime example.

Tim is in his early 70's. He's devoted to making sure he lives a healthy lifestyle, one where his partner doesn't have to be a caregiver for him in the future; he, himself, went through a life changing experience with his first wife as he had to care for her. He has a goal to lift 200 lb off the floor and maintain an active lifestyle – one where he can travel anywhere he wants, be able to walk over 15 miles in a weekend, and continue to work with his hands and do manual labor for fun well into his retirement years. Just the other day he lifted 180 lb off the floor with ease... there is no doubt he will hit his goal. Why? He thinks about aging as a non-issue... for him, it is a blessing. He is not an exception – he's worked hard over the years to keep his body in shape and continues to surpass any pain or ache that comes his way!

If you change your view that aging is all about the body breaking down, things going slower, and not doing the things you used to, and you replace it with a view that aging is a gift and you can do anything you want, your entire life will transform.

Here's the other point about getting older: most people plan for retirement and work most of their lives to achieve that goal. They meet with a financial planner and are recommended to put \$1,500 a month away towards retirement so they can retire at the age of 65 and maintain a lifestyle they desire. Then 65 comes, and although they are in "okay" shape, don't work out regularly, and eat moderately healthy, they have no plan for their body to be ready for retirement. They still have frequent low back flare-ups or a twinge of knee pain when hiking or climbing stairs, all of which keeps getting worse. It used to only last a day or two, but now it's forcing them to spend upwards of a day on the sofa at a time. There goes a Sunday on the golf course with buddies or that girl's trip to Napa Valley for a wine tour.

So, where's the retirement plan to keep the body and mind healthy alongside of retiring monetarily free and with more time? What's the point in retiring if you have too much pain or aches and stiffness to actually enjoy your retirement years?

Many of our clients come to us in this exact situation. So, we ask them to create a health plan (with our help) that will help them combat pain, aches and stiffness, fuel their bodies correctly, and preserve them from breaking down; we help them focus on building the mental sharpness and toughness needed to tackle getting older. The ones who are committed to doing so are living some of their best days and enjoying every minute of them. Our favorite days are when we receive emails or texts from clients with pictures of them skiing on a blue bird day in Breckenridge, hiking through Waterton Canyon, walking their dog in Washington Park, or they send us videos of them playing with their grandchildren. Can you imagine what this would mean for your own life?

So, we see that you have 2 choices: you can either accept getting older as a terrible, negative thing, or you can make the decision to create and execute a plan centered around what needs to be done to live your best years, even as you age into your 50s and beyond.

Ultimately, it's your choice.

My Mom Had Bad Knees... My Dad Had Terrible Back Pain Too...

Can you inherit back or knee pain from your family? Do your genes carry the blue print for these conditions? Or is it a habit thing? It is popular to hear from people that their knee osteoarthritis or low back disc problem is genetic.

There's not enough proof in the research that can honestly pinpoint pain or degeneration being hereditary or linked to your genetics. There is, however, more evidence that most people deal with some type of joint pain in general, but again, if we assume it's due to arthritis or degeneration of joints... a concept we've already concluded to be not the root cause of pain... then it directs us to the latter issue: your habits. Most point to environmental and psychosocial factors like:

- Sedentary Lifestyle
- Poor diet
- High stress

- Lack of Regular Exercise
- Irregular Sleep Patterns
- Limited Meaningful Social Interaction

Now, the majority of our clients who initially blame their pain on genetics ultimately come to realize that the real root problem is instead related to poor habits and a lack of understanding about what the real root problem is. We will discuss habits and these factors mentioned above in more detail in the upcoming chapters.

My Doctor Said I Need Surgery...

Surgeries aren't quick. Let's just be truthful about that right from the beginning.

The mistake people make is having a surgery that they later regret due to the additional pain or interruption in their lives, infections, having to get reconstructions because it went bad, continuing to have pain, or the experience new pains after.

Once you are out of surgery, it takes time to heal and get back what you lost. The ironic part about joint surgeries, in particular, is that so many people do them to get their lives back, yet the procedure still stops them from completely being able to walk, hike, or do what they love. Why? Because it takes anywhere from 3 to 12 months, if not years, to heal enough for that to happen.

Not only do joint surgeries take lots of time to heal, but then you go through the process of rehabilitation to get back to daily activities, let alone bigger activities like hiking, running, or skiing. Surgery really is a big time commitment.

The other thing to point out here is that you have a choice. Just because your doctor might say you need a joint replacement, or a scope to "clean up" the joint, etc., doesn't mean you have to have one. These joint surgeries are elective surgeries, meaning you choose to do them or not.

We had a client who was recommended she get a meniscus surgery since her MRI showed it was torn. The doctor suggested surgery to fix it, but she decided she was tired of having surgeries and told him she wanted an alternative solution. He supported her in her decision to go a more holistic route. After 4 months of us working together, she said she felt better than she had before she had her meniscus tear. She was completely pain-free, able to hike with more stamina, get on the bike and ride for miles, and able to walk in the park with ease again.

Would it be such a bad idea for you to commit yourself and your time to the right program from the start? One that continued to help you stay active without forcing you to stop doing the things you love? And to top it off, one that will give you informed answers about surgery, that is, if it is even necessary to get out of pain and get your life back?

Surgery isn't as appealing as it can sound at times. It's a long process and one that isn't 100% reliable, despite how much we've been made to believe otherwise...

For example, research estimates the [success rate for back surgeries](#) to be about 50%.² Literally, the flip of a coin chance! Plus, people who have repeated back surgeries have a much higher chance of failure. They found only 30% of second back surgeries are successful.³ The number decreases for third and fourth back surgeries, with a 15% and 5% success rate, respectively. Failed back surgeries are common enough that they have their own medical condition – FBSS (failed back surgery syndrome).

This is not meant to scare you out of surgery or ignore the fact that 50% of the surgeries were successful. It's just to point out that, oftentimes, we see many people still suffering with their same pain after years down the road... when they were told surgery would fix the problem.

² Daniell JR, Osti OL. Failed Back Surgery Syndrome: A Review Article. *Asian Spine J.* 2018;12(2):372-379. doi:10.4184/asj.2018.12.2.372

³ Daniell JR, Osti OL. Failed Back Surgery Syndrome: A Review Article. *Asian Spine J.* 2018;12(2):372-379. doi:10.4184/asj.2018.12.2.372

If you are like most of our clients, then you want to keep moving and not have down time recovering from all the side effects of a lengthy surgery.

It's Not Just Physical Pain Anymore...

Did you know that depression and pain can go hand in hand? Nearly 40-60% of our clients tell us that they suffer with some level of depression since pain has taken over their lives. And why wouldn't they? It's awful not being able to do what you love to do, stay active, or enjoy life with family and friends.

It fits in with the old adage everyone thinks about... "is it the chicken or the egg?" Was it the depression or the pain that came first? Either way, we don't really care – our focus is to reduce the pain you're in and get you back the life you deserve, one which will naturally boost your mood. But, it'd be a disservice not to suggest that your mindset and the thoughts you tell yourself play a HUGE role in the pain you experience. It's not simply just a physical ailment or problem you are dealing with. When you've suffered with pain for weeks, months, or even years... it turns into a physical and emotional problem.

And maybe it's cheesy to read, but one of the biggest mistakes when it comes to people successfully getting out of pain is thinking that their emotions and mindsets don't play a role in pain.

We understand it wasn't really in your plans to have a future constantly worrying whether your body will be able to keep up, or worse, be concerned whether you are going to end up needing a walker or wheelchair for the rest of your life. And we're sure that, if you didn't have to constantly worry about what was going to set off your pain or not, you'd likely be in a different position than you are in today.

No one ever wishes this for themselves. But it's hard not to think this way when pain cripples not only your physical capabilities, but your emotions and mood, too.

Some people don't believe they are worthy of getting out of pain. Others have resentment towards it or do not truly believe they will ever

get out of pain. In our experience, these people are some of the hardest to help. They simply don't have an open mindset to see any opportunity and will always find a way to hold themselves back.

If Your Thoughts Could Speak...

The real problem is that the methods we use, and are going to teach you later in the book, cannot work well or be successful when someone lacks the right state (of mind) and the story. What do we mean by this?

Well, the strategy is less effective you don't have the right story being told in between your ears. If you are constantly telling yourself that you will have this pain forever, that there's no one who can help you, or that you're doomed... you will likely have a much harder time getting out of pain successfully.

Why?

Because the state of mind you are in, or the emotions you feel, control the story you tell yourself. For example, let's say you want to lose weight. If you dread having to change what you eat (state of mind + emotion) and tell yourself that you are too fat and no one likes you (story you tell yourself), what's the likelihood that you will stick to the diet (strategy to lose weight)? Probably not much. You might do so for a week or two and then you'll likely go back to what you were doing before.

This is the problem: many people have a great strategy to lose weight, but the state of the energy around it (not excited, no desire, no optimism) and the story (I'm not worthy, I don't think I can do this and stick to it) will actually stop them from losing the weight. Getting out of pain is no different.

One way for you to discover if the state or story is holding you back, is to ask yourself these hard questions below. We recommend you take at least 10-15 minutes and write down your answers:

- Do I believe I am worthy of getting out of pain? If no, why? If yes, why?

- Do I believe anything will actually work for me to stop the pain I am having?
- What am I really telling myself when I experience my pain?
- Do I have the confidence and belief that I will be able to tackle this and actually achieve the success I want? If the answer is no, keep asking yourself “why” at least 5 times to get to the real answer.

Now's Not The Time - But Is It Actually Costing You Even More Time?

Sandy started out by telling us that she had a bad back for many years. She's been in and out of chiropractic clinics, used massages here and there, and otherwise just decided to slow down a bit so that her back pain wouldn't flare up or cause her to have to stay home. Sandy is one of those go getters. She was on the go constantly, but at the same time, when she was home, all she did was think about how she was paying for what she did that day because of her back pain. It could put her down for days in a row and this just wasn't her. She was someone who was full of life and love for being around her friends and family, traveling, and staying busy. So, after she mentioned years of misery, it was evident that she had wasted a lot of time in her life not only worrying about her back pain, but also lost time that could have been used to do the activities he loved.

This is a big problem we see happen with people all the time. They have no time to worry about the pain, but really all they do is end up worrying about the pain... and before they know it, months if not years have passed and it's still there.

People think they don't have the time to take care of the pain. Life is too busy and there's just not enough time in a week to devote to giving it to themselves or to commit to a program that fixes their pain. But really, what they don't understand is the amount of time and energy wasted on worrying and stressing about it. In this case, the pain is irrelevant. It is the constant worry, stress, and fear that ends up eating more time than the pain itself.

Imagine how much time would be more readily available if it was just fixed from the start! And when the pain is gone in the end, many people realize they end up saving even more time in their lives. Why? Because their mind isn't constantly worrying about whether their pain will come back or not...

Time is non-renewable. We all want more of it, yet we are busier than ever... too busy to take care of ourselves. Who has time to be in pain and spend time worrying about it? Not you.

But the reality is, how much time have you spent worrying about your pain? How much time have you lost out on with family members or friends because of your pain? How many things have you missed out on or stopped doing because you were worried your pain would return? These were the questions we asked Sandy and she replied... "years."

These are the questions that we ask our clients, and we challenge you to answer them, too:

- How many extra hours in your day and full nights of sleep would you get back because you are not worrying about your pain?
 - Hours:
 - Nights of Sleep:
- What value would it bring to your life if you didn't have to worry about this pain any longer?
- If we could snap our fingers and this pain was gone, what would you be doing differently right now?
- What impact does your pain have on the loved ones in your life right now?

Listen, we both know that our time is limited and it goes fast. It's worthwhile to make sure that you are spending your time wisely and using it how you choose to. So, if you're wasting your time on not fixing your pain and not getting back to being the active, lively person you want to be, you should begin by asking yourself why.

"I've tried everything before, even Physical Therapy..."

We understand you have tried many options to help yourself get out of pain: massages, pills, adjustments, heat, cold packs, doctors, injections, and even physical therapy. How frustrating to keep trying different things, yet coming up short in terms of getting solutions to put this pain to bed! We've seen this time and time again... one bad experience after another and you start to question if you can even heal anymore.

The good news is – yes, there is good news – that now you know what doesn't work. Even the stuff you tried in physical therapy before can fail you...

Honestly, we're not holding back in this section; we saved the best for last because dare we say it... one of the worst mistakes happening in our profession, right now, is how traditional physical therapy is not delivering results to clients.

If you are one of the people who has experienced this, then we're so sorry this happened to you.

It's why many times people have turned to other options like pain pills, injections, and surgery. It's likely your doctor suggested you do PT before you get surgery, and if it failed, then they offer other solutions. The question not being asked is what kind of physical therapy did you have?

Yes, not all physical therapy is created equal. There are a few problems with why this type of generic, cookie cutter physical therapy fails people.

We'll just be fully transparent: part of the problem is that the system is broken. Insurance companies dictate the nature of many physical therapy clinics and decide what type of treatment you get, how much (you only get to treat one joint!) can be done for you, and how long you can be seen (they tell PT's how many visits you get seen for). And if the PT's do more for a client than is deemed "medically necessary", they won't reimburse the clinics for that help. This is the typical "mill" physical therapy clinic where sheets of generic exercises are tried without success... over and over.

It's not the clinics' fault. It's the insurance company's fault. Because the insurance companies reimburse so poorly, these clinics have to run at high volumes, see massive amounts of people in a short time, and push people in and out. You often only get 15 minutes at most with the physical therapist and then you're pushed off to a junior who finishes up the rest, or worse, *you* finish it yourself with a generic piece of paper that the person ahead of you just got handed as well.

The other part of the problem lies in assuming that all physical therapists are created equal and do the same thing. The majority of PT's do not have the expertise to look at your body as a whole or in a holistic way.

Not all PT's get to know you and your whole story, dive deep into your habits, sleep, or diet, let alone give you enough time to look at other places in your body to figure out what's really going on. It's not the same level of care across the board.

This is why all physical therapy isn't always created equal. The mistake is thinking that you've tried it all just by going to one physical therapist. We all have different skill sets.

It's like saying you tried going to a doctor. Well, what kind of doctor did you go to? If you have a digestive problem, you're not going to go to a cardiologist, right?

Just like in every profession, there are different kinds of physical therapists and clinics, and "failing" your first trial or two just means that you didn't get the right kind of physical therapist that can help you... yet.

Like we tell everyone who has tried many different options, even though you haven't found the solution yet, you are one step closer to success just by finding out what doesn't work. Thomas Edison put it best: "I have not failed. I've just found 10,000 ways that won't work."

Chapter 3: The Most Vital Aspects to Healing & Recovery That You Must Know About

The biggest questions we get asked over and over when it comes to having any type of pain is “why did this even happen to me in the first place?” It’s also the one being asked by every person in pain right now, all across the world. Most people understand that when they find out why pain is happening they won’t do the aggravating action again. Yet, not doing it again doesn’t take away the pain you are experiencing right now. Pain doesn’t care how much you wish it wasn’t there and it pays no attention to how you feel. It doesn’t care if you’re having a so-called good or bad day. It just keeps happening regardless.

What we’re really asking for anytime we wonder why it’s happening is what caused it... so we can do something about it. We call this the root cause. Finding the root cause is a method of solving your problem at its source, rather than just treating the symptoms.

If you’ve ever tried solving your pain, but it shows up again and again, you’re not getting at the root cause. And what most people confuse the root cause is its symptoms: those areas where the pain, soreness, or aches end up. This isn’t the root cause. It’s likely coming from somewhere else.

Inside this chapter, we’re going to take a deep dive into the most vital concepts you need to know about in order to allow healing and proper recovery to happen when it comes to all different types of pain.

And to start, if you were to look at all the people who suffer with pain, you’ll find one of two things in common with all of them: they didn’t find *the real root cause* or they had an *improper recovery*.

Not Finding The Root Cause...

Say you have a persistent tire that continues to go flat. You change the tire and just a few months later, the same tire on the passenger side goes flat again. You rotate the tires and replace the flat tire once again. Yet again, months later, that same tire on the passenger side goes flat.

You take the car into the shop and find that they missed a bigger issue: your axle was bent, therefore causing the tire to wear on the inside and go flat. No amount of tire replacements is going to fix this issue.

This is what most people are doing when they are just try to make their pain go away with passive modalities and not getting down to the real issue underneath it all. If what you've tried hasn't helped you the way that you'd hoped, it's likely the real, root cause hasn't been discovered.

Now, again, this is when most people think that because their MRI results or the X-Ray says they have arthritis, disc degeneration, disc herniation, or a tear in a muscle, that is their root cause. But as mentioned, from the research and evidence you'll start to discover how this isn't always the case.

So, then, what are some root causes of pain?

Weak Links in the Chain

Your body is not simply a collection of separate parts like an arm or a leg. Rather, it is a collective being. This is why, if you want top care, your whole entire body and experiences have to be taken into account. Sadly, our healthcare system is set up in a way where i's care is specific to one thing at a time – a single joint or a specific diagnosis.

Sarah, a lovely lady in her early 50's, shared her story of how she tried to get help from doctors when she had excruciating back pain. She went for a visit because she could barely get up from her bed to simply get to the bathroom, let alone go for hike with her puppy as she loved to do. As her husband drove her to the appointment, both were nervous about what was going to happen next. The doctors requested an X-Ray and then gave her prescription pain pills. Sarah didn't like pills, but she was in so much pain – she took the prescription to get some relief. A little while after, the doctor walked back in and said they wanted an MRI, too.

Sarah had previous bouts of back pain like this, but it was never this bad before. She felt like it had something to do with the tightness of her hips – she was sitting more at a desk job recently and in a new chair

they had given her. So, she explained this to the doctors and they just brushed it aside as if Sarah didn't really know what she was talking about. They told her that they didn't see anything wrong inside of the images other than arthritis, told her it was a muscle spasm, and sent her home with muscle relaxants and pain pills. They told her to follow up with them in 2 weeks if it was no better.

I remember Sarah being incredibly discouraged: "No one looked at me. They didn't even move my legs or ask me to do anything besides sit and listen to them. No one really asked me anything beyond what I did to cause the pain. And they didn't even consider that my hips or alignment were changing from this new chair I was in."

Not only that, but she mentioned to me that her life was more stressed at work in the past couple of months. So, Sarah stopped going to the doctors because they didn't listen to her anyways; she went searching on *Google* to get help from someone that looked at the body in a holistic way. This is how we met Sarah.

Together we tackled finding her the root cause, and to Sarah's surprise it wasn't just coming from her hips. It was a bigger issue stemming from a previous injury she had endured because of a car accident years ago; the injury affected her left mid-back. Her hips and her low back were getting the brunt of it. We discussed methods to not only ease her back, but also discovered ways to help her sleep better, manage her stress more effectively at work, and got her nutrition back on track to help heal her back as well.

Her frustration is similar to many of our other clients'. If you are not working with someone who provides the level of care you deserve, then that is big problem. Most likely something is being missed.

So, is it all connected? Yes.

This is why most people ask if their pain is connected to a car accident from their younger years or a previous injury. It's also why they wonder if their shoulder pain is connected to their hip or back pain.

You have chains in your body that connect from your head and fingertips to your toes. So, yes, it is all connected.

As mentioned previously, root causes can be a bit more complicated to find than just simply looking at an image to see what's wrong.

When it comes to finding root causes, one of the biggest areas one needs to look into is your alignment. How does your alignment cause you to move your body and what muscles or areas of your body are helping or hindering you?

Your body begins to compensate as the years go on; you might put more weight into your right leg than your left without even thinking about it. Why? Because you've had left sided low back pain or knee pain for years. Alternately, your hips might be uneven, or one is higher than the other, thereby forcing your back to be tight on one side. Finding those imbalances or compensations will be where your root cause comes from and they are found in the chains of the body.

If you can move all your life without pain and then one day you wake up and have pain, it's likely you can reverse and move out of the pain as well. The body needs to be reprogrammed from time to time.

These chains connect us from our head to our toes with muscles, tissues, and joints. They allow us to do things like pick up our babies out of the crib, bend over and get up off of the floor, and swing a golf club on the 18th hole with our friends.

But when the chains get disrupted, or an area of the chain is not pulling its weight or doing its job well, this can lead to more stress being put on another area.

It's much like working with a bad co-worker. You've probably experienced one of those in your lifetime, I'm sure. When they slacked on the job and didn't pull their end of the stick, who had to pick up the extra work?

You! Or someone else in your team.

Your body is no different – when one of the muscles or joints in the chain is not pulling its weight or doing its job, there’s another muscle or joint in the group that has to pick up the slack. This can lead to overuse and pain of that area being overworked.

But again, this is not the real problem – this is a symptom you feel. The real problem is the muscle or joint that is not doing its job.

Missing the real, root cause of why pain is happening in the first place will be the biggest reason you don’t get back to doing the activities you love, and it is therefore one of the main reasons people stop those things all together.

So, if you’re still in pain and haven’t found a solution to put an end to it, the first place to start is to find out what the root cause of your pain is. Then, it can be taken care of properly... for good: you won’t just have temporary relief, you’ll have a permanent solution.

Another reason people continue to have pain and don’t get lasting solutions is...

Improper Recovery

It’s imperative that you not only work on the right thing (your root cause) in order to get out of pain, but also that you have a successful plan to stay out of pain for good.

Most times people get stuck in a perpetual cycle that involves taking some Advil, resting, and then trying a massage or getting an adjustment... then just wait for it to get better with time or continue this cycle over and over, right? The first couple of times, this might actually work. So then, they’ll do it again when pain comes back... and again... and again. The problem is, though, that the pain just comes back.

Why?

Because you have not experienced a full, proper recovery yet. It stopped short, and that's why the discomfort or pain came right back. This cycle is one that many people get stuck in and continue to use over and over for years. The short term relief is enough for most people to think that it worked... but then the pain just pops up months, if not weeks or years, later. That's not a solution to put an end to pain. That's just a jack-in-the-box waiting to pop up and scare you when the handle is rotated just enough...

Before we dive deeper into what proper recovery needs look like, let's first take a look at the two different types of pain people experience:

What's The Difference Between Chronic and Acute Pain?

Chronic pain is something most people have heard of and are aware of. The word chronic simply means "long" or "lengthy". But, it's not just as simple as having pain for a long time. When this type of pain starts to develop, it's not just that the body is trying to heal itself at the tissue level or get rid of inflammation in a joint, it's deeper into the nervous system.

Your nervous system is the part of your body that collects and stores information about how we experience anything such as pain, happiness, and life events throughout the years. Our nervous system is the best data collector we have. It's the part of your body that tells you not to touch a hot stove... since you tried that once when you were 3 years old and that didn't turn out to be a great experience. It's also the part that reminds you about the pain you once felt when you lost a loved one and how your body responds when you feel those emotions. This is why some people get more back pain or neck pain when they are stressed when big life events happen.

If you've suffered with years of pain, or have a low grade pain on the daily, you know that this type of pain can feel overwhelming. At times it can take a complete toll on your life. Other times, you'll have decent days where you can tolerate the aches and pains, but then you'll have a flare up where it's more miserable and harder to move. This is what we call an acute (short) on chronic (long) pain episode.

The reality is that this nervous system serves us really well because it helps us in so many ways: to feel things, to sense our environment, to react, and to keep us safe. It gets a bit more challenging when it starts to come into play with your pain, so much so that it can keep you from doing things you once loved to do. It may be giving you faulty signals of pain, or making you fearful to move, even when there's no threat or harm done to you.

This type of pain – chronic pain – takes time and needs to be addressed at the root cause level, which has to do with the nervous system for a start.

The other type of pain is the one that most people experience, and it is definitely the sneaky type...

Surface Level Pain

Someone in this type of situation – with surface level pain – will experience a bout of pain, but then it goes away on its own. It's hard to pinpoint when or why it happens, but when it does come back, it comes fully fledged.

So, for example, let's say you have a day where your back just acts up after being in the garden. You don't really go out of your way to do anything to fix it, or to find where the root cause is, but you do have relief within a few days. You might think that your body has "healed itself" without you proactively doing anything. Great, right?

Then, 3-4 weeks later when you were feeling great and you didn't have back pain anymore, you go to pick up a bag of trash... and boom! There it is again: that terrible sensation of back pain, only this time it's four times worse than the last bout.

The real problem with this type of pain is that it is just lying dormant right under the surface, and the moment you push it or try to do something aggressive, it just comes right back, oftentimes more severe than the time before.

Now, the reality with this type of pain is two-fold: *the root cause was not identified* and the *recovery process* did not happen whatsoever.

And that is why the pain keeps coming back time and time again.

The truth is, many times people can have both types of pain – chronic and acute – and not just one or the other. Remember, pain can be very complex, so having patience and time to see it through is what will make the difference in your fight to get out of pain successfully.

Recovery Needs

So, what needs to happen in recovery then?

True recovery isn't as simple as doing a few exercises and hoping for the best. Sure, you can pick from various different sources like *Google*, for instance, but in our time helping people, one thing is tried and true over and over again: you need to **LEARN** how to move your body properly once again.

This is the bread and butter of how we help people. Most people know to move, walk, and exercise to take care of themselves and stay healthy. Most people also try exercises that someone recommends, participate in work-out classes, or search for exercises on *Google* or *YouTube* to help. All in good faith, of course. On the surface level, that's all fine and good.

But that is only the tip of the iceberg. It is much more complicated than that.

We like to think of the body as a moving machine. As you know, if all the parts in a machine are not functioning, the machine won't work as well and it may even get to the point where it stops working altogether.

The same is true in the body. It's not just about one exercise or one joint. It is about how *all* the joints and muscles work *together in unison*.

It's also not just about the strength of the muscles and being strong. It is about the timing of a certain muscle to “turn on” when it is supposed to, as well as how each muscle coordinates with other muscles and the brain. Muscles that fire together, wire together.

Every activity you do is different, therefore each pattern is unique when it comes to getting muscles to fire together.

Not understanding this concept is one of the biggest mistakes we see. And often, it's overlooked when people do try alternative options and don't get back to living a life full of activity without pain.

And did you know that your body also holds “movement memories” which are rarely talked about?

Movement memories are what are bodies remember day after day and year after year. When those memories begin to head down a path of injury, pain, worry, and stress, it is not long before the body will end up in a movement memory cycle.

The pain will flare up, get a little better, then flare up again, thereby leaving the person in a perpetual state of a negative movement memory cycle.

In order to get out of this sort of thing it requires new memories to be created and dosed appropriately. This needs to be done in a sequence that allows the body to get out of its negative movement cycle trajectory and onto a trajectory towards a healthy movement cycle.

Coordination of movement, as well as the timing of movement, are very underestimated concepts when it comes to having a proper recovery and eradicating pain. This is especially true because they are extremely important when it comes to moving with less pain as you age.

The same goes for chronic pain and the role your nervous system plays in this type of pain. Normally, pain is your nervous system's way of warning you about perceived threats or movements that could cause you harm. But, at times, these signals can go awry.

It's almost as if you had an alarm system in your house. Your alarm system is meant to help you be aware if a burglar or an intruder who has broken a window and come into your home. Its job is to warn you that you are in danger.

Chronic pain then can be a bit more like a faulty alarm system. It perceives danger or a threat when a tree branch is scratching your window. It will alarm you when, really, there is no high level of threat.

This type of pain goes deeper, almost as though a legacy has been left on the tissue: it's developed a memory to give you an alarm during normal daily activities, or even during things that used to be simple and easy to do. It's created a memory – a pattern – to continue to give you pain associated with non-threatening activities.

The area of injury really needs to understand how to fire the muscles again, and thereafter it needs to re-learn how it starts to play into the body's natural movement patterns or chains in the body.

As we mentioned, the body has these muscles that work in unison, almost like conducting an orchestra. When you want to bend over and pick something up, there are muscles that connect to one another in order to make that happen smoothly and with ease. Alternatively, when you want to push a heavy wheelbarrow, you have a different chain of muscles that do this work in unison in order to perform that task. These chains continuously talk back and forth to each other, relaying information nonstop.

But, when an area in your body is vulnerable or weak, this exposes a weak link in the chain.

Resultantly, the orchestra is out of beat or out of sync. This causes us to play a slightly out of tune song. If you get just enough offbeat, the piano and the violins can't get into rhythm again, and ultimately you've got a bad song on repeat... and it will likely lead to an injury.

This is the importance behind the need for a proper rehabilitation process. It needs to start with identifying the weak links in the chain to prevent having more issues.

On the other side of the coin, if you're someone who has gotten some relief but don't feel like you are back to 100% yet, or you don't have the confidence you need to get back to doing what you love to do, then you might be stuck in a plateau.

Feeling Stuck In A Plateau

Other people tell us they feel like they are doing all the things that they can, and are trying hard to get back to doing things that they love, but they feel as though like they are stuck or not able to get past their current state. This happens to many people.

For them, the pain has improved a little bit and they can do many of their daily activities around the house again, but they're having difficulty getting back to bigger activities like hiking, skiing, or just feeling completely back to normal. They feel like they are not over the hump, so to speak.

Many people will ask us questions like:

“Is what I'm doing actually helping me?”

“Am I actually getting out of pain with what I'm doing?”

“Is this still worth my energy and time?”

In this case, there's a missing piece: they are simply stuck in a plateau. They need the next level care from someone who knows how to take them past where they currently are.

It's important to note that, at this point, pain may not be the issue: many people simply don't feel like they are confident enough in their bodies to return to the activities they once enjoyed.

It's likely no one has looked above or below the area where the pain is found. Remember, it's all connected.

Plus, the body needs to be looked at as a whole, and on top of that, the dosage of your exercises will have to be adjusted in order to take you to the next level.

We think of giving exercises to people much like any other prescription medication you would take. Just as a doctor wouldn't overdose your heart medication or any other pill, exercises and the right type of activity need to be looked at similarly.

If a dosage is too little it can cause you to feel stuck; it can also be too much, though, thereby causing you to have more pain than when you started. A balance between these two is what we call the *sweet spot*. But, as you get over the plateau and unstuck, your sweet spot moves and grows with your changes in abilities.

This is why a proper recovery, and a plan that progresses you all the way back to doing the things you love WITH CONFIDENCE, is even more important than just simply getting out of pain.

Because the reality is, if you're still struggling to think that you could do a hike or you could play 18 rounds of golf, then you still have an issue.

For most, it's not that the pain is gone, it's that you have the confidence to do whatever you want, when you want, without hesitation.

The Test - Retest Method

Let me tell you why so many people feel stuck or in a plateau... and rightfully wonder if what they are doing is going to help them get out of pain once and for all.

I'll start by telling you about an old method where so many people typically get stuck and feel like they aren't moving the needle forward when it comes to getting out of their pain. This old way, or the old method, has been used for decades and decades and a lot of people

have gotten stuck because of it. This method is in direct contrast to the new method we use here at *The Physio Revolution*.

So, let's say you have a sciatica episode come on. In the old method, there's this normal "recipe" in which you do four different exercises that everyone else with sciatica normally gets in week 1. Week two is when you do the next six exercises. Week three, same thing... another four to five new exercises. You're getting the gist, I'm sure. Basically, the old method calls for anyone with sciatica getting the same exercises over and over and over. And so, you'll get a "cookie cutter" approach: you're just another person with sciatica, so you'll get a generic protocol to follow just like everyone else.

Consequently, this is why so many people get stuck – assuming that all sciatica, for example, is the same. Sciatica is a unique experience and treatment is different for everyone. As is any meniscus issue or rotator cuff issue. This old method, or "cookie cutter" approach, works for very few people, and it isn't how we've seen people accelerate to get out of pain faster. So, if you're using the old method, this cookie cutter plan will not help get you out of the plateau.

But, how do you actually know what you're doing is helping? The big thing that everybody wants to know is: "If I'm going to put my effort into this, how do I actually know that I'm moving in the right direction?" I'll give you a sneak peek and show you the exact method that we use here, all so you can understand if the needle is moving in the right direction for you or not.

To start, if you're struggling with any type of pain, it will generally follow a pattern like this:

Normally you have absolutely no pain or you're not struggling with any symptoms. Then, if your injury is not traumatic, as far as any accidents or major falls are concerned, people then move into one of a couple of stages of pain...

First, they might move into feeling some level of stiffness. You might start feeling your back getting stiff or your hips getting stiff. This is a

sign that you might be moving into a bad pattern, typically becoming more evident in your 40's and 50's.

The next stage we see will then move into more of a soreness or ache sensation (low grade), and this begins to creep in around your 50-60's. The soreness or ache might come and go, but it's more prevalent than just feeling stiff. After this, you'll move into an actual sensation or level of pain... real pain. Pain where it's maybe even sharp, dull, or a "nervy" feeling. The whole trend of getting into pain typically has some level of this pattern:

No Pain → Stiffness → Soreness/Ache → Pain

These are the levels that people progress into or go through when they start getting a normal pattern of pain gradually coming on over an amount of time, be that weeks, months, or years.

Now, in order to know that *your* needle is moving in the right direction and that the things you're doing are helping you move out of pain, we simply reverse these arrows starting from the spot you are currently in:

No Pain ← Stiffness ← Soreness/Ache ← Pain

If we can work backwards and find out how to reverse the process and make the pain change back into what it was when it started, then we know you're headed in the right direction. So, moving from pain into more of just soreness or aches. Then we assess how we can take soreness or aches and move into just stiffness. In this way, you start seeing and noticing patterns that tell you and help you know that you're moving in the right direction, that is, towards your ultimate goal which is to move normally again without pain, right?

You do not deserve a cookie cutter approach – there is a lot more to your pain. Taking just any set of exercises and throwing them at a wall to see if they stick is not a long term solution. The approach needs to be specific to your pain, body, and unique compensation patterns.

The New Approach

Instead of having that cookie cutter approach – the old approach of generic, planned exercises – you’re just going to do things a bit differently to help you move out of pain and be more active... faster. This is precisely what we do at our clinic because we feel it’s exactly what you deserve – individualized care.

So, what’s the new approach and how does it look at you differently and uniquely?

Let’s say you’re someone who’s been dealing with sciatica and you’ve been struggling with bending over to put on your shoes, for example. The first thing we’d need to do is test your movement during this activity. We’d test all different types of movements, but start where it hurts the most. We’d test all different types of bending, such as having you stand up and fold forward over your legs to see how that feels, or have you bend over while sitting on a chair, or go to lift something off of the ground, for instance.

Then, you’ll help us understand your pain by rating how it feels on a scale; we’ll then collect the data and examine the quality of your movement. We’d be able to observe, quantify, and ascertain a plan of action based on baseline measurements.

After testing the motions in order to pin down a baseline, we then come up with a specific plan for hands-on treatment options that we know – based upon the test results we collected – will help you feel better.

After we do treatment to help reduce the pain, we have to retest it to confirm the pain is lessened. Not only do we need to assess improvements that day, but we also need to make sure that you’re going home with that special, unique recipe of homework to do on your own... one that’s actually helping you move your needle in the right direction.

This is a very different approach; it is way more specific than what you have been given previously. No more exercise sheets pre-printed on a paper or some silly *Google* or *YouTube* exercises just to see if they work.

Instead, we have to test the motions, assess the effectiveness of the exercises, tools, and manual techniques to make sure that the needle is moving forward. And how do we know it's moving in the right direction? Because of the arrows I mentioned before, and because the sensations you feel should be moving in the right direction... less pain/soreness/ache/stiffness, or less intensity of pain, or more activity that you can tolerate.

It looks like this on paper:

Test —> Treatment (hands-on, exercises, or other tools) —> Retest

This should be done every time you want to reduce pain or need to get unstuck out of a plateau. And as your body, activity levels, and pain changes over time, so too does your specific recipe of care. Your program should always be evolving to match what your bigger goals are.

The proof is in the retesting. This is not a cookie cutter approach – you don't just grab four random exercises from *YouTube* or *Google* anymore. They aren't reliable. Most of it is junk on the internet anyways.

You need specifics and a better understanding of what it will take to tackle your specific pain; what it will take to get you unstuck so you can have a better quality of life once again. You deserve that and much more if you've dealt with pain this long.

If at this point you've realized that you're tired of cookie cutter approaches and doing exercises that don't help you get unstuck or out of pain, and you know you'll need a new approach with proper guidance, then you can go to www.thephysiorevolution.org/book to

schedule a no-cost discovery phone call with my team to see if we have availability to take you on as a client.

All of our exclusive clients started with this call to get quality customized health advice and to see if this was the right decision for them. The call is free to you, and just to let you know: we don't take on the majority of people that we speak to. Yes, that's right. It's just that we want to make sure we are 100% certain we can help you the way you hope before moving forward with any commitments.

It's now time to dive into a detailed look at some specific areas of pain – back, knee, and neck and shoulders. The next three chapters will take you on a journey, and my hope is that they give you the information you need to make better decisions regarding your health. Now, don't just read the chapter on knee pain if your knee hurts, and don't just focus on back pain if you're sore there.... remember, it's all connected, and all of the advice that follows is essential for your journey out of pain.

Chapter 4: Knee Pain

If you're living with bad knees, they're painful, or they ache, then it's very easy to think it's "just something that comes with age", it's a bit of "wear and tear", or that it's nothing and will go away on its own.

You can't quite put your finger on why you're feeling so much pain in your knees, but it doesn't seem to be getting any better. If that's happening to you, then you're not alone. In fact, we hear this type of thing all the time.

Many people tell us how they have bone on bone, meniscus tears, or arthritis in their knees, and that they're worried that, if this isn't fixed, then the pain won't go away and that it may even get worse; they're just not sure what to do about it.

Others say that their knee pain has become so difficult that they have a hard time with hiking or walking, not to mention simply trying to go up and down stairs. Some have been told it's from ITB syndrome, knee cap (patellar) tracking issues, or even a long standing tendonitis issue.

If you've already tried surgery or an injection and it only helped for some time, but now the pain is different or worse...

And if you're looking to avoid this knee pain from worsening or have to avoid doing what you love to do, you're in the right spot.

This all makes sense, and we see these scenarios all the time. In this chapter, therefore, we'll take a deeper dive into why knee pain is happening and what to do about it.

But, let's start with what I would do differently if I ever had knee pain again.

If I Were To Get Bad Knee Pain Again, Here's What I Would Do Differently...

First, I wouldn't wait and hope it just goes away on its own. That only makes it worse.

I wouldn't try to stretch or get adjustments on it.

I definitely wouldn't get an injection, as that can be very dangerous in the long term.

So, what would I do?

Let me start by explaining what happened to me when I was younger. Early on in my career, I had bad knee pain. I tore my meniscus, MCL (medial collateral ligament), and part of my ACL (anterior cruciate ligament) when I was younger.

I had done so while playing the sport I love, basketball.

I was going up for a rebound and an opponent jumped in the air simultaneously: we bumped knees while we were both jumping.

When I landed, my left leg was not where I imagined it was going to land and this caused a poor landing. My kneecap slid out of place and dislocated to the side of my knee.

I fell to the ground screaming in pain and holding my knee cap with my hands off to the side of my knee in a spot it visually wasn't supposed to be. Instinctively and subconsciously, my leg wanted to straighten and "POP!"... my knee cap went back into place.

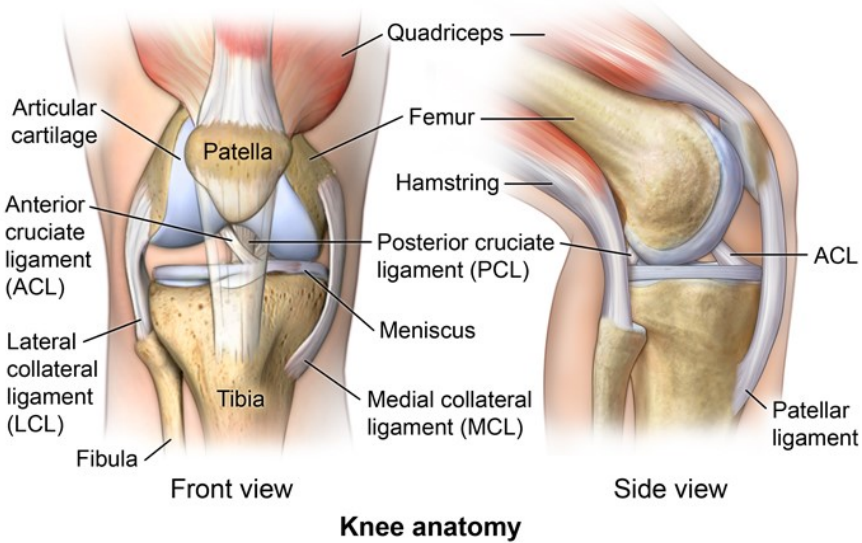
Later that week I went to the doctor's office.

The news was in: I had torn many things that they called an "Unhappy Triad" including these 3 things: my medial meniscus, MCL, and part of my ACL.

Unhappy sounds about right for this injury.

Knowing what I know now, I would have wanted a different surgery than they told me I needed at the time. And knowing what I know now, I wouldn't have gone through the same decisions I did back then.

They removed a big portion of my medial meniscus. They reattached and fixed my MCL. And luckily, it was suggested that they didn't touch my ACL since it would be okay to be left alone.



My recovery process went okay, but I still lacked confidence in my left knee. Every day I was trying to get help for either my back, my knee, or my nearly daily ankle sprains. I tried massages, worked with trainers, PT's, chiropractors, you name it.

Yet despite all this, I felt like a broken body. My knee bothered me nonstop and it held me back multiple times when I was trying to be active and do the things I loved.

Later, I had incredible swelling and pain when just walking up and down stairs, not to mention trying to go for a hike or walk around the park.

Why did my knee still hurt and bother me even when they “fixed” everything inside of it? I had the surgery they knew would help, didn’t I? This was the biggest question that I kept asking myself.

I tried what felt like everything to help and yet the pain just wouldn’t go away. You can imagine the frustration and hopelessness that set in. I asked my colleagues for help, but most of what they tried did nothing for me.

I was told to work on my glutes, since people thought this was where my problem was coming from, but that only helped a little bit. I was told not to squat and that squatting was bad for my knees. So, I stopped squatting.

I was told to stop running, since running was bad for my knees. So, I stopped running and doing impactful sports. I started cycling and pretty much stopped doing the things I loved.

None of the advice I tried helped, though. It made my progress plateau and I felt stuck... like the pain was my “new normal”.

It felt like my identity, one underpinned by being active and free to use my body for running, playing, and being who I am, was being slowly ripped away from me. I saw my future-self being held back, my livelihood being swallowed up, and my future consisting of more surgeries, more pain, and more limitations.

I felt like I was going to end up just like I watched my grandma end up: getting replacements, in a wheelchair, and using a walker.

Desperate for a return to my normal life, I set out on a journey. I traveled the country in search of learning from the best and brightest. I took many courses and studied different approaches to helping knee pain. I eventually found a mentor who had some answers.

I learned that in order to fix knee pain permanently and naturally – which is the holy grail of all treatments – is really not that hard. The secret is fixing **the root cause**, that is, the thing that’s causing your knee to hurt in the first place.

Most doctors and treatments just focus on relieving the pain where it hurts – just looking at your knee and *only* your knee – without ever questioning why it hurts and what other areas could be affecting it. They are missing a key piece of the puzzle... it's likely not coming from your knee.

The truth is, the knee is just where the stress and the pain ends up; it's not where it originates from. The reality is your knee is controlled by the joints above and below it. There are muscles that attach from your hip and ankle area all the way through to your knee joint. These are very common areas that, when injured, can contribute to, and cause, knee pain.

There are chains in the body – they link each joint, like your ankle, knee, hip, and back, together in order to do specific movements: this is what enables us to move in a complex manner.

The problem arises when the chain doesn't communicate effectively or is not "linked". It's like an orchestra trying to be in rhythm without having a conductor to lead the beat or cue the different instruments to start. This rhythm gets completely out of beat and the song will be awful to listen to.

When a part, or parts, of the chain involving your knee are not functioning properly, this causes a breakdown: stress gets put on the knee, therefore causing stiffness or soreness which eventually leads to pain.

Knee pain can be complicated, especially if you've had it for a long time and even if you have degenerative conditions in your knee.

But, even if your case is a bit more complicated, or you have been told you need a knee replacement, if you truly want to stay away from surgeries or multiple injections, you can. Mary is an example of someone who has done just that:

Mary came into our clinic uncertain about what to do about her knee pain.

Before coming to us, she had seen a doctor who recommended she go see an orthopedic surgeon. Mary had noticed a lot of “noise” going on in her knee. She also felt that it hurt to sit in the car for long periods of time, go up and down stairs from time to time, and she was also noticing swelling around her knee at the end of each day.

It was the swelling and the noise knee that concerned Mary the most.

Many of her friends had already gone through a knee replacement in their 60's and Mary thought she would be told that this would have to happen to her, too.

Deep down, this was the last thing she wanted to do: go to the hospital, have even more pain after the surgery, try to learn to walk and bend her knee again, and then have to take a full year or more to recover.

It sounded daunting to Mary to think she'd have to go through that.

She also saw one of her close friends struggle with worse pain than before her new knee replacement; her friend never really got back to being able to walk in the park in the mornings or take the dog on hikes anymore. Mary hated this idea.

So, naturally, if she could stay away from doing surgery then she wanted to do that first.

The surgeon came into the room and told Mary she had moderate “bone on bone” degeneration in her knee and that a knee replacement would likely be in her future.

For now, he wanted to start with an injection to see if that helped; he also told her to try some physical therapy first.

So, Mary went home to think about her options and scheduled the injection with the doctor. She then called the physical therapy clinic they advised her to go to.

After 8 weeks with an injection and some physical therapy, Mary felt she was only 10-15% better. The injection helped immediately, then the pain started to come back after about 4 weeks.

Frustrated with her progress, and telling her husband all about it, he mentioned he saw something in the newspaper about training during knee pain. It happened to be our article. Since it was free, and Mary had nothing to lose, she reached out to us, but she was very uncertain about if we could actually help her.

With a bit of reluctance, she decided to give it a chance, though... and when we took a look at her whole body, the source of her pain was not only coming from her hips, core, and ankle, but it was also due to some of her habits and how she was moving while doing stairs and walking!

We took a deep dive into some of this, and within 6 months Mary was completely pain free, even with moderate degenerative changes and the “bone on bone” diagnosis from the doctor.

Now, Mary is enjoying working out in the gym, and each month she comes back to make sure she’s doing everything she can to avoid that knee pain from leading her down the previous pathway. She is happier and more healthful than she’s been in years.

What we know from many cases like Mary’s is that you are not doomed to have to have a surgery, even with “bone on bone” or degenerative changes in your knee.

In my case, I wouldn’t have let them do the surgery they did on me with what I now know. There was warrant to fix my ligament like they did, but removing my meniscus would be the last thing I’d ever let someone do to my knee. This is a shock absorber and an essential part to assure your knee lasts years and years.

The bottom line? If I ever got bad knee pain again – even after surgery – I would immediately start fixing the root cause of my pain and making sure someone is looking above and below, that is, getting the whole picture and story. I’d do this a million times over rather than waste time on temporary Band-Aid fixes.

If you've diligently read this book up to here and have felt like you're being challenged in your thinking, this is exactly what we wanted to do.

We hope you've started questioning whether you want a short-term quick fix or if it's better for you to put in the effort for a natural, long-term solution.

Band-Aid fixes are just that: quick and typically not long-lasting. They are not solutions.

So, if you want a long-term solution, you're going to have to be willing to put in the time and effort to find the real root cause of your knee pain. Why? So that it doesn't come back down the road.

I will not sugar coat the truth. You didn't come here to be tossed nonsense, magical solutions. You came to read a book that will give you real, long-lasting solutions. I encourage you to make the changes you need to make.

The Musical Notes of our 40's, 50's, and 60's

Are your knees getting stiff as you get older?

People in their 40's, if not early 50's, commonly tell us: "I'm getting old... and stiff!"

It's around this age that people begin to feel tightness in their calves, knees, or thighs. They'll do more stretching to ease it, but that only temporarily takes away the stiffness...

They might also blame the fact they are not in their 20's or 30's anymore. It's like my aunt or my parents would always tell me, "Don't get older. It sucks!"

It really doesn't have to, though!

So, why does this happen?

Think about what we do in our 30's or the decade prior. We're pushed in our jobs to create more, do more, and climb the corporate ladder higher. It's also a time in our lives when the kids are busy. You are needed in 4 places at one time and you have little to no time to focus on yourself, let alone to focus on your body's overall health.

You will sacrifice much of our own well-being for the sake of building your dreams and fulfilling life's demands... without thinking about your health. You'll put everything else in front of your physical body, neglecting it: you also no longer play or move like you did when you were younger – running randomly, jumping in a puddle of rain, or climbing a tree.

10 years of this neglect in our 30's, and more of the same in our early 40's... and you've got a recipe for disaster. It's the start of the tipping point for most people. This is when they begin to notice more stiffness and tightness in their knees.

Your body is pretty amazing in that it gives you signals, all of which tell you what's really going on. Stiffness and tightness are just signals shouting that something is off or wrong. Your body is asking you to do something about this, and ultimately, when ignored, these signals can progressively feel worse.

So, what is stiffness or tightness telling us?

Well, underlying most feelings of knee stiffness or tightness is a critical message that most people don't understand: when we don't move our bodies, or place controlled amounts of challenge or stress on our leg joints and muscles, we get weaker; atrophy begins to set in.

It's exactly like that age-old statement: "If you don't use it, you lose it."

Remember, muscles are made to help us move and keep space between our joints; if someone gets weak in areas like the calves or your quads, naturally the body will still want to feel like these areas are stable or they will otherwise try to compensate for the weakness. In order to do this effectively, the muscles tighten up and feel painfully tight without a level of control to help joints feel more stable...

This is what results in feelings of tightness or stiffness. The muscles and joints are unstable. This is why stretching over and over when things feel tight just doesn't work. It's not that it's truly tight – yes, you definitely feel tight and stiff, but it's really due to atrophy or weakness in the muscles that support your knee.

This is a secret that most people don't know. Now that you do, it's important to note that, if the proper action isn't taken and the stiffness is neglected, your 50s are going to be a little bit hard for you, turning into more aches and soreness patterns, not just stiffness or tightness, I'm afraid.

Something needs to be done to avoid this scenario, right?

Do you need a knee replacement?

One of the biggest problems we see is how people brush off all of these symptoms as they age. Many say it's inevitable that they will need a replacement, and if that's the case, we understand there is definitely a time and a place for some replacements.

Yet, at times, we can't help but wonder why are so many joints getting replaced every year? Right now, over 1 million joint replacements happen each year, and of those roughly 600,000 are knees...⁴

The average age of a knee replacement is 65 years old. Why is this?

It's the evolution of neglect from the previous years of being stiff, first in your 40's, aches and soreness in your 50's, then pain and swelling in the 60's & 70's.

As you now know, there's normal wear and tear just like your back or any other joint for that matter.

⁴ Steiner C, Andrews R, Barrett M, Weiss A. HCUP Projections: Mobility/Orthopedic Procedures 2003 to 2012. 2012. HCUP Projections Report # 2012-03. 2012 Sep 20. U.S. Agency for Healthcare Research and Quality. <http://hcup-us.ahrq.gov/reports/projections/2012-03.pdf>.

Take it from an experience I had in Haiti; I was volunteering as a PT for 2 weeks. An elderly woman in her mid-80's limped into the clinic after carrying a bucket of rice and food on her head for half a mile, yet with a visibly crooked right knee.

I looked at the interpreter and asked her to say "What's hurting you today?" She told me her wrist hurts... not her knee!

Surprised by the shape I saw in her knee joint, I asked why she was limping. She turned to me with a confused look on her face and told me that she didn't even know she was limping!

The good news once again is that deformities or natural aging processes don't necessarily have to be painful or require someone to have surgery.

How do we know this?

Well, as you've likely noticed, we enjoy having a good read and using studies to define how we come to these conclusions.

Let's review this: in 2012, one study took 710 people, aged between 51 and 89, and looked at scans of their knees, hoping to see what's inside.⁵ It's important to point out that NONE of them had pain in their knee joints. Yet, 68% of them had cartilage damage and 72% had osteophytes (bone spurs), but again, they experienced NO PAIN even with these findings in their knee.

So, what does this tell us? We naturally wear down over time, and our joints change on the inside (remember: wrinkles on the inside), but this doesn't necessarily mean it's the SOURCE or ROOT CAUSE of our pain.

⁵ Ali Guerhazi, Jingbo Niu, Daichi Hayashi, Frank W Roemer, Martin Englund, Tuhina Neogi, Piran Aliabadi, Christine E McLennan, David T Felson. *BMJ*. 2012; 345: e5339. Published online 2012 Aug 29. doi: 10.1136/bmj.e5339
PMCID: PMC3430365

As we know from this study, and many others not mentioned here in order to avoid boring you, cartilage ‘damage’ and osteophytes are not always the source of pain.

And neither does osteoarthritis have to be...

Another study from 2019 took the MRI results of older adults (over 4,700 people) and looked at what their knees had inside, but again, none of them had pain. Results were that for those who were ≥ 40 years old, 43% of them had arthritis.... yet no pain associated with it. ⁶

And even if you have ITB syndrome, tendinitis, patella femoral issues – these are SYMPTOMS of something else being wrong. This is where the stress is ending up, it’s not where the root cause is coming from. It’s important to see someone who can investigate the real ROOT CAUSE by referencing what you experience and feel, rather than automatically thinking it’s something an MRI or X-ray can solve.

You deserve the chance to limit the need for injections, medications, and surgery. These options can be expensive, have unfavorable outcomes, and oftentimes do not fix the REAL issue.

We’ve seen 100’s of people get out of knee pain with these same findings on their scans, all without surgery.

Take, for instance, Dan’s story.

Dan, only in his 60’s, was suffering with knee stiffness and pain; he was not sure what was causing it. Dan’s wife was even more concerned than him. He was sitting more and becoming less active. They loved to go for hikes and they loved to be active together. In fact, Dan was the type of guy who could carry a dresser down the stairs on his own if needed, but in the last 1-2 years his wife noticed that he wasn’t as active and able to do as much around the house.

⁶ Culvenor AG, Øiestad BE, Hart HF, et al Prevalence of knee osteoarthritis features on magnetic resonance imaging in asymptomatic uninjured adults: a systematic review and meta-analysis British Journal of Sports Medicine 2019;53:1268-1278.

He started avoiding projects for the house and stopped going on their normal walks together, let alone hikes.

Scared and worried, they saw the doctor for his knee pain and stiffness. It was concluded that he had cartilage changes and moderate arthritis in his knee. The doctor told him to stop doing so much and that, if he didn't, a total knee replacement would be his future. He was then told that whenever the pain got too bad, he was to come back and schedule the surgery. In the meantime, he was sent to try and get stronger at a physical therapy clinic, one suggested by the doctor.

Dan tried physical therapy for 12 weeks, but didn't notice much improvement. So, they tried massage. Then he tried just resting and doing less.

Nothing was moving the needle forward for him, and his wife grew more concerned.

While he and his wife were still skeptical and unsure about whether a different physical therapy clinic could help him, they decided to try something different before they threw in the towel.

After some time, Dan and his wife came in to see us and we took a good look at his whole body, not just his knee. We looked at his back, his feet, his hips, his knees, his walking, how he climbed stairs, his squat, his form when sitting and standing from a chair, how he got in and out of the car, and how he approached inclines or declines. All of the nuts and bolts.

After some time working together, Dan started to see this pattern: his pain started to shift and move into different areas... and he knew he was headed in the right direction.

It started out looking like this for him:

**No Pain → Stiffness → Soreness/Ache/Swelling → Sharp Pain
→ Instability + Pain**

But as we treated him, it started to change and morph into this pattern, which is exactly the pattern one should go through when knee pain is lessening:

**No Pain ← Stiffness ← Soreness/Ache/Swelling ← Sharp Pain
← Instability + Pain**

With the specific program using our *Ladder of Success Method* (Chapter 7) made just for Dan, he's 100% pain free and back to enjoying hikes and projects with his lovely wife only 10 weeks later.

Dan told us later that he got his life back again. It wasn't that we changed his X-ray or took away his arthritis or his cartilage "damage". I'm sure if he was to have an X-ray right now, it'd still look the same. No. It was, instead, that we got down to the nitty gritty, real root cause and fixed it.

So, as mentioned in earlier chapters, when it comes to your knees, you are NOT defined by your scans. The sensations you get as you age – stiffness, tightness, soreness, or pain – are all signals for you to do something about your knees.

They do not condemn you to having injections, taking pills, or undergo surgery in your future.



“You say the pain in my left leg is caused by old age, but doctor, my right leg is just as old and it doesn't hurt at all!”

“This is totally me!”

That’s what a gentleman told us after seeing this quote and cartoon. At 64 years old, he went to the doctor to find out why his knee was hurting. The doctor’s response?

“It’s just old age.” He then got up and literally asked the doctor, “Well, why doesn’t the other one hurt then?”

And the doctor just went silent.

We all do this... chalk up our knee pain to getting older or to genes. We just can’t keep letting you carry these false beliefs around like a 50 pound backpack for the rest of your life.

This is why it’s so important for you to know that what you believe, what you think about, what you continue to tell yourself over and over again, will affect your recovery to achieve a life free from pain.

What you are told by doctors, trusted loved ones, friends, and what you tell yourself, will absolutely impact *when* and *how* you get out of pain. You will never get over something you can’t let go of freely. It’s much like anything else in your life – someone upsets you but you never let go of it, so you’ll carry a grudge with you for years until one day you decide to just let it go and move on. Our ideas behind why we have pain will do the same to us. If we believe it deeply enough, it will be very difficult to let go and move on or to try and see that something else might possibly be a better solution.

This section about knee pain is to help you unburden yourself and to help you see that nearly all aging knee pain is common. As already mentioned, many people do successfully get back to doing the activities they love, even if they are older, have arthritis, or have “bone on bone” issues seen in their X-rays.

But dare we mention that many meniscus issues are also common? More on this later!

Over 95% of people who do get the privilege of aging have many of the findings one can see on scans. This is common. This is normal.

What is abnormal or uncommon is the 1-5% who DON'T have anything on their scans!

Here's some concrete evidence to help understand even better:

Did you know that research in the *New England Journal of Medicine* has shown that people who have arthritis have LESS disability and LESS pain with physical therapy verses getting an injection?⁷ Yes, it's true.

Yes, that's worthwhile repeating and rereading: people with arthritis have LESS disability and pain with physical therapy after 1 year than those who only get an injection.

In another case, research from the *Bone & Joint Journal* that said corticosteroid injections in your knee are associated with a 10% increased likelihood of getting a total knee surgery in the future.⁸

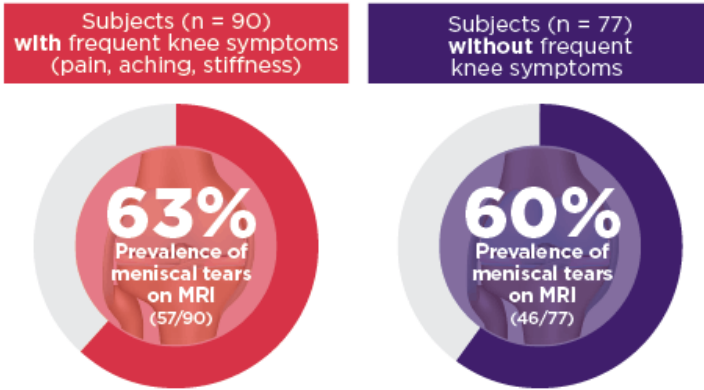
What?!

See below: these findings indicate that people who have no pain are often found to have meniscus tears.⁹ And that people who have knee pain are found to have nearly the same probability of having a meniscus tear as someone who does not have knee pain!

⁷ https://www.nejm.org/doi/full/10.1056/NEJMoa1905877?query=featured_home

⁸ <https://online.boneandjoint.org.uk/doi/abs/10.1302/0301-620X.102B5.BJJ-2019-1376.R1?journalCode=bjj&>

⁹ Englund M, Guermazi A, Gale D, et al. Incidental meniscal findings on knee MRI in middle-aged and elderly persons. *N Engl J Med* 2008;359:1108-15.



So, why are knee steroid injections and surgeries still recommended as often as they are? Especially for things like meniscus tears, arthritis, cartilage changes, or any gradual onset of knee pain?

It's because people don't know the other options available to them, and generally, everything they tried before just let them down.

So, how can you know if you should consider getting surgery for your knee pain? Here are 3 important steps to help you when considering these types of options:

1. Get Multiple Opinions

Go to multiple doctors and find ones you trust, that is, ones who are willing to give you the real information, not just ones who look at your X-ray or MRI and tell you that you are doomed or that it's due to old age. Remember: these findings are normal.

There are many doctors who think along a similar wavelength as us. They want to help you in the best way possible by starting with less invasive procedures or surgical options. They will tell you that you don't need surgery *when you really don't need surgery* because they know normal aging wear and tear exists. Moreover, they will advise you to start with physical therapy or try other alternative routes, too.

These types of health care providers have been the most trusting doctors I have ever worked alongside in my history of helping people with knee pain. It is my hope that you will keep searching for someone like this for yourself. So, first consider getting referrals, look up the reviews, and do not consider getting surgery before you have consulted multiple doctors. Why? Because they might very well all say different things.

2. Make Sure That You've Exhausted All Other Options

Make sure that you have tried and exhausted everything. If you value staying away from surgery until it's the absolute last resort, then, just because physical therapy or exercises didn't help before does not mean they won't work for you now. It's likely that you haven't found the right person who can help you the way you need in order to get you back to doing the things you love.

Just like any other profession, there are many other doctors of chiropractic and doctors of physical therapy who do very different things and have different training or skills. It's important that you keep searching and being an advocate for yourself.

Find someone who you align with and who listens to your story, someone who gives you the time you need to understand what is really going on with your knee pain, and someone who knows what is needed to fix it once and for all.

Kevin came into the clinic with both knees hurting him. After he saw his friend (who was an orthopedic surgeon), he was told at the age of 52 years old that he should stop skiing, running, and doing any activity that created pounding in his knee joints.

He's an active dad in his kids' lives and also a busy lawyer. Staying active and exercising with things like running, biking, and skiing in the winter, eased his stress and helped out with the work/life balance he needed. It was his go-to when the stress and pressure got too much, and exercising allowed him to take the pressure off and still have time with family and for himself.

Taking activity away from him was going to remove the one thing in his life that allowed him to function on full-throttle as a dad, husband, family member, and lawyer. He was devastated to hear he needed to give it all up.

He brought his X-rays in and he pointed to what his doctor friend was referring; it appeared to look like some level of bone on bone issues, cartilage changes, and arthritis. But, here's the thing: only one knee seemed affected, not the other knee.

So, after much discussion and us giving him information, Kevin decided he would try a more conservative option: physical therapy. He said that he had tried PT before, however, and had tried injections and chiropractors, too, but had found no resolution. He was open-minded nonetheless, and decided to give it a go with us.

He didn't want surgery. He didn't want to be down and out for months recovering from the surgery. He didn't want to keep taking injections: they only helped temporarily. And frankly, he didn't want to give up his active lifestyle; it's what his two young teenage boys loved about his relationship with them. It was bonding time for them.

After 3 months of Kevin being on a specialized program with us, he was completely pain free and stopped having the aches and stiffness he used to experience in the mornings and evenings. He went right back to doing three consecutive days of bumps and skiing, running half marathons, and playing with his teenage boys as if he was in his 30's again.

Honestly, it's not the image that counts... it's the way your body can develop compensations allowing you to move into pain – but understanding on the other spectrum of it that you can move out of pain, too.

Again, investigate and make sure that all other options have been tried before throwing in the towel.

3. Ask yourself this one question...

This one question has the ability to change your life and radically transform the way you live; it can get you back to the life that you deserve without needing surgery.

As I mentioned before, the way you think about your knee pain, and the level of fear you have around diagnoses by X-ray or MRI, will continue to define how easily you get out of this pain.

Continue to repeat the fear and anxiety related to the above in your head like a broken record and you have a terrible recipe for the worst chocolate cake you've ever eaten.

So, what's the question I ask most people who suffer with knee pain and who are unsure whether they can get out of it naturally?

The question is:

Has anybody ever truly found the REAL root cause of my pain and explained it to me to me in a way that is simple, understandable, and actionable?

And you might be saying, "yes, they told me I have arthritis, a meniscus tear, bone on bone, or they told me I have old-age syndrome."

By now you know that these are not REAL root causes as to why knee pain comes on. Your knees are where the knee pain ENDS up. The real root cause is where the pain is ORIGINATING or STARTING from.

If nobody has explained this to you in a way that you understand, and they've only done a very generic Band-Aid attempt at masking the pain, then I DON'T think you should get surgery yet.

The 5 Most Common Causes of Knee Pain

Have you ever experienced that sudden jolt of knee pain that catches you completely off guard? You find yourself thinking your day is going

wonderfully... with no problems... and then you just “move wrong” while getting up from a chair, out of a car, or while bending down to feed the dog.

You find yourself grabbing your knee, staring at it as if there should be a big red warning flag, one that gives you a sign for the intense pain you feel on the inside or outside of your knee. Yet, there’s zero evidence something is wrong. No big swelling, just some residual old scars from childhood, a pocket of swelling from months or years ago, or a “normal” looking knee.

For most, this is where things start going awry. Those jolts of pain have to come from somewhere, right? It’s not just “moving wrong,” is it? In scenarios I see day in and day out related to people who suffer with chronic knee pain, it’s similar to a butterfly effect: the phenomena of an accumulation of events that starts as a sudden sensation of pain, and thereafter growing into a larger, more frequent issue.

Why? Well, because of a couple reasons. You’ve been taught to “suck it up” or think “no pain, no gain,” so you just suffer through it and try to ignore it...which normally works *initially*. You can actually move on without having issues again for a while.

Then another jolt comes later and you think... “it’s just nothing”, “it’ll go away on its own, it always does”, or “I just moved wrong again.” You also do not have enough pain to do anything about it at this point. So, you’ll ignore it, move on, and wait for a more agonizing pain since it’s “not that bad.”

I’ll tell you this much, to those of you who do suffer from chronic knee pain, I know you understand. Even I’ve gone through this. You understand that it started with a few of these “wrong movements,” then turned into a dull ache, a stiffness in the morning, but it got better as you began moving in the day, right? Perhaps it got bad at night again.

It can keep you from feeling safe on your feet when going up and down stairs, it can stop you in your tracks when walking the dog – you are fearful that they’ll pull too hard or make you suddenly move in a

way your knee can't handle. It will make you wonder if you can attend that family event, the gathering with friends planned in a few days, or church. It will have you question if you'll ever be able to go downhill on a hike ever again.

If this sounds like something you've experienced then you're going to benefit from this part of the book. We've put together 5 common causes of knee pain that can be looked at immediately in order to help you avoid getting worse, keep you thinking about other options that WILL work for you, and help you get back to your active, fulfilled life.

Here are the 5 common causes of what many knee pain sufferers have yet to discover about the REAL ROOT CAUSE of their knee pain:

1. Compensations in the Body

Everyone has compensations (or imbalances) that develop over time in their bodies, but not all compensations are the same. That's why treating people with knee problems is complex and requires investigation.

Have you ever noticed one hip being higher than the other or that one foot might turn out a bit more when you walk or stand? You feel "off balance" or that your alignment isn't right.

Why does this happen?

Basically, certain muscles can become dominant due to the movements you do over and over , thereby causing your alignment to change. This means other, weaker, yet very important muscles that help control the knee, lose strength over time.

In this case, the imbalance created with one hip being higher, or one foot turned out more, can alter your movements and stability in the knee, thus creating repetitive wear and tear in one side of the knee.

If the body is left to do its own thing – not challenged to change the negative pattern it’s created – then the pain will progress faster than is necessary, thereby stopping you from doing things that you love.

So, the problem arises when these compensations are not taken seriously and no one looks at the body as a whole: from the head to the toes. This is vital to pinpoint compensations that are likely recreating knee pain.

2. Is It That My Hips Are Weak?

It’s easy to blame knee pain on certain muscles, like those in your hips, for example. I’ll admit, this became quite a fad a few years ago. Everyone, no matter what type of pain they had, needed to strengthen their glutes...

And I get it, there’s a missing piece for the majority of people when it comes to their hips.

But, what if you’ve strengthened your glutes over and over and still have knee pain?

Here’s the problem: most times it’s not that you aren’t trying, it’s that you haven’t fixed the first step before you need to strengthen anything. Fixing the alignment needs to happen first.

Let’s say one hip is higher or rotated forward. This will send a cascade of events down into your knees and you’ll naturally feel like your alignment is off.

If you stay with your alignment off, strengthening your glutes will only make the faulty alignment in your knee more secure in this “off” position, thus not allowing pain to lessen.

Often times, it’s also an issue related to the entire motion of the hips and knees.

If, for instance, you can raise one leg behind you 25% more than the other, you're going to create an imbalance and not be able to use the unavailable motion. Muscles don't like not having the full motion to use. They like joints that can move and feel open to maximize their use.

In this situation, you'd only be strong in the first half of the motion, not the second half.

This is a problem that arises when we're just told to strengthen our hips – if the full motion isn't available (which is common), or your alignment is different from one side to the other, then strengthening is pointless until you get that motion and alignment back.

Strength in the glutes is essential for keeping knee alignment correct and functioning properly. But remember, the body functions as a whole, and doing this alone won't solve the problem. It is essential to look deeper into other areas that may be causing the pain, especially when strengthening your glutes does not fix your knee pain.

3. Poor Posture

Did you know that your feet are one of the most essential foundations of your posture? Imagine a tall skyscraper being built in downtown New York City. When building this tall structure, the most important thing is to make sure a building of that size does not fall on other buildings. So, it is the foundation that secures this building from blowing over or just collapsing.

In our bodies, our feet are the foundation. So, when you walk, stand, or run, your feet – and the way they are placed on the ground – will affect the way in which the feet, ankles, knees, hips, and back align and match up... which directly impacts a person's alignment and posture.

This means that, if the feet or ankles are structurally or mechanically "off", that is, tight, stiff, or weak, we can assume that the rest of the body has to make up for the defects in order to keep it "in balance."

If your feet are pronated or you have low arches, most times people struggle with their knees knocking. Whereas, if your feet are supinated or you have high arches, this tends to push knees away from each other: bow legged. Both are okay to have and there's really no perfect posture, but in essence it is something we should be aware of.

Because of these structural differences, muscles will function differently up the chain. Therefore, it's not that you are too flat arched or too high arched, rather it's that your knees get repetitive loading in one way and become almost dumb when you ask them to do something new. This can cause overuse injuries and breakdown.

Your feet can lead to MANY knee pain issues. It's why you need to look above and below the knee so as to figure out where your knee pain is coming from. If you haven't done so yet, then you're missing a big piece of your knee pain puzzle.

4. Never Fixing the First Injury

This is something that happens far too often, especially with people who have had knee pain for years. They start feeling a dull ache, or experience a few months of pain, only to get to a point of "feeling better", never completing the full, necessary rehabilitation in order to avoid the pain from coming back again.

So, even as you begin to feel better and experience less knee pain, the rehab process is just beginning. It's not that you just want to get out of pain... it's that you'd also like to stay out of pain for good, right?

This process is similar to climbing a mountain: if you start to see the end in sight and stop 100m from the summit, did you really climb the mountain? No.

When you stop early, it just allows you go backwards down the hill again, not overcoming the peak to get on the other side of pain.

Fine tuning is the missing piece to most people's puzzle and is typically the last 15-20% of the rehab process. The majority of people don't do

this and therefore don't stay out of pain for good. This last 20% is the time during which to not only correct the poor movements that CREATED the issue in the first place, but also to build a bigger capacity to take on more without having pain come up. That way, when you go to do a bit more you don't have to pay for it the next day.

Many people skip this process, that is, the one that is known to be the MOST beneficial part of you getting out of knee pain.

5. Lack of Stability

If using a knee brace makes your knee feel better then I'm so glad you're reading this section. Putting on a knee brace for simple activities once in a while is totally normal and acceptable. But, if you are using a knee brace nearly all day to get through a day, you have a bigger problem going on underneath that brace.

First, let's talk about what knee braces really do. They give some level of security to your knee by giving feedback to your body. Having that touch on your skin makes you feel better about your knee and allows you to correct or adjust as needed to help make the pain or discomfort lessen.

The brace isn't lessening the pain, though... it's telling your body what to do to help it.

Relying on them to do this for you around the clock takes away your body's need to have to do this itself. It's natural for the knee to begin to depend on having that feedback, when really it can do this on its own when trained to do so correctly.

So, if you are depending on a brace to help your everyday needs, or you feel like your knee is going to give out from time to time, it's likely that you lack stability around your knee joint and that it needs further investigation than just simply covering it up with a brace.

This is the importance behind finding which muscles are working and not working well to help your knee feel secure and supported. If the supporting knee muscles are firing and working in unison, there would

be no need for a brace or to feel like your knee is giving way (more on this soon).

So, there you have it: the top 5 of the most common causes of why knee pain continues to plague your life. These are the ones that most people struggle with when it comes to figuring out why pain is holding them back from doing what they love to do.

And if knee pain forces you to grab the railing or hobble up stairs, then let's dive into that...

Why Knee Pain Gets Worse While Going Up & Down Stairs

Do you ever just stand at the bottom of the stairs looking up, dreading having to climb them because of knee pain? If you're avoiding the stairs like the plague by sleeping on the couch or pulling your makeshift closet down to the main floor, you are not alone.

You've tried everything to stop the pain on the stairs by becoming even more careful, taking more time to put your foot in the right position, using the railing with a white knuckle grip, or turning your foot to try to and ease the pain as each step is taken.

You may even skip every other step now. The only way you can climb stairs is by taking one step at a time... with both legs hitting each step or going sideways.

Adjusting the position or taking a different route to go up the stairs is a smart and helpful to try to avoid the pain, but it's not efficient.

Your subconscious part of the brain just wants to go up and down the stairs like any other normal human being, and so it becomes frustrated that pain is the one thing stopping it from doing so.

The number one complaint that we hear from people with knee pain is that it hurts when going up and down stairs... and even on an uphill or downhill during a hike.

Most people do okay to moderately fine on the way up a hike – their knees only bother them a little. But on the way down it becomes a whole different story. They have to take quicker and longer breaks. Some have to whip out their hiking poles, try to go sideways down the mountain, or even ask a friend to carry their pack just to offload the pressure on their knees.

Why is this happening? Well, there can be multiple reasons, but two of the biggest ones are very simple: overuse injury or compensation injury. Let's examine each one of them more closely.

Overuse Injury

Was there ever a time when your child kept repeating your name or asking the same question over and over? If you're smiling and remembering those times, good! It went something like this: "Mom, Mom, Mom" or "Why?... Why?... Why...?"

I know it's cute to think about it right now, but at the time it most likely annoyed and irritated you, right?

This is exactly what an overuse injury does to your knee. It's the same unwelcome pattern or load being continuously used on your knee. Maybe you've done more stairs recently than usual or you've done new moves in a Pilates class, but your knees aren't used to this – increase in weight, increase in repetitions, new movements can all inform what we call an overuse injury. Basically, you're repetitively doing more than what your knees are used to doing without giving them time to adapt, thereby causing your knees to feel pain.

This is why, if you rest afterwards, the pain can lessen. But, the moment you start doing more again, the pain will pop right back up. The WAY you are moving, and how much of it you are doing, is not the right thing for your knees.

According to your knees, something is off or wrong and they need you to know that what you are currently doing is not beneficial. It's not that you can't do more, it's that you have to fix the problems first before doing harder things.

Here's another way to describe pain when it comes to hiking. Let's say you walk 30 minutes a day around the neighborhood and don't go to the gym like you used to 5 years ago, but you have decided to join your friends on a big excursion climbing a fourteener (14er)...

It's been nearly 5 years since you did your last fourteener (14er). Obviously, this is quite a stretch from your normal routine and you don't feel prepared, but you decide to stick it out and go with your friends anyways.

What do you think your knees will be saying to you after you are done, or even while you are climbing? You're right... they might be cursing at you. But, why is that happening? You used to be able to do them easily! Why, 5 years later, are they struggling? Is it because you are 5 years older or that you're now in your 50's instead of your 40's?

Absolutely not.

It's because your knees are accustomed to a certain amount of exercise (30 minute flat ground walking) and are not used to the new load (climbing a fourteener for 6 hours). This is what we call a capacity issue: asking your knees to do an extreme amount of work (load) – more than what they are used to doing (capacity) – and this creates an overuse injury.

The stairs are no different from a hike. Going up and down the stairs is not the problem. You don't need to stop climbing the stairs or stop going on hikes. These activities are not bad for you and they are actually great exercises for your body when done properly. I know many doctors and well-meaning loved ones have told you that stairs are “bad” for your knees, but that's just not the truth.

No movement or exercise is “bad” for your knees. You might just be doing too much of the activity or going too hard, too soon. Building strength and stamina is a gradual process, and this is why we tell everyone with knee pain that we simply don't have quick fixes.

To achieve a long term solution it takes time and commitment. You have to be all-in on a program that will serve you in the long run by way of enabling you to do everything you love to do once again.

“But Dr. Brooke, I work out and go to the gym all the time and it still hurts when I hike or climb the stairs.” If this is you, then it’s likely going to be a combination of an overuse injury and a compensation injury. I’ll discuss this below.

So, the problem isn’t stairs or hiking, the real problem is HOW you are climbing them... which leads us to the second biggest reason we see knee pain with stairs: compensation injuries.

Compensation Injury

Have you ever had someone come up to you and tell you that you’re stooping or limping without even knowing it yourself?

Or maybe you go to stretch your hips or legs and notice that you can move much more easily in one direction than the other?

These are all tactics that our body creates to compensate for something it’s lacking, be that motion, strength, or control of muscles, etc.

Your body is naturally very smart at making sure you stay alive. That’s its primary goal: to make sure you keep breathing and to keep you away from things that cause pain, both mental and physical.

This may not always be beneficial, though. Yes, the body compensates in order to help keep us alive and keep us out of pain. When we feel pain or injure ourselves, our bodies change how we stand, walk, and move, all so that we are still able to do the same things, albeit differently and with less pain. If you therefore continue to move in this altered way for long periods of time, your body will adapt and begin to assume this movement as its new normal... unless you train it back to its original motion.

So, let’s say you rolled your ankle when you were 15 years old. As the days continued afterwards, you suffered through the swelling and pain,

limped on your leg a bit, and just kept walking it off until it got back into shape. This was the drill for me, over and over. What I didn't know, though, but what I do know now, is how doing this impacted the way I walked. It changed how I walked, ran, and just used my whole leg.

For this reason, we see so many people have a bigger issue at their feet, ankles, or hips when it comes to their knee pain. The pain generally stems from a previous injury after which they started to compensate. It then developed into a new pattern that stressed the knee joint over and over, only to eventually break down into pain. This is a compensation injury.

Many people are very surprised at how different their ankle motions are from one leg to the other, especially when we find the imbalances and the compensations their bodies have created over the years. They are surprised to know that once these compensation are seen to, their knee pain diminishes and they can go back to the gym in order to get stronger for more activities in the future.

It's much like the gentleman I mentioned before, whose doctor told him to stop all impact sports and activities simply because he was in his 50's. In his past he had two major ankle sprains: one in his teens and one in his 30's. He developed compensations to get around these previous injuries, but they were never addressed properly. Once we were able to find the imbalances by looking at his ankles, hips, spine, and knees, then the pain lessened and he was able to get back to skiing bumps, running over 3 miles, and going back to the gym to train and get stronger once again.

This is exactly why so many people are surprised to know that their knee pain is not really related to their knees. Again, that's just where the stress ends up, not where it originates from.

4 Simple Tips to Ease Pain When Climbing the Stairs

So, if you're having trouble on the stairs and you know where your compensations and imbalances are coming from – and you're addressing them properly – then I'd like to give you 4 simple tips that

you can try at home, right now, to help you get up and down the stairs more easily:

1. Use Your Whole Foot

Make sure that, when you step onto the stairs, you use your whole foot and not just your toes. Oftentimes, people go up stairs and contact the step with the pad of their feet and toes only. This adds more stress on your knees. Instead, use your whole foot on the stair to put less pressure on your knee.

2. Pitch Yourself Forward and Push From Your Heel

When going up the stairs, you'll want to bend at your waist a bit to "pitch your trunk forward." Then, push off of the stair from the heel area of your foot. If your foot is too big to fit the whole stair, push from the part closest to your heel. This pitching forward motion, combined with the heel push, will help you use other parts of your legs to reduce the stress on your knees.

3. Watch Your Alignment

When going up or down the stairs, try not to climb when your knee is not aligned over your foot. If your knee is falling inward towards your other knee, this can lead to pain. Your best knee angle should be directly over your 3rd toe, or more towards your little toes on the outside, not towards your big toe.

4. Address the Imbalances and Compensations

When you have knee pain, this often indicates a misalignment, tightness, weakness, or an injury that could get worse over time if not addressed. Often, pain indicates something further coming your way, so it's very important to get ahead of the game to avoid a worsening of your knee pain.

Something could be out of balance and it's likely not what you think. We help people with knee pain every day and it's safe to say that imbalances in the body are the NUMBER ONE root cause of knee

pain. Yet, many people do not know this is happening and they aren't sure how to recognize where those imbalances come from.

After Surgery, But Still Not Where You Want To Be...

Oftentimes, surgery helps take away the pain, but it can leave people feeling like they still aren't back to 100% or are not confident enough to get back to the sport or activity they once did.

This is what happened to Susan. Knee pain was getting in the way of what she wanted to do like hiking, skiing, and just simply walking with her friends around the park. It bothered her most mornings and evenings. Her doctor recommended that she get a knee replacement, and she followed the whole protocol exactly. She did her rehab before surgery and afterwards was very committed to the physical therapy process. She graduated from the outpatient physical therapy clinic and thought, now what?

The problem was that Susan was not back to 100%. She wasn't confident in her ability to hike, let alone to get on skis and go down a blue or black run in the next few months.

The doctor said everything looked good in her X-rays and nothing was wrong with her knees anymore, but why was Susan still not back to 100%?

Well, after generic therapy there's often a gap between your health and what you want to do. It's for this reason that many people stop doing the things they love altogether instead of finding other options for getting back to 100%.

In Susan's case, she needed the next level. In someone else's case, perhaps, when they aren't completely out of pain or have full strength, motion, or confidence in their knee holding up, they need the next level, too.

Just because you've gone through physical therapy and surgery doesn't mean you've received the full array of options to help you back to your

normal, confident self again. It just means you need help getting to the next level.

Why Knees Can Rip You of Your Independence as You Age

Life changes as you age. You might stop driving late at night because it becomes unsafe; your eyes have difficulty seeing as well in the dark. It might take more time to get your agenda done for the day. You might need more time to go up and down the stairs. But, as the additional layers of interference creep into your life, be that knee pain or other issues, they could impact the quality of your life as you age and take your independence away.

Knee pain can make many people feel unsteady or feel like their knees want to buckle or “give out” when they’re doing things like walking, standing up, or going up and down stairs. Naturally, it would be scary to feel like you don’t have control over your legs. That’s why many people end up using canes, walkers, or worse... wheelchairs.

Yes, these devices allow you to have a solid support system. But, one of the problems with these devices happens when we become dependent on them.

What does this mean in the long run? Well, it means you aren’t working your legs or challenging your body enough to grow stronger or regain back your independence. You become reliant on these devices and this isn’t always the right solution for your knee pain.

The bigger problem is that society has made these cruxes feel normal. We’ve come to believe that the true perks of getting old are that you will use a walker or be in a wheelchair, ported around in a nursing home. How lucky! But, we know that’s not the truth. You don’t have to be in a wheelchair or a walker for the remainder of your life. This isn’t the only way you have to live as you age.

Here’s the even bigger problem I see as I look at the secondary, or even tertiary, consequences of all of this:

You get older and have knee pain. You decide – or someone tells you – that you need to be in a walker or use a cane because your balance is unsteady. You get used to using the new device, but still feel a little fearful of falling. This leads to you to feeling less confident to go shopping or go out for dinner with friends, and you then become dependent on other people. Naturally, you become reclusive and stay home. Ultimately, this leads to feelings of inferiority, helplessness, and a loss of hope for a good quality of life. What is a good quality of life if you live in pain?

Naturally, you feel like a burden on everyone's lives, needing constant help with not only getting around, but simply doing daily chores. These are out of the question at this point. You slowly give up and end up in a wheelchair, even more dependent on someone else for all your needs... all of which eventually sends you to a nursing home.

Sound familiar?

I'm sure you know someone who has been through this journey before, such as a grandparent, parent, or a loved one. So many people tell us they are very fearful of living this way, and they want to avoid it at all costs.

It's miserable watching someone slowly deteriorate and lose hope in their body. The thing is, this whole cascade of events is like playing with dominos. You set them up perfectly close to one another and all it takes is just one piece to tip over and create the entire downfall of the rest. In this case, it all started with unresolved knee pain.

Now I know you don't want to live a life like I just described, because you are someone who thinks about your health. You are an advocate for yourself to assure that your life story does not repeat what you watched someone else go through... especially if you are over 60 years old and thinking about your life differently as you get closer to retirement. Allowing knee pain to go on for much longer than necessary will bring to fruition a cascade of unwelcome events, be that giving up activities you love or losing out on time spent enjoying your loved ones and family. The biggest problem, if you are still struggling with knee pain, is that you haven't made a decision to do anything

about it yet. Or maybe you are doing something, but it's not working the way you had hoped.

Ultimately, you are now where the domino piece is in limbo. What if you tipped over a different domino piece and it was led down a different path instead of the horrible cascade of events I just described?

What if you lived a fulfilling, active, amazing life as you aged?

Imagine if, as you move into your 80's, you were one of the people everyone looked at, saying "No way! There's no way that you are 85 years old! You look like you are at most 70. And you're still walking 2 miles a day and driving yourself? That's amazing!"

What if you had *this* story being told about you instead of a nursing home story like so many others? All because you did one thing differently: you made a different choice.

Jim came in for knee pain at 90 years old. It was winter. His trouble was that he couldn't run as well because of the pain and he had some races coming up in the summer. Yes, you read that right... races coming up. Is he a needle in the haystack? It's possible, sure; I don't know if all 90 year olds *desire* to run, but what I do know is that many of the 80 year old – and older – clients we see are showing the world the new way to age. Their minds are sharp: they work on their mental state, read books, volunteer for work, and use games to constantly stay sharp. They work on their bodies, going to the gym and using weights to stay strong. They walk 2-3 miles every day and do not miss a day in all of this. When it comes down to it, they've just made a different choice.

How you look at your life, or how you look at the situation you are in... is your choice.

Right now you are making a choice to read this book and likely hoping it will reshape the way you think. I hope the same for you.

Your quality of life matters as you age. What you do to enhance your life is up to you. I hope you choose the path that ends knee pain once

and for all so that you can live a fulfilled, active lifestyle, instead of feeling stuck or like a burden to someone you love.

We want the best for you and know that knee pain can be one of the most debilitating things out there. If you feel overwhelmed about where to start, I invite you to download our resource pack in which you'll find useful information, more tips, and advice on making the most of your life, right now.

Chapter 5: Back Pain

If you are reading this chapter then it's likely you have back pain. You're someone who values your health and is looking for real solutions to end your back pain; you want to avoid using more pills or undergoing surgery. If this is you, you're in the right spot!

Back pain can be a very scary and exhausting experience. It's intense and can feel overwhelming. It can drop you to your knees, literally, and grab you out of nowhere.

Other times, it can just slowly turn into an ache or feel like a muscle spasm across your low back... making it nearly impossible to get through a day without having to lay down on the couch.

Other people we see have said it's a more gradual low back pain that seems to get worse over the years, and before they know it they can't stand up straight or are constantly giving up their activities hoping it won't get worse. They start losing out on life because of this back pain. Not only that, but when the pain comes and goes so frequently, causing a state of chronic pain... the emotional toll it can take becomes draining.

It can be so extreme that your spouse has to take you the doctors thinking it's more than just back pain.

Yet the majority of people with back pain decide to rest, take pills, and wait in hopes that it will get better with time... it's easier to just wait and see how it goes than to do something about it right away.

The abundance of people who have had back pain all makes sense, and here's why: 80% of us have a chance of having a back problem in our lifetimes, and for those of us who do, there's a 90% chance it will happen a second time.

With statistics like that, it's no wonder that so many people struggle with back pain as they age. But, here's the thing, you don't have to... despite the odds stacked against you. From our experience of helping

100's of people who have struggled with back pain, the common theme is that no one really understands what to do about it.

So, let's start with what you definitely shouldn't do.

Rest Is NOT Best

Most often, people do the one thing they absolutely should not be doing when they have a terrible flare up, one that ends up setting them back weeks, if not months.

What's the first thing you think about doing when you have back pain?

If you are like most, you'll think that you should just go lie down and rest. How far off am I? Most people are under the assumption that, when their backs flare up, they should rest and lay down right away. The truth is, this adds extra weeks and months of back tension!

A large majority of people will consider rest to be the best thing to do for themselves when back pain strikes. I want you to be the one who knows this is not true.

This is the **WORST** thing you can do for back pain when it happens. I understand that back pain may leave you wanting to sit and find that "perfect" position to ease pain, but the reality **is your body favors moving over resting**, even when it is in pain.

This is important, because when you feel back pain come on your back wants support from surrounding muscles. But when you lie down or sit, you basically take away all that support from your hips and other areas that keep the back supported.

Essentially, what staying active and moving does is get all the surrounding muscles around your back engaged and working hard to help support your back.

After all, your back is begging for some help from other muscles, so why would we ever sit down and just take away all the support it

needs? Once you lay down or rest, the support from your hips, core, and thighs are gone.

Remember, there's so much that happens in the body when we move. First, you get a good blood supply to the areas that are moving. Blood has oxygen in it, as well as many other elements that help us stay healthy and feel well. Second, when you move you produce hormones that make you feel better and help dull down the feeling of pain. This is what they mean by a "runner's high," or why after a workout most people feel happier. Third, when back pain does come on, the affected area of muscles typically go into hibernation mode and don't do their job to help support your back, thereby leaving that area feeling more threatened. Your back wants you to know what's going on, so it gives you more pain. Movement enhances waking these muscles back up again so that they can do their job as they should... and so that you can start feeling better quicker.

When we're given incorrect advice to "just go lie down and rest", there's a bigger problem. Every parent in the world says this when their child or loved one gets hurt or doesn't feel well! Do you remember your parents telling you to do this? It makes sense only because it's likely their parents also told them to go rest when they were young.

We all do this; it's been ingrained in our heads. We'll even hear someone who no longer has back pain tell us that they probably shouldn't be in the garden, or that they shouldn't be lifting boxes so soon. They still think they should rest or take it easy on their backs...

So, our response usually shocks them: "I disagree. You should be in the garden and going back to your normal lifestyle again as soon as possible!" After which they typically question back with "really?," as if we are the first people to ever give them a green light to get back to their old self so quickly.

So again, remember the number one tip that I could ever give you: stay moving – I suggest you keep moving for at least two hours after a flare up.

If you've been struggling with a chronic issue, then you'll want to know the 3 vital strategies to use...

Chronic Back Pain: 3 Vital Strategies to Use

Many times people who struggle with chronic back pain begin to wonder if something is wrong with them or if they are making it up; they're concerned that it's all in their heads. If you've ever had to deal with back pain for months or years, it makes sense. People tell you there's nothing they can do to help you further, or you continually try different things only to be let down once again.

Struggling with constant back pain can leave you stranded on the couch for days and weeks at a time, leaving you to ask for extra help from everyone around you just to do simple things around the house.

It can take extra time to simply do a normal routine in the morning, never mind trying to concentrate on your work.

The pain itself can follow you around like an unwelcome guest no matter where you go, be that the shower, the dining room table, or work.

This type of constant or chronic back pain is frustrating and debilitating and at times more complex. If your back pain has become more of a complex case, it's very important that you know these 3 things about pain and its complexity, all so that you can gain a better understanding of what is really going on.

First thing: don't ignore pain. Pain is much like a "check engine" light in a car that tells us that something is potentially wrong or "off". Of course, your car will still be able to drive, but there may be more problems that come up over time if we ignore the light on the dashboard.

Here's the caveat, though: sometimes the check engine light goes on even when there are no issues with the car. Chronic back pain can be similar to a faulty check engine light. It may just be your body giving you an inappropriate signal from the nervous system, which is like the

wiring system in our cars. Your back pain is messaging from the brain that ends up in your back, but it may not mean that there is a serious problem. Much like a computer, the brain needs a ‘reset’ of your nervous system. And this can be done in many simple ways.

Secondly, the amount of pain we have does not equate the amount of injury. This is very important to remember. Have you ever noticed a cut on your arm or leg but didn’t notice it until someone asked you how you got it? Then, immediately after, there was more pain around the cut? Have you noticed how painful paper cuts are for something so small? One reason for this is that, if your brain considers something to be dangerous or a threat, then there will be more pain. Alternatively, if your brain considers something to be non-dangerous or not a threat, then there will be no pain. Why is this? Because your body’s only goal is to keep you alive. So, if your body perceives something to be a threat, it will inform you. Sometimes with a megaphone and on repeat!

Lastly, our brains store memories of painful events. These get interlinked with things like emotions, experiences, thoughts, and feelings. Have you ever listened to a song that instantly reminded you of your childhood or of an ex? Is there a smell or scent that brings you back into your grandma’s kitchen? All of our senses, experiences, and memories are intertwined and stored like files in our brains so that we can find them easily. Back pain is no different. The brain connects everything that occurred during your initial back injury, whether it’s a drive to the doctor’s office, a song on the radio, the time of year, your emotions, the weather, or a specific movement you did. Then your brain can easily access these stored files and use that memory to relive an experience for you. So basically, back pain can turn on when any of these experiences are stimulated or happen again.

For example, I’ve had many people come to me telling me their back pain flared up because they bent over and tied their shoes. It then started a cascade of events including pain when they sit, stand, or try to lift anything. But, when we dive deeper into understanding this flare up, it’s normally revealed that the initial onset of their back pain, that is, in the past, was also caused in the exact same way... while bending over and doing something.

These 3 factors are very important to note when it comes to why you continue to struggle with chronic on again, off again, back pain.

And just so we are both clear, it is not that pain is “all in your head”. What you experience and feel is absolutely, 100% real. If someone tells you differently, don’t listen to them. We help people who are in chronic back pain daily – this is not just an experience that you made up or want to be in. It’s real and you feel it.

Just note one very important thing: you do not have to live in chronic pain for the rest of your life. Many people successfully get out of it when having slow and steady, graded exposure to movements or visual imagery of events that can trigger painful responses.

How Can Pain Memories Change?

Imagine you are driving to work. You take the same route every time. You take the I-25 South to 285 West and get off on Dahlia street. Then on Saturday, your off day of work, you decide to go to a restaurant with your family on Holly street. Yet you automatically exit on Dahlia street without thinking.

What happened?

Well, your subconscious brain automatically brought you to *work*, because I-25 South to 285 West triggered the memory of going there.

However, if you drove on I-25 South or 285 West and took different exits on those roads more frequently, you would decrease the automatic memory of driving to work.

This is how chronic back pain and moving your body is the same. The goal is to dampen pain memories stored in movements or events so as to decrease their frequency.

How can you do this? By seeking help from an expert who knows how to give you an appropriate, progressive program to find the right movements, that is, ones that your back will respond favorably to once again.

You do not have to be a prisoner of chronic back pain for the rest of your life. And if you are becoming one, my question to you is: “what value would it bring to your life if you felt even 20-30% better, starting today?”

Do you want the keys to the kingdom to relieve chronic back pain?

Remember this: chronic back pain is complex, but all it takes is a very driven, committed, and hard-working person with the right guidance and strategy to get over the hump of chronic pain.

It does NOT have to be a life sentence.

Why People with Back Pain Get Out of Pain Without Needing An MRI

This bears repeating: in 2019 there were over 119 million MRI's or CT scans performed in the US alone, which contains a population size of 328 million people. This is statistically saying that $\frac{1}{3}$ of the population will have some level of imaging done, a number which most researchers and some physicians are starting to define “overused.” They follow up by saying that “while information can be useful, too much information can create numerous problems.” Remember this from the knee pain chapter?

What harm could taking pictures of our bodies really create? It's only an image, right?

Not so much.

It's been proven that more people have a higher chance of having surgery solely because they had an MRI vs. people who don't get MRI's.¹⁰

¹⁰ <https://www.choosingwisely.org/patient-resources/imaging-tests-for-back-pain/?fbclid=IwAR0aOBGCzX-09wQF9aE8caMGss4d3eqyj9FOFrICqTFkPW4RVjFHeNiaHYs>

Not only that, but MRI's can cost hundreds to thousands of dollars depending on where you get it... and what you get it for.

Why waste money when it doesn't help your pain? They don't make you feel better.

If anything, more people tend to feel worse after they had an MRI compared to those who just kept moving and sought help right away. And, if the images lead to surgery it can be even more costly in multiple ways.

Every single day, we've been able to help people get back to doing what they love... without imaging. In my time as a clinician treating back pain, I've sent one person to get an image on their back, and it was because in my professional opinion it looked sinister. And it was, sadly. Otherwise, the rest of the time back pain clients don't need an image in order to fix their back pain and get back to what they love to do again.

Abnormalities found in MRIs, and X-Rays for that matter, often don't have any diagnosable significance, but even so they can have major financial and health consequences.

Do you have concerns that you might need imaging or an MRI on your back just to see what's going on when it comes to pain?

If so, we hear this all the time. It's common to wonder what is causing your back pain and, of course, you hope that an MRI or an XRAY will show you exactly why you are experiencing such discomfort.

The truth is, though, many times the results of these images – CT, MRI or X-RAY – aren't always the reason for pain, especially if you've dealt with this pain for some time. Remember what I said about wear and tear?

Here's how you can know this to be true. Allow me to put on my glasses and tell you about another study that helps clear this up.

In 2015, Brinjikji and colleagues wanted to see what happens inside a spine as we age. So, they gathered data around people (3,110 individuals) who had CT or MRI scans performed, BUT the most important thing to note is that *none* of them had back pain. They were asymptomatic: no pain, nothing.¹¹

Then they split them up by age groups: 20's, 30's, 40's... all the way through to the 80's. Here's what they found:

Essentially, there's an increased risk to having all of these "diagnoses" on our scans as we age. As you can see, the numbers just continue to be more prevalent in each group as the age increases.

Here are some findings that I find are outstanding and you should consider:

- Of those in their 80's, 96% of them had disc degeneration, that is, a breakdown of their discs.
- Disc height loss and disc bulges increased an average of 10% per decade! This means you get more probability of having them as you age, yet they don't necessarily cause your pain!
- Facet joint degeneration (one of your spine joints) increases sharply with people over 40 years, yet it still doesn't guarantee pain!

Again, all of these people – over 3,000 individuals – had no pain despite the myriad of "issues" we can see on their images. The findings on their scans greatly increased as they aged, yet none of the results were connected to them having pain.

This should have you reconsidering the results and diagnoses of any scans you've taken. We now know – because of this and many other studies – that these types of findings are normal. They are just simply the wrinkles on the inside of your body as you age.

¹¹ Brinjikji, et al., 2015, p. 813

Another thing that's important to remember is that your image is just a moment in time. If you don't have an image from prior to your pain, how do you know that your arthritic changes, osteoarthritis, or disc

Table 2: Age-specific prevalence estimates of degenerative spine imaging findings in asymptomatic patients^a

Imaging Finding	Age (yr)						
	20	30	40	50	60	70	80
Disk degeneration	37%	52%	68%	80%	88%	93%	96%
Disk signal loss	17%	33%	54%	73%	86%	94%	97%
Disk height loss	24%	34%	45%	56%	67%	76%	84%
Disk bulge	30%	40%	50%	60%	69%	77%	84%
Disk protrusion	29%	31%	33%	36%	38%	40%	43%
Annular fissure	19%	20%	22%	23%	25%	27%	29%
Facet degeneration	4%	9%	18%	32%	50%	69%	83%
Spondylolisthesis	3%	5%	8%	14%	23%	35%	50%

^a Prevalence rates estimated with a generalized linear mixed-effects model for the age-specific prevalence estimate (binomial outcome) clustering on study and adjusting for the midpoint of each reported age interval of the study.

bulges weren't there 1 or even 5 years prior? If you don't have pain then there's no reason for an image to be taken.

Along the same lines, if we are solely basing pain on what you see in an image: if you have pain in the morning and evening, but not in the middle of the day, does this mean your disc bulge, arthritis, or degenerative disc disease gets worse in the morning and at night, but it goes away in the middle of the day? That doesn't really make sense, does it?

When it comes to back pain, the goal is to help people find relief quicker so that they can get back to what they love doing right away, and so that the pain doesn't slow them down any longer than it already has.

Don't let scans and imagining be the reason you stay in pain for longer than you already have.

Sciatica

Sciatica can be extremely painful. It can drop someone to their knees in agony. It can hold you hostage in bed for hours, if not days on end, causing an intense amount of fear: even the slightest movement can become debilitating very quickly.

One moment you're fine and the next you find yourself irritated with pain that can travel into your lower back, buttocks, or worse... down into your foot or ankle.

Most people begin to worry that it's caused by something in their back, like a disc herniation, disc bulge, pinched nerve, or something more sinister. And this alone can be concerning and worrisome.

Was it that you twisted or bent down to pick something up incorrectly? Or was it from sitting in a chair all day wrong? Either way, it's affecting you and your relationships because of how troubling sciatica can feel.

Sometimes sciatica can come on instantly, while other times it can gradually sneak up on you. Here's how the theme goes:

Normally there is absolutely no pain or struggle with any symptoms: this is the pain free zone. Then, you might move into some stiffness or tightness surrounding the lower back area. You might start feeling your hips getting stiff, too. After that, the pain starts to move into more of a soreness or dull ache. Then it will move into actual pain in your lower back region, that is, pain where it's maybe even sharp, dull, or "nervy." The last stage is that it might move into what's called a radicular, or radiating, pain; this means that it's not just in the spot of your initial back pain, but it's now traveling down the leg.

Sciatica looks like this on paper:

**No Pain → Stiffness → Soreness/Ache → Pain →
Radicular/Radiating Pain**

How then can we get out of this type of pain? Again, in order to know that your needle is moving in the right direction – and that the things you're doing are actually helping you – we simply reverse these arrows:

**No Pain ← Stiffness ← Soreness/Ache ← Pain ←
Radicular/Radiating Pain**

How can that traveling pain in the leg or buttocks move to more local pain? What needs to happen to take local pain and move into just soreness or aches? And finally, how do we take soreness or aches and then move into just stiffness? And finally, how do we then move to no pain?

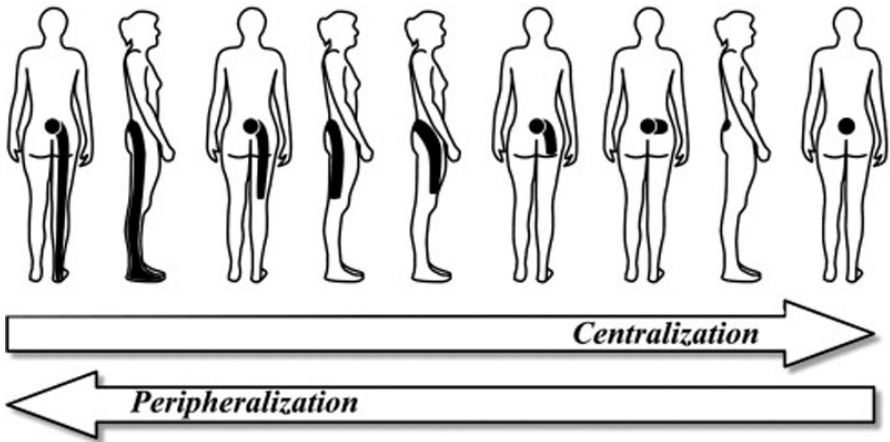
In this way, you start seeing and noticing patterns that tell you, and help you know, that you're moving in the right direction.

Many people think of stiffness or soreness as being outside of pain when really this is just when the pain is getting warmed up. It's essential, particularly when it comes to sciatica, to get to that "No Pain" zone and continue working on it so that the pain can stay away long term. This will mean that you can get back to doing the things you love without fear... and with the confidence that your back will hold up.

Here's another way to think about sciatica:

The correct process to easing sciatica is to get the pain to start traveling back towards the center of the back, not further away.

This method, called the McKenzie Method, is used to help someone's pain lessen and go away knowing that, if you can move the spine repetitively with motions that centralize the pain (take it towards the center of the back), versus peripheralize the pain (take it away from the back), this will help someone overcome pain.



Lori was someone who came to us with a similar pattern of pain, much like the person in the far left of the above image. She was in excruciating pain for months prior to coming in. Her pain was traveling into her buttocks, down into the back of her leg, and all the way to her calf and the side of her foot.

It was completely devastating for her. She could barely help around the house let alone drive anywhere. Anytime she tried to get comfortable, or to watch a show or rest in bed, she'd have to move every 10-15 minutes because the relief wouldn't last. There were simply no comfy positions for her.

So, like most, she went to the doctor and, after they ordered an MRI, she was told she had a large herniated disc that was pushing on her nerve at the L4-5 region. They recommended she do injections, so she did what was suggested, albeit that she was scared and nervous of needles in her back.

The relief it brought didn't last much longer than a few days. She tried generic physical therapy, chiropractor adjustments, nerve stimulation with cupping, heating pads, hot baths, and so much more. It took Lori months of ups and downs to try a different approach, but once she made a decision to come see us, and was finally able to see results because of our tailored, effective approach, she was on the journey to healing... and it came fast.

First the pain started to travel from her foot and ankle up into her thigh. Then it started to travel just into her buttocks... and then finally into her back with less intensity each visit. It took weeks of consistency to keep it there, and as the days continued moving on, she noticed herself being able to help more around the house: picking up and cleaning. Then she was able to drive in her car – alone for the first time in months. Simply going to the grocery store was so rewarding for Lori! And just months later, she was back in the gym doing workouts once again, all without having to fear that her back would give in while lifting heavy weights.

When sciatica is treated properly it can allow you to have freedom back in your life. This means you can do what you want, when you want. Even though it begins as such a terrible experience, there is a way to get out of it and back to doing everything you once loved to do. Lori is living proof of that.

Disc Bulges and Herniations – How Bad Is It?

Are you concerned about your back having a herniated disc or disc bulge?

Did someone tell you that you should have surgery to make it better?

If you're worried about having a disc herniation or a large bulge, and you're thinking about rushing to surgery because nothing else could possibly fix it, just think about this: "good things are worth the wait."

Very early in my career, I had terrible back pain. I remember when my doctor told me that I had "the worst spine" he had ever seen. I was diagnosed with having a large disc herniation in my low back that sent shooting pains down into my left leg and calf.

Before I knew it, I was in over my head with pain. My first back pain experience was excruciating. I couldn't bend down to tie my shoes, put on my pants, or bend over to grab my book bag for school.

I had to rely on my friends and family to do so much for me, and I winced and moaned every time I tried to move. It was exhausting being in that much pain for so many weeks and months.

The doctor told me I would need surgery and said that I had a large disc herniation that was pushing on my nerves and leaking down in my spinal canal; they would have to go in and surgically remove part of the disc and repair it.

But, this isn't what I wanted. I didn't know much at the time, and it was so scary to know that I had something internally wrong with me, but I knew surgery sounded bad.

I did know that I didn't want surgery and I didn't want any more injections. That wasn't who I was.

Luckily, I never did the surgery. I didn't know why, but deep down I knew that I could heal if I could just be given some time to figure it out and have someone help me. It took years for me to understand it, but I'm so glad I trusted my gut. And of course, we now know so much more about these bulges and herniations.

Here's the reality of what they really mean for you:

There was a recent study that evaluated 361 cases of people with herniated lumbar discs, all of whom were not treated with surgery.¹² What they wanted to look at was how commonly these herniations shrink with time, particularly with a natural, conservative approach.

These findings are outstanding! The probability of the herniations spontaneously regressing (shrinking) was 96% for disc sequestrations (leaking discs), 70% for extrusions, 41% for protrusions, and 13% for disc bulges.

¹² Chiu C-C, Chuang T-Y, Chang K-H, Wu C-H, Lin P-W, Hsu W-Y. The probability of spontaneous regression of lumbar herniated disc: a systematic review. *Clin Rehabil.* 2015;29(2).

What's most outstanding about all of this is that the most severe type of disc issues (sequestrations and extrusions) – where the disc material is actually detached from the disc and in the spinal canal – have the HIGHEST rate of shrinking and returning to normal!

As we already know, even disc bulges – which are more minor and exist in the majority of adults who have no back pain whatsoever – don't change as significantly as that.

What does that mean for you?

It means that disc bulges and small herniations are normal signs of aging and that they don't need any major medical attention.

And it also means that, if you have a more serious disc issue, the odds of it improving naturally, on its own, are in your favor.

You'll need a specialist who can do a thorough examination to make sure that you have the right plan moving forward... and then, let the body do its thing!

It's like getting a sore on your face. It can heal on its own without needing much help – just give it the right environment.

Remember this when it comes to disc bulges and herniations: good things are worth the wait.

Back Pain Is Never Really Back Pain

Back pain isn't always what it appears to be.

Have you ever noticed that you had back tightness that started to travel down into your groin, your hips, or even noticed your knee starting to bother you?

Did your upper back and neck feel really tight and then back pain came on?

These are all tactics that our body creates to compensate for something it's lacking, be that motion, strength, or control of muscles, etc.

If you look at yourself in the mirror, what do you notice? Are your hips even? Do you slouch forward and have your tailbone tucked under you or do you arch your low back with your butt sticking out more? Do you feel you aren't symmetrical?

These imbalances can be created in one place, but they ultimately start to create havoc on your back, starting with tightness or tension across your low back or along one side more than the other.

Let's say one hip is higher than the other. Every time you go to step or put weight through your legs, one leg will have to do more work. This puts tension through your spine causing your low back to feel tight. Or maybe you have a tight upper back that doesn't move very well and every time you go to swing the golf club your upper back doesn't move or rotate when you swing the club...

This is going to force the rotation to come from somewhere else and often it ends up in the lower back area.

When we can have imbalances or previous injuries that aren't fully resolved or fixed, our bodies will compensate by changing how we move... all so that we are still able to do the same things, albeit differently and with less pain.

But, if you continue to move in this altered way for long periods of time, your body will adapt and begin to assume this movement as its new normal, eventually creating stress somewhere else, like your back, and causing pain.

It won't change unless you train it back to its original alignment and motions.

This is why many people begin to stoop, feel like they are leaning to one side slightly, or limp without pain, yet eventually start having pain. For this reason, we see so many people have a bigger issue at their hips, knees/ankles, pelvis, and upper back when it comes to their back pain. The pain generally stems from a previous issue after which they started to compensate. It then developed into a new pattern that stressed the

back over and over, only to eventually break down into pain. This is a compensation and overuse injury.

This is exactly why so many people are surprised to know that their back pain is not really related to their back. Again, that's just where the stress ends up, not where it originates from.

Why Back Pain Gets Worse In the Winter

You're outside watching your nephew's or grandson's high school football game in the bleachers on a frigid 10 degree December night. You're all bundled up in long underwear with jeans on, you've got your scarf wrapped around your neck and a stocking hat on, too, but you are still cold. So cold, in fact, that you are shaking and your fingers and toes are cold. Your body is tensing up and your back begins to bother you.

At halftime, you finally get up because you can't take it anymore and start walking around. As you keep walking for the entire 30 minutes during the second half, you start to notice that your fingers and toes are less painful, your back is easing up to where you feel nothing again, and you've actually warmed up... finally.

Do you ever wonder why being in the cold during wintertime causes your back more pain than in the summertime? Some might say that it's due to barometric pressure changes – which is a very plausible theory – but, we don't have enough research to back it up at this time.

Another possibility, one we see all the time here at our clinic, is how internal temperature drops can affect back pain.

When you are in a cooler environment such as during the winter, your body has to work harder to create heat internally, that is, to maintain a normal temperature in order for you and your vital organs to survive. And in order for your organs to function and survive, we need one essential piece to the puzzle: fresh blood that is nutrient rich!

This means that the blood that feeds all your hands, toes, heart, and muscles needs to be warm and nutrient rich. And guess what? In order

to get good, healthy blood to all these places within the body, it requires movement to help it flow better and have more oxygen inside the blood.

Movement is the best medicine to “warm” up areas. Yes, it’s even better than a hot tub or a heating pack, or even a warm shower, believe it or not!

This is what your body craves in order to have less back pain in the wintertime. It wants a good supply of blood flow and movement.

A second reason your back pain can happen more in the winter is due to lack of exercise. Cold weather and shorter days can discourage you from exercising or staying in a routine. Daily, low-impact exercises like walking, swimming, or biking are some of the easiest ways to ward off back pain.

However, in the cold fall and winter months, it can be too cold or too dangerous – with ice or snow on the paths – to get outside and walk or cycle consistently. With this factor in mind, many people simply take a break from exercise until the weather changes again. This is one of the worst things you can do if you struggle with back pain.

To make it even more evident, Gallop (a research group) showed us just how much people don’t exercise from September to December every year (1).

Percentage of Americans Who Exercise for at Least 30 Minutes Three or More Days a Week

Monthly trends for 2008, 2009, 2010, and 2011



Gallup-Healthways Well-Being Index

GALLUP

Interesting, right?

Lastly, your mindset during cold, darker days can contribute to feelings of depression or more feelings of being down, which we now know can make your back pain worse. Do you notice how your mindset can change during the winter? You might feel more lethargic and less motivated to do anything. Sound familiar? If so, it's completely normal and there's a bit of science behind why this happens. It's not because of your gender or that you're a sensitive person, or even that you are different. This happens to all of us because we are human, no matter what our genes are made up of... and here's why:

First, you get less sunshine in the shorter, darker days. This can throw off your body's circadian rhythm. If you like consistency in your life, so does your body. Having a consistent circadian rhythm of darkness to light is important for your body, and when it gets disrupted, and there is a larger ratio of dark to light, this can lessen how many of the feel good hormones are being produced in your body. This hormone is called serotonin. And when you laugh or feel joy, this is the hormone that helps you feel those feelings of happiness.

Of course, this plays into you feeling more fatigued, tired, and less interested in being active. And for anyone feeling this way it's hard to

want to be active. This means, though, that if you aren't moving, exercising, or strengthening the muscles that support the spine, you can suffer from more back pain. Your back needs continued exercise in order to remain strong and healthy, but if you are neglecting to stay active or move, you are opening yourself up to injury further down the line.

The cold months are full of back-targeting activities including shoveling snow, skiing or snowboarding, chopping wood, raking leaves, and indoor activities like treadmill walking, cycling, or swimming. The point is this, if your back or body goes on vacation the entire winter – 3-4 months without exercise – imagine how weak and unconditioned it will be in the spring or summer, especially when you try to jump right in and use it for gardening, walking, cycling, or playing with your kids...

It's likely that you will experience back pain as you use it less in the winter... and further down the line, too.

To sum up, it's important to not only stay moving and active in colder months, but that you double your efforts in the winter months to feel the same way you do – less pain – in the summer months.

Back Pain: The 5 Most Common Critical Errors

Do you struggle to know what to do when back pain strikes? Most people make costly mistakes that can put them back for days and even weeks... usually with more back pain, resultantly leaving them to wonder what will actually help them get past the pain. This can often feel like a hopeless situation, but it doesn't have to be. Remember, knowledge is power.

Some might try the route of taking pills and resting, others may try to get adjustments. From our experience, these can help, but only short term. So, what should you do instead? We'll break that down inside this section by discussing the 5 most common errors people make when it comes to easing their back pain.

1. Do NOT Sleep On Your Stomach

Back pain makes it nearly impossible to sleep through the night. If you have back pain and are desperate for just one good night of sleep, here's a great tip: do not sleep on your stomach.

Don't sleep on your stomach anymore... just don't do it. The second you get into bed, it might feel ok to lay on your stomach, but if you stay that way throughout the entire night, you'll be putting constant tension on all of your back muscles... all night long.

That's 8 full hours of tension building up. It's like going to the gym and holding a squat for 8 hours. Of course, your legs would be sore and killing you.

This is why your back is so stiff when you wake up. Essentially, you've been working your back for 8 hours, 7 days a week.

So, how should you sleep?

I recommend that you sleep on your side, in the fetal position, with a pillow between your knees in order to level out your hips; this will keep your spine in a neutral position. Sleeping on your back with an optional pillow under your knees is a less desirable option, but still much better than sleeping on your stomach. Now, this won't necessarily fix your back pain, but it will allow you to get a good night's sleep and not feel nearly as stiff in the morning.... not to mention that it'll put you in a much better mood the next day.

The goal when it comes to sleeping with back pain is to find the best position for you, one that will allow you to get a good, full night's rest. Sleep is a major factor in helping you get out of back pain faster. So, put some effort into your sleep hygiene if you are looking to avoid – or stop – back pain altogether.

2. Motion Is Lotion

By now you know that moving your back and your body will be the ultimate best thing you can do to either stop back pain or keep it from surfacing. Rest is not the answer to helping your back pain stop. The phrase “motion is lotion” is what we use for all of our clients, especially

those who struggle with back pain. The goal is to keep a good flow of blood supply to your back in order to help lubricate its joints.

Imagine you have 2 doors. One door is used at the front entrance of your house. Everyone goes in and out of it and the door constantly swings. The other door is on the side of the house, is hardly used, and it's been years since that door has been opened. Which door do you think is going to be easier to open? The front one, of course.

Our back joints are no different. By moving often, we supply a "lotion," or WD-40, to those joints; this makes sure the fluid coats your joints just like grease does for door jams. The fluid in your spine helps reduce stiffness, soreness, aches, and pains in your back. And the less you use it, the more you lose it.

The moral of the story? Motion is lotion to your back... and rest is not best. If you are looking to prevent or stop back pain, keep moving!

3. Extend Don't Bend

This tip is perfect if you are someone who sits all day and struggles to have a more upright posture... especially if you suffer with on/off low back pain. There's a statistic that says we bend forwards at our low back nearly 3,000-5,000 times per day. PER DAY!

On the other hand, we extend, or bend backwards, less than 800 times per day. That is 6.25X more bending than extending every single day. If we add on days, months, and even years to that, then one is left with have a system that is really good at bending over, but pretty bad at bending backwards, a movement essential for "good" posture.

It's no wonder, then, that all of us have an 80% chance of having a back pain episode. This in itself should be alarming.

Many times people bend over to stretch out their low back, when really those muscles are already stretched out from sitting or bending over in the first place. They don't need more stretching. Often, they actually need a break from stretching! Instead, you should extend backwards.

This will take some getting used to, it's true. Why? Because as I already pointed out, you and the rest of the world hardly bend backwards. But, it is as simple as standing up, putting your hands on your low back or just above your buttocks, and bending backwards a couple of times, multiple times per day. Doing this relieves the tension that builds up from the bending we do every single day and will help lubricate the joints. It will also help with a better upright posture if you do this consistently.

Remember this: extend, don't bend.

4. Assuming Hurt Equals Harm

When the simple, daily activities start to become painful, it becomes concerning and worrisome. Motions like bending over, picking up laundry, sitting in the car, or just walking long distances can become painful and concerning. You're right, you shouldn't have large sums of pain from these simple things. But, most people start to think that there is damage or harm being done if there is a sensation of pain during movement, and this simply isn't the case.

If you've hurt your back and have had pain for more than 3-4 months, there is a very high likelihood that your tissues are healed and the inflammation is actually gone.

Although there's nothing "wrong" any longer, you can still have pain. So, you might be wondering, "why do I still have pain if there's nothing wrong with my back?"

Most times, the problem is a faulty pain system telling you the wrong message. Just like a computer will slow down or not do what you need it to do without updates or rebooting the system, our nervous system can need a reboot or an update when the simple things are still painful months, if not years, later. This malfunctioning alarm system is giving you the feeling that something is wrong and needs fixed. This isn't the case.

In majority of cases like this, "hurt does not equal harm," especially when we know tissue healing has happened and there's absolutely

nothing abnormal going on. If there's no immediate trauma, swelling, damage, or broken structural issues, many times it's as simple as just knowing that the pain isn't causing harm or damage; this simple truth can help people get over the hump and begin moving freely again.

Remember: "Hurt doesn't equal harm."

5. Train to Stay Out Of Pain

If you want to become someone who stays out of pain for good, then you need to think like someone who stays out of pain.

It often seems as though many people think there's nothing else to be done once the pain is gone. If your back is better, then there's no need to exercise it or keep doing what got you out of pain in the first place, right?

One thing to note is that everyone has a different experience with pain; they have their own healing journey through back pain. No one has the same recipe. The same goes for *staying out* of pain. Stopping the journey to stay out of pain for good is a terrible idea. In fact, it often leads to many people experiencing back pain again.

So, how does one stay out of pain for good?

Answer: Train to stay out of pain.

In its simplistic form, this approach is much like growing a plant. You start with a small glimmer of life in the soil. But, if left to its own devices with no nutrients, sunlight, or water, the plant will die. Yet, if you transfer the small plant into a bigger pot full of nutrient dense soil, one that sits near a window with sunlight, and if you water it frequently, the plant will thrive and grow thick, strong roots and bud beautiful flowers.

Staying out of back pain is not much different. You'll want to gradually challenge your back to grow stronger and smarter when it does simple things like lifting your grandkid off the floor, or bending over to fix the

plumbing in the cabinets. The more you grow your back up, the more robustly it can withstand nearly anything you throw at it in a day.

If, on the other hand, you decide to just stretch every day, then your back will be good at stretching, sure, but this won't keep it strong. And, if you don't do anything at all, your back will be very good at doing precisely nothing at all... likely leading you towards more pain.

If you want your body to be strong and resilient then you have to train it to be strong and resilient. Take the small steps each week/month to keep pushing past the previous weeks. This is how you train to stay out of pain. Work up your body's capacity to do new things, to do them well, and at the same time teach your body that it can handle all that you throw at it in a day.

Back pain can be one of the most debilitating things out there – it steals your joy, your happiness, your hope. I don't want this for you – I want you to live a life full of energy, adventure, and life. If any of the advice in this chapter resonated with you, and you feel as though it's time for you to do something different about your back pain, then I invite you to download our resource guide for more tips, help, and advice about training, prolonged pain free strategies, and a healthier, happier you. Find it here: www.thephysiorevolution.org/resources.

If you're ready to schedule an appointment with us or find a time to talk to us directly about if we can help you with your specific back pain, simply head over to www.thephysiorevolution.org/book to apply for our free option of a discovery call now.

Chapter 6: Neck Pain, Shoulder Pain, And Headaches

If you've got neck pain, shoulder pain, or headaches, then it's very tempting to think that they are just nothing, that they will go away on their own. Or, you pass them off as consequences of having "slept awkwardly", "moving wrong", "muscle spasms," or a bit of stiffness that everyone goes through from time to time... right?

There's no obvious reason why it happened, but it doesn't seem to be going away.

You can't quite put your finger on why you're feeling so much pain. But, doesn't seem to be getting any better. If that's happening to you, you're not alone; I hear this type of thing all the time.

Many tell us how they have problems like disc bulges, rotator cuff tears, or arthritis in their neck and shoulders, and that they are worried that if the problem isn't fixed, the pain won't go away... it may even get worse and they simply aren't sure what to do about it.

Others say their pain has become so difficult that they have a hard time staying active, let alone trying to just get comfortable in bed or not have pain while driving their car. Many have gone to their primary care doctors to understand what's going on and what to do about it, but they tell them that they need to see an orthopedic or neurosurgeon or advise them to take some Ibuprofen and just try a few exercises on their own.

Another group has tried surgery or injections... and sure, it helped for some time, but now just months or years later the pain is different or worse.

This all makes sense.

In this chapter, then, we take a deeper dive into why these pains are happening and what to do about them.

But, let's start with finding out where the pain is actually coming from.

Is It Coming From The Neck Or The Shoulder? And How Do You Know?

An aching shoulder may not truly be a shoulder problem. And a sore neck may not indicate a neck problem.

If you've been struggling with relentless neck or shoulder pain that won't go away no matter what you try, it might be that you're looking in the wrong area... the culprit may not be what you think!

So many of our clients walk in the door complaining of neck pain, explaining that no matter what they try to do with their neck – stretches, exercises and massages – the pain does not stay away.

After a thorough assessment, they come to find that none of those treatments worked. Why? Because it was a deeper underlying upper back or shoulder issue all along. This is also the case for people with long standing shoulder pain. It really originated from their neck and upper back, yet they were only treating the shoulder.

But, why does this happen?

Well, pain in the neck can travel to the shoulders, and pain in the shoulders can travel to the neck, and upper back pain can travel to both.

You see, the neck, upper back, and shoulder muscles share some of the same nerve pathways, much like a two-way street on a highway.

Some signals go from the neck to the shoulder and some travel from the shoulder up to the neck. These signals are like cars moving on both sides of the street carrying precious information to and from the brain; they drop off signals – pain – where they need to go.

The problem is not that the body dropped off the wrong signal in the wrong area. The real problem is when we don't know the signal could well have been dropped off there.

There's a big disconnect here.

The way the body reports pain can be somewhat unreliable, particularly when you aren't sure what you are looking for. And this is why it gets tricky, especially for people who think that their shoulder is just a "rotator cuff" issue... when really it's coming from their neck.

We call this "referred pain". Basically, it's pain that shows itself in one area, but actually originates in another. So, if you have a difficult time deciphering if it's your neck, upper back, or your shoulder bothering you, then the complexity of referred pain is the reason.

When the Shoulder is the Suspect

If you've had unrelenting shoulder pain that hasn't gone away, and you are curious to know if it truly is shoulder pain... then good. I'm glad you're starting to think about it a bit differently. That's why you're here, right?

In the medical world, the majority of shoulder pain issues are diagnosed as "rotator cuff" injuries... But again, if you think an MRI is going to tell you that a torn rotator cuff is your root cause, think again.

Reliable research has shown that a natural part of aging comes with rotator cuff tears. And once again, these tears don't have to be painful or dysfunctional. We now know that, as we age, we have an 8-40% chance of having no pain (asymptomatic), even with partial or full-thickness tears in our rotator cuffs.¹³ And in general, this probability continues to increase as we age. So, having rotator cuff tears are very common and can even unknowingly happen in your sleep.

But, you may have a rotator cuff injury or other shoulder problem if your shoulder pain:

¹³ Lawrence, Rebekah & Moutzouros, Vasilios & Bey, Michael. (2019). Asymptomatic Rotator Cuff Tears. JBJS reviews. 7. e9. 10.2106/JBJS.RVW.18.00149.

- Develops in the shoulder itself or on the outside of your upper arm.
- Is dull and aching.
- Occurs when you reach up over your head or behind your back... or when lifting.
- Radiates into the upper arm, but not past the elbow.
- Persists at night.
- Improves when you rest your arm.

Here's the thing: when shoulder pain happens, you can start to compensate by using different muscles in order to pick things up or reach for them. These muscles start in the neck and connect to the shoulder. For this reason, many times this can cause not only the shoulder and neck pain simultaneously, but upper back pain, too.

When the Neck is the Likely Culprit

Now you know that shoulder pain isn't always coming from your shoulder. So, when is the neck or upper back likely the culprit?

Neck injuries can manifest just a bit differently when it comes to their symptoms.

Your neck and upper back are one of the most complex areas of your body, with nerves, discs, vertebrae, arteries, veins, and so much more running through this one space.

The nerves of your neck control different parts of your upper body, and if irritated can cause "radiating" or traveling pain down your arm, shoulder blade, or neck area. If that isn't bad enough, it can also send pain into the upper back area.

This often makes it difficult for you to determine if the pain stems from the neck, upper back, or the shoulder area.

Many times, this is caused, but is not limited to, poor posture, trauma like whiplash from a car accident, or strains and irritation from overuse, imbalances, or compensation injuries.

Naturally, your neck ages and gets wrinkles on the inside, much like every other part of your body. But, some common signs that your pain is stemming from your neck include pain that:

- Radiates to your shoulder blade or close to or on the side of your neck.
- Electric-like, stabbing, burning, sharp, or tingling pain.
- Radiates down past your elbow or even into your hand.
- Happens with movement or when you are at rest.
- Radiates down your arm when you extend or twist your neck.
- Is relieved when you support your neck.

Because pain throughout this area of the body can be so confusing, getting clear on the root cause is vital.

If you continue to work on your shoulder with no relief, it could be stemming from your neck or upper back... and vice versa.

Getting down to the root cause is the first step, then knowing what to do about it comes next.

Why MRI's and X-rays Aren't 100% Reliable When It Comes to Shoulder Pain

Me: "What did you find out?"

Sharon: "It's not good. I'm really worried and afraid I'm going to need surgery like the doctor said."

Me: "Would it be helpful if we talked through what the report says?"

Sharon: "Yes, please! It says I have a full-thickness tear, so I'm not sure what that means. I'll make an appointment to come see you."

This was my conversation with a client a few years back; she suffered from shoulder pain. She was nervous and scared because her pain was making it very difficult to sleep at night.

The pain would come on with a vengeance after she tried to pull weeds or garden. Simple things like carrying groceries from the car to the house made it worse. Even things like putting on her seatbelt, trying to undo her bra, or reaching for her purse, could send her through the roof in excruciating pain.

Naturally, Sharon did what many others do, too. She went to an orthopedic doctor who ordered an MRI: the results indicated that she had a "rotator cuff tear" in her arm.

Worse still, she saw "full-thickness tear" on her report and many other words that just sounded awful and scary, like osteophytes of her acromion process, inflammation of the bicep tendon, tendonosis, and more.

It's normal if this type of diagnosis feels overwhelming. It's like the medical profession has a different language that the majority of people don't understand, and then reports with these words and findings pop up. Of course, this limits your ability to really know what is going on and how to think about it.

And in Sharon's case, this was the same story.

Want to know what I told her about her report?

First, I sat with the report and read it top to bottom, making sure I didn't miss anything important and I could answer any question she had about it.

Then, I asked her what she thought “full-thickness tear of the supraspinatus” meant to her.

She said it sounds like it's fully torn and probably needs to be reattached.

As we spoke for a little bit longer, I told explained that:

I see a lot of people with rotator cuff tears; unfortunately, most of them have been poorly informed about what their tears really mean.

So, I want to make sure you understand what your report is saying. A torn rotator cuff does not mean you have to have surgery or a life of pain and difficulty. Rotator cuff tears are common... really common. In fact, they should be seen as a normal part of aging, just like skin wrinkles on the outside as we get older.

Please know that what I told Sharon applies to you, too!

We start to see rotator cuff tears appear in people without pain or any other symptoms from the age of 50 onwards.¹⁴ In fact, research found that, if you are over the age of 50 and have a rotator cuff tear seen on a scan, then it is twice as likely to NOT be giving you any symptoms... and this increases to four times by the age of 80.¹⁵

So, Sharon's tear was more than likely there before she the MRI... and it wasn't painful before.

¹⁴ Teunis T, Lubberts B, Reilly BT, Ring D. A systematic review and pooled analysis of the prevalence of rotator cuff disease with increasing age. *J Shoulder Elbow Surg.* 2014 Dec;23(12):1913-1921. doi: 10.1016/j.jse.2014.08.001. PMID: 25441568.

¹⁵ Minagawa H, Yamamoto N, Abe H, Fukuda M, Seki N, Kikuchi K, Kijima H, Itoi E. Prevalence of symptomatic and asymptomatic rotator cuff tears in the general population: From mass-screening in one village. *J Orthop.* 2013 Feb 26;10(1):8-12. doi: 10.1016/j.jor.2013.01.008. PMID: 24403741; PMCID: PMC3768248.

The other important thing I told her was this: “It’s NOT a rope. It’s a blanket.”

You may be told that your rotator cuff is like a rope and that “it’s hanging on by a thread” when it’s torn. Therefore, the doctor recommends “reattaching it” ...

But, the majority of the time that’s not what these tears really look like deep down inside of your shoulder.

Rather, the rotator cuff muscles look like a big blanket, and when there’s a tear, there’s a small cut or hole in this large, flat blanket, not a tear in a rope as most visualize.

Also, just because you have a hole in a blanket doesn’t mean the rest of the blanket is useless.

A blanket with a hole in it can still keep you warm at night, and a blanket with a hole in it will still move when you tug on one end of it.

It’s also very safe to exercise with a tear in the rotator cuff. There’s no evidence that exercise or strengthening will make the tear worse.

If anything, it helps it scar down and feel less painful. Why? Because you flush out the irritation when you get moving; the correct exercises won’t make it more painful, they’ll actually help you get pain-free once again.

As I told Sharon, there’s a lot of proof in the research: it tells us that if you do MRI’s on the shoulders of people over 65 years of age who have never had problems with their shoulders, over 50% of people studied will have tendinosis or partial tears of the rotator cuff 1, 2.¹⁶

So, then, why are rotator cuff surgeries still recommended so often?

¹⁶ Gill TK, Shanahan EM, Allison D, Alcorn D, Hill CL Int J Rheum Dis. 2014 Nov;17(8):863-71.

Well, it's because people don't know what options they truly have, and everything they've tried before has just let them down.

As Sharon now knows, rotator cuff tears do not have to be painful. You can do the right things to help move the needle forward and out of pain!

Sharon is now happily back to lifting her 2 young grandkids and loving life in the garden. She no longer needs to empty out her purse just to carry it, nor does she need to ask her husband to carry the groceries into the house.

Instead, she is lifting her arm up overhead with ease, she sleeps through the night without pain interrupting her, and she loves life as her old self again.

Why a Massage Feels Good, But Doesn't Keep Pain Away For Good

Have you ever had an amazing massage and walked out feeling more relaxed, less stiff, and less achy?

Then slowly, as you continue through your week, you start to feel your upper back, neck, and shoulder pain come back... and later it's almost unbearable again, right?

Well, in this scenario, most people think they should just go get another massage. The truth is, this becomes a trend that just takes you down a rabbit hole; it won't fix what's really going on.

For example, when it comes to neck pain, a better approach would be to apply heat. Basically, massage & heat are just ways to bring down the pain and calm your system's pain response. They relax the tissue and help it to release tension.

Massages are an amazing gift to ourselves, and they should be used to calm any us down – destress, relaxing, etc. – but they should not be used to take away pain in the long run. They should be used in

conjunction with some level of strengthening and improving your movement patterns to pursue your goals.

It's the same for any physical therapy – you should not receive only hands-on treatment. This is not the most effective way for you to STAY out of pain. These are just tools to help calm your nervous system or the pain and move to the next step.

The next step is that you need to find out where the root cause of your pain is coming from so that it doesn't get worse or resurface with a vengeance. Tight areas along your neck or shoulders are not always the reason for the pain. Again, this is where it feels tight or painful because that's where the stress ends up.

This is why a massage feels good initially but doesn't help in the long term; it's why your pain comes back, therefore forcing you to rely on massages or heat... again.

After you find the root cause, you'll need to address the alignment of the connecting muscles surrounding that area.

The goal is to assure the alignment remains corrected permanently via exercise or a routine that continually does this for your body. If you don't have this in play your body will go back to what it knows – your poor alignment. We discuss this in detail later, but for now it's important to note that quick fixes like hands-on treatment alone won't cut it.

If you're like the rest of our clients, you want a long term solution, right? One that fixes the problem for good...

That's why things like massage, heat, adjustments, foam rolling, Theraguns, generic exercises, or stretching alone aren't real solutions: they just put Band-Aids on instead of getting to the deeper issue.

Now, if you want to know how we really fix neck or shoulder pain, you'll want to read all about *The Ladder of Success* in the next chapter of this book. It's the proven, effective program we have used for years in

order to successfully help people get out of pain and back to the things they love.

In the meantime, let's chat about why you have times where you wake up in the morning with stiffness and aches in your neck and shoulders.

When You Wake Up And Can't Move Your Neck (Wry Neck).

All you did was go to bed, just like the night before, but this time you knew within minutes of waking up that something was off with your neck.

You can feel an achy, soreness along your neck deep in your muscles as you keep trying to move about. As you try to get up, you quickly submerge yourself right back into the pillow due to the excruciating pain...

If that's happening to you, you're not alone. We hear this type of thing all the time. And when it comes to having this type of neck pain, everyone we see wants to know...

Why Is This Happening To Me?

It's easy to get confused; you've been told different things by different people. There are many people out there who are happy to dispense advice, but please remember that not all of it is credible.

Maybe you think your neck pain was caused by doing something, like sitting too much at the computer, being on your phone too much, or sleeping awkwardly. Maybe you had a previous car accident years ago and it still hasn't gone away.

Most of the time, though, when neck pain like this comes on without a specific reason – no accidents or trauma – it was likely caused by years and years of poor posture, that is, poor body mechanics and habits that caused the muscles in your neck to become imbalanced. Essentially, the

compounded effect of the awkward sleeping and sitting was just the **TIPPING POINT** in exposing your neck issues.

If you don't know what you're doing, then neck pain can be very confusing. Because of this, many people just end up accepting it as "part of life," as if it's normal and "just the way it is now."

If you've ever experienced new pain and limited motion while trying to move your neck first thing in the morning from waking, then you have what we call an "acute wry neck" or "acute torticollis."

Basically, you have some irritated joints and muscles that want to spasm, thereby protecting your neck from moving and causing more pain.

This is one of the most common things we see with people over the age of 50 years old, and there is a 20-30% chance that everyone will have an episode like this in their lifetimes. But, not to worry, there are many things that can help this get better.

The first and most important thing: Keep Moving!

When it comes to lessening neck pain, movement is your medicine... even though it is painful to do at times like these. Movement lubricates the joints and keeps the muscles from tightening or spasming even worse than they are. Resting your neck is probably the worst thing you could do.

So, my advice is to think about keeping your neck loose and to remember these phrases, "motion is lotion," and "rest is not best".

The other tip is to get help right away so you can get relief faster, otherwise it can take weeks before this turns around. Many people can get out of this type of pain with hands-on help and guidance on what to do for it on your own at home. These types of situations do continue to pop up when not treated properly with a full rehabilitation process.

Neck Disc Bulges and Herniations

Neck pain can be extremely painful and completely mess up your days. It can hold you hostage in bed for hours, if not days on end, thereby causing an intense amount of fear of moving. It can be incredibly debilitating.

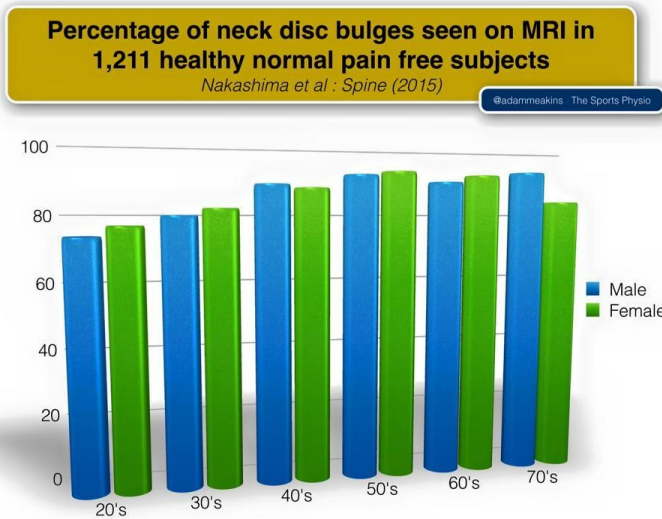
One moment you're fine and the next you find yourself suffering with pain that can travel into your neck, upper back, shoulder blades, or worse, down into your arm or hand.

Most people begin to worry that it's caused by something in their neck like a disc herniation, disc bulge, or something more sinister. And this alone can be concerning and worrisome.

The truth is that disc bulges and herniations are very common and are far from a death sentence. They are so common, in fact, that a 2015 study found that over 70% of people develop a disc bulge at the age of 20, yet experience no pain!¹⁷

Here's a visual so you can see how prevalent neck disc bulges are as we age.

¹⁷ Nakashima, Hiroaki MD; Yukawa, Yasutsugu MD; Suda, Kota MD; Yamagata, Masatsune MD; Ueta, Takayoshi MD; Kato, Fumihiko MD Abnormal Findings on Magnetic Resonance Images of the Cervical Spines in 1211 Asymptomatic Subjects, Spine: March 15, 2015 - Volume 40 - Issue 6 - p 392-398 doi: 10.1097/BRS.0000000000000775



Knowing this, is the pain because you slept incorrectly on your neck, or is it due to the whiplash accident you had years ago? Or, is it from sitting in a chair all day wrong? Either way, it's affecting you and what you are able to do; this type of traveling pain can be very troubling.

Sometimes neck pain can come on instantly and other times it can gradually sneak up on you. Here's how the theme goes:

Normally there is absolutely no pain or struggle with any symptoms: this is the pain free zone. Then, one might move into just some stiffness or tightness surrounding the upper back or neck area. One might start to feel as though your upper back muscles are trapped and getting tight.

Then, after that, the pain starts to move into more of a soreness or dull ache. Then, you'll move into actual pain in your neck or upper back region; this pain may be sharp, dull, or "nervy."

The last stage is where the pain might move into what's called a *radicular* or *radiating* pain, which means that it's not just in the spot of your back pain, but is now traveling down the arm or upper back, much like sciatica in the lower back.

It looks like this on paper:

No Pain → Stiffness → Soreness/Ache → Pain → Radicular/Radiating Pain

These are the levels that people progress or go through when they start to get into a normal aging pain pattern of typical wear and tear. When pain immediately strikes, it might be that you feel some soreness or stiffness in your neck, and then, within hours, pain starts traveling down into your arm or shoulder blade. If this has happened to you, this is common.

So, how does one get themselves out of this type of pain? In order to know that your needle is moving in the right direction, and that the things you're doing are actually helping you, we simply reverse the arrows:

No Pain ← Stiffness ← Soreness/Ache ← Pain ← Radicular/Radiating Pain

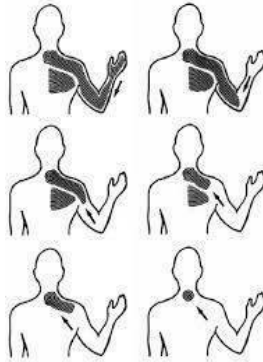
How can that traveling pain in the arm or upper back move to more local pain? What needs to happen to take local pain and move it into just soreness or aches? And finally, how do we take soreness or aches and move it into just stiffness and to no pain at all? In this way, you start seeing and noticing patterns that tell you that you're moving in the right direction.

Also, many people think of stiffness or soreness as being *out of pain* when really this is just when the work is getting started. For this reason, when radicular pain like this happens it is essential to get to the “no pain” zone and work there for a considerable more time. Why? So that the pain can stay away in the long term, and so that you can get back to doing the things you love once again, all without fear and with the confidence that your neck and upper back will hold up.

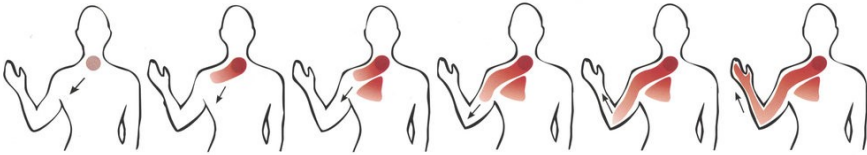
Here's another way to think about it.

The correct process to easing radicular pain is defined by the fact that the pain starts traveling back towards the center of one's neck or spine, not further away.

This method, called the McKenzie Method – also mentioned in an earlier chapter – is used to help pain lessen and go away by underscoring the fact that, if you can move the spine repetitively with motions that centralize the pain, then this will help.



This is opposite to peripheralized pain, as this method sees the pain being driven further away from the spine, that is, in entirely the wrong direction. See below:



When neck and upper back pain are treated properly by following the methods above and finding the root cause, it can allow you to have freedom back in your life to do what you want, when you want.

Even though it begins as such a terrible experience, there is a way to get out of it and back to doing everything you once loved to do.

What Is The Best Sleeping Position?

Since you will spend about one-third of your life sleeping in a bed, the type of pillow, mattress, and what position you choose, is an important part of preventing or managing neck and shoulder pain.

Two sleeping positions, in particular, are easiest on the neck: on your **side** or on your **back**.

Whatever you do, don't sleep on your stomach. Just don't do it!

The second you get into bed, it might feel ok to lay on your stomach, but if you stay that way throughout the entire night, then you'll be pulling on all of your neck and upper back muscles... all night long.

That's 8 full hours of constant pulling and tension building. Why? Because your neck, spine, and muscles will all be twisted to one side: half of your neck will be tensioned, while the other half will be relaxed, therefore creating an imbalance.

This scenario is similar to when kids play with playdoh or taffy. If you pull half of the taffy, part of it will stay in its original form, in the ball, and the other half will be stretched out and in need of some work to get back to its original form. Of course, your neck and upper back would be sore and hurting you if this was happening to it!

This is why your neck and upper back are so stiff when you wake up. You've been essentially pulling and putting tension on this area for 8 hours, 7 days a week.

So how should you sleep?

If you sleep on your back, choose a rounded pillow to support the natural curve behind your neck, with a flatter, thinner pillow cushioning your head.

This can be achieved by tucking a small neck roll into the pillowcase of a flatter, softer pillow, or by using a special pillow that has a built-in neck support with an indentation for the head to rest in.

A good option is the *Cervical Neck Roll* by McKenzie: it can slip into your pillow case with a thin pillow.

Thereafter, support your arms with thin pillows between your arms and ribs. This is the optimal position for your shoulders to rest comfortably and not bother you at night.

Here are some additional tips for side and back sleepers:

- a. Try using a feather or down pillow, which easily conforms to the shape of the neck. Feather pillows will collapse over time, however, and should be replaced every year or so.
- b. Another option is a traditionally shaped pillow with "memory foam" that conforms to the contour of your head and neck. Some neck pillows are also made with memory foam.
- c. Do not sleep on the side of shoulder pain. This can cause worsening of pain in the morning. Instead, sleep on the opposite side with a pillow under the arm of the shoulder that hurts.
- d. Avoid using very thick or stiff pillows. These types of pillows keep the neck overly flexed throughout the night and can result in morning pain and stiffness.
- e. If you sleep on your side, keep your spine straight by using a pillow that is higher under your neck than your head.
- f. When you are in a plane, train, or car, or even just reclining to watch TV, a horseshoe-shaped pillow can support your neck and prevent your head from dropping to one side if you doze. If the pillow is too large behind the neck, however, it will force your head forward, so avoid this position if possible.
- g. The biggest tip of them all: get adequate, quality sleep. The best remedy to helping yourself quickly is to allow your body to heal; it does this best by getting good a quality and quantity of sleep.

Headaches - More Than Just a Pain In The Head!

Headaches are more than just a pain in the head. They disrupt your entire morning and day.

And when it's time to settle in for a nice glass of wine with a book after a long day, you instead have to deal with a nagging, irritating, and painful headache that makes it difficult to concentrate and leaves you cranky and irritable.

We all get them now and again, but for some of us they're more of a regular occurrence.

It's incredible just how many people tell us that they've suffered from headaches so often that they just consider them to be a regular part of their lives. Yet, this doesn't have to be the case.

This is also why things like Ibuprofen and other types of painkillers are such big sellers, especially when it comes to headaches.

But, drugs can only relieve the symptoms temporarily by masking the pain – when, in fact, the recurring headaches may actually be the result of something else!

In my years of experience, I find that it's often the case that, if someone is suffering from dreaded regular episodes of headaches, they just haven't got to the real underlying root cause of their pain – and most of the time it's nothing to do with anything that's going on in the head!

Many times, recurring headaches may be the result of tension in the shoulders, upper back, jaw or neck – many people aren't aware of this.

You see, while simple painkillers prescribed by the doctor may help take the pain away for a few hours, they aren't actually doing anything to prevent the headaches from coming back and/or keeping them away in the long term.

Most people are aware that certain foods such as cheese, chocolate, and red wine can, at times, bring on a nasty headache. But, so can other things like hormone changes, being in a smoky room, irregular meals, and disrupted sleep.

But, what happens when you try to change all of these yet but nagging, irritating, and painful headaches just won't go away?

The one thing most people overlook as a trigger for headaches is 'stress'. We all know stress does many things to our bodies, but where do most people store stress the most?

That's right! Our necks and shoulders are primary spots for stress and tension.

We feel it as tightness, stiffness, and tension in our neck and upper shoulder muscles, and all of this tension can definitely bring on headaches.

Just imagine this...

You're running late for a meeting in the morning, you can't find your keys, and you're not prepared, plus the dog is taking 25 minutes to go pee this morning instead of going on her normal 2 minute outing... you're rushing to find your keys, yell at your dog to get inside, and you have a recurring *Guns and Roses* tune that you hate stuck in your head! No wonder why you're stressed!

Add all of those daily stressors up and you'll likely find that at the end of the week you've got a lot of tension stored in and around your shoulders.

And this is exactly why it's important to deal with our stressors.... without responding to them in a stressful way. In this manner, we can start to prevent headaches and make them occur less and less.

Another aspect to having headaches lies *within* your neck and shoulders.

As we are on devices, or stuck with our noses in newspapers or magazines multiple times throughout the day, our necks get strained. One important thing to remember is that having a weak neck can cause headaches to emerge.

You'll be surprised to know that your head actually weighs about 8-12 pounds, but did you know that for every inch your head moves forward – to read a screen or a book – it weighs an extra 12 pounds?

When you have weak, stretched muscles trying to hold this noggin of yours up, it becomes a strain on weak muscles to consistently do this. The joints finally end up out of balance and, because your head

balances on your neck, the equal distribution of control – from front to back, side to side, and corner to corner – is lost. This can cause problems very quickly.

That's why oftentimes headaches aren't just a pain in the head, they're actually a pain in the neck, as well – pun fully intended.

What are some things you can do, right now, to help?

When it comes to getting rid of headaches, neck, shoulder, or upper back pain, what most people fail to realize is how much the upper body can compensate for other areas like your mid-back and low back, thereby causing imbalances – you might be able to turn your head to the side more in one direction, one shoulder is higher than the other, or you might have a terrible time trying to have good, upright posture.

These imbalances need to be addressed as compensations lead to bigger issues down the road.

Your neck can also lack low grade muscle tone.

So, what exactly is low grade muscle tone? Well, it is the body's ability to keep certain muscles active when the body is at rest, that is, the body's postural and supportive muscles. The body needs to have active muscle tone (when you move), and resting muscle tone (when you don't move), to perform like a well-oiled machine.

This is why many people have difficulty sitting for long periods of time, or still have pain when they are resting. They lack the low grade muscle tone that the body craves in order to be supported.

In order to fix this issue properly, it's important to figure out which muscles are not firing vs. which are over-compensating first, and only then to correct any alignment issues happening deep within the joints before trying to secure your head.

What else can you focus on?

There's are a number of relaxation techniques that can both reduce symptoms of stress and help reduce your upper neck tightness, muscle spasms, and headaches.

You can make time for activities that sooth you, such as listening to calming music, reading a positive book, or doing your favorite exercises. I personally love to go for a run or do a workout in the gym, as it really helps to clear my mind and keep stress at bay throughout the week.

In addition, set aside time – even if it's just 10 minutes a day – to practice different relaxation techniques: things like Yoga, Pilates, Tai Chi, and deep breathing can produce amazing results to not only your mental well-being but also your physique.

You can meditate or take 10 minutes to just listen to your breath and nothing else.

Many of our clients, who lead busy lives during the week, do some sort of combination of the activities mentioned above – and they find it really helps reduce tension, tightness, and headaches in their days.

At the end of the day, stress can make your head hurt – and a headache can really stress you out! So either way, to reduce the pain you've got to rein in the stress.

Lastly, if you think it's more of a neck issue for you, then I suggest you start focusing on the root cause. This could mean the pain coming from a specific joint, muscle spasms, or even tension built up due to a long overdue shoulder issue which was never resolved.

If you're struggling to get the headaches to lessen and keep them at bay, it's possible that you just haven't been told your real root cause and you're simply working on the wrong things.

Neck and shoulder pain are two of the trickiest things to treat, only because it takes more than just an MRI or an X-ray to find out what the real problem is.

If you have had on and off again headaches for many months, if not years, these are things we see all the time.

One of the most important things you can do is find out what stretches or exercises, hands-on techniques, and other tools are actually going to help you, what routines or habits will correct the issue in the long term, and then learn strategies and techniques to easily lessen the headache as soon as you feel it coming on.

This is what it takes to keep you from lying in bed all day, miserable and with a pounding headache, so that you can go out and do what you love to do once again.

In fact, this reminds me of a client we helped, namely, Emily; she was a new mom experiencing severe neck pains and headaches.

She came in after seeing 6 different providers: massage therapists, chiropractors, her doctor, and even her dentist! I found out she was trying a new mattress, new pillows (which helped a little), a mouth guard, and was stretching every single day, but was still having deep neck pain and headaches at least 2-3 times a week, on average.

As she mentioned to me, it took time out of her week to lie down, turn off the lights, and just try to keep the headaches at bay. She would get through a day's worth of work by simply taking Ibuprofen in the morning and at lunch. This was the only way she could function.

I remember her husband coming in with her for the free discovery visit and being so frustrated that nothing had worked to help his wife thus far.

He kept mentioning how hard it was to watch her suffer and deal with this when he thinks of her as a happy, go-lucky person – one full of life and adventure.

Emily started telling me her story: she had been in 2 previous car accidents over the last 3 years, and these had left her with a couple

weeks' worth of excruciating neck pain. She also mentioned that it was never completely resolved: just eased and lessened.

So, she decided to do some physical therapy that was covered by her insurance: 6 visits in 2 months. That was all that the provider offered. She followed the sheet of exercises they gave her, used her mouth guard every night, bought a new pillow and mattress as advised, and used a sling to “decompress” her head at night.

But the reality is ... none of this actually helped.

She was not seeing any improvements and she felt like she was stuck in neck pain and headaches.

Rightfully so, Emily (and her husband) were hopeful that we could help, but yet very skeptical that anything more could be done, especially since she had been trying so many things and had already seen so many people, all of whom told her that they could help her, yet didn't.

Though she was hesitant, we started by focusing on the root cause using specialized movement assessments and tests that allowed us to gather important data. Then, we started to treat the root cause and gave Emily the tools she needed to be successful at home. In her case, her compensations developed in her upper back area and there was an alignment issue that stemmed from a previous car accident. The pain was just lying dormant under the surface, waiting to pop up over and over again.

We worked on improving her low grade muscle tone in the front of her neck and worked on opening up her chest so her posture improved for better alignment.

Within 4 weeks, Emily and her husband were smiling ear to ear about her progress. She was getting back on her bike again, riding the trails alongside the river, and was able to reduce her pill intake to just once in the morning, one day a week, if that much.

I remember a session where Emily nearly teared up at the end. This was when we started to finish her plan; she said, “I really felt like it was going to be like this for the rest of my life.”

“I felt my life was going to be scheduled around my headaches and neck, like I couldn’t go places because of it. I just can’t believe I’m living a whole different life again, one in which I love to get up and look forward to living again!”

If you’ve been struggling to find solutions to your neck pain or headaches, I hope you can find a bit of hope in Emily’s story.

Her story reminds me of so many of our clients, and much like we tell them, you too do not have to live in neck pain or with headaches for the rest of your life.

I hope you’ll choose a different story for yourself.

Want specialized help and guidance from an expert to get you there? All of the clients we help start with a no obligation, free discovery call with our team to get specialized advice and to see if what we do can help them in their situation. We do not take on just anyone. We only take on people we know we can help. Together, you too can gain more clarity and confidence during this call, and you can see if what we do will be able to help you. To apply for yours, simply go to www.thephysiorevolution.com/book.

As we move into the next couple of chapters, we will start to discuss the process of implementation, that is, how to truly begin getting out of your pain... permanently.

Chapter 7: The Ladder of Success

How Do We Get These Results?

So, how are we so successful at helping our clients get back to the lives they deserve? What if I told you that you can learn the five simple steps anyone can **instantly** take to put an end to pain, even if it's been years of misery?

That's right, all you have to do is follow our simple five step process, right now, and you will be able to achieve freedom from pain.

Yes, the previous chapters are specifically designed to help you understand more about your root cause and what not to do, but what do you do once you do understand that? Well, look no further for the answers!

Now that we know what is likely going on with your pain, and what to do to help ease the discomfort, we must now take all that information and map it out into a solution which will put an end to your pain.

The way we help people is through our *Ladder of Success*, the in's and out's of which I will teach to you in this chapter.

This proven strategy has helped 100's of people get out of pain successfully, thereby getting them back to the things they love to do, all without using harmful, unnatural solutions.

Firstly, I want to get clear about who this is for:

- If you've got pain that's either preventing you from doing what you love to do or threatening your independence and mobility.
- If pain is getting in the way and limiting your activity.
- If you want to find a natural way to end your pain.
- If you've been feeling stuck in your situation or feel like you've plateaued, perhaps, and you haven't been able to move the needle forward for a while.

- If you're frustrated with your pain getting in the way of your life... and you're finally ready to do something about it.
- You already know quick fixes won't help and it's likely you're looking for real long-term solutions just like the rest of the people we help.
- If you tried other options before, but haven't had a real solution to end your pain.
- If you want to gain momentum, try a new, unique approach that no one has ever taught you, and find a real solution to ending pain.

Many people come into our clinic saying, “yes, I get a little short term relief here and there, but I'm looking for a long-term solution. One that keeps the pain away for good.”

They get tired of waiting to just see if it gets better on its own with time.

It doesn't. It becomes worrisome and stressful to constantly be in and out of pain. And the truth is, many people struggle for weeks months, or even years of pain before doing anything about it!

The good news is that our strategy works for all levels of complexity.

If you've had pain for so long that it's become complex, that's okay. Or if your pain is new to you... you're in the right place.

YOU NEED CONFIDENCE, CLARITY, AND CERTAINTY

What you need is the confidence, clarity, and certainty about where to put your time, energy, and effort so that you can get the results you want. You've probably wasted a lot of your resources in treatments that haven't worked for you. This is just information to collect, because now you know what doesn't work.

Moving forward, then, it's essential that you take into account the following three things:

1. You're going to need confidence in the fact that you're doing the right things and not the wrong things. It's important to make sure that your program of exercises, stretches, or techniques is not making your pain worse, but rather making it feel better.
2. You'll need clarity in that you understand exactly what's going on (root cause), why it's happening to you, and how long it's going to take to resolve the pain.
3. You'll want certainty to know that it's going to move in the right direction once and for all. You need evidence and proof that you are improving as you put time, resources, and energy into resolving your pain.

So, how can we do this?

First we use the methods taught in previous chapters, such as the Test-Retest Method, to understand what tools help keep the pain headed in the right direction... and when to progress the program to the next phase.

Here's a refresher to just make sure we don't miss important parts:

Test —> Treatment (hands-on, exercises, or other tools) —> Retest

In this method, we test the motions that are painful first, and then assess the effectiveness of the tools used for treatment, exercises, and manual techniques by retesting the initial motions we tested. In this way, you make sure that the needle is moving forward and pain is reducing as anticipated. No more guess work or exercise sheets pre-printed on a paper.

And how do we know pain is moving in the right direction?

When the arrows reverse and the intensity/symptoms begin to change and/or you're able to be more active.

From this: **(Lots of Activity) No Pain → Stiffness → Soreness/Ache → Pain (No Activity)**

To this: **(Lots of Activity) No Pain ← Stiffness ← Soreness/Ache ← Pain (No Activity)**

Now, let's get into the nuts and bolts of the program.

Ladder of Success

So, what is the *Ladder of Success* and what can it do for you? Well, I'll start by telling you this: it's more than just an exercise program and it's more than just throwing stretches and exercises at a wall hoping they'll stick.

This proven, effective process has helped 100's of people, and will continue to impact 1,000's, if not 100,000's of people in the future, all with the hopes of transforming not only the way we as practitioners look at helping people get out of pain, but more importantly, how *people* should really be looked at when they have debilitating pain.

This process has been able to transform a person who's suffered with years of misery and pain into one with only weeks or days of pain, and thereafter into one living life on their own terms, without pain dictating what they can and cannot do.

The most important part about this process is that it's not for everyone. This is not a strategy for those who:

- Would rather have a surgery or a quick fix for their pain.
- Are not dedicated to putting in 100% of their effort, time, and resources.

- Would rather have an unnatural, possibly harmful way to put an end to pain.
- Are not ready to do something about their pain and would rather wait to see how it goes.
- Aren't committed to the program and do not desire to be held accountable during the process.

If you fall into one or more of the above, then this process may not work for you and it's probably best you close this book right now... give it to someone else who can use it.

But, if you don't fall into those groups and you have a deep desire and commitment to yourself to get out of pain and live a better quality of life, then let's get started.

Here's what the Ladder of Success looks like from a 30,000 foot view:

The Ladder of Success Program

Phase 1: Pain & Alignment

Phase 2: Secure The Alignment

Phase 3: Strengthen Every Day Activities

Phase 4: Strengthen Specific Activities

Phase 5: Increase Your Back's Capacity

Phase 1: Pain and Alignment

After you find your root cause, first phase is to focus on alignment and reducing the pain.



Whether you suffer from knee, back, or neck pain, you must always focus on your alignment first. I want you to think about alignment and pain like this house:

What do you see in this house? Does it look strong and secure?

Of course not.

This house has warped stairs, the platform of the porch is cracked, and the columns are somehow holding on by a thread. It does not look like it's doing too well. It looks like it's kind of on its last legs here.

The reason for this is because the foundation of the house has been cracked and everything on top of the foundation has had to compensate for the imbalances just to keep it upright.

Your alignment is to your body much like the foundation of this house is to its structure. When the foundation is disrupted, it can start making

the other areas of your body compensate, create imbalances, and then eventually cause pain.

There are two different approaches to alignment.

The Bottom Up Approach

First, there's a bottom up approach, which is the most common. Here, much like with this house, having a solid foundation of concrete is vital to make sure the house doesn't start to lean or crack. Your body has a foundation as well – your feet. Your feet make contact with the ground and this causes a reaction all the way up through your legs and into your spine, and then, thereafter, into your neck and shoulders. So, if you notice your arch is low on one side, or you have one foot rotated more outwards than the other, this causes your body adapt all the way up the chain. Resultantly, it starts to impact your knees, hips, and back.

Other times, people feel like they are not symmetrical, and either their hips, their backs, or leg lengths causes them to notice these imbalances. Addressing the bottom up approach is essential to fixing the alignment in these cases, since most relief comes when the body feels it's in a safer, more aligned position. This is where the pain is lessened.

We could go into all the different types of bottom up approaches, but really, alignment is the foundation of it all.

The Top Down Approach

On the other hand, the top down approach is a bit different and more relatable for most instances of headaches, neck, shoulder, or upper back issues. Take, for instance, if my glasses were crooked: my head would start to adjust to those glasses because my eyes would want to have a level field to see from, and my body naturally wants to feel "upright." This would be a top down approach, that is, one where my upper body would be imbalanced.

Does one shoulder sit higher than the other? Are you able to turn to look over your shoulder much easier one way than the other? Can one shoulder raise higher than the other?

These are all imbalances that need to be looked at from a top down approach.

After alignment is narrowed in on, it's vital to assure that you find which muscles are creating the imbalances. Since muscles are what pull and move bones, in order to fix the imbalances and keep the alignment in its place you need to focus on which muscles are being overworked and which ones are being lazy.

Overworked muscles are ones that feel tight, want to be in constant spasm, and feel like you want them rubbed at the end of the day. They get so dominant in every way you move your body that they don't allow the other smaller, but supportive muscles to help.

The smaller, supportive muscles deeper near the joints get lazy and weak. Not always feeling worked or challenged, the moment you try to use these muscles they want to cramp up and fatigue very easily with just the smallest tasks like bending over to pick something up.

Knowing which muscles are which type will allow you to know where to focus on keeping your alignment as you move into Phase 2.

Phase 2 – Secure the Alignment

What's the point in correcting your alignment if you can't get the alignment to stay?

It's like going to the chiropractor or massage therapist and feeling great afterwards because your body is aligned finally... then just a few days later you slowly feel your body start to fall out of alignment again. You'll need to keep going back time and time again...

Phase 2 is where we'll start the process of securing the better alignment created from Phase 1. Because your body will naturally go down the path of least resistance, meaning it will revert back to what it knows – poor alignment – it will need constant reminders and daily work to help it secure the new alignment.

The only way the alignment stays in place is when you train the body to memorize and secure it as such. It's like trying to stick to a new habit. You have to keep reminding yourself over and over or else you'll easily fall back into the old habit.

So, how do we secure it?

Well, your bones only move because they are connected to muscles. Muscles are the only physical aspect that make your body move. So in order to secure an alignment of bones and joints in their correct spots, we use your muscles.

Imagine you've been avoiding putting full weight through your right leg because when you do it bothers your knee and your back. Well, you'll need to relearn how to do that without pain and keeping your better alignment now.

Of course, alignment compensations created from pain will look different and unique for everyone. Once they are identified, we'll need to put you in the correct alignment and teach the muscles to be strong and secure again so that the body can stop the compensation pattern it's created.

Again, using what we know from Phase 1 now, we can focus not only on waking up the lazy muscles and calming the overused muscles, but also making sure that the timing, sequencing, and the coordination of the muscles are all in sync, that is, firing when they need to. This is an essential piece to the program's success and for your ability to move through the next 3 phases.

Phase 3 - Strengthen For Everyday Activities

If you are having a difficult time bending over to pick something up, go up and down stairs, or even just to stand or sit at your desk, this is where Phase 3 comes in.

Now you've corrected the alignment, and secured the alignment, but you're still having problems picking something up, going up and down stairs, or even simply sitting at your desk or walking for 30 minutes. This is where Phase 3 comes in.

Your body forgets how to do the basics because of pain.

So, let's say you are having a hard time bending over to pick something up because your back hurts. Since pain makes our body forget about the better alignment and makes muscles stupid, the goal will be to relearn how to move into bending over again while securing muscles to keep the alignment you've just corrected. This way, bending or hinging at your waist doesn't bother your back any more.

This goes for anything else related to basic movements like pulling, pushing, lifting, carrying, squatting, twisting, and walking... you use all of these patterns daily and they need to be addressed in this phase to ensure that you are able to do everything you need without fear or pain holding you back.

At the time of writing this, we are about 12 months into the COVID-19 pandemic. All of us are cleaning our house more frequently and doing honey to-do lists for our partners. I can't tell you how many people have told me they have finally replaced their floors, re-did their fences, or painted their walls a different color.

In other words, we've got more time on our hands than we usually do, and while some people are starting to return back to the office, others are still working from home. This means we're constantly doing laundry, going up and down stairs, and leaning over to clean or fix repairs we haven't touched in months... or years for the rest of us! :)

You want to make sure your back, hip, knee, or painful area is secure and strong enough to do these things.

Note: Many times other PT's, massage therapists, and chiropractors do not go deep into this type of treatment. Some only help you until Phase 2 and others Phase 1. This is a problem for you, particularly if no one is looking at what you need to do in your daily routine.

Phase 4 - Strengthen For Specific Activities

If you're like any of our clients, they love to be outdoors and stay up with all of their friends and family. It's important that they can go on hikes, go for a long bike ride, or even play tennis or swim again.

If you're like them and want to get back to doing what you love with confidence and not having to worry if pain will hold you back – or worse if you'll have to pay for it the next day – then this is where Phase 4 comes in.

Imagine you're walking 20-30 minutes easily, able to clean or do projects around the house, and you can do the full flight of stairs in your house...

What happens when a loved one calls you to go for a long bike ride? Or to go on a 2 hour hike?

This requires your body to have even more strength and endurance to keep securing your alignment to not only get through it, but also to feel *good* while doing it.

Untold amounts of people come to us after trying generic clinics and say they are not back to doing the things that they once loved doing. Many times we fill in the gaps that were missed, that is, helping them through Phases 1-3, because many people just jump to this Phase 4 without starting at Phase 1.

Other times, people are close to being completely out of pain and therefore stop their program early. This really is a mistake: the pain will likely come back in the future. And so, this leads me right into Phase 5.

Phase 5 - Increase Your Capacity

In this phase you likely have little to absolutely no pain – you may even want to stop working on your ailments altogether. The problem is... this is precisely why the pain can come right back in the future. When people get tired, they normally revert back to old habits or poor alignment and this is where many get hurt again.

So, Phase 5 is what I call “the icing on the top.” This is THE MOST imperative part of your program, and it’s typically the last 10-20% that you’ve probably missed in your previous attempts at pain eradication. I urge you to stay with the program at this point, even when you feel better or feel no pain. Here’s why: this is where you get the long term results!

Usain Bolt, the fastest man in the world as I write this, ran a pretty quick 100-meter dash in the Olympics back in 2009: 100-meter sprint in 9.58 seconds. Do you think he just practiced 100 meters nonstop? No, no. He practiced 150-meter and 200-meter sprints. He didn’t just run 100-meters. He went beyond what he wanted to be able to do, and thus he grew his capacity to finish the 100-meters at an Olympic standard.

Now, I know you are not looking to sprint and become the fastest person in the world, right? Well, maybe you are! But, his story is no different than what you need to be able to confidently go to Pilates, do yoga, or go on a long walk.

All of this takes growing your capacity – or going beyond what is required – as well. Building your capacity is basically growing your stamina.

For example, let's say you want to go for a 1 hour long hike with a friend, but you're worried your knees will hold you back. If you strengthen your alignment to keep your knees pain free for 1.5 hours, then when you go to do a 1 hour hike... it's a breeze and you have no worries!

You'll want to go further, past what is required, so that your body will hold up and you'll be able to finish any specific activity you desire with ease.

This is exactly how we approach your program; we want you not only to get successfully out of pain, but to remain pain free in the long run – pun intended.

You need to go beyond what your baseline is – don't go backwards. This process and program is much like climbing a mountain. If you only climb $\frac{3}{4}$ of the mountain, then you run the risk of sliding right back down to the base. Whereas, if you hit the peak and start climbing down the pain-free side of the mountain, you'll get long term results.

So, there you have it: these are the essential phases that create the *Ladder of Success* and this is the precise strategy we've used to successfully help people get out of pain.

Remember that, as you move through the phases, your body is one whole organism: all its complex systems work in unison to make you, you. Any program has to take that into account, otherwise your chances of a permanently pain free life are minuscule.

If you'd like to learn more about our phased program, the *Ladder of Success*, you can watch our free webinar which will guide you through this process step by step; it is located inside of your resource guide at www.thephysiorevolution.org/resources.

In conjunction with the *Ladder of Success*, working with a client as a whole is a big part of it. It's another major aspect of how we help someone create lasting change and help get them back to doing the things they love. In the next chapter, we are going to discuss how to do just that in a way that takes into account the whole.

Chapter 8: How to Create Lasting Change In Yourself, Stay Out of Pain, and Do the Things You Love

To drive yourself towards feeling better – to make real and lasting progress – it is vital to know where you want to be. Do you know what you want? Do you know where you want to go? What are your goals? Most likely you do, and that’s why you picked up this book.

Just as important, do you know how you will achieve them? What are the milestones you need to hit in order to get there? What does your road map need to look like? Do you even think it is possible for you?

There is no shortage of people who tell us they want to be more healthy, be able to lift up their grandchildren, hike, be active, avoid slowing down, and keep up with family and friends. They say their plan is to get out of pain.

Here is the mistake they all make: what they describe here is not the *plan*, it is the *outcome*.

They know what they want, but what they lack is a road map or a guide to help them get there; they also lack a real understanding if it is even possible for themselves. Very few people can describe the road map of they will get “out of pain”, have more energy, get back to playing on the floor with their grandchildren, and be more active. These people are also the ones who are usually lost as to what to do. They will try some things and then get stuck. They have no wellness plan or a guide to help them.... no guide or map and no one to help them create it.

Part of the map, as well as the guide to getting there, is understanding all areas of wellness, not just the pain. This is the single most important thing you need to know in order to get from where you are today to where you want to be. And despite popular belief, it's not just about addressing the pain...

We have yet to hear someone say that they don’t want to feel confident in their bodies and minds, that they don’t want to be energized, feel

rested, fulfilled, happy, and able to do all the things they love confidently with family and friends.

So the question really is, why are so many people still suffering or stuck in the same position as they were months if not years ago? Why are there so many people slowing down? Why are there so many people who are not able to do the activities they love, like hiking, playing golf, walking, or running?

Where Are You Going?

Everything you work towards must be in the direction of where you want to go – what makes life worth living for you. Many clients tell us it's the freedom to choose what activities to do without worrying about pain. Many say it is the fear of losing their independence or mobility, winding up like their mothers who had to rely on others at the end. Whatever the reason, it's vital you know your big why and your goals.

The wellness program has to start with understanding what you want, getting down to the root cause of the problem, and then creating a plan to get to a destination or goal you have set.

The plan also has to start with diving into the person as a “whole”, taking into account all aspects of the human being: your life and experiences, and your story, habits, and beliefs. It is not just about genetics, exercise, diet... it is well beyond that.

It is not even about the disc bulge or stenosis seen on an X-ray or MRI: that is simply the effect. The cause of *this* is the root problem.

Oftentimes, we find the bigger problem by peeling back the layers, like an onion, perhaps.

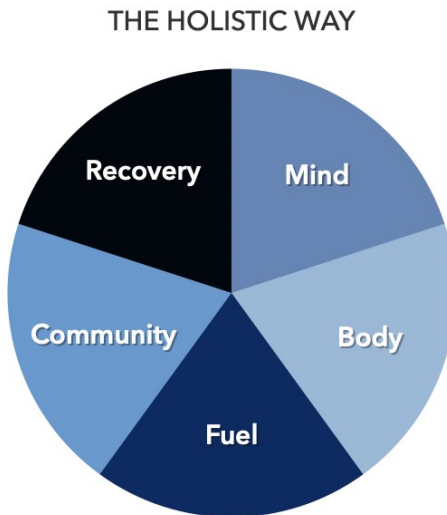
People tell us that they just want some hope of getting better; they need the relief of knowing that we can help them build their road map to the hidden treasure chest of a pain free life – just that is already enough to take a big weight off of their shoulders. We genuinely want this for you, too.

To be well, you have to look at the habits and beliefs surrounding your body, mind, and spirit: these are the key areas to focus on if you're a person looking to maintain your independence, mobility, activity, and confidence in your body and mind.

The Holistic Way

An important part to this entire process is also being able to look at yourself as human, one who has other factors that come into play when it comes to pain. You should be looked at as a whole, not just as a painful back or someone with neck pain. This point of view is often missed by professionals and is similarly misunderstood by those in pain. We often are not looked at the way in which we should be treated: with a unique and individualized, customized approach. You and your experiences are different from every other person.

There are five subcategories to the whole human that need to be addressed in conjunction with your plan to get out of pain for good. You can see them in the chart below:



Community

“You are the sum of the 5 people you surround yourself with the most.”

I mentioned that this is what my mentor told me early on when we began working together. It has helped me see how important it is to pick your environment – and the people you put in your world – very selectively.

Do you enjoy or benefit being around people who find every little nuisance in their lives as negative, or do you prefer spending time with those who take these ‘blips’ as learning experiences and laugh at them? Which environment serves you and who you really are?

What 5 people are you around the most in your life right now? I’m sure they are good people. Maybe they include your partner or spouse, your kids, and a good friend you grab coffee and go for walks with. Or maybe they are co-workers who just moan about work all day long... leading you to follow suit since everyone else is doing it?

Your community, the environment you are in, and the people you surround yourself with, will influence you every single day.

Imagine that you are struggling with severe back pain. You are limping and leaning forward because of it. A co-worker comes up and asks if you are okay and you say “yeah, my back just went out.” Then your co-worker goes off about how their back pain is the worst and how awful it’s been for them for 15 minutes while you struggle to get a word in, let alone try to stand for that long!

But, what if a different co-worker says: “What do you need from me today? How can I help you? I have a heating pack on my desk, would you like to try that? Also, I heard going for a short walk can help – want to do that with me during lunch?”

Which situation do you prefer? I would hope the latter.

This is why the people you surround yourself with are so important when it comes to getting out of pain. You don't need sympathy. You probably (much like myself) can give yourself enough of that. You need empathy, support, and accountability in order to see things through. The alternative of only listening to sympathy will only get you so far.

We created *The Physio Revolution* to have a community of like-minded individuals who wanted to support and encourage each other as milestones are accomplished. Our community supports one another and cheers each other on as we see improvements and gain new friends along the way. We don't tolerate negativity or people putting others down. It's completely unacceptable in our environment and we call people out on it if it happens. This is how much we cherish our community – we do it *for* them, not *to* them.

It's amazing what a different environment can do for someone when trying to heal; an environment that supports you, empowers you, and ultimately accepts everything about you – even your complex pain that no one seems to understand – can really make a difference.

So, who are the 5 people you surround yourself with the most, and are they serving you, helping you get what you want out of life, including getting out of pain? I think this is a question we should all evaluate at least once a year, and I hope you set this book aside for 15 minutes to do that right now.

Fuel

Do you need to eat healthier? Have you fallen off the wagon recently? How much does your diet contribute to your pain and aches?

Putting the right nutrients in your body will fuel both it and your mind. Mostly, people look at food as though it needs to taste good, as a

reward, or as a comfort blanket. Rarely do people ever perceive food as fueling our bodies and minds.

It's like fueling your car at a gas station: you wouldn't fill your gas tank with diesel fuel if it only worked with gasoline. It won't be long before the engine stalls and things start popping-up requiring more mechanic visits, right? Our bodies are exactly the same, but people don't seem to acknowledge this that much.

With this being said, most people these days know that eating better nutritious foods equals feeling better, having more energy, and increasing your longevity and ability to stay healthy as you age. It begs the question, then, as to why do so many people struggle to fuel their bodies correctly.

There is hardly a lack of information out there about what to eat and what not to eat. Understanding what the best foods are to fuel your body is something we encourage our clients to do. A plan that is customized to the person, however, isn't just about that. It is more about the habits and disciplines we carry in our day, all of which surround food, that will truly determine whether we are successful in fueling our bodies or not.

Everyone has habits and beliefs surrounding food: for many, they coincide with cultural beliefs, traditions, and upbringing. Some people use food for comfort, others as a reward. If you are serious about wanting to fuel your body in the best way, it all starts with an awareness of your thoughts and beliefs regarding food and drink. What are the things you do consistently? Do you drink soda every day? Sugary coffee from a local coffee place? Are you a salty or sweet snack muncher? There is always a trend.

Once you become aware of your thoughts and habits surrounding food, you then know what things you need to change in order to achieve the type of eating habits you desire, those that will make you feel good and live longer.

It can never start with certain foods or a diet plan. That is why most diets fail: they only fix the symptom of the problem. In order to create

true change (which you can see is the theme throughout this book) you need to fix the root problem.

The root problem with people not eating as healthy as they would like always starts with understanding the thoughts and beliefs surrounding their eating habits. Individuals can sometimes spontaneously become aware of these thoughts and beliefs, while others need guidance in their journeys.

We could talk about nutrients in a general way, however most of that information is easy to find and honestly, you probably know by now what is and is not a healthy option. What you won't find is that your **discipline** and **habits** with regards to food will determine whether you are successful or not. As you will see in the upcoming section, it is paramount to grasp these underlying factors in order to achieve true health.

For most people this isn't what they want to hear, though. They want the latest and greatest diet fad or trend... or the quick fix, in fact. We always want that instant gratification and quick fix, however, true change never lies there.

Change happens over time, meaning the gratification is delayed. What most people fail to realize is that the feeling of gratification is felt most strongly when it originates from something that has been built up over time. This is the holy grail of feeling good... what most people describe as fulfillment.

So, what kind of eating habits do you have?

I always tell my clients a phrase that I didn't coin, but wish I did: "You can't outrun a bad diet." You can exercise all you want, but if you do not fuel your body and make good food-choices, you will still have problems.

I've seen many active people have heart attacks, get diabetes, and go through multiple diseases.

Why is this?

Because exercise is NOT the only factor when it comes to health. And no, your kids, nor anyone who is thinner than you, can't just "eat whatever they want". This is a myth and it's a terrible mindset when it comes to your eating habits. You have a much better shot at having less issues (diseases, diagnoses) in the long run when you focus not only on exercise, but on what you put in your stomach.

The main point of is this: what you eat is a CHOICE.

This is an active choice over which you have control: no one else forces you to eat particular things. And if you listen to what you *think* your body wants (a juicy cheeseburger, fries, and a soda), I can almost guarantee it won't be truthful to what you *really* need.

See, wants and needs are different: cravings are a want, while vegetables, water, fruits, and proteins are needs.

When you decide to stock up on junk like candy, fast food, chips, or just poor quality food, you can expect your body's energy to deplete quickly; you'll feel drained easily. Repeat this day after day and you're just running on unsustainable fumes. This is a breeding ground for pain.

Now, I'm not going to claim to be a diet or food expert, but I do know this: your body may crave those quick, easy snacks, but it's not going to benefit from them. Do you want to know what I tell my clients when they ask me what the "best" diet is?

I tell them it's one that is *sustainable*.

This is the key to success. Find a diet that works best for you and can be implemented in the long run. Gimmicks and "quick fixes" do not work, especially if KEEPING the weight off is your goal.

Let's say you try to implement an anti-inflammatory diet to help with your pain. You start making big changes to your diet: eliminating anything that is inflammatory like sugars, processed meats and processed foods. You just cut it all cold turkey. After 3-4 days you start to crave, trying to fight the urge... but it's so hard! You just want some level of normalcy again. This new diet is so hard!

It is nearly impossible to sustain such a dramatic change in a diet - between cravings, old habits, lack of a flexing your discipline muscles - you wind up back at square one. It's just a matter of when. Sustained success happens when new habits are created over a period of time. This needs to be a process... one where you slowly teach your body how to adjust to a new normal.

So, my suggestion is to avoid removing things from your life and to add things to it instead.

Add, for example, drinking a large glass of water in the morning, mid-day, and evening before you eat your meals.

Add multiple water breaks to your life throughout the day.

Add extra vegetables to your plate and eat them first... before you enjoy your normal meal.

Adding good choices allows you to do a few things:

1. You get the better, healthier options down the hatch first.
2. You still get to enjoy the taste of whatever else you decide to eat.
3. You fill up your stomach a bit faster and thus will eat less when you drink a large glass of water before every meal.

All I did was apply these 3 simple tips when I was in severe back pain... and the change was profound. Not only did my pain ease up, but I started to crave healthier options and lost over 40lbs.

Plus, as I mentioned, it's been sustainable. I've never gained back the weight and I enjoy a life living in an 80/20 world: 80% of the results come from 20% of my efforts.

What you put in your body day after day will affect your pain levels and your energy... this I guarantee.

Body

Movement matters. Let me share a story about why it is so important to move... and why movement matters so much. It is not for the reasons you may think. The majority of the time, you hear movement matters for the sake of staying healthy: you need to get your steps in, keep your body limber and flexible, stretch and keep your heart and lungs healthy.

Here's the thing: movement is a gateway to the lens of pain. An expert in movement can reveal the root of the real problems just by moving your body.

We had a client by the name of Kathy come in. She had been struggling with ongoing back flare ups for the past 4 years and tried many different things to help ease the pain; she was at her wit's end. She knew she needed to do something different to what she had already done and tried. After numerous PT visits, MRIs, X-rays, and chiropractic adjustments, she really wasn't sure in which direction to go.

The problem was that during all those attempts, no one ever really listened to her story. They only looked at her back. They missed one of the biggest pieces of her puzzle: she had severe right sided, upper back and neck pain 2 years ago... and it was never properly fixed.

They say eyes are a glimpse into the brain, yet the same is true with your body, as movement is a glimpse into one's pain: it begins to paint a picture of one's puzzle.

When Kathy was carrying stuff that required her to use her upper back, her lower back paid the price.

So, if we consistently focused on just her lower back like previous clinics did, would Kathy ever have gotten out of pain?

If you're going to solve a puzzle, you don't start with just the middle pieces. You start with a defined boundary so you know where to fit the rest of the pieces, right? Well, so too does your body's movements – they tell us where to fit the missing pieces in your own body's puzzle.

If we think of your pain as a puzzle, it is about collecting all the pieces of the puzzle to be able to put it back together again.

In other words, true healing starts with gathering one's story, past experiences, and movement patterns... just like it did with Kathy. To get a puzzle finished as quickly as possible, it starts at the edges and the borders and then works its way in. It doesn't only start with looking at the back first.

There is not much I need to say that's not been said already in the pages of this book. Your body is your vessel to get through life, and we believe it is one of THE most important things to take care of, all so that you can age gracefully, stay independent, and be confident in your abilities as you live the wonderful life ahead of you.

You deserve to give yourself that much.

Recovery

Recovery does not just mean recovery from pain or injury. When you think about recovery, I want you to think about your stress, your sleep, and how much you let your body rest as opposed to pushing your system towards the edge of a disaster.

This disaster isn't reached by exercising too much, but also by exercising too little.

A sedentary lifestyle... is not a healthy lifestyle.

A non-stop, 6-8hrs/day, 7 days a week exercise lifestyle... is not a healthy lifestyle.

A workaholic lifestyle with less than 6 hours of sleep per night... is not a healthy lifestyle.

Finding a balance between activity, sleep, and stress management is very important. It is also one of the hardest things to do. This is recovery: allowing yourself to challenge your system (your body and mind) by also giving it adequate recovery (sleep, rest, brain dumping, mediation, etc.).

So, let's start with the number one issue everyone has gone through in their lives: stress.

How do you manage it? Do you even know it's there? If you do, what do you do to help combat it?

Life can really throw some hard curveballs at us, and sometimes we may feel overwhelmed – our job, our family, trauma, and so much more – and leave us feeling like it is out of our control.

As this book is being written it is 2020. Year 2020 brought a lot of challenges and rewards to all of us. There's a global pandemic we are all trying to navigate, change is happening with a new POTUS, governments are telling us when we can and cannot come out of our houses, we are losing loved ones without being able to see them during their final days with us, and we are in a very unique situation of semi-isolation.

With all of this going on, it's imperative that we all find a way to release this newfound stress.

So, what are some quick tips to manage the stress and challenges life will always throw at you?

One of the best things to do when you're over the age of 50 is to exercise. Getting your heart rate up for at least 30-40 mins every day will release feel-good hormones that dilute the increased levels of cortisol, that is, the hormone produced when you are stressed. This is one of the best and easiest ways to reduce stress.

Another easy tool to use is brain dumping. There is not much to this one. Simply grab a physical pen and a pad of paper. None of that computer or iPhone stuff. Old school is the best schooling, so get that hand stretched... and just dump everything that is going on in your brain onto the page. Write it all down until you are satisfied and feel some relief. Need some jump starter questions?

Here are few:

1. What am I grateful for today?
2. Why am I feeling stressed?
3. What are the two things I can do this week that will help ease my stress?

Get consistent with this. Practice this daily, as well as before you go to bed, so that you can get a restful night's sleep.

Lastly, a great technique is to simply to listen to your breath in complete silence. The idea is to shift your focus by gently slowing down each breath, one at a time, so that your exhale is much longer than your inhale. A 2:1 or 3:1 ratio is best. For example, inhale for 3 seconds and exhale for 9 seconds. This will shift your focus from the worry, stress, or fear you are currently feeling to your breath. When this happens, your brain and body's calming system turns on, allowing the physiological angst and worry to settle down.

Most start out only being able to do this for 30 seconds. Now, they can sit for over 15-20 minutes without a problem. This one takes time to grow into, so be sure to give yourself some space to keep working towards where you want to be.

Other things to help you:

1. Light a candle with a gentle scent.
2. Play calm, soothing music.
3. Spend time with your pet (or family/friends).
4. Laugh – even better, laugh at yourself!
5. Practice mindfulness.

Let's take a moment to explore where stress really comes from. After all, finding the root cause is the key to true healing!

As individuals, we all have our external environment and our internal environment. Most of the time, people think stress is caused by our external environment: losing a loved one, too many work deadlines, an unruly teenager, a sick pet... terrible things, yes, but definitely not the cause of the stress.

The truth is that stress levels come directly from our internal environment. The cause of stress is **how we react to the external thing**, how we process it, and then how we manage it. In the same vein, then, the internal environment is where all stress can be managed and released, too.

Managing your internal environment (or level of stress) requires a couple of things: exercise, diet, sleep, and the most underestimated ne... the management of the mind. Management of our minds requires a good understanding of the thoughts that we have from minute-to-minute and day-to-day.

The thoughts in our minds dictate our reality, and we have the power to control which reality we want. The thoughts that we keep and the thoughts we decide to release will determine our stress levels.

Here is the thing though, most people don't understand what thoughts they have on a daily basis. What often times happens is people get caught up in negative thoughts that run on repeat in a way that keeps our internal environment negative, fear based, worried, and stressed. Until you understands the thoughts your mind is having, you will never be able to break a stressful internal environment.

Think of it like this, the mind is like software that needs to be upgraded – it is not enough to upgrade it once a year. It is something that needs to be upgraded on a consistent basis. The way we upgrade our software is by understanding our thoughts (having awareness of what our thoughts are). This is what mindfulness techniques are and what meditation practices are used for. They help gain an understanding of ones thoughts, because it's not until ones thoughts are known that you are able to change them.

This is how stress can be changed.

We all deal with stress... it's just that the people who are happiest in life understand their stress, how to process it, and how manage it. The ill effects of stress in our bodies, minds, and hearts can have a staggering impact on our health, and more specifically, our pain levels.

When our bodies or minds are stressed, cortisol is released which, in some cases, is a very important hormone: if you were being chased by a mountain lion on a hike, for example, you would greatly value increased cortisol! However, when cortisol is released regularly, simply because of daily circumstances, then the body is continuously plagued by this hormone: it is constantly in flight or fight mode. It can never rest.

These are 2 different modes our body operates in: one is called the parasympathetic system – our relaxing or calming system – and the other is named the sympathetic system – our fight or flight system creating worry, fear, or angst. When an individual is in a chronic sympathetic state, it affects every aspect of their wellness and makes it difficult to think, be present, manage emotions, heal, prevent any injuries, and be healthy. It blocks the immune system from being able to do its job, thereby creating an inflammatory internal environment.

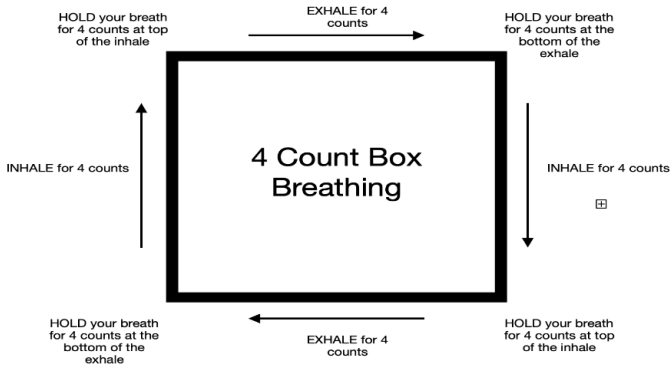
This can resultantly help produce or perpetuate pain, injuries, worry, & suffering.

Alternately, activating your parasympathetic system, which is how you destress yourself, requires a calming environment where you release stress and let it go, that is, one focused on combating the stress hormones (cortisol) and releasing feel good hormones like serotonin and melatonin which helps sleep improve.

If you are in a constant state of stress, then the best way to calm the body is to move you from the fight or flight system to the calming system. One way to do this is to take a deep breath in with a really long exhale (6-8 seconds or more). This is a signal to the “ancient brain” that you are safe. When you feel safe, you start to calm your thoughts, think properly, breath slower, and stop producing cortisol (stress hormones). The other breathing technique to move yourself from a stressed state to a calm state is by using the 4 Count Box Breathing.

It’s simple: Just follow the visual aide to keep this clear in your mind as you practice.

Close your eyes. Imagine the box you see below in your mind. You’re going to trace the box as you do this practice. You’ll start on the left side of the box and inhale 4 counts as you trace up the box. Then you’ll hold your breath at the top of the inhale for 4 counts at the corner. Follow the arrow to the next corner by exhaling for 4 counts. Then hold your breath at the bottom of the exhale at the corner. Keep repeating this until you complete the box. You can repeat this multiple times. Ultimately, you’ll need to complete at least 2 boxes if you’d like to get to a point where you start activating the calming system. This can be challenging at first and you can feel a bit breathless, so take your time and keep practicing. You can use this simple technique as many times as you need.



Sleep - The Most Underestimated Cause of Ill Health

In order to be well, or even to thrive, individuals need a solid recovery system of sleep. Sleep is just as essential as food is for survival.

There is a lot of talk around diet, exercise, and mindfulness, yet the sleep is rarely discussed. The recovery we as individuals need to thrive starts with sleep.

Immune system response related to sleep is huge – most people talk about anti-inflammatory diets, but that is not the only area that reduces inflammation. Anti-inflammatory diets are great, but if they are not in conjunction with a good quality and quantity of sleep, they can be much less impactful.

There is no shortage of popular beliefs when it comes to sleep: “I’ll sleep when I’m dead”, “Caffeine doesn’t effect me”, “Sleep is for the weak,” right? People pride themselves on getting little sleep and still conquering their lives. Are they really conquering, though? Sleep is something we do every day without fail, so we better learn how to become good at it... or else we could pay a bigger price later on.

The research pointing to the ill effects of a poor night sleep, as well as how it manifests in the body and mind, is staggering. It shocks us to know how many people suffer in this area, yet practitioners don't often dive into it. In fact, it is often a big piece of the puzzle when

determining our clients' root cause of pain and suffering. For this reason, we always investigate our clients' sleep patterns as we search for their root cause. Sleep is the bedrock of being able to maintain your independence and confidence in your body and mind as you age.

Also, if you are questioning just how important sleep is, check out what the latest research is saying:¹⁸

- Individuals have a 40% decrease in memory when sleep is restricted.
- Blood sugar regulation is affected by sleep. Perfectly healthy people show no signs of diabetes, but when limited to 4-5 hours of sleep per week, their blood sugar regulation changes dramatically, almost to the point of being pre-diabetic.
- If you only get 5 hours of sleep, then you are 10 x more likely to catch a cold! If you go and get the flu shot, but haven't slept well the week before, there really is no reason to get the flu shot – it won't trigger the right antibody response.
- A global experiment was conducted surrounding the effects of day light savings on individuals, and in the spring – when we lose one hour of sleep – there was an increase of 24% in heart attacks the next day, while the following day saw a 24% decrease in heart attacks, all because of one extra hour of sleep.

You can see why getting the perfect night of sleep, night in and night out, may be the single most important place to start in order to start feeling better and staying healthy in the long term.

Most people know sleep is important and there is no lack of people wanting to be able to fall asleep, sleep through the night, and wake up feeling refreshed. Yet, so many people struggle with sleep.

What most people fail to do is have a sleep routine before bed.

¹⁸ Sleep expert Dr. Matthew Walker interview - we got this information from a podcast: Finding Mastery: Conversations with Michael Gervais - Podcast Date July 10th, 2019. - Interview with Dr. Matthew Walker.

The first step to getting the perfect night of sleep, night after night, is to design a customized sleep routine; a routine which naturally allows your body to wind down, to begin to release melatonin (your body's natural sleep-wake cycle hormone), and one that gives you the best possible shot at having good nights of quality sleep.

In order to get the perfect night of sleep, 3 things have to happen: you have to be able to fall asleep, stay asleep, and what most people don't even consider, is that you need a good quality of sleep. In order to be successful, it all boils down to a sleep routine that can be repeated consistently, night after night.

What research shows is that the most successful sleep routine starts with consistently going to bed at the same time every night, and thereafter waking up the same time every morning... regardless of the night's sleep you get. Why? Because the body's sleep/wake cycle does its best when time is consistent across the board.

So, let's first talk about falling asleep. In order to successfully fall asleep, a good routine is everything. The body needs time to wind down. It is the same in the morning when you get started for the day: most people have a routine to wake themselves up. As such, it is just as important to have a routine for drifting off into sleep.

We are a quick paced society, and so much of our world is digital, from the TV's through to computer screens, phones, iPads, and more. All of these devices trigger our brains to stay awake. Naturally, our bodies are designed to fall asleep when it gets dark and to wake when it is light. That is why the melatonin hormone is released: its function is to let the body know it's time to start winding down and get sleepy. Devices stop this process.

See, the trouble is that, if we watch TV until we go to bed, then there is no time for the hormone to be released. One of the first times our clients have success in their sleep routine is when they unplug from all technology (zero screen time) an hour before bedtime, even to the extent of dimming the lights in the home. This last hour allows an individual to build out a routine.

For example, Jim, one of our clients, was suffering with back pain and was also having a terrible time sleeping (both falling and staying asleep). When he came in for a consultation, his wife mentioned how worried she was about him not sleeping and hurting so much. She kept saying, “I just want my Jim back.” Naturally, we started looking for the root cause and habits that worsened the pain. We in fact found out that Jim always watched TV right before getting into bed. That was the first thing we changed.

This is an example of Jim’s bed time routine – we created and customized it just for him. His Bedtime was to be 11 pm, with his wind down period beginning at 10 pm. At 10 pm, Jim would dim the lights and then head over to the kitchen to boil some water and make a cup of decaffeinated (chamomile) tea, head over to sit down in his comfortable chair, and read a Daniel Silva spy novel for 40 minutes with a dimmed light. He would then journal for 10 minutes and answer the question: “Was anything worrying you today? If yes, what was it?” Then, he would head to the bathroom, brush his teeth, and wash his face while repeating the affirmation most applicable to his feelings at that time. He would then turn down the air to 67 degrees, get into bed, set his alarm for 7 am, and drift off into sleep.

Just 3 weeks into Jim’s *Ladder of Success* program to help his back – of which his sleep routine was a part – he and his wife began to notice a difference in how Jim was feeling. Jim’s wife finally began to get her husband back.

So much is built up in us from the day, week, month, or even year. When do we shed this stuff? When do we release all the things that have been thrown at us all day? What about all that we’ve experienced in our lifetimes? If you are someone who gets to bedtime and hopes that sleep will make all things better and refreshed, then I’m afraid that you are seriously mistaken. You need to be proactive.

Sleep is our time to re-energize and re-charge, not to process feelings from the day; doing this will only repeat our stressors and “what if ” worries. Those feelings, experiences, and thoughts have to be released in other ways, not at bedtime or sleep time. These are the things that we find hurt people more than anything. The root problem for not

getting good quality of sleep is that the person is not managing their inner state well...

The other part that plays a big role in a good quality of sleep is alcohol. A lot of people find that alcohol helps them fall asleep, which is true. However, the quality of sleep an individual gets after drinking affects their REM sleep. Sleep expert Dr. Matthew Walker states that those who drink alcohol always say they sleep much better with a night cap... however, what people don't realize is that they mistake sedation for the recovery that the body needs.

Sleep is not fluid: it becomes splintered. The individual will wake more without even realizing it, and when your body awakes in the morning it does not feel recovered... which is how you should feel after a night's sleep. Dream sleep, also known as REM, is powerfully impacted by alcohol in the last half of the night. The worst news about alcohol is sleep disruption, as your slumber is impacted for upwards of 8 hours after your last drink. This means that, if you have a cocktail at 9 PM, you will still be affected by it at 5 in the morning. And guess what, Dr. Matthew Walker also found that individuals tend to have 20% less REM (deep sleep) when alcohol is in your system, which he says is equivalent to aging 20 years quicker.

Next, how do you help yourself stay asleep and have a good quality night of sleep that actually allows your body to recover? Well, we'll have to look at another one of our most beloved drinks for some answers: coffee. Caffeine is a stimulant that keeps you awake – most people know this. What people don't realize, though, is that caffeine has a half-life of 6 hours, and a quarter life of 12 hours. This means that, if you have caffeine after 10 am, then a quarter of that caffeine is still stimulating you at 10 pm... when most people go to sleep.

Sleep cannot be repaid by sleeping more the next day, I'm afraid. You cannot sleep off a debt that accumulates. This is not how sleep works. There's no way we can just "catch up" on the sleep we've lost. If you want to take one thing with you, it's to make every night of sleep consistent and get as much as you can **each night**, starting right now. If you want to be able to recover, wake up feeling refreshed in the

morning, and be able to add years to your life – instead of taking years away as you age – get a sleep routine going.

Mind/Mindset

As Epictetus once said, “Men are disturbed not by the things that happen, but by their opinion of the things that happen.”

You probably know a scenario of someone who was a bright student and got into a great college, but decide not to go. Instead, they got a job in retail and took a different direction in life only to have someone say, “You’re so smart, though! It’s a bad idea to waste a good thing you have going for yourself.”

Well, it is a fact that you switched your path, but it was just someone's bias or opinion that the decision was bad.

Or...

Have you ever had you hair done and absolutely loved it, and when you got home your partner basically tells you your haircut is bad by saying “It’s okay...”

It’s also a fact that you got your hair done and an opinion that it looks bad, or good, for that matter.

Over 7 years ago, I sat down next to Margaret who was 84 years old at that time. We were in her house and I was asking how she’s holding up just days after her husband passed away from a heart attack.

“Well, I miss him a lot. But, I’m happy to know he’s in a better place and not suffering any longer, and honestly, I’m just taking all of this in [her house] knowing that I have to give this all up soon.”

I asked her what it meant to live in this house for the past 50+ years with her husband and six kids.

“Oh, it meant everything to me! I got to see my kids go from crawling to leaving for college, and I’ve even seen the grandbabies come in here and do the same! I love this house so much. There are so many happy memories here and I’m okay letting it go, too.”

I asked her why.

“Well, I get a new place to decorate! I’ll have more friends and I get to meet so many more new people! I’ll have someone to cook all my meals. After 55 years of deciding each meal, it’s nice to have someone else choose for me! I’m going to love this change for so many reasons!”

But, you’ll be leaving this all behind.

“No I won’t. I’m taking it all with me.” And then she smiled at me.

At that moment, I realized something so powerful and I’ve never forgotten it:

Happiness and a positive outlook on life is something you actively decide to practice and create as a habit that naturally happens over time.

Whether or not I like the situation I am in, or the pain I experience, doesn’t depend on how the pain got there or why it happened...

It depends on how I arrange my mind.

Margaret had already decided that she liked the change and the move she was about to go through.

She told me it was a decision she made every morning when she woke up: she chose to appreciate every moment, whether good or bad, that came her way.

The reality was that her body was slowing down and she was still fighting to stay on her feet and walk at that time...

But in my 7 years of knowing her, she never spent one single moment looking at life as anything less than an amazing gift.

She could have spent the day in bed, going through the difficulty with her body slowing down or thinking about how she lost her husband and her house all in one moment...

Or, she could have gotten out of bed and been thankful for the parts of her body that do work and all the happy memories she'd made with her loved ones.

She always chose the latter.

As Margaret helped me see, every day is truly a gift.

She passed just months ago at 90 years old, and as long as my eyes open I will continue to focus on the new day and the happy memories I've stored, all thanks to her shining example.

HAPPINESS and POSITIVITY are like a bank account: you withdraw from it what you deposit.

My advice would be to deposit as much happiness and positive thinking into your memory account as possible... so that you have more to pull from at your fingertips.

Alternatively, if you put more negative thoughts or memories in your account, well, that is what you'll withdraw.

It's your decision as to which memory account will serve you best.

Affirmations

Another technique that many people use to build up positivity in their lives is *affirmations*. Affirmations are a positive statement that is declared to be true.

Affirmations relieve stress and combat negative thoughts and feelings. To fight the negative chatter in your head, simply start by saying a few positive phrases over and over until you truly feel them and believe them.

Some example affirmations to choose from:

1. I am a beautiful (or handsome) person.
2. I am energetic and filled with joy.
3. I relax knowing it will all work out
4. I am aging happily.

Meditation/Mindfulness

Lastly, meditation and mindfulness have been practices used for years and years in cultures all around the world. In my opinion, it is underdeveloped in the US, and we take for granted the beauty of just sitting in silence and breathing. This can ground you, bring you peace, and develop a deeper understanding of yourself which you will carry with you for the rest of your life, not just the day.

To get more information about mindfulness and meditation techniques, please flip back to the stress section of this chapter.

If you value a holistic approach to pain, one that includes how your mindset and thoughts play into healing, then mindfulness is exactly what we have found helps our clients successfully, not only to get out of pain, but to stay out of pain for good.

It's very important that, when trying to heal from knee or back pain, you and your healthcare provider are not only a good fit for each other, but that you are looked at as a whole, not just as a body part that hurts.

Pain is complex and the person who helps you needs to understand that.

Habits: Are They Taking You Closer to Getting Better or Pulling You Further Away?

Habits are next on the list when looking at your wellness path. When we take on a client we are very clear that what we do, and how we help people, is not a quick fix. Everything we do is based on a principle called the compound effect.

If you know anything about investing, then you know if you take money and invest it in the stocks, your average return is 8-12% for every year it sits in there. It compounds over time. With that being said, would you rather be given a lump-sum of \$1 million to last for the next 30 years, or invest \$250,000 that will yield a return of 8% for 30 years... I hope you picked the latter! Because of the compound principle effect, it would significantly benefit you in the long run. You would have \$2,515,664 instead of \$1M, to be precise.

We believe the same is true when staying healthy, getting out of pain, and feeling better – with more energy – as you age. It boils down to your habits. So, if you are participating in the wrong habits, or doing the wrong exercises, then they will compound over time and send you in the wrong direction. However, if you are participating in the right kind of habits or exercises, they too will compound over time and send you in the right direction.

When working with our clients, the best thing we can do is narrow down poor habits that can lead to worsening of pain. We generally point out 2 or 3 things to jump start a person on a path that will serve them positively rather than send them towards more pain, stress, worry, and fear. New improved habits put them on a path of energy, health, wellbeing, fun, and happiness. When given these 2 or 3 things to work on, they compound and evolve, thereby building over time.

The biggest problem is that most people don't know how to identify bad habits, or even worse, don't know how these new habits need to evolve over a period of time as improvements are made.

The thing is, everybody's essential good habits will be different depending on what you want – what activities are most important to you, what you want to achieve, etc. By prioritizing these, you can evolve and be the person you've always wanted to be: the person your children and grandchildren will be proud of and will follow as an example.

Have you ever taken the time to think about what you really want? We find that when most of our clients start to uncover what they really want out of their lives and health can it come as a surprise to them, Why? Because they are not sure if it is even possible.

Well, maybe you're like them and have given up on the idea of being able to simply go on a 4 hour hike – you can't even go up and down the stairs as is. But, if you were able to do stairs more easily and without worry, would the idea of being able to hike for an hour start to become more obtainable? Of course! So you see, once the first layer of goals are met, the mind is able to wonder around the next possibility. Though your vision right now may be narrowed because of your poor habits, or because of pain, your eyes can open and things can certainly change.

Here is a great exercise to start with – pull out a piece of paper and write the following at the top: “What do I really want?” Then answer it below. Is it to stay out of back pain, get a full night of sleep, be able to walk long distances, sit for long periods of time on a plane, or to travel the world? List out everything you really want to be able to do. The results may surprise you.

Balancing Your Health

Good balance is often taken for granted, and in fact, it is often not really considered when thinking of the mind/body connection we've been discussing. But guess what? It is absolutely connected!

Most people don't find it difficult to walk across a gravel driveway, go from walking on the sidewalk to grass, or to get out of bed in the middle of the night without stumbling. However, when you feel unsteady on your feet, the fear of falling can really take its toll on your mind and confidence. It can disrupt and change your normal, daily routine, and it can make you second guess your capabilities. There's so much that can be ripped away from you when you're afraid of moving – when you feel confined – that pain is really not the worst of it. Depression, loneliness, and hopelessness can quickly set in.

Did you know that simply being scared to fall can increase your chances of falling by 50%?¹⁹ In fact, it also increases the risk of having to enter a healthcare facility and lose independence. Really, the fear of falling creates a prison whichever way you look at it, and I know that, if you're anything like our clients, you don't want this for yourself. So, what do you need to focus on?

First, you need to know a few important things when it comes to your balance. I've already mentioned THE MOST IMPORTANT part about balance: mindset. Having fear is common, but the goal is to kick this fear to the curbside and let confidence come running in. The goal is to get you so confident in your balance that you feel supported no matter what the adventure you choose to go on is.

Secondly, you need to be aware of the three major parts of the body that assist in balance control:

1. Vision – your eyes (sight).
2. Proprioception – your joints and muscles (touch).
3. Vestibular System – your inner ear organs (motion, equilibrium, spatial orientation).

Let's break this down a bit, though it is important to bear in mind that this system is interconnected and very complex. Essentially, your body

¹⁹ Young WR, Mark Williams A. How fear of falling can increase fall-risk in older adults: applying psychological theory to practical observations. *Gait Posture*. 2015 Jan;41(1):7-12. doi: 10.1016/j.gaitpost.2014.09.006. Epub 2014 Sep 22. PMID: 25278464.

takes in information from its environment, after which it travels to your brain. From here, your brain sorts out all of the information and then tells your body how to adjust itself in order to keep “balanced”. This all happens in milliseconds.

Seems simple right?

The problem is that it’s a very complex system, all of which gets exacerbated by vertigo, dizziness, stiff joints or weak muscles, sensation loss in your feet, vision issues, head injuries, concussions, and/or loss of memory or confusion; all this can delay the millisecond process. And the more time it takes to correct, the worse your balance becomes. So you see, it’s a little more tricky.

Most people just grab a walker or a cane to help compensate for their poor balance problems. And while this is a great solution for the time being, a bigger problem arises as time goes on. It only gets worse when not addressed properly.

Cheryl, who was in her late 70’s and struggling with back pain, told us how she recently remarried to a wonderful gentleman, Jim, who is in his mid-80’s. She said they travelled all over the world together and loved getting to spend time together learning about other cultures and countries. They would plan trips 2-3 times a year.

More recently, though, Cheryl noticed that Jim was having more trouble getting up from a chair than usual. She also noticed that he was having small losses in his balance when they were on a trip with sandy beaches or on gravel/rocky areas. This made her hesitant to make any more travel plans, especially if they were going to be sitting on the plane for more than 8-12 hours... and the walking long distances in the airports – what if he had a fall in a foreign country?

I remember Cheryl being frustrated because Jim wouldn’t do anything to fix this issue – he knew it was going on, too. He made excuses and promised to make it better on his own: he’d do even more weights at the gym and do some balance exercises he found on the internet. As he promised, he started to do more sit ups, went to the gym more often, and walked more around the neighborhood. Things did not change it

for him, though. “If anything” Cheryl said, “it just got worse because [she didn’t] think he was doing the right things.”

Growing more and more concerned over the next few months, Cheryl decided enough was enough and literally had to drive him to our clinic to get help. Reluctantly, Jim came in and you can tell he was embarrassed for having to do this. After a quick introduction and helping Jim know that many people suffer with this type of thing, he started to get a bit more comfortable and told us more. He mentioned being worried about falling, and him being the “man,” he felt he shouldn’t be weaker than his wife – he wanted her and the kids to be able to rely on him.

It was heartbreaking to know that Jim felt this way, mostly because, in fact, if he only stepped away from his preconceived notion sooner, he could have been in a dramatically different situation. Nonetheless, with Jim’s permission we got to work. We noticed how restricted his joints were in our head to toe assessment; we checked his vision and vestibular system, checked his reaction time, checked his reflexes, and did a full assessment on his balance. After we got down to the nuts and bolts of what was going on, and what it would take to make this better for Jim, he was all-in. He went to work doing his stuff at home and continued to come in for more progressions, knowing this was not going to be a quick fix, but rather a journey to get back what he lost.

We’re happy to report that after dedication and hard work, Jim and Cheryl are back traveling overseas and enjoying their active traveling life together – happily. Jim continues to come in for tune up sessions so that he can keep working on his balance in his own time. And, of course, we get to hear all about their travels together each time.

We’re very aware that this is a sensitive topic to discuss with your spouse or loved one, but understand that it’s important.

It is no different for anyone else struggling with their balance. It can be very hard to take a step back and ask for someone’s help, but at the end of the day most people end up telling us how they should have done something about it much sooner! Jim being one of those people.

Many people go from using a walker, then using a cane only, to getting completely off of a device. It really is possible. Even people with vertigo and dizziness get better in just weeks, if not in a few months, of coming in.

The first step, as in Jim's case, is to simply start by asking for help from an expert who knows what they are doing. Afterwards, most people won't ever take having steady balance for granted ever again.

So, there you have it: all the information you need to create an optimal wellness plan in order to help you navigate aging in a way that will set you free to live your life with independence, confidence in your body and mind, and feeling good. This wellness plan is different for everyone, of course. As individuals, we all have certain areas in our lives that we do better in than others, but that doesn't mean we can't improve! Everyone's wellness plan will be different, and for that reason each person must be conscious of their own reasons for creating one. What do you want from your plan in order to stay healthy, happy, and pain free as you age?

Wellness is best thought of as a box containing the aspects of your mind, body, fuel, community, and recovery. 80% of the time you stay within the optimized box doing all that you can to enhance these areas. The other 20% of the time you might head outside the perimeter, but the goal is to return quickly to make it back to the optimized area again. The goal is also not to be perfect; the goal is to be **intentional** and have a choice.

This may feel like a lot of information and yes, it may be overwhelming, but I hope you soak in every word. The best thing you can do is prioritize. Just start with one area and work from there.

Chapter 9: Avoid The #1 Reason People Cannot Get Back To Being Active and Pain-Free

Do you want to avoid the number one reason people cannot get out of pain and back to doing the things they love... those things that make them who they are and make their lives worth living? And do you want to do this naturally? No pain pills, injections, or surgery?

What is the number one reason people cannot get out of pain and back to being as active as they desire?

It's simple.

They make a decision to commit themselves to a plan (finding the real, root cause, and fixing it) and to see it through. What we mean by this is one's ability to stick with the process and trust it over a period of time.

So many people dabble in medications, stretching, random exercises their friend told them to try, adjustments, and massages. Some even second guess themselves on if what they are doing is the right thing.

Many people get out of pain and back to doing the things they love with confidence in their bodies and minds all the time. It is something we see on a daily basis.

They don't have better genetics. And they, too have findings on their MRI's and X-rays as well. Their success has nothing to do with any of that.

What we see is that people who don't trust the process and won't commit to sticking with it over a period of time still struggling to get back to doing the things they love. It rarely has anything to do with the diagnosis or the person's genes. It has to do with the person. Everyone struggles with this, and that is why people who struggle with pain need an expert to guide them.

Not just anyone, though: a guide who can show them the way and give them a plan to hit each milestone they want to achieve – one that

builds upon itself to achieve even bigger goals than they imagined for themselves. Someone who can hold them accountable, because it's nearly impossible to successfully hold yourself accountable.

They make a commitment to a long-term plan and stick with it week after week. They surround themselves with people who want to see them successfully accomplish their goals. They pull them up and support their needs.

They don't put themselves in low energy environments, nor find a place where they aren't listened to or feel like they fit in. They advocate for themselves and desire to find a good fit and a place where they can be heard.

Lastly, they don't tolerate a poor level of care because that's just what insurance will pay for. Nor do they assume that all places and therapy are the same and do the same things.

They commit to finding a solution to helping themselves because they know if they do, not only will they reap the benefits, but their loved ones and friends will too.

These are the people we see every single day get out of pain successfully even after years of misery.

Here are a few people who have transformed their lives from using our guidance with the methods and teachings in this book:

Dawn 

1 review

★★★★★ a week ago - 

I am so grateful for this practice. I was diagnosed with a severe rotator cuff tear and was scheduled for surgery. I decided to seek other alternatives. I am SO glad I did!! Trevor is so supportive and encouraging. I have learned so much. Through the exercises I was able to become pain free and am back to doing all the activities I enjoyed before my injury. My experience with Physio Revolution has truly been life changing. I am forever grateful for this great group of people.

Danny [REDACTED]

1 review



★★★★★ a week ago

I have had numerous attempts at lessening my sciatica and piriformis pain. From dry needling to actual lumbar back surgery. I was just about ready to give up when I saw physio revolution on Facebook. So I went in to see them for a consult. Very friendly staff and excited to see and greet their clients! They showed me things to do that were foreign to every other instruction I had been given in the past. After 3 sessions and doing the moves at home I started to see some improvement! Now it is 6 visits later and I can say that I'm totally amazed! My pain is 90% gone and I'm doing things I hadn't been able to do for 5 years!

Janine [REDACTED]

2 reviews

★★★★★ 6 days ago

This the first place that has truly helped my body change and improve! They have helped me find the root of my problem and not just say to work on my leg muscles. They are kind and personal in each and every interaction. I have done many things to try to get my body and knees better. THIS is working and I do believe it will be for good because I have learned so much and my body has too! If you have been struggling with knee or back issues, or any other body issues, please give them a call. They will meet with you and be honest about your needs to help you!

Karen [REDACTED]

2 reviews

★★★★★ 3 weeks ago - [REDACTED]

The team at The Physio Revolution are amazing! They are so knowledgeable and caring and want pain free patients as much as the patient wants to be pain free. They not only cater to you as an individual with unique strengths and weaknesses, but they are there to cheer you on emotionally as well as physically!! Pain is a lot of emotional healing as well and Dr.Trevor and Dr. Brooke know exactly what that means to a patient. They don't just hand you a drawing of exercises to do and send you on your way. They talk through the struggles with you and then work with you physically until you feel like a different person than who entered through the door!

The greetings you receive when you first call and come to your first appointment from Annie and Lauren are so comforting and genuine.

The entire experience at The Physio Revolution has been nothing but encouraging and successful in the healing process. Pain meds and surgery are not an option anymore!

In the end, you have to figure out what your root problems are to either avoid or get back to the life you envision for yourself, and ultimately how you want to feel while living through the second half of your life.

We can help you with that. Here are a few ways we can work together beyond this book:

Option #1 - Apply for a Free Discovery Visit

Who this is for: this is perfect for the person who's looking to get more information about their current situation and who wants to see if we can help them or not. First, before we commit to our Free Discovery Visit option, where you'll sit down with a Specialized Doctor of Physical Therapist, you'll apply for a complimentary 30 minute phone call with one of our amazing team members. You'll get to share your story, tell us more about what you've tried, and together we can decide what the next best steps are for you – whether that be working with us or the next best place. Just so you know, we don't take on clients we know we can't help. Many times, we turn more people away than take them on.

Reach out here to apply: www.ThePhysioRevolution.Org/Book

Option # 2- Inquire About Cost and Availability

Who this is for: this is for the person who knows they want to get started with us right away, but they also want to see if we have availability in our schedule and about the cost of our programs. This is also a time for us to see if what we do can help you, before any commitments are made, and if we'd be a good fit for each other.

Reach out here to apply: www.ThePhysioRevolution.Com/Inquire

We hope you have enjoyed reading this book as much as we have enjoyed sharing all the knowledge we have gained from working with some of the most wonderful people over the years. It's been our joy to help them stay active, avoid slowing down so they can continue to live active lives without pain pills, injections or surgery - even as they age.

We wish you all the health & happiness on your journey towards feeling better and staying active – one that will make you proud of yourself.

If this book has inspired you, sparked a bit of hope, or empowered you to choose a better future for yourself, then it will be worth all the time it took to write.

This book was written with the intention of empowering, inspiring, and giving hope by sharing real life stories of clients we have helped and by using our clinical knowledge, education, and personal experiences throughout our own journey to better health and happiness. If we can help someone see things differently on how to get out of pain to live a happier, healthier, and more confident life as they age, then we have achieved what we set out to do.

We would love to hear about how it has impacted you and your life. Please feel free to reach out to us at theteam@thephysiorevolution.com with your thoughts. It would mean so much to us if you would tell a friend or family member about this book, too.

In the end, well done for picking up this book and reading through its entirety. It speaks volumes about you and your commitment towards finding a solution to age happily.

To Your Health and Happiness,

Brooke & Annie

