Ep 577: Out of Pain, Into Power: Online PT Coaching for Women with Dr. Krista Fazio Transcript

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Podcast Intro and Guest Background

Welcome to The Health Fix Podcast, where health junkies get their weekly fix of tips, tools, and techniques to have limitless energy, sharp minds, fit physiques, or life.

Hey, health, junkie. On this episode of The health Fix podcast, I'm interviewing Krista Fazio. She is the wife of Adam Ross, an Adam-Ross nutrition, ARnutrition.net.

You've heard me talk about him before. He's been on the podcast a couple of times getting real about what we want to be thinking about. when it comes to nutrition.

Now she is working on the fitness side of things in their joint business. And so she's a physical therapist, she has a licensed athletic trainer. She has diverse background in treating patients from athletes and she talking about some Olympians in the podcast that she working with and some post-op stuff and beyond.

We go into what it takes to Stay fit for life and we talk about what she's doing with her clients who are mostly women 35 to 65 and how she's helping them to gain strength but keep the strength going and why PT isn't just something you just go and then stop and also why there should be progressions to your therapy exercises and how's she integrating them into workouts so it's not doing your PT and doing the workout so that it ends up being an enormous amount of time spent working out.

So we kind of bust the myth that you don't have to work out two hours to be fit and strong. We also talk all about how the Hips are so crucial for your health, especially for women.

We talk about rotation, we talk your feet and how those have some clues as to what might be going on with pain you have in the body and why you need to be looking at your feed.

So this is a fun podcast. we even wore the same gray tank top for you guys. We didn't plan it, just on accident. But nevertheless, that's for you guys who are watching the podcast.

We look like twinsies here. Her and Adam have such a cool thing going where they are tackling both sides of health that is so needed for folks, the nutrition and the strength, mobility, fitness side of things.

They've got an app coming out later the end of October here of 2025. I look forward to that coming. We'll keep you guys posted on that. But until then, let's introduce you to Krista Fazio.

Boy, during this podcast, I really want you just be open-minded to what could you do if you had your pain dialed in and your fitness even better. Let's jump into the podcast.

Krista fazio, welcome to the health fix podcast. Thank you. Thanks for having me. Well, I've been wanting to have you on since of course, Adam, your husband talked to you up and folks who are listening.

This is Adam from AR nutrition. We've had him on the podcast a couple times he speaks the truth about nutrition and so I'm like, you know what, Let's bring Krista on and talk about her side of things in physical therapy and all the things physical, therapy that you're helping folks with online.

So I'm really excited to talk today. One of my big things that I have chatted with folks about over and over again is one, just like we were talking about before I hit record, it's been coming harder and harder to get into physical.

And two, sometimes it is really nice to do physical-therapy exercises at home because now we can learn what to, do you can use your equipment at. So tell us a little bit about how long have you been online doing PT and and what kind of things do you love about doing online physical therapy?

Why Online Physical Therapy Works

Yeah, so I worked in a outpatient clinic for like, eight years or so it was a long time and then I finally like made the switch over to online. And honestly I wasn't sure about like, I was like I don't know if people are going to like really do this.

Like it kind of seems like it's something that everyone's going want in person. I mean, like if I'm going make this work, we'll kind like see what happens.

And to my surprise, it has been awesome. It's really great being able to connect with people all over the world. People who are like limited and they can't find like good help or quality care.

Just like being online just makes things so much easier and having like, being able to build people out these custom programs that don't have to be held by what the insurance company wants you to do and how we have the bill and all these crazy limitations that you get in the clinic.

I mean, I used to treat like up to like six patients in one hour. So like, how are you giving people really like the attention and care that they need and deserve when you have six other people that you're trying to get to?

It's insane. Honestly, moving online I've been able to actually give people better care, which sounds crazy. I'm actually able to like focus in on what they actually need and build them out these custom programs and we can tweak it and adjust it.

And, you know, we're not on this like time constraint and, handcuffed with the insurance company. So I've honestly, I love it, it's really been great and I will probably never go back.

Never say never, but I don't see myself going back I don't blame you. I mean, having left the insurance world, it's so freeing because as you know, how can anyone learn anything from a physical therapist when it is like six patients in an hour?

Most of the time I hear like in the common models, its like handoff to OT. You know, or not OT, but physical therapy assistant. And then, you know. No, no disrespect to some of the PTA.

Some of them are awesome. It's more just that's that how it goes. and and a lot of times folks you call me they're getting, they'll have they go through the exercise and they sit with ice for like a half hour, like something ridiculous on the back.

Yeah. The heat and stim for 20 minutes and then like the classic three exercises and like, a little rub down and ice and you're out the door is like kind of the classic treatment that which is why I was just like, I can't do this.

Yeah, no, it's definitely something that, you know, i've always looked at that model and been like oh no that doesn't work. And not only that I think a lot of women are really struggling with joints that'll get frozen like especially the shoulders as we get older and and the intricate like muscles we need like I don't know if you've seen this but so many women will reach to the back of their car to grab their purse and then they're like I can't move my arm anymore.

And yeah, it was like this should not be happening, right? Like this, we should be stronger than that. I think so. Tell me a little bit about, you know, what are the most common things you see from from women 35 to let's go to 65? What kind of things often happen to us and what kind Could I benefit from PT here because a lot of people are going to be like, I'm just stuck with this pain or I've just stopped with limited mobility.

Let's open up their minds a little bit here. Yeah, like I think people kind of see it as like okay I am getting older I should expect to have these aches and pains and I'm going to get more limited because I am older and that's just not the way we should be thinking about it.

If we keep ourselves moving and we are following like a proper program that has the mobility and the muscle activation and strengthening that we need, there's no reason why you can't maintain that stuff as you get older.

And even if you have let yourself go for a few years and you you're getting all these aches and pains and, you know, not moving well, there's no reason why you can't get them back.

It's not like you are too old. I hear people say, oh, I'm too, old to, to be able to do that. You're not, like, really not. Like, You can take someone who's like 90 years old and start like helping them with like a squat or something.

And like You will see improvements. Um, Like it's, Not, your not limited by your age. That's more of like This like mental like societal thing that we've kind of just put in our heads that like, okay, we're getting older time to kind, of scale it back and like I don't want to hurt myself and I can't move like that anymore.

Like, I think that's really something that, like we just as a society just need to like get over and leave in the past, but. Some common things that I typically see, I mean, back pain, of course, is like rampant, like everybody has backpain.

And I think that people get very freaked out by their diagnoses. Like people will go get MRIs and they'll see degenerative disc disease and disc bulges and maybe a couple herniations and think, okay, i'm broken.

Common Pain Patterns in Women

I have, you know, all this stuff going on. Like, this is crazy. They get all freaked out, they get stressed out. Um, and the truth is, is that our bodies are gonna degenerate over time.

It's just the way it is. it's totally normal to have a spine that's degenerating. That's literally normal. If you look at anybody over the age of 35, we're all gonna have these little degenerations going and some bulges and different things going.

And not to say that you should overlook those things, especially if you're getting, like, severe, you know, pain and stuff. But I just think that putting the label on it, it just does more like harm than good.

You can bring yourself back from that. It doesn't mean that because you have these certain diagnoses that you're always going to be in pain or you are always gonna be limited.

That's not the case. Like you can have all these things and literally have no pain, and full motion. but if you go out to the MRI, You'll still have the degeneration and some disc bulges.

And that's kind of normal. But I think we just kind of freak ourselves out. And like I, think a lot of doctors kind like just stress, like, you know, they just make you nervous about all these different things going on when really like you can work yourself out of those, out the pain and you, can you totally like make a full comeback from those things.

Another thing that's super common is just like the postural changes over time, like we're all just so like hunched over on our computers and yeah our shoulders are super tight, our chest is tight our back gets weak, or neck or chin comes forward, you get that little like hump in your back.

That's like another thing I see a lot and it really affects like the shoulders, especially on women, like their shoulder blades aren't gliding properly when you like raise your arm up over your head.

So that's another like big thing that we work on a law is like stabilizing that shoulder blade and opening up your chest and just like restoring the posture and strengthening up the muscles in the back and, you know, getting your

getting, your chin back, and everything.

Those are probably the two biggest things is back pain and shoulder issues, I would say. Percent I would agree. I wouldn't agree just knowing myself even and I'm looking at you know imaging I think that's a great point you made about the degenerative, you Know disc degenerate of art, You know this and that a lot of people come to me and be like I am falling apart like this I wish that terminology just wasn't there.

You don't know what I was like Okay, we got some signs of agey. No big deal. Yeah Oh, yeah So yeah, for sure. And I hate when people are like, I'm broken.

I like no, you're not broken, You're just, your aging, like we're all aging. It's okay. it's totally normal. Like we just got to get you out of like that pain cycle.

like it doesn't mean that you are going to be like this forever. Absolutely, absolutely. Well, the pain cycle is a big thing. And this is something I would love to talk about because I think for a lot of women, what will sometimes happen is they'll notice like all of a sudden, they're not able to get, you know, on the floor and get back up.

Right? Like all the sudden they've lost that. Or like, I always describe it and this is why I love doing squats and my kind of joke is like if you're going to go to a public restroom, you need to have your quads.

Because you do not want to be sitting on something you want. You guys are in New York, and you know what that's like. Um, so it's a matter of like okay, How do we help folks understand what is key here to maintain over a lifetime?

What's important? So when you assess someone's posture, assess someones strength, where do women need to be thinking about? Or maybe like what kind of things like from getting from the floor up, like, what kinds of metrics do you have people look at to be like oh, I might need some PT here.

Yeah, 100%. And I think it's it based on more like functionally like What are the things we need to do as we get older and right now like everyone's doing the same movements right on repeat and you might notice that over time you're like, that's getting kind of hard, like I can't do that anymore or whatever it is.

But I mean, definitely like everyone needs to be able to do a squat. That's like have you ever like bent down to tie your shoe or like pick something up or pick up a package or even like a kid off the floor or anything like that.

Like a squad is like absolutely like necessary. Um, reaching overhead, like putting the dishes away or, um, putting anything overhead or doing your hair.

Like those things are just like, you have to do them. It's kind of hard to not be able to that. Um. So yeah, so definitely like a lot of shoulder mobility, hip mobility is huge as well.

like you said, getting up off the floor, God forbid you fall or you know, your on the floors playing with your kids or whatever it is. You need to be like able get up and sometimes you won't have someone there to help you up, or you might not have something to grab onto to pull yourself up and you're relying, you know, on your muscles and your strength to get up.

And be able to do these things without, it's scary like to be like on the floor and not, not be confident that you can get yourself. No one wants to. Be trapped in like that situation.

So just staying, mobile and functional in the ways and the things that. You need to I even have people who like older people, who they love to travel.

But guess what? Your luggage is like 50 pounds. You need to be able to carry that luggage around and bring it up the stairs and put it on the overhead bin when you travel and all that stuff takes mobility and strength.

A good combination of the two is definitely vital for just being able to live out a healthy, happy life and do the things that you want to do, not be limited by your own body.

Absolutely. Well, one of things I think is really important for myself, but I thing for a lot of women, is what can we maintain, just like you've described, to our adventures, and also to stay out of nursing homes.

To stay of assisted living for as long as possible. maintain your independence for as long as thinking possible. And so it sounds like squats overhead motion, those kinds of things.

No, no, go ahead.

Squats, Mobility, and Staying Independent

Another movement that I find is very, very overlooked, like very over looked in in most training programs, I see almost all clients who come to me like they've never trained this before.

is rotation. And I don't know why people have gotten afraid to rotate or when we got this thing in our head that, you know, rotating your spine is like bad for it or rotating our hips.

Like we, we rotate every single day. We rotate with every step we take. As we walk, We literally rotate our body. we Rotate our spine. So I Don't Know where we've got This thing where like rotation isn't bad or we should just like overlook it and only train in like straight planes, but like we're not robots, like, we do not function in, in straight like planes of motion.

Like we are, We're all over the place. We are dynamic. So rotation I think is so overlooked in training programs. I don't know why most people and trainers and stuff like they don t program that stuff in, but like hip rotation is like vital.

Like you can't even get into a deep squat if you don' t have the proper hip internal rotation. You're rotating your spine literally every single day. So why not train it so that we're stronger in that movement so when we do have to do that, we don''t throw our backs out.

injure ourselves, let's build up some resilience in those motions instead of just training literal robots, which is not the way we function at all. It's so true.

And you're right. I'm lucky enough to have a trainer who definitely does do that. But I've seen, I mean, if you look at the old weightlifters, they're all like, Carrying buckets and not really rotating much i mean i'm rotating slightly but it's very stiff so what you know someone who's listening might be thinking like what kind of am i doing that right now and especially with the hips cuz the hits in the back and the pelvis for women is such an area.

Tell me what kind of movements would people be thinking about? Like, can you do it? Should you? Do it, you know, those kinds of things. Yeah. I mean, I would say like hip internal rotation is probably one of the most important movements to train and become mobile in.

And that's like you said, like that is going to loosen up your low back. It even like affects like your knees. Like it literally affects a lot of different like deficits that people have going on when they have knee pain or back pain, it's literally because their hips, they're stuck, like they don't rotate.

So then your back kicks in to compensate and then you're knees get this like funky mechanics going on. And so, yeah, so like hip internal rotation for sure is like one of those things that I, I make every single one my clients do some sort of hip, internal, rotation exercise.

I just think it helps with so many compensations. And yes, women, especially, they'll have troubles rotating their pelvises, doing posterior pelvic tilts and different deep core exercises that has to go with your breathing and your core mechanics.

you know, target like the deep core all together as one unit. And that's something that people really struggle with, especially after they have babies, because that whole dynamic is just like really thrown off and your core gets very weak and you're pelvis is like, you now, everything's just kind of like out of whack there.

So I see that a lot in women who have recently had babies or have just been struggling with like hip pain. But It's really like your pelvis and your breathing and you're diaphragm and deep core, everything's just not kind of working properly together.

So like reestablishing like those connections for women is like huge, especially after having a baby. Man. I think that's probably where we went wrong here, at least in the States, for so many women, like now who are in their 50s, 60s and beyond.

Because there was no real pelvic floor physical therapy trend. Now it's all over the place. But I feel like we could, you know, And this is something I'm going to, you know, obviously defer to you about.

It seems that a lot of the physical therapists who are in the pelvic floor department are overwhelmed, like they're busy as heck. So correct me if I am wrong, but like you just said, You're doing some pelvic, I just had pelvic tilt.

pelvic tilt and internal rotation work and in different work there, you could be working on the pelvis without in the pelvic floor without having to get internal or any of that, correct?

100%. And I think people think that like pelvic, floor, like specific pelvic for PT, like you have to do like one-on-one with someone in like a clinic and it has to be like this whole thing.

I also know that a lot of, it's not even covered for some reason for a lotta women. Like I've had a wanna women come to me and be, like, It's a crazy amount of money, per session.

It just like insane. like I can't even afford to like be doing this for an extended period of time. But what people don't realize is that you can do those exercises at home.

there's literally things you can do, like squeezing a yoga block and getting into a certain position and deep breathing and, you know, tucking your ribs down and pulling your pelvis up and like getting your deep core to fire as you're breathing.

And like there is so much you could do like at home with like no equipment. Like a lot of the things like you literally don't even need anything. You just need like a proper program that's going to like progress and progress with you and get harder as like reestablish those things, but it's definitely not something that you like have to go to a clinic to see.

But I know a lot of people do think that. Yeah. It's fascinating to me. I mean, I can see in some cases, definitely for the general population with low back pain and hip pain, and things of that nature.

What else could we be doing, especially if someone's in an area where there just aren't any physical therapists, kind of like my Wisconsin crew, there's just not any, and especially pelvic floor.

Now, you had mentioned internal rotation exercises. And I'm thinking to myself, what is an internal like, give me give us an example, because I mean, I can't even pull anything in my brain right now.

Yes. I'm actually working on a internal rotation reel right now. Yeah. So, okay. Let's see. One example is sitting, just normal sitting. Yoga block in between your knees and a band around your ankles, and you're pulling your legs apart like this.

Why Rotation and Hip Mobility Matter

Does that make sense? No. When you sit, yoga block, in-between the knees, then you are pushing into the yoga

and rotating your feet out. Ah, I am trying to mimic it, right?

Yeah, so like that's internal rotation. And I know it's kind of like a weird movement. Like people are like, well, what the heck is internal? Like what does it look like?

Yeah. So it was anything where like your feet are coming out when your knees are together. That's hip internal rotations. Nice, nice. Yeah I'm like over here I have a little yoga ball that I sit on.

I like it. It feels good. like I can feel it opening up my right hip. Even folks are just sitting right now without a yoga block. You could probably like just Oh yeah, just push your knees together and bring your feet out and you'll feel like a stretch in your hips and that's hip internal rotation and then just throw a band around your ankles for some resistance and there you go.

Super simple. We've been sitting in our desks doing this, folks. Yeah, exactly. Actually, I came prepared. I have to wrap it a couple of times, but I don't know about yoga.

But I'm looking around actually, because this room I oftentimes will do some of my workouts in here. Anyway, so if you guys have just the yoga block hanging out and you've got a band hanging, you could do this right now.

There's no excuses. See, that's the thing is that the excuse situation too, like you can be doing it while you're working. I love it. And it feels good.

I myself tend to have a little back pain, little hip pain. So sometimes I'm always looking for stuff too. Now in terms of like, let's go with the upper body, because a lot of women, a lotta men too, have tech neck situation going on.

What is your go to to try to bring, like you were saying, bring the chin back, the shoulders back? What do you love to do with folks for that? Yeah, so some like, like a starting point, I guess I would say for a lot of people is like I don't know if you know like that corner stretch where you like put your arms in the corner and you bring your chest forward to open up your chests.

Like that's like kind of like classic stretch that like opens up you chest. It feels so good, especially after sitting for awhile. And that is the thing, you can literally do this in like your office.

Find any corner of your offices and like just stretch for like couple seconds. But it feels good and it makes such a difference. So that's kind of like the, the beginner, I would say, like starting point for like opening up your chest.

And then you want to strengthen everything in the back. So you wanna stretch everything here, strengthen, everything, in, so doing any sort of, back exercises, rows are great, pulling a band, straight across and squeezing in between your shoulder blades.

And anything that's going to strengthen up those muscles in between those shoulder blades are just going help to pull you back. Any sort of like shoulder external rotation, like working out rotator cuff is also going, to help pull your shoulders back, so that stuff is great.

For neck stuff, like a lot of chin tucks, there's a ton of different variations you can do. You can them laying, you could do them against a wall. There's some you do with a band, but there is just so many different movements like tucking and rotating or tuck and extending.

Like there are so different little like tricks and movements that you an do to help to shift everything back just to like fight that forward pull that we all have on us.

I think this is a good thing for a lot of folks to hear because you're mentioning the old rotator cuff exercises, and that's what people think about when it comes to PT.

They think of the micro-movements. The band is like, yeah. Yeah, they're like it's so boring. But band pull-aparts,

I've had some serious feelings where after a while I started to feel muscles there that during CrossFit and all the other crazy stuff I'd done I never felt those particular muscles.

Yeah, for sure. And a lot of people think of it as like you go to PT and like everyone does that banded extra rotation exercise. That's like a great starting point.

But if we're not progressing that, that's not going to help us in the long run. No one's building up strength from doing like 10 band exercises that like they have everybody do.

And it's okay to start there, like you might need to Start there. But if we're not progressing that, it is a total waste of time. I'm so glad you mentioned that because I think that's what a lot of people do think like, oh, they're just going to make me do the bandy things again, and I already did them and now what?

So what is the progression from doing like the I's Y's T's and all of that with the bands? Yeah, for sure. And I think that's like, that where we're so handcuffed, like in the clinic, it's, you don't have time to show people like all these other things, when you have six other people.

So you stick to the basics and, maybe you'll progress like one or two things. But you're not going to be able to really progress people to like a functional, really functional strain.

When you just, don t have the time and then insurance cuts you off when your like 10 visits in and it s just like okay. So, yeah. So like to start with those band exercises is great.

The I's, Y's T's like everyone kind of like makes you do that stuff. But if you're thinking like real world functional strength and movement, like that's stuff is only going to get you so far.

And I have so many clients who have come to me and they're like, you know, I've done PT. I I'm done it all. Like I done all this stuff and Like I still have pain or like the second I went back into the gym, like it started hurting again.

And it's just simply because they were never progressed through a more like functional program where they progress from the bands to actual weights and different movements.

to weight bearing exercises, like nobody you'll never see in a PT clinic, which like blows my mind when people doing like weight-bearing shoulder exercises where they're on all fours and they are going through different motions with their own body weight through their shoulder joints.

Like you almost never seen that in PT clinics which is really insane to me. But just doing things with actual weights and putting your bodyweight through your shoulders, It's going to have such a better lasting effect and you're going actually get functionally strong rather than just pulling on these bands.

But it's needed sometimes to get you out of that acute stage, acute flare up, but the problem is we just don't progress them. That's definitely something I hear a ton from clients.

That makes sense. And I think that's where people too, they're like, yeah, I go to PT, do the same things on board. You know, and really the way I, you know look at it is like if someone can have their eyes on you that knows functional mechanics really well.

Pelvic Core and Postpartum Recovery

Like what a game changer, like even for like we were talking about the band pull aparts, you know, to have someone look at are you doing it right? Are you getting the right mechanics?

Could you have little tweaks? I mean, just thinking like that, it's been so helpful for me to Have someone do that. I'm imagining that for your clients.

You've probably seen a lot of cases in which one there's not symmetrical firing different things are happening. Give us a little background in terms of when you observe someone's mobility, what kind of things are you looking for and what kinds of thing are calling out that could be causing pain, causing issues for folks?

Yeah, so I'll do a full assessment on everyone. We'll go through a whole bunch of different movements. um like some of the classic things i'll see is like lifting your arms up over your head like your people's shoulder blades will just be doing like the craziest things like they're not getting that like fluid movement when you go to put your arm behind your back your shoulder blade will wing out like scapular winging is huge.

And especially for women. I don't know. It's so much more pronounced in women than in men. But like, I would say like eight out of 10 women, like have scapular wing.

Like it's the craziest thing. Almost all the clients I see, they have some degree of scapsular winging. And you can you, can like test that out on yourself just by literally putting your arm behind your back and you'll see your shoulder blades like pop out.

And that's considered winging and that just means that the muscles aren't holding your shoulders down to your rib cage properly so it's going to throw off your whole mechanics.

of your shoulders. So that's something that we always, always check. The hips are another huge thing, like seeing the mobility in those hips, checking the rotation, looking at someone's squat, someone lunges, balancing on one leg, seeing if their hips or dropping, if they're glutes are weak.

Glute strength is another thing that a lot of people have a lotta trouble firing their gluts properly and getting those muscles to engage, and then their low back kicks in, They'll feel it in their hamstrings, but they never really feel in it their glutes.

So that's like another huge thing that we look at, like make sure that those gluts are firing. Like when you do a bridge, do you feel that in your glute or are you feeling that your low back?

Can you a single leg glu bridge or is it just not strong enough to even get into that full hip extension and get that glut fully firing? that's something that we always look at.

Another thing that I feel like is very overlooked is people's feet. If you look, it's our foundation, right? That's what drives everything. We stand on them all day.

It's kind of like the foundation of all of our movement. And you would be shocked at how many people have knee pain or hip pain and they'll be treating their hip or their knee, but no one ever checked their feet and you'll see right away they have no arch, their foot's collapsed, everything's rolled in.

So now there are knees trying to compensate for it. Now there're hips trying compensate it for. And now they're getting low back pain, which is actually coming from their feet, but you're treating them for the low bat.

Like it's just like this like kinetic change, like disaster that like people just kind of overlook or don't even think to check your feet because well, the pain's not in your feed.

The pain is in back, back. But it coming that foundational, you know, platform of everything just being caved in and then everything is trying to compensate like right up the chain.

So I always check people's feet. I make sure that their arches are appropriate. Sometimes they're too high. Most of the time they are flat or caged in.

Um, and then especially when like you're balancing on one leg, like, you'll literally see the ankle just like collapsing in, um, And then it just makes everything have to compensate straight up the chain.

So it, it drives me insane when people are like yeah, I've had this back pain for so long and I, You know, i've done all the back stuff and iIve gotten the massages and the cupping and dry needling and like all this stuff.

And I'm like it's literally your feet. Like it has, It's not your back. It gets literally coming from your feed. It's wild to think that we wouldn't look at the foundation.

As an acupuncturist, I love it. I make people take their shoes off and their socks off because then I can see what their feet look like. It is my sneaky little thing.

Plus, you probably notice too if someone lays on a table and they're feet are out like that. We've got some tightness going on here, or if one foot's going like this and the other like that, it's pretty fun.

I guess for folks who are listening and are like, hmm, are my feet jacked up? How do I know? Most people know if they've gotten bunions, right? Or if the have flatter feet.

Let's go along the flat feet side of things and the feet collapsed in. What are typical pain patterns that go with the collapsed, archers aren't there anymore kind of foot?

Yeah, so it's funny because a lot of times you'll have collapsed arches, but you won't actually have, a like, people don't even have foot pain, which is probably why it like missed often.

Yeah. A lot times, you will have flat feet, and, But you have zero foot paint. Like usually it will present itself somewhere further along up the chain.

Um, A Lot of Times it is in the knees. You'll get like pain on the inside of your knee and that's just from your foot collapsing in and then your knees starts to collapse because it trying to compensate.

Upper Body Posture and Tech Neck

So like um knee pain like on the inside of your knees is like classic um hip pain, like outer hip, pain is super common as well just for the same reason um even like back pain.

Like a lot of people have backpain just from like their knee and their hip trying to compensate and then it just throws like, their pelvis off. Um, so yeah, it's funny because it doesn't it usually doesn t present in the feet that's an issue or even the ankles like for some reason like usually You'll never hear people say, yeah, I have like ankle pain or I've foot pain.

Like you'll really never here that. It's usually always in the knees, the hip or the low back where it presents, which is kind of funny. But, but yeah.

So if you are having some sort of, you know, knee, hip, or back issue, like don't disregard that it's not coming from your feet. And I know it sounds like, ah, it couldn't be my feet, that's crazy.

But a lot of the times it does come from your feet, so just definitely something to key in on. So huge. I sometimes will have people, when they come in to see me, I'll be like, hey, next time you come and bring your oldest, crustiest shoes, because I like to the wear patterns on a lobby.

Do you tend to do that? Yeah. Yeah, that's a good… I always catch myself like when we're in the city and stuff, like watch people like walking and I'd be, Adam, look at her left ankle, and look It's so bad.

I'm the same. Like, I am not looking at clothes. But I used to run marathons and be like, how are they running faster than me? They're like swinging their leg in a circle.

And I mean, it's hilarious. The sad reality is like so many people the way the walking patterns, the gait, so many people are walking like on their ankles practically they're so collapsed and and it's so it so scary that we we don't

talk about these things as much and how that affects the rest of the body I mean it just yeah and I also hate when like you'll go in for like a specific reason but like you have to check like our body functions as literally like as a kinetic chain like we if there's something going on at the shoulder like, you better check, like your T-spine rotation and your mid-back and you know see what's going, on there like everything is connected so I just think that we've gotten into this bad place where it's like oh you, have a hip injury let's look at just the hip like what is going with the but it's like, no, like what's going on with the low back, what going at the knee, What's on the foot?

Like you have to treat people as like this full unit and work on all those things instead of just like trying to like key in on this one thing that's happening.

Cause especially like even if you've been diagnosed with like let's say like hip bursitis, right? You know it, okay, you had a bersitis inflammation in that hip, but why did it get there?

It could have been the, because of you're having poor mechanics, from literally your knee or something else going on. So just because it's presenting in the hip doesn't mean that that's where it is coming from.

I think that is where a lot of people really miss the ball with the diagnosis. It's tendonitis here. Why is it hurting you there? Is it because your shoulder blade in your back isn't moving properly and now your mechanics is thrown off?

That's usually the case. I love that you mention that because I see it all the time like yes, bicep tendonitis, you know, it's not necessarily anything with the biceps, unless you like totally strained it and you came up there but like, no, usually, right, It's usually something in the front is because of something It's, it's funny, but we don't think of things that way.

And unfortunately, yeah, the medical system is kind of compartmentalized. Like, if it said pain, a tip thing, you know, and that's all you do. Yeah, sadly, I will often see that that all that the exercises someone is doing.

So this is why it such a benefit to have someone like you who can look head to toe. in an exam and so when you see someone you've eval them on online the next thing becomes you're making a plan up to like get the body moving better strength like stronger like give us for example if you were going to look head to toe at someone say that they hadn't been in the gym in a while maybe they're coming back to fitness they are trying to figure out there.

Let's go with knee pain. We'll go knee-pain on this one. Maybe we've given the shoulders and hips a little back a level with me a Little bit because you mentioned inside of the knee pane.

let's say they got right side inside the Knee pain you're gonna look at the whole body What kind of what kind protocol might folks be looking at when you are going through the Whole body versus just the knees.

I want to give folks a perspective on what it looks like to go into a PT office versus what It looks for someone to look head to toe. Yeah, so no matter what you come to me for, you're getting a full body plan.

I don't care if you are here for the knee or whatever it is, like you were going to get a whole full program because that's like truly the way I believe that like we work as like human beings.

So if come into me with a knee pain, of course, we're going focus in on the things that we found in the evaluation. you know, I'm going to put you through all the tests and think we're going figure out like where you're compensating, where your weak, when you are tight, like what needs work.

But it doesn't mean that we are going totally like disregard the upper body because we still need to be strong and functional in the body. And just because you don't have pain in your body, it does not mean you do not have areas that you can still work on that You know, you're still tight in that you are still a little bit weak in the mechanics could be a bit better.

So we're going to put everything in there.

Progressing Rehab Into Real Strength Training

We're not just going focus on the one area that is presenting with pain. Like we are going We literally work on the entire body and we're going to go through all those tests.

We're not just going do the test just for the knee or just the lower body. I'm going put you through everything and develop a fully comprehensive program that's going really hit on everything.

That's really my goal and how I want to change our outlook on this. people to, as a whole, get stronger, but move, not only get, stronger but, move better, function better.

You know, be able to do all the things they want for their entire life without having, you know pains or limitations or weaknesses or feeling scared that they can't do something.

So for my programs, I have a format, you could say, that I like to use when I make people's programs. I'm always going to start you off with mobility.

Everybody is going get mobility, then I am always gonna put in some sort of muscle activation. And that might be some of the banded stuff just to get you firing through the full ranges, kind of wake up the nervous system, wake the muscles, get everything firing properly.

Then when we go to do like our main strength program, your muscles are already going to be woken up and firing because we just primed everything. Then we'll go into like, our full bike strength, program.

We'll do usually like do, like one like main lift where we will go a little bit heavier and then we follow everything up with like the accessory movements.

There's always going to be some sort of rotation in there. Rotation will be in every single person's program. Laps also typically get missed, like I was saying, everyone just kind of does everything front and back.

So I will always program in some sort of lateral movement as well. And then usually we'll end off with like a fun, like functional movement kind of thing.

So it might be something with, balance or if you're like higher level, we will do some jumping or something like that. Everyone will get this really comprehensive, really well thought out program, not just like classic like chat GPT workout that I see like all the time and I just can't stand it.

I love that you mentioned this because we're in the world of, hey, chat GPT, I want to lose 25 pounds in eight weeks and my back hurts. Please create me a program.

And it's like, what? I mean, same for me too. Like, Hey, have this particular health condition. What can I do? It's not personalized. Chat GP didn't see you move.

Yeah, yeah, for sure. So yeah. It's more just like being smart about how you're programming things and the way you are doing things. And you aren't just doing random movements and random exercises.

Everything is very well thought out and programmed in a very specific way. Nothing is randomly just thrown in there. Or I can't stand when people just throw in an exercise just to make you tired.

It's just such a waste of time to me. Everything should be for a reason and a purpose, not just to make you tired and burn calories. That's not going to get you anywhere.

Well, the finisher. Yes. So I think a lot of people will be thinking like, wait, so you create a whole program. don't need a work, like I don t have to go to the gym.

I could follow what you or I can take what your you're telling me and go the the Gym if I'm advanced enough to do those kind of things. Yeah, 100% and that's kind like the bridge I m trying to get people like mine to start thinking like rehab and strength training or working out.

It's literally the same thing. Like it should be the thing like you shouldn't have do a boring rehab program with three stretches and band exercises and then go to the gym and do like your weights and everything else.

It literally should be combined in one solid program where You're doing all like the rehabby type stuff, but then you're also doing like, the heavier lifts and the weightlifting and accessory movements.

And then, you know, depending on the level, like you can still do like your functional movements, You can do your jumping, your athletic style stuff there.

Like everything can be comprehensive in one program if it's planned properly and like well thought out. the thing I'm trying to get people to understand is that like rehab and strength training, like they are the same thing.

Like they should 100% be done together. It shouldn't be like these two separate things. So like, when people come to me, they have a full week worth of workouts that they go to.

A lot of them, well, some of the do it from home, Some go the gym, but most of will go into the gy and they do like their full program. And like we'll program in depending on like where they're at and what their goals are.

If they want a heavy back squat, we will program a heavier back squats. They want to bench or do pull ups or whatever the heck it is, we'll program that in.

And I work with some really high level athletes, like I have a few Olympic athletes and stuff, and so we're literally programming in their rehab into their full strength program.

They're doing some heavy lifts and some real athletic style movements, but it doesn't mean that they have to ignore all the rehab-y mobility type stuff.

It's just combining everything into one solid workout. It makes it so much easier, but it also gives it purpose, right? And I think so many people. Yeah, well, and if you don't have an athletic mindset, you, don' come from sports background.

Oftentimes you'll think I do the PT and then I'm done. Right. And you and you. Don't do. The maintenance or you? Don' do? those kind of things. Cause I mean, one of the biggest things that I've learned about my clients just over the years and not really realizing like, Oh, cause I come from a sports background.

For me, it's like always there. Right. But I didn't realize that a lot of people will think like I'm through the space. My pain's gone. I stopped now.

Yeah. A hundred percent. Like, like no matter who you are, what level you're at, if you aren't athlete, If you not an athlete. It doesn't matter. You should always be doing some sort of like strength training and some mobility.

Always. who you are, like if you're newer to it, if your more of a beginner, you don't have to do the crazy things, but still just having a program to follow that takes you through all those things and just keeps your body functioning well is like everybody should be doing that.

Like there's literally not one person on the planet who should not be not doing it. It's so great to hear you say that because I think we've lost that I don't know like you know you'll see online there's the hacks and this and that and it's like wait a minute we do have to actually work to maintain the body and and its incredible how many women will do the 10 step face stuff for their aesthetics after their esthetician was like okay we need this like colossal program to take care of your skin, but you won't take the moment, you know, the time to like work on the body.

It's like, what's a great looking face if you're in a wheelchair, I'm going to be drastic here, Why? What the heck? Yeah. And I think people too think like, like your workout shouldn't be two hours long.

Like it really shouldn t be. I work with a lot of like really busy moms who have like three kids. They're like I have a half hour a day. and I'm like no problem.

We will get it in in a Half hour. No matter what time you have to work With, you can still do something. If it's with purpose and there's like a, like a plan behind it, like it's still going to be beneficial.

It's not gonna just be like, oh, I only have a half hour. Like, what am I gonna get done? Like you can get it done in a lot in half an hour, you know, it just, that you have to program it out strategically, obviously, and like get, have, a, plan.

Um, like I work with a ton of like busy moms and stuff who they just don't have the time for it. So when people tell me like, Oh, I just, don t have time.

Like I, just I think that's like such a, such an excuse. Everybody has like 30 minutes that they can do. If like you might need to wake up 30 Minutes earlier, you may need 30 minuets less of TV time, whatever it is, everybody has 30minutes that can dedicate to like working out and just getting like a little bit of a sweat in.

Priorities comes down to priorities.

How Krista Works With Clients

And you know, I think it's a great, it is great that you mentioned the 30 minutes, because I do think yes, people do you think to have, you fitness, we have to be in the gym and sweat our butts off and like grunt and do all the things for like, a long period of time.

Like the truth is, yeah, like you said, that's so good. So good to hear that. Now, in terms of like follow up and things of that nature, Give us a little bit of how you work, just so folks can hear, because you're doing one-on-one.

How often do you meet with people? How does it work in your specific programs? Yeah, so someone will sign up. We'll book, right away we book an evaluation call.

So we'll do a full video evaluation. Call will go through, like I said, the whole body will figure out what's going on, what your goals are, where you are starting, how much time you have to work with, What equipment you everything custom so that I can get a good idea of how to build out your program that's and I also I want to I wanna know like what what realistically are you gonna do because people I don't want you to just to like tell me like oh I wanted to an hour every single day seven days a week but realistically you're not going to do that so why am I gonna like set you up for failure like let's Let's like come up with something that you can actually do that's, like, realistic for you in your lifestyle and with, all the things that YOU have going on.

Like, let's figure out something. And that might be going to the gym two days a week and going at home two day a day. That's fine. It's totally custom so we can make that fit your life style however we need.

So, we get all those details from you. Um, and then it will take me a couple days. I'll build, I kind of play with different, different circuits and different mobility things.

And we'll obviously base everything off of what we found. So I build you out like your full program. Let you know that it's done. Have an app that will connect in.

so I will build out your program within the app. There is a chat feature like right in the apps. anything you need, any questions. I have people sending me like videos of their form, videos if they're not sure if their doing something properly.

Like, you can always send me whatever you want, I'm more than happy to check it out and send you back a video. Or if we need to hop on a call, like I am very easy, i'm not like, oh you only get one call a month, or like i am not that like that.

Whatever you like you're gonna get it. If you, if you have to, hop, let's hop. or whatever the heck it is, let's figure it out. I don't want to leave anyone hanging or feeling like they can't get the help that they need.

So I'm very easy with that. Um, I literally just tell people, like, whenever you need help, just reach out to me. And if you, if it's like something more that we need to like really talk about, or if I need like see something, we can always hop on a call.

Uh, um, super easy going like that, and then you typically will keep the same program for like four to six weeks. Sometimes we'll have to adjust certain things, sometimes we have tweak it, but generally we will keep it somewhat the for four or six week and then after that we do a full progression.

And I like to do that because I don't want people to plateau, I want you to be like, okay, it's starting to feel better, we're not there yet, so I progress everyone after four, six, weeks, will do full revamp of the program, everything will get slightly harder.

Or if we have to, if some people like you might need to scale back, like whatever it is, whatever you're feeling or whatever is hurting you or feeling better, or wherever it, we'll progress the whole workout and then we will go for another four to six weeks on that program before we progress it again.

So it's just like, you are consistently progressing everything. And like I want to get you to a point where like your body feels great, your getting stronger, getting more mobile.

You can do all the things you want do and it something that you can see yourself doing forever. It's not something you know, okay, I'm going to do this for like one month and then I'll stop.

It's a workout. So it should be something that you can do for the rest of your life. Absolutely. Yeah. That's what we want. Fitness for life here. Very important.

Of course, you are the wife of Adam Ross. And so the fun part about that is you guys team up. You've got the nutrition side with Adam and we've you for all of the PT and fitness.

So you had mentioned that you guys have an app that's coming out possibly in October 2025. So this podcast is airing in September, but stay tuned, guys.

We'll make sure we have a link there for everybody. Tell us a little bit about how you two are teaming up and what you're up to with the app so that folks can interact with both of you.

Yeah. So we basically have gotten almost like maxed out with there's only so many like one-on-one people I can see where I still give people the proper attention.

But there are only hours in a day, of course. We do have to cap our numbers somewhere. Um, and like get them started in like another way, or if they want, you know, programs to follow or whatever it is.

So we're coming out, we've been working on this new app. Hopefully it will be done by the end of October. Um. And basically what it, is, it's, there's different 12 weeks strength programs on there.

There's like a beginner program, a more advanced program. there's a bunch of quick like 30 minute things that you can grab and do. There's like, 30-minute kettlebell workouts, like dumbbell only workouts.

People always are constantly asking me about my mobility stuff. So I have like a full mobility program in there. Um, there is different like core programs in their muscle activation thing.

It's just going to be like full app, just with like everything you would need from like workout side of things. mobility side of things. I'm also going to put in certain rehab programs.

So if somebody comes with just general low back pain that they've had for years, you can grab the rehab program for the low-back and it will kind of like walk you through everything.

There's different phases of it, so it's going progress you over time. So hopefully you're going to have those out for like the shoulder joint, the knee joint.

The Upcoming App and Where to Find Krista

And then Adam's going have like his whole like nutrition side of things. So he's gonna have different like cookbooks and shopping lists and, you know, like different supplement things and looking at blood work, things that we should just be focusing on and kind of like questions to ask your doctors.

And there's going to be a chat in there so you can ask both of us anything you need whenever you needed. We can also do lives in their, which is really cool.

So we're going probably go on there once a week and do a live Q&A with everyone. Yeah, so we are super excited about that. It's been a lot of work, to say the least.

But we very excited that just being able to reach more people and help more Um, without it having to be like the one-on-one, like intensive stuff. Cause not everybody needs that.

Like some people, they have a lot going on. They need it. But some, people also just want like a solid strength program that they can follow that, you know, has all the things that we were talking about, it has the mobility and the muscle activation and main lifts and accessory movements.

So, um, It should be a really nice, comprehensive, group of things you can grab on there. Hopefully it will help a lot of people. Awesome. I'm looking forward to it.

Anytime we can have something that is easy for folks and has good solid information in there that's going to keep them from getting hurt, which is the big deal as we get older.

Such a big thing. So to wrap up this podcast, I think my last thing is you had mentioned rotation and you'd mentioned feet as being overlooked things.

Where would be the first space you would have them start sleuthing out what's going on with them? What would you have him do? Honestly, it would the hips like 100%. Like I feel like your hips are kind of like the center of everything and like like it's so common that like, it s something at your hips, but you'll have like the low back pain or the knee pain like above or below.

And the hips like It's very, very common, that people's hips are very tight and just like not functioning well. So I would definitely say like key in on that hip rotation, like I guarantee you if you've never like focused on it before I guarantee you like you are tight there um so definitely work on that hip rotation and your hip mobility for sure I would say that's like the number one place to start for like mobility and like just having everything like feel good nice nice I can resonate I'm definitely definitely vibing on Oh my goodness, Krista Fasio, thank you so much for coming on and chatting with me.

I look forward to hearing how the app goes and when that comes out, we'll make sure we promote it on our end. And then of course we have to tell folks where they can find you in terms of Instagram and you're on the AR Nutrition website, but where else can we find do?

Yeah, Instagram has been like my main hub right now. Doctor. KFascio, F-A-Z-I-O is my Instagram. So there's my websites like linked on there. Everything's like in my bio.

Um, so feel free to shoot me a message. I'm always happy to talk to you or answer any questions that you have. But yeah, Instagram is probably the like my main hub right now.

Deal, deal. so we'll put that on their and then yeah for all the other stuff we've got arnutrition.net we will put in things as well that way. there for Instagram there, put the notes in there.

For you guys. And we'll make sure we get that all put out there and look forward to hearing how things go with the app. Thank you so much for coming on.

I really appreciate it. Yeah, no, this has been great. So thank you for having me. Hey fellow health junkie, thanks for listening to the health mix podcast.

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