Structural Neurology: What Facial Asymmetry Reveals About Your Health Transcript

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Introduction to visual health and chronic symptoms

you're definitely going to see anxiety with a lot of visual issues. And that's because your brain looks at your visual system as its role is safety. And if your eyes do not work well together, so if you have an eye turn, your eyes then can't work well together.

If you're overwhelmed with chronic health symptoms and still don't have answers, you're not alone. I'm Dr. Javin, and on redefining wellness with Dr. Javin, we'll be exploring root causes like Lyme disease, mold, and parasites, and I'll guide you with simple and practical steps towards real healing.

I'm excited to have this conversation, Elena. So I've known you for a little while and I was at a conference. You were literally looking at people's faces and you were just like, oh, well, your eyes a little bit, a little further out or a little lower, a little droopy, or your nose is shifted.

And you're like, well, that means this for your nervous system. That tells me that your body's in fight or flight. And I was just like, what is happening?

How are you looking at my face and telling me what's going on? And then you're like, well, I'm a neuromuscular scientist and my job is to look at your body and understand how it's basically torsioning and then what that means to your health.

So one, what is going on?

Reading facial patterns and nervous system clues

What are you doing when you're looking at someone's face? I'm looking at patterns. So everything that I do has a basis in looking at underlying structural patterns, which have a neurological component.

So that's what I'm actually looking at. But I'm also looking at lifestyle. I'm looking at their health history. And I can see that through facial and body profile.

So when I go on Facebook or Instagram, somebody's got like this, you're beautiful because you have facial symmetry thing and there's like lines on it.

You're telling me that that imbalance actually means something to like internal health. It's not just something we're born with and how our body is. Yeah, so babies, if you look at a baby, their face is plump, it's round, they have nice wide pallets.

There's a reason we think babies are so cute. But what happens when we grow up into adulthood? We're all symmetrical as babies. And then we have these forces from the birth canal that make us symmetrical.

And we have these forces from life that give us asymmetry. So head injuries, different history from orthodontia, visual history, cranial strains that can occur due to trauma, due to traumatic brain injury, etc.

And so as we look at adults, we can actually see life in someone's face. So when we see significant amounts of asymmetry, this kind of tells us what's happened to them and it also tells us where they might be headed in the future.

So it's a really good viewpoint of what's going on with that nervous system of that person. So looking at somebody,

if I see even looking at celebrities or looking at Facebook, somebody with significant asymmetry is going to kind of red flag to me that their nervous system might not be in a spot to be able to handle any more stress.

So can you fix facial asymmetry? You can make changes, yeah. So in my opinion, you can change anything that you weren't born with, like a congenital issue.

You can always go back to where your body was at when you were born. And when it comes to facial asymmetry, I have seen dramatic shifts in what people look like when they start working with somebody and then the changes that we see.

So we're just gonna start calling you the beauty coach. We're just gonna fix faces. You're gonna be like the next matchmaker. It's like, here, we're gonna work on your nervous system, fix your face back to asymmetry, because that's what the standard of beauty is today, right?

That's what they say anyway. It is definitely the standard of beauty, in my opinion. And also, this is an opinion that is around the world. Symmetrical faces are more beautiful.

And there's something that that level of attractiveness actually is increased when you're looking at somebody with a more symmetrical face versus significant asymmetry.

How asymmetry reflects health and development

Obviously, some bits of asymmetry are normal. You should have a little bit of asymmetry. But when we see excessive, that's when we know there's a problem.

And yeah, you can call me the beauty coach. That's fine. I'm cool with that. There's a lot more to looking at someone's face and fixing someone's face than just the face itself, because I have to start with the feet, with the rib cage, with the pelvis, and then the full picture is that we'll see changes in somebody's face, but it might not be the first thing that takes place.

So no, if you look at reasons for someone to be attracted to someone else, not from societal means, but from the means of reproduction or means of health, right?

So a lot of times there's something tied to like taller men means that they're able to defend better. They're more, um, They're capable of being more protective and women that have more curves potentially means that they have higher ability for fertility.

Are we looking at each other's faces and saying, oh, that's not symmetrical. This person's unhealthy or dysregulated. Is that what's really happening?

Yeah, I think it's so subconscious that we don't realize it, but I definitely think it plays a role. And you know what else plays a role? Vocals. So like, listening to someone's tone and pitch of their voice.

So think about men that have deeper voices. to me that tells me their vocal cords are actually in a proper position to vibrate in the tone that it should versus like um if they had a more high pitched voice as a male whereas females are supposed to have higher pitched voices and same thing there our voices are meant to be like that to attract are mate.

And so when it comes to facial symmetry, I think it's more, there's a structural component and then there's also a functional component because if I'm going to see symmetry, I'm usually going to see head and neck posture is going to be in a better position alignment to actually get those vocal cords to vibrate at the right levels.

So there's even deeper underlying themes there. So the next biohack is come see you, fix your face and your voice, and then get back in the dating pool.

Got it. Okay. Wish I would have known this 20 years ago. So how does this work? Someone comes in to see you and they've got an eye that's a little bit further out to the side.

And what are you doing with them? Yeah, so I'm actually looking from a very holistic approach. So the medical system today is like very siloed, as you and I both know.

It's very individual healthcare. So if somebody comes in with shoulder pain, they're only going to look at the shoulder, and that's very problematic. So if somebody comes in and they're telling me, look, they have some problems with their visual system, they might have migraines and their eye is a little off, I'm not just going to start at the face.

I'm probably going to start at the feet. I'm going to look at the rib cage, the pelvis. I'm looking at asymmetries throughout the entire body. Facial asymmetries is something people are most interested in, but facial asymmetries do not come alone.

They usually come with rib cages that are asymmetrical, pelvises that are asymmetrical, and feet that are asymmetrical. So I'm addressing all of this in one, and that's how we're going to see long-term changes.

Got it. So I'm curious, you know, we're talking about just for instance, let's just talk about an eye that's turned out a little bit.

Whole-body approach to eye alignment

What are some symptoms this person might be experiencing more on the neurological side, right? So as a neuro and muscular combined specialist, would a person with certain facial torsion, like let's say the eye coming out, is this going to cause anxiety or depression?

What are we going to see with this individual? Yes, so if we're looking at someone with an eye turn, now we can look at it from multiple perspectives.

So when it comes to actual symptoms, you're definitely going to see anxiety with a lot of visual issues. And that's because your brain looks at your visual system as its role is safety.

And if your eyes do not work well together, so if you have an eye turn, your eyes then can't work well together. then your body's getting this perception of its environment that is off.

So we're gonna see heightened anxiety, we're gonna see clumsiness in children and adults, we're gonna see inability to catch a ball, we're gonna see things like car sickness is a huge one, and just overall functioning being a little off.

They might have struggles with school, they might have struggles with learning. So that's a lot of things that I see with visual issues. And the fix, I don't really like to say fix, what do you do for somebody like that?

So like I said, I'm gonna look at the whole body. I'm also gonna a lot of times refer to behavioral optometry because we might need a prescription that can realign the eyes in a way that helps.

But the timing of the referral is really important because I'm not gonna just refer right away. I need to make sure that I'm addressing those cranial torsions.

So a torsion is a twist and we're gonna see these twists occur in the entire system. And these torsional patterns can be changed. They just need to be given the right input.

And they need to be given the right input from the ground. They need to be given the right input possibly from the dental component and from the respiratory system.

So we can actually make changes in facial asymmetry, in cranial asymmetry with light touch, but also with breathing patterns. So this is all in combination how I would treat a problem like that.

All right, so let's go down this path because immediately upon listening to this, people are gonna be like, wait a minute, I can change the structure of my face.

And we're just talking about face today. You're also saying, you know, you can change the full body structure. But if we're talking about face, you need to check their feet to see if they need some orthotics.

You need to check their body posture because if they are tweaked from sitting like I'm sitting right now, which is poor posture for sitting long periods of time, that can pull on the face, but it's also how you breathe, the dental work you've had, you mentioned optometry, so we're talking about like glasses and contacts?

Yeah. so you've got a team of people that you have to work with to make sure somebody's getting the best of this so now i'm going like wait a minute so for my fantasy football team should i take the like profile picture of the football player and be like are they going to catch the ball this year and like look at if their eyes is matched this is my secret for next year that way i can win my fantasy league all right off topic there but If somebody's going to an eye doctor and they're getting typical recommendations, what are some things to look at that's going to help them be more effective going to an eye doctor?

Yeah, so first off, I wanna talk about how an eye exam typically looks in the traditional world.

Traditional eye exams and overcorrection

You go in, you sit down in a chair, they shut the lights off, you bring your head forward into the ferropter, and there's a lot of problems with just what I talked about right there, because our visual system functions outside with natural lighting, and it functions to keep us upright and to be able to move in space.

Okay, so if we're sitting, We're negating that upright factor, so there's a problem there. Your visual system changes from sitting to standing. And then with the lights off, that's not how we function in the real world.

Your eyes need real world to actually be corrected as if it's as close to real world as possible. And then we are looking at it with our head coming forward.

So now we have a forward head posture going on, which is just going to continue this cycle of people being in the wrong prescription. I see that all the time.

So right then and there, traditional model for eye care a lot of times is problematic. And so what I do when I work with these optometrists, and I've trained them to be open to doing this, which is a very different model, is we'll actually do a lot of things standing, and we do it with the lights on.

There are some optometrists that actually have windows where UV light is allowed in to permeate, and so the eye is actually getting exactly what they get from the outside world.

We're not quite there yet, but with my team of optometrists, we do a lot of things standing. We do things with the lights on, and we're not bringing the head forward into the foropter.

And if we are, we're always double checking it's standing. So there's a standard that's completely different. And that's why we, I'd say 80% of my patients are over-corrected in their visual system when they go to a traditional optometrist.

And that is just because of the standard of care with that. So if 80% of your clients are over-corrected, what are some signs and symptoms that your contacts are wrong, your glasses are wrong?

Yeah, so people may not realize it because they might have been overcorrected for a long time. But one of the

biggest signs I see is just chronic neck tension.

So they put in their contacts and glasses for the day, and they start to get chronic neck tension that increases throughout the day. Another thing that happened to me when I was overcorrected is my sleep really suffered.

And I noticed that when we changed my prescription and we decreased it, there was a difference in the depth of my sleep. So I was able to get into deeper sleep.

Because what happens when you're over-corrected is your body tones up, it tensions up, it gets into that sympathetic overdrive. So when you take that off and you let the body relax and let the eyes actually work a little to see in the distance, the body's able to relax.

It's able to get more peripheral view instead of so focal. So the biggest thing I would say though is chronic neck tension. Or if somebody has, let's say hip pain, just lasting pain that doesn't go away.

Wow. So 80% of people have overcorrected eyes and it's causing tremendous symptoms. Got it. Okay. So then the only time that most optometrists are hitting the mark are for your, you know, keyboard warrior or your radiologist that their job is sitting doing a forward head posture in front of a computer in pitch black.

Dental structure, jaw development, and implants

the rest of us if we have eye correction need to go somewhere else and get a life like your lifestyle tested eyes all right so we're gonna move on from this because that's enough to blow a few people's minds they're gonna be like oh okay so then dental I love talking dental with you because well I hadn't been to the dentist for way too long and I went back to the dentist and I had some issues but fortunately I didn't have to have a lot of work done but you were giving me all kinds of advice on here's the right way they do it this is the right kind of testing how many what percentage of people have been to the dentist and have different types of either implants or treatments that are causing them more problems what percentage of people I would say the majority of our society has implants or root canals.

And I can't give you an actual percentage, but it is more rare for me to find somebody that has had no dental work, no cavities. I probably have only seen a handful in my career working with people.

And cavities, they're not that big of a deal. It's really problematic when we see teeth that have been pulled that don't have an implant replacement. And it's problematic when we see implants that, you know, we've talked about this at our titanium or our root canals.

Those are real problems. But when it comes to the structure, specifically structure, not talking about, you know, what titanium does to your body, just talking about structure here, one of the biggest problems I see is when people get their premolars removed for braces.

And this was something that happened a lot in the past, and it is decreasing today. But when we remove teeth in the mouth, we lose structure in the face.

So we're going to see significant amounts of asymmetry and collapse in the palate. Think of somebody with dentures. When they take their dentures out, everything is just collapsed.

So that's what we see with kids and adults that have had their premolars removed and have not gotten any implant or any tooth removed. We're always going to see some type of bony collapse in that region.

So that's problematic. So I was joking earlier and I called you the beauty coach and I know it's not what you actually are but is it so you're saying like for the guys that want that like chiseled jaw I mean there's these like tools or people are biting down on I'm trying to build muscle if you want that jaw you got to have all your teeth so taking your kid and getting teeth removed as a child removing your molars maybe even wisdom teeth is leading to this like sunken back draw thing Yeah, so for sure.

And another thing too, what you just touched on, like all these exercise tools to get that chiseled jaw, some of them are okay on the market, but the problem is if your jaw is asymmetrical in the first place and then you're doing this thing where you're clamping down using your massagers, you're really trying to chisel your jaw, you could be doing that very asymmetrically.

And I've seen that. So there's also something called mewing where people are really pressing their tongue up to the roof of their mouth. Again, that's okay to do, but really make sure you're not asymmetrical first.

But yeah, there's a lot with the jaw that has to do with asymmetry, especially when teeth are removed. You're not going to have that chiseled jaw if you've had teeth removed.

It's just very difficult. So one of my biggest advice to people is if you have to get a tooth removed, let's say you had a root canal that's infected, you have to get it removed.

Always get an implant and make sure you go to a biological dentist for that implant so that your health is in check. So interesting. The things that we feel like in medicine are almost not even medicine.

They are, but they aren't, you know, dental, eyes, body movement, physical therapy, personal training. All of these things are like outside of the normal health regime.

And those are the things that are affecting facial asymmetry. And we just keep talking about beauty because this is interesting. I think people are going to be like, oh, wow, that's incredible.

But let's talk about chronic health for a moment, because that's what I do. I work with complex chronic illness. I work with mast cell and SIRS and Lyme disease and parasites and people like, well, those are those are things.

But like, what does that mean? Or with people that are anxious and tired and their brain isn't operating the way they want it to. They have depression or brain fog, you can't recall words.

And you mentioned earlier that if facial asymmetry is there, it can be a different sign, a visual sign of somebody's brain being like that. So if you correct the jaw palette and you correct the eyes, how is it going to affect those complex situations I'm working with?

Yeah, and I see a lot of those patients too, so I can relate.

Chronic illness, breathing, and nervous system support

If you go and correct these things in the right way, if you're looking at it from a neurological perspective, if we're giving that body better sense, sense of the ground, sense of their spatial awareness, their environment, then you're going to see pretty significant changes in their health.

So I see so many of these patients come in and they do have chronic health conditions and their facial asymmetry might be on their list of problems, but maybe not number one.

Usually people in pain, their number one issue is they want to get out of pain. then they care about their facial asymmetry. And so what we'll see is things will start to shift in their body.

Their facial asymmetry is one of the later things to change. But as their pain decreases, we'll also see changes in facial asymmetry. But I do think facial asymmetry is a very big red flag.

So if you are out there and you're a provider, you're working with these patients, and you notice one eye is much higher than the other one the jaw is shifted either to the right or to the left one ear is more flared these are things to look out for you might not necessarily know what they mean but if you see them it's a red flag so the secret sauce to solving problems is to take a full awareness be understanding that If you can't start with meds, herbs, homeopathics, maybe you need to start with new contacts and glasses, new dental structure, which, man, that's

going to take a while, but it can happen, orthotics, body movements to reclaim the body feeling safe within its own skin.

Yeah, and just knowing even if you can do all of this together, right, you could go see somebody who can work on the herbs, who can look at all the things at once.

That's really where you're going to see the best care because medicine is not supposed to be siloed. We're not supposed to be treating patients in individual parts.

You are one person. So you really need to take awareness of that and go to a provider that's going to look at you in a full fashion. And that's really where I think what my practice does really well.

What you do really well is we're not just looking at pieces of the puzzle. We're taking the whole piece of the puzzle together and actually putting the puzzle together.

Yeah. I love what you're talking about because it's just unheard of. I mean, people come into my clinic every day that are in very bad situations and they feel really stuck and sometimes they can't tolerate anything oral and they're like what do I do and they don't have the ability to go to the gym and work out because their body is completely decimated like it is just not able to get started but I bet they can go to an optometrist if they can and have you ever seen somebody actually have like a what some would call a Herxheimer, it's not a Herxheimer reaction, but a Herxheimer detox reaction where they're like, I got new contacts in and I'm having this negative reaction, but it's actually the nervous system itself coming back to health because it's sensing a almost safety mechanism.

Yeah, I love this question. What I love about what I do is that we will see this, but it's more rare than when you're working with herbs. But certain very sensitive individuals are going to have herx reactions to really anything.

I always start with breath work. The main component of what I do with people is I teach people how to breathe. And we use different, it's called positional breathing.

We use different positions to change where their airflow goes. I have seen people have problems with that, so I always have to back up, especially for my most sensitive cases.

It's pretty rare. Most people are fine, and they do a great job when I give them any sort of technique. But yeah, we start with positional breathing even before an optometrist, but there are some people that are just very far gone that their body is so sensitive that they actually have to get them out of their prescription first.

or get them into a dental appliance that gives them some balance in their bite before they can even tolerate other things. So I like to wait on those higher level integration skills because sometimes people have reactions to that.

Think about changing your bite on somebody where you're giving somebody a different reference in their mouth. That can for sure throw people off. So I really always start with the positional breathing just to make sure that they have a baseline that we can build on.

But there are some people and some of that is knowing your audience, knowing who that person is that you're working with so that you can treat that person individually and give them the best care possible.

You know, one of the most interesting things that I've run into is biohackers, you know, these people trying to optimize these professional athletes versus people that are complex chronic illness.

And they're like, we're different, we're not the same. I'm like, sort of, sort of. The difference is your bank account. The difference is literally your bank account of your body's ability to adapt to your body's energy.

So let's just talk about that for a moment. Cause I want to kind of close out with this because I want people to understand where to place this information.

It's like, it's fun to talk about beauty, but if you're a professional athlete and you are this, you know, what seems like unbreakable, just capable of anything person.

A lot of times, your body's just not burdened the same as someone else's, right? So you've built this bank account that has a whole bunch of money in it, and everybody knows you got a bunch of money going out to dinner doesn't cost much.

Athletes, chronic illness, and integrating the approach

Whereas, if you're complex chronic illness, your bank account's depleted, you're probably in bankruptcy. and you don't have any money to spend so dinner you're not going out you're hoping just to get food and that's complex chronic illness the solutions that make somebody feel better are still going to be similar so If you see a professional athlete, you can help them by looking at their face and go, if we tweak this, that's going to help improve your body by taking off the burden or expenses which allow the bank bank account to grow.

The same thing works for someone in complex chronic illness. But what I run into is going through that process still takes effort. So I tell people all the time, doing a detox takes energy and it will replenish you just like going to the gym takes energy but then you build back stronger getting your eyes corrected your body will then have to go through a healing journey that takes energy you have to have that level of energy to feel it the same thing for a professional athlete when i'm working with a biohacker somebody that's really really healthy when we make positive change it still takes energy short term but then it leads to more energy being made so If you're listening right now, no matter where you are on that spectrum, you just have to figure out when to fit this information in to the journey you're on.

And you know, I really appreciate you talking about this because it's not heard of and there's just really no one out there talking about how do I combine the physical body, the nervous system, the eyes, which by the way, your eyes are connected directly into your brain, directly into the central nervous system.

Your teeth have a direct path to your central nervous system. If you're not dealing with these things, you're missing the boat and it's probably gonna hold you back from getting the maximum possible outcome that you can get.

So thank you for coming on today and speaking. Thank you so much for having me. And how do people get a hold of you? My Instagram, it's at Alina Kanner.

And yeah, most of my stuff is through that. If you look for me on other things, it's usually at Alina Kanner. Thank you. Thank you for tuning in to Redefining Wellness with Dr.

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