Staying Grounded Under Big Pressure with Dr. Neel Bulchandani Transcript

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Introduction to the airway, movement, and emotions

Anybody talks about a narrow palate, hands down there's four of them out tension going on. Far easier ability for resilience and for that parasympathetic activity to initiate and come back online.

And I found a movement practice that kind of emerged from grief. I traveled and taught around the world on how to lead other people in this integrative practice.

Expanding with breath work really provides such relief and such a good nourishment to their bodies. Hello and welcome to another episode of Ritualize.

My name is Dr. Emily Spickle, your host. And today we have a incredible session where we are going to be talking about the airway, a little bit about movement.

and a little bit about emotions. So my guest, before I welcome him on, is I'm going to be joined by Dr. Neel Bolshindani, who is a chiropractor, movement educator, and creator of the Floor of The Mouth Body Connection.

Neil's work bridges breath, fascial release, integrative movement, an expressive arts to reveal how tension in the tongue mouth, floor and airway can influence posture, movement patterns and nervous system resilience.

That sounds totally perfect for it to rise. In this conversation, we will dive into how Dr. Neal developed his groundbreaking map of the floor of how sound, music and ecstatic dance can shape into integrated practices and how we can use these insights to connect to our own bodies and regulate our nervous systems.

We will also explore how the future holds movement education, nervous system awareness and holistic healing. Dr. Neal's approach is all about helping people move, heal, and embody resilience in new ways.

Welcome to the show, Dr Neale. Well, it's amazing to be here, Emily. Thanks so much for having me on. And I feel alive and by the way you framed up what I do.

So thanks for doing that. It's really, really amazing. I'm excited for our conversation. Absolutely. So I want to kick it off right away because I know the listeners are probably like floor of mouth.

What is that?

What the floor of the mouth is and why it matters

So can you share with the listener's what you mean by floor mouth and how powerful this area of the body is for controlling posture, emotional release, maybe compensations that we have in our body?

Yeah, absolutely. I mean, I, you know, working with babies, kids, adults and teaching other healers. It's so funny how we we think about this. We have a roof and a floor in our mouth.

Now, I'm going to talk about this really technical place in the body. And we call it the floor. You would have thought we'd come up with a better name.

It's actually the mylohyoid muscles. Where it is, though, it's under the tongue. So people are like, where is that? You can't miss it if you have your tongue and you lift it up.

I'll do what's called lingual palatal suction. So lifting my tongue to the roof of the mouth, if you lift your tongue of your mouth and you plant it up there, you're going to feel a stretch.

But underneath that is where the floor is. And it is this precious area that I feel has been talked about more and more, but I believe it's underexplored.

That's what led to me, without even knowing it, going on this journey of charting the whole body from the context of The Floor of and seeing these connections that go from the floor of the mouth to over 70 areas in the body by anatomy that I've created this map from that you mentioned.

Are they fascial connections or how specifically are these muscles connecting to the rest of body? Would you see it on cadavers? Yeah, such a good question, by the way.

And nobody jumps right to that question. But I feel like you would, because you know so much. The way my brain is thinking. You know the whole body, right?

So what's known as the front line fascial chain, well talked about by Tom Myers in Anatomy Trains, and then there's more work out there from others. That's a more of a fascia chain and a facial strain that goes through the midline.

But what my map shows is this intimate connection between the floor of the mouth and certain bones, muscles, organs, and other connections in the body.

Some of it is very clear if you look at a cadaver, but what I'll say is I believe if we look our Ayurvedic and Chinese medicine with the different Meridians and the different systems of Chi and Prana, I think they're really getting more into these invisible channels.

The only way I came up with this map is through downloads of working with people and seeing where they needed help. But then it went through pouring over data of years of patient care, looking back and saying, oh, when there is four of mouth tension, which is predominantly in those who have pharyngeal arch formation issues, that's the mouth embryologically, this four to five weeks in utero, It could be they have a tongue tie or lip or cheek tie.

It couldn't be. They have narrow maxilla, narrow arches. it could. Be they. Have any malformation of the palette. Um, it doesn't have to be one of those things.

That could the, um, the combination of things too. But when there are those issues, they were there in utero. And so then this mouth formation influences the way that so many other things form, you know, kind of my.

my easy one to point at is the diaphragm because it starts forming in the throat at five weeks. And so then it has this descent through the body where it makes its way into our belly at 10 weeks and that kind of starts us off in this constriction pattern along with many other organs and embryological kind processes that we can talk about.

So I think it's an overlaying map that does not It's not able to be seen by the eyes on a cadaver only because you have to look beyond that and to these other connections.

Okay. So let's say the listeners are curious of, do I have a floor of mouth restriction? What would be a few examples of how that could present? Would it be literally what's experienced like mouth breathing and like you had mentioned a tongue tie?

Or could it more tangential of something digestive? Could it in the foot? Yeah, I'll start with like the really niche narrow one and then I widen to pardon about to be pun of the palette.

Okay. Anybody talks about a narrow palette, all of us needing palette expansion, people needing pallet expansion. Hands down, there's four of them out tension going on.

If you've got TMJ, jaw issues, If you've got a tight SCM that's rigid that won't let go, swallowing issues, then we can expand of your baby, or you got baby that not feeding well, maybe there's a hypersensitive gag reflex.

But then you can also look beyond that and say, there's the hypermobility or Ehlers-Danlos population that don't

have a tight floor of mouth, they actually often have hypoactive and like their tone is weak, so their jaw actually opens too far.

So an unstable jaw and there is a certain place on the floor the mouth usually on a left side and it's midway that those with Ehler's Danlos have that's especially like a valley, whereas on right, further back, it may be more tense.

There is a connection there that you could talk about, too. And then we'll say those who, like you said, mouth breathing or even if they have like a lot of congestion, stuffiness in the nose.

Well, the knows is often, you know, led by how the palate forms and performs. So often underneath that, that tongue can't move well. Yeah. Those who say like, if you can move the tongue well, it can lift to the roof of the mouth easily with your mouth open.

Like that floor of mouth tension is probably prevailing.

Signs of restriction and how it shows up in the body

And then if you add one step to that and say, how does the fascia, How does your neck move? How easy is it for you to vocalize? So a lot of singers, performers, they can do really well with singing, even if they have floor-of-mouth tension and the way they know if the actually had floor mouth tensions is after I work on them and they're like, oh my gosh, I, as an opera singer or any other kind of singer, it's so much easier for me to get my voice out there and also for my to breathe because the diaphragm is often more restricted when there's floor of mouth tension.

So there are some ways that I would say people can tune into whether they have that going on or not. Interesting. And then is it manually releasing it?

Just like if someone had tight traps, you're actually going in there manually, releasing Yeah, you can do that and there is a lot to say about that. There's a lots to about going in and releasing the pterygoids, those internal jaw muscles and how that is what a lotta more body workers are familiar with and then there's talking about the tongue and even you get a paper towel or gauze and stretch the tong and do these movements that can help loosen that which myofunctional therapists have been doing this for a while too.

But for me, what I started to see with babies, kids, adults is that I would work there but There was sensitivity, there was discomfort. And I'm not saying that that isn't sometimes necessary, but I like, why is it so tense?

Why are there nervous systems is regulating when I touch the floor of the mouth? And why isn' t that lasting when i work there, especially because of that, the realm of tongue tie and working on my daughter when she was born with tongue, tie, and how I don't want my.

Daughter to have to go through this kind of discomfort, so yeah. That's where I started to look into the body and I starting to see these patterns of when I would release the right kidney, when loosen that restriction and get that in a better alignment, the floor of the mouth will loosen.

When I released the ileocecal valve where the small and large intestine meet, the floor of the mouth would loosen. And then another good one is the plantar fascia.

You know this, this is your territory. It's also known as a diaphragm, a functional diaphragme. When I would get the foot and ankle to free up often the tibia, distal tibiata, often, the first metatarsal and sometimes even that big toe, when I free that up, Instantly floor of mouth tension would drop and I would see how I did we you know way less actual manual work and needed the reason I think it's really important for me to say that is because I don't want temporary results with people.

I didn't them to need me more. And once we figured out those keys with patients, I started to be able to teach them how to do those movements at home.

So they could sustain that floor of mouth tension reduction. Not only were they not reliant on my manual work in the mouth, But they also weren't reliant on them needing to do much in there, which is a lot easier for people to move their foot and squeeze their side to help release type fascia there than it is for them to feel in the mouth and know what they're doing.

was probably the biggest breakthrough for me in how I wanted to guide these babies, kids and adults, through patient care is I started to find those places in the body that actually held the root tension for the floor of the mouth so that when I get to the flow of mouth, it just was able to loosen way more easily.

Got it, so it's almost like the tension in floor the of a mouth was a result of or a symptom of this other tension, let's say, in the plantar fascia, as an example.

Very, very fascinating. So then, do people ever have to strengthen the floor of the mouth? I know you mentioned with the Ehlers-Danlos, but how would that present if someone needed to strength it?

And then how do you strengthen floor the of mouth. Yeah, it's a great question. In fact, there is a lot more dialogue out there about how to we loosen the tongue and the flow of them out.

And how do we, so hands down, I'll give a shout out to lactation consultants or IBCLCs especially who have this training on feeding and tongue tie and myofunctional therapists who are experts in the floor of the mouth from a training perspective or a guiding through practices perspective because they have been doing this work in how you strengthen muscles and the whole oral facial complex.

We also want to mention, you know, speech language therapists who have done this. You know there's a realm of others too, but And we know our friend, Mandeep Chauhal is a dentist who knows so much about this part of the body.

What I found, though, is that through the floor of mouth protocol, and now I'm distilling it down to what's called the Floor 4, these four main regions of body, that when you work on those, you see this shift in the mouth.

I talk about the flooring mouth a lot, but really the tongue is connected to the floor of the mouth through the phrenum, that's that tissue under the tongue, they form the oral diaphragm.

So there is this functional diaphragme in the month that regulates the flow of interstitial fluid above and below. And so when I started to find this foreflow happen, not only would I find that kidney, the right foot, and these other areas, release the floor of the mouth tension, but it would create a phase shift in the body to where it will not only loosen tension but would strengthen weakness, and it could create stability of mouth, the flow of a mouth.

Not only that, with these Ehlers-Danlos spectrum patients, I would find that their hypermobile ankles and other joints would be strengthened. I actually feel, when I started to make that discovery on people, I was blown away because I'm like, there's no way I thought that that was gonna happen.

I just was trying to loosen things, but then I got out of my matrix of loosening, loosened, and loosens and I go into that capacity of thinking about function and integrity and then, right, this is not about me doing a binary thing.

This four floor is this phase shift paradigm of, finding the root of the route of root and then all the permutations of that to get to this place in the mouth.

Visceral connections, fascia, and nervous system regulation

And usually I can get there within five, 10 minutes of once I start treating a patient after evaluating them and finding that place where the shift happens not only in four, but the tongue, the lips, cheeks, palate.

the cranials and down through, so those inner thigh muscles and hamstrings and calf muscles elasticize and become like butter. So that's the moment where strengthening also can happen.

It's like this neurological, bi-hemispheric integration moment that happens when you can get to this point. That for me has become my primary way of strengthening.

Then I layer on top of it everything you say, everything that my other people who are geniuses say too. Yeah, no, I love that. So what are the four areas, you said the floor four, areas that are influencing some of these presentations?

Can you share that? Yeah. I started to say, okay, so these are 70 areas in the body and everybody's eyes would glaze over. All the dentists I was collaborating with was like, Neil, that's cool.

But can you narrow it down? And I'm like no. Uh-uh. So when I presented at Symposia I narrowed it down to ten and even then I didn't like it I'm like I don't Like this list.

It's just too narrow but all of a sudden my wife and I were having a conversation late one night and my dog my Wife Dawn is brilliant and she just said something to me and you know when somebody says something and it's not just what they say, but it the words that are laced with divine wisdom, that was her.

That was that. And all of a sudden I saw these four regions of the body, like highlighted, on a map. So those four reasons are, it's going to sound really simple, but it is the head, the throat, there's a lot more to those areas.

But when I'm teaching parents of people and anybody, and even some healers who are like, I don't know what all those 70, they love that it's four regions.

And then you could talk about different cranial bones and diaphragms, you can talk the throat being comprised of the thyroid, parathyroid gland, the hyoid bone.

We can also talk about the trachea and the epiglottis and how those need fascial release and I do that. We could also talk from the sides about the kidneys.

We can even talk about releasing definitely the liver. Or we could talk releasing the QL muscle. There's so much to say about these different areas in the feet.

I'll just pass, say you could just talk to us about that. But we can talk the talus, the hinge bone of the foot, calcaneus. The Achilles tendon and all the other bones.

So, but those four areas, even for those who work very generally on them, even if it's patients who are doing this on themselves or on their babies. It's just, it is really effective, so those are the floor four.

Love it, love it. Can you share a little bit about the viscera? I know you mentioned the kidney and the liver, and it's one area where I think it is underappreciated, especially in my training in Western medicine of maybe fascial restrictions that occur if you can get kind of these fascial bridges that are not natural that occur between organs just what effect does that have not just on the floor of the mouth but overall in how an individual moves and feels yeah We've got to get props to people like Sue with the melt method, with other Rolfers, other Craniosacral, Osteopath.

These are the people who have been working on the visceral system for a long time, but we have these ancient healing practices that also talk about it.

And so for me, I really love distinguishing between fascia and the visual system, because when we can get really specific on those visceral adhesions and misalignments, That's where I see so much happen with the body when we talk about nervous system regulation and when they can not hold integrity.

I think maybe I'll get into the weeds and say, when I'm working with women postpartum, and they've got diastasis where that ab separation is present, it's been a struggle for them to get those abs to cohere and come together, they have done the pelvic floor therapy, the breath work, maybe even had some body work.

I'll say, well, if the right kidney, or any kidney if, the kidneys are bound up and fashionally restricted as well and the ileocecal valve is or the esophagus or stomach, any of these areas, they sometimes need to be very specifically released in order for that container of the abdomen to allowed to integrate.

So it's kind of a fluid way of working, but I also say I work with a lot of neurodivergent populations and tongue type populations. And I think in these ones, the midline is such a compromised place in the body, that mid-line structure.

So we'll also see ab separation or diastasis on babies to kids, even boys, girls, because all babies are born with diestasis. Stanford has a great article on this.

And it's often said in that article that a lot of people refer to that all children have the abs integrate and diastasis will integrate in heel by the age of five.

And I'm like, yeah, however, I've seen too many people who that's not the case. their abs need integration. So it's not just postpartum women. This is important to mention here because if the abs don't integrate, the visceral system does not have that scaffolding in order for it to remain.

It's a very, very connected world. kind of get away from that I'll say there definitely is this also this big connection between the vagus nerve and how it does innervate so much of the visceral system.

And so a lot of people know the Vegas nerve as this thing that we don't have a handle on. We need to do somatic work for, we need control this vagus nerve.

And I think some of us who work with the whole body and nervous systems and visceral work can know that, you know, it's so much more nuanced than that because if you have a kidney that won't get into alignment, It disrupts that pathway to the brain.

You know this the the hypo spinal thalamic tract that actually controls temperature regulation. So you can actually feel really cold or be shocked by cold when your kidneys out of alignment.

But if you release that visceral shift, yes, it influences vagal tone. Then you have this far easier ability for resilience and for that parasympathetic activity to initiate and come back online so that the brain doesn't get overwhelmed in a sensory way or a shock way with normal stimuli.

So that's kind of a roundabout way of speaking about it. So do you think everyone should do some degree of visceral work? Yeah, I feel like it's just I mean, a I see so many babies come into this world, and even if they have no issues, the moms just dads are bringing them in just because, right?

They just feel I just want you to check my baby out. And sometimes I'm going to find all the issues that they're not seeing. But sometimes on the most at ease regulated baby they had to come through a canal the birth canal and have all their cranials collapse and expand they start out in this fetal position right embryonic fetus position and then they unfold and so even though they might be unfolding beautifully without tongue tie and oral restrictions and it's still a process and I have found rare people who I haven't needed to release at least one organ.

So I think it's just a nice, beautiful thing when those of us with the privilege to get these kinds of body work done, they can. But also in the Ayurvedic world, Chinese medicine world and other countries, some of these practices are in-built.

I'll have the pleasure of seeing a family that's got Chinese origin that has a great-grandmother that taught the grandmother how to do bodywork, massage, and they're massaging organs.

So I feel like this was built into our cultures, and it's not as present in some of our cultures. So because I don't think it is as inbuilt in our culture, we need people like me who know a lot about it to do it.

The Floor Four framework and strengthening through integration

But I'm actually on a mission and I get more excited about teaching my families, teaching people how to bring this into the traditions and rituals of their family so that then when they leave that inheritance and legacy, their babies will grow up just knowing what it felt like and how they also give it Yeah, no, I absolutely love that.

I love to switch gears a little bit, because I know there's many facets to Dr. Neal. The side of movement, so I don't body work, your hands are on patients and clients, but I knew you were a big believer in movement specifically around dance.

Can you share a bit about that? How you got into that and why you think it's so powerful? Yeah, well, I grew up as a kid who never talked. People called me numb Neil or neutral Neil, or whatever.

I was so I just grew a very fractured, very living in chaos. So I didn't know how to sound out. It was very quiet. Very reserved, Very controlled. very insecure.

Even I don't even know that I would live long or do well in life. I made it through that. And in high school, I started singing, started joining the choir, and that brought me out of my shell.

I joined a musical and I starting performing and started to move my body and it integrated me. It brought into healing and a sense of who I am that I'll never forget those transitional moments because I went from like questioning whether I wanted to be on this planet to I am so excited to be here.

I actually like the sound of my voice. fluid dancing. I don't know if anybody's seen Footloose, right? But you know, Kevin Bacon, Foot Loose and he teaches the other guy how to move.

But everybody knows that white suited guy in the end, he's got the white suit and moves his body like liquid, that's who I was in college. The fluid dancer and I'll tell you this little segue in between.

That was called liquiding. Liquiding was a gestural postural movement practice that was birthed out of the ecstatic dance platform that I fell into. I just find that when we move in ways that are liberating, healing, and expressive, it's part of expressive arts that forms part my practice, personal in my practiced life.

We emote in a way and we find healing and peace and integration and safety and security in way that is just beautiful. So that could look like slow poetic movements where we become the wind or we'd become a candle flame in front of us, right?

Or, and that's a practice also that through visualization, when we visualize and we move according to the visualizations that we have, that is a practices called idiokinesis that I learned from the work of Anna Halperin, who was a dance pioneer and legend who passed away a few years ago and lived to like 102 years old, that we can tap into this movement flow that precedes our intellect, precede dance.

I mean, I'm speaking to a competitive ballroom dancer here. That's valuable to have dance moves and we need those kinds of skills. I'll locate it to a really specific time now.

When my daughters, I've been a chiropractor, healer for nearly 18 years and nine years ago when my daughter was born with a tongue tie, that's what threw me headfirst into this field of oral restrictions and tongue-tie and learning about that.

But the year before When we had a miscarriage and that was wrecking and seeing my wife go through that, I mean, it was rough. And seeing that I started to find grieving.

would transform into movement and I found a movement practice that kind of emerged from grief. And through that moments of grief and grieving in those moments, I started to build a practice and where I would do this movement, and i would move for like one hour to four hours early morning before anybody else woke up.

I'd get lost in movement. All of a sudden I You know listen to this nudge of move your right finger right thumb and I

would move Your right elbow up and i would and then i, would listen, to my, whole body Show, me where to move it some of this came through learning a little bit of the world of fascia and movement that i had through my my work in chiropractic but but it really, was just surrendering to these nudges that I began to string together movements and then I would see emotions come up and I Would vocalize and i would journal I built this practice called the five m's that became a big integration tool and form this Practice called move into it that i traveled and taught around the world and how to lead other people in this integrated practice to find themselves, to come together.

So I don't any longer teach my move into it movement practice around the world, but the five M's are something that I really keep within me and I guide other people in.

And so I'll say what they are and then I will kind of bring back to ecstatic dance. Cause I feel like some people may never do any of the things that are mentioning.

The five ends are movement, mapping, musing, meditation, and music. Musing is different than meditation because musing, is when we think about roll around an idea in our heads.

Meditation for me is very specific on whether we're doing it through breath work or movement, we kind of center in and lose our thoughts to enter into that different brainwave state.

Movement, grief, and the rise of expressive practice

Music can be listening to music or playing it or singing and then movement is all the things that we know moving our bodies to even grapho therapy when you move your hand and you write and heal through writing and then also then mapping is a very specific application of journaling but I use paper as a canvas or whatever kind of thing you want to write on and it's charting what you see, whether you're a visual kind of learner thinker and you are drawing what your seeing and experiencing in your body or in you day, or you simply writing what going through, what emotions are.

And so those became really interlocking practices that helped me integrate and then, you know, for some people, and especially when I'm with my kids, I like, sometimes we just need to wiggle and just kind of shake, right?

And to let our bodies loose. And I found those simple moments of shaking or wiggling or, if you get carried away with that and all of a sudden you're wiggling for 15 minutes, profound things happen, that freedom leads to joy and liberty.

half an hour, hour and I had the luxury of waking up at four and doing this for four hours some days. I was like transcendent in how I escaped the confines of my mind and found bodily emotional healing as well.

And so for me, ecstatic ecstatic dance looks like letting yourself move how you want to and not allowing yourself anything else or even time limit you.

Yeah. I love that, I loved that. So I started getting into somatics, somatic healing, and I've never done this before, which is fascinating, being a gymnast.

I'm very into the body, very much into sensing. And I do my ballroom, my aerials. Some into movement, but they are, as you had said, controlled movements, right?

They are intentional movements that are choreographed, or it's essentially like a routine that I am going through, depending on what I doing. So with the somatics, it's tied into breath work, but I am, I'm not dancing.

I need to try that. But I, um, on my back and I just allowing my body, like I moving my legs in certain ways. Like honestly, my, have chronic right hip pain.

And since I've been doing this over the last month, no longer have pain in my. So it was fascinating. My body will just move and spiral and express that I.

you know, crying and releasing tension and all of these things. But it is there's something that just like magical. And I've never I can't believe that it took till now of being in the space of of movement for 20 years.

I'd been in movement and I have never tapped into that side of it that. my life has completely changed since I did that. And it's almost addicting. Like every night now I'm like, I want to like get on the floor and just let my body move.

So maybe I am dancing and I don't realize I've just on floor doing it. Is that similar to the ecstatic? Is what somatic dancing would be? Essentially ecstatic similar, we're just using slightly different words?

Yeah, I mean, there's a lot like there is ecstatic. OK, let me just speak to what ecstatic dance looks like for those people who are going to go to their local community.

I'm not going knock this, but often it's you get on headphones and you're listening to music and everybody's in a room or at the beach and they're just dancing.

That's what a lot of modern contemporary ecstatic dance gatherings look like. And again, I'm not knocking that, but at its roots, ecstasis is a state of bliss, right?

Ecstasies is the state where you're beyond your mind, where have transcended the mind. What I'll say is like, you are tapping into something that for me has formed in my life.

in at least looking at the last 10 years, but if we go before that, when I would move according to my intuition, whether lying down or… I think that's intuitive movement or even unwinding.

We could talk about that. And for sure, somatic therapies, like somatics like the Feldenkrais and you could talk about the Alexander technique. They were tapping into that a long time ago.

But, you know, I feel like, the difference is when you're in that ecstatic dance place, You almost have no idea what you're doing when you doing it because you've taken it to a little bit further step beyond following your intuition that you are in a flow state.

But I think you, what your tapping into is really the core and the essence of it. That it is basically like movements that your exploring that necessarily attached to an intended outcome.

And I think, but I'll say I, think a great place for a lot of people to look at is the expressive arts are really great. There's a of ways we can talk about that.

But I did some training at the Tamalpa Institute in San Rafael in the Bay Area. Actually, I recently interviewed Rosario Sammartino, who is one of the main teachers there, and she was mentored by Anna Halprin.

I'll say Anna Halperin was a legend in our field of dance because she took ballet from you had to wear tutus and you have to where ballet shoes. And she did a parade on Broadway where she taught her dancers and they got floats on a Parade and.

They were naked just to show that ballet is not about clothes. It's not. About ballet. Shoes. So it's like in the in. The fifties. She's. Like a. Legend from who?

Contemporized ballet So her and her daughter formed the Temelpa Institute in the San Rafael, the Bay Area. So I think it's a great place to go to explore movements and somatics to merge the psyche with the arts coming through movement.

But there's so many people who are tapping into this just by turning on the music, and just letting it move their bodies. And I think that's pretty much at the core who we are.

We're sonic beings, our brains are informed by sound, music is an anthem for our bodies, but we don't need music too. I your body still and you hear your heart beat or you feel the flow of blood through your and, you know, hear a bird chirp and hear the wind blow.

And you can even let those movements, like, make your bodies appear like that, then you could tap into this flow too. So I think ecstatic dance and somatic movements and unwinding and expressive arts are all part of this spectrum of just having a beautiful time of getting to know ourselves and letting our body move.

also getting out of our own way, where I feel that I'm sure as someone is moving, if they're doing kind of this expressive dance of what you're saying or intuitive dance where they are just moving their body, I would do it with my eyes shut.

I don't know if you do with your eyes shot, but so that you could reflect inward. But I am sure that a lot of listeners would go through a self analysis of, do I look crazy?

Do I like, right? Like there's this, this judgment side of what it is, which I know you can resonate with that because you were saying that you didn't speak and you know, and then you're like, no, I actually like the sound of my voice.

And you have to kind of break the critic who's saying like no. So it's a fascinating journey on that. How can, you don't always use music, but how can music help pull some of that intuitive freeing and emotional expression through our movement and body?

Ecstatic dance, intuition, and the role of music

How can music do that? Like certain types of music, like tribal music like that does it for me. How does music help? Yeah, and you know, I will say that whether I'm singing or like doing spoken word or And there was a time when I was really insecure, again, after getting out of my, like, the subculture of the rave world in undergrad.

And I came back and I found myself again. Soon after, I went to chiropractic college and got on my path that I'm on now. But when started to come back to the…

I gave away dance because it, to me, was connected to that world. an undergrad as I ended that in 2004, whatever it was, I kind of gave it away. But after graduating chiropractic college and reuniting with my passion and desire, in 2010 or nine, I fell in love with dance all over again.

So like five years later, but I found I was so insecure about moving and I felt like, can I move that way? And just being okay with, look, if I moved and it's an expression, there's no risk in moving a certain way because I'm just moving for the sake of enjoyment.

So I will say music helps with that. But I'll also say that there was a point, too, where I was dancing in front of, let's say, 1,000 people, streamed to like tens of thousands of people.

And I had to be OK with, I am going to look silly. I want to looks strange. because there was no goal for my movement aside from moving out of pure self-expression.

But I think music is the great gateway to getting past our inhibitions, right? Because the euphoria that comes from certain music, it's just, you know, It's unmistakable.

I mean, I don't think it is good to have those feel-good songs, but who, who puts on The Lion King and doesn't love it, And sometimes it's those tribal drums.

I actually, when I reclaimed my love of music, I also got back into playing music and I started playing the djembe, which is an African drum, right? And then I became part of a group of 10 djembe players.

And we would go to the Sundial Bridge in Reading, where I moved from in Northern California, this massive bridge

that's a functioning sundial. Underneath it, there's part that echoes.

So we will gather, the 10 of us would play the Djemba. We would have other people dancing. And that beat, that would percuss our bodies. That would get our heart beating and that will bring us into this collective experience where we were so unified and through that, like, you just kind of see your bodies awaken and you see yourself getting to get into that ecstatic part.

So I do think music so many times is good. And I think some people like my daughter, she's nine now, but from when she was like two, singing beautiful songs.

When she like three, we were dancing and we would often do interpretive movement together. She loves when some people we need that flowy, slow, gentle movement, whether it's for our nervous systems because we needed that down regulation or whether we love the poetry of the in-between.

So I think putting on strings, putting, you know, the piano guys, they're really great. I love them. Yeah. Two cellos. So I do think, but Rosario Sammartini, to mention her again at the Tamalpa Institute, her husband, when I went to this workshop, Her husband is a master cello player.

He would play the cella as we moved for hours in this somatic expressive kind of work. I feel that live music is nice when you can get it to bring you into that space to where you just kind lose yourself in the music.

Yeah, there's definitely something about the live music so you can actually feel in your whole body the vibration of the drums versus just the headphones from the music or whatnot.

I absolutely love that. Last thing as we're getting close to the end, and I could keep talking to you for hours, but what are your thoughts on breath?

throughout this. We spoke about the movement, moving the body, feeling, sound, music. How about, the incorporation of the breath, maybe feeling your breath.

Different styles of breathing. I'm also very into breath work, which is why I am asking this and just uniquely curious about it. But what's your thoughts on breath?

Oh my gosh, breath work is a topic. You're right. I'm like, oh, do we even talk? I am having so much fun talking to you that I can just keep going. Yeah, I get into topics that don't talk about as much because I think, first of all, it's fun to do that.

And second of, all I know you have such a broad range of interests when you look at the body. I think the breath is so important and we have so much that we can access through breath work.

Whether it comes from like box breathing to, you know, the Botteiko method. We can talk about the Wim Hof method, my brother trained with WIM and I love Wim Hof's method for some things and shifting the autonomic nervous system.

But obviously, when we're talking about like nasal breathing, getting air in through the nostrils and letting ourselves have that proper form of nutrition, which air is, right?

We need air for existence. For me, my favorite form a breath work is singing. I like breathwork on its own and I do have a really specific practice that I But when I'm singing, I find that it requires optimal breath in order to produce that sound that's really resonant.

So I like to encourage people out there like some of my patients I've taught them breath work and then they've learned breathwork from amazing people like my functional therapists are almost all trained in the Botteco method or decide to because the take a method is a really great method out.

But Some people are like, it doesn't fit their passion. Whereas they might be somebody who would be more inclined to like even if they're not a professional singer, just sing.

So I'm like you can use that. so whatever it is, when you run, you often have good breath. That's where I learned a lot of good breadth work is when I conquered asthma and defeated that and became an ultra runner for a while.

Breath work, singing, and contraction-expansion practices

When I taught my movement practice and I still do it and guide one to one patients in it still, There was this move called embryo where it just was, this movement where you fold in and then you unfold and you could do it sitting on your side, but paired with breath, that movement of folding and unfolding in this fluid kind of practice where could you do for minutes to longer.

I would find such expansion occur in my body, but I will also find that the breath combined with that movement of contraction and expansion would free up fascia in a way that I wasn't finding with just the breadth work or just unfolding and the stretching.

So because nobody else does that or talks about that, I'll focus on that for one minute and say that you breathe in, right? You have this 360 barrel increase that you have your whole container fills with this air.

Whereas when you breath out and you get that air to expel from the body, we could say our navel can plummet towards our spine, so we let all the air out.

Well, if you let all that air out and your abdomen sinks inward, much easier to fold into a contracted state, right? So get into that cannonball tucked in position.

But when you breathe in, you naturally inflate, your belly comes out and you expand already. So when the breath informs contraction and expansion, especially in those of us that are tongue tied, because, you know, now my daughter who started this, I have tongue tie.

I looked in the mouths of my family members, my dad, boy, it goes all the way up at least that far. And so for those us who have these fascial restrictions that originated from our tongue ties, Well, we formed in utero in this contracted state like everybody else, but when we unfolded as we gestated and as were born, our fascial framework, visceral framework didn't expand as naturally.

That's why most babies with tongue tie have rigid hamstrings, calf muscles, adductors, peck girdles, SCMs, you can just name a bunch of other things. So even though they're going to be upright people who walk around, they are crawling struggles if they crawl, right?

So I think we need this, and I thinks 60 people on the planet have pharyngeal arch formation issues due to my my data and others' data, I think that's way more than what was said before with these issues.

More than half the people on the planet need that specific pairing. So I've seen so many people who have done that simple contracting, expanding with breath work that really provides such relief and such expansion and a good nourishment to their bodies.

I love that. That's such a great practice or takeaway as we wrap up. And I'm going to do that later. Go through that and practice that. I absolutely love that!

Well, you shared so much, Dr. Neal. Where can the listeners learn more about your work if they want to explore more this floor to mouth, maybe see you as a patient, and then, of course, a little bit on the dancing, if you don't mind sharing that?

If you Google floor of the mouth and Neil, you're going to find me. But if you look up Dr. Neel Bolchandani on Instagram, and my name is N-E-L and you'll find everything out there.

Where to find Dr. Neel and closing remarks

It's great that I do virtual sessions. So if you can't come to me, I can do a virtual work with you. And then I am in Santa Barbara, but I due once a week trips to L. A.

to see patients. I also go up to the Bay Area to sea patients and I'm going down to San Diego soon. Even if your planning a trip to California and you want to do some reset sessions where we do hours of body work over a couple of days, happy for people to seek me out.

that way. And yeah, I'm just excited to share more. I have a podcast that you've been on the episode just published yesterday called Compromise to Alchemize.

So you tune in that and reach out. so I'd be happy to kind of talk with anybody who wants to reach and find some place to find the work that I do and where it comes from.

Another shout out to the to Malpa Institute for expressive dance, expressive movement. You can find some good resources there. And yeah, inevitably when people come for these reset sessions, we usually do them a part of it at the beach where we spend an hour reframing their movement patterns, their mindset, take them through the five M's.

So sometimes there we'll see people get into this fluid movement and they've got it on video so they can take that back there with them to home and use that as kind of a blueprint for their own practice.

Got it, I love it. I loved your work. Love your approach, the way your mind works. And just as a dancer, love that you do dance. So thank you so much for sharing your knowledge.

The listeners will absolutely enjoy this. Thank you, Dr. Neal. My pleasure. It was so good to be chatting with you and I really enjoy the ways you think.

Thanks for leading our conversation so well. Of course, thank you. And then to all the listeners, Thank you so much for tuning in. I hope that you enjoyed and please, please do check out Dr.

Neal's work and turn on that music and move.