Trauma: Because It's Never "Just" Lyme Transcript

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Introduction to trauma and Lyme healing

Everyone. Dr. Tom Moorcroft here for you with this episode of The Healing from Lyme Disease Summit. And we have a super special treat today. We are talking to Dr.

Aimie Apigian who is one of my best friends. And I just. Ever since I met Aimie, I knew that we needed to get her in front of our Lyme community because she talks about, you know, how life experiences are stored in your body, how it can potentially lead to in, you know, susceptibility to infection, immune suppression and other sort of breakdown of the body, that disease that we always talk about.

And she's really become the world's leading expert in how to be in your best state and to recover from this thing we call trauma. And I know that word we've all heard about, but she has this approach where we look at the biology of trauma and what it really means.

So today we're going to be talking about the biology of trauma. We're going to dove into what that really means and the simple things that you can start to think about and do so that you can start to really ignite that self-healing mechanism within you so that you can live your best life.

Dr. Aimie, thanks so much for being here. Thank you, Dr. Tom. It's always good to be here and to talk with you. Yeah, I'm excited. I'm so honored that you take the time out of your super busy schedule to to talk with us.

And I purposely kind of leave out a lot of the bio reading because of the blah, blah, blah. I mean, I just know that like, you know, you've got the great smile, you've got this amazing heart.

And the thing that really gets me is like, you know, your background is in addiction medicine. And it's one of these things where I feel like a concept that comes up in the Lyme community is some people try to say that our folks are who are suffering, are getting addicted to being sick and addicted to their to their label.

And so they actually aren't sick. They're just the psychiatric person. So I don't think that that's true. I think there's a component that can be true.

But I was just hoping that you could kind of tell us a little bit about your background and what got you really into trauma and then kind of like maybe riff a little bit on what's actually going on because we don't all want to be sick, but sometimes we act like we do.

Yeah. I never saw myself going into addiction medicine. I was actually headed into general surgery and I was in general surgery starting to see a lot of patients who were having body sensations and chronic physical health symptoms that were showing up and didn't have a lot of answers.

And very similar to this where it's like, do you not want to get well? Are you really the problem? Right? Like, are you starting to make stuff up?

Dr. Apigian's background and the roots of trauma work

And I think that as as physicians, when we only have a certain number of tools and those tools don't work, like that's kind of a tendency that sometimes we can have is to be like, well, it clearly is not anything wrong with my tools.

It clearly is you. That's the problem. Exactly. And what happened was that I had adopted a son during medical school and while I was in general surgery, things kind of unraveled for me personally and I had thrown myself into learning about attachment and early life experiences to try to help my son.

He came into my life when he was four. I adopted him when he was five, and he came with a lot of emotions and a lot of behaviors with those emotions. And he was not getting better with time.

And so mean kind of making that commitment to see him through this and do whatever I could. I learned everything that I could. And it led me down this path of looking at the adverse childhood experiences, things that I had heard about in medical school but hadn't studied per se.

But now this was my home life. This was my son that we're talking about. And I'm not just looking for information. I'm looking for transformation. And what are the things that are really going to work?

I was surrounded by some of the best child therapists, child psychiatrist, and their therapy modalities were not helping him. In fact, they seemed to just be stirring things up.

And when I would take him into trauma therapy, he would seem to become more triggered from his traumas rather than it seeming to help resolve things. So it opened my eyes to so many things to him that I never had even thought about before.

I had never even thought about before. One thing that I had never thought about was my own childhood and my own life experiences. I never would have looked at my childhood and said, Oh, I had trauma, right?

And so when in 2014, I came down with chronic fatigue, autoimmunity, and I was overweight, I was depressed, I was anxious, but I was on to antidepressants or mood medications already.

I was like, wait a second. Like all of these things that I'm experiencing in my physical health, I know from my studies are directly associated with these adverse childhood experiences.

Why is this me? Why is this my body? If we were talking about my son, I would totally understand. And I would. If it had been my son, Tom, I would have almost probably done what I see a lot of people do and accept that this is just the reality without looking for solutions and like, well, what can you expect?

That was his past, you know, and we're going to just have to live with it and make the best of it. And when it was not something that I related to from my life experiences, then that piqued my curiosity enough.

And it also motivated me because I really wanted to get back on my bike, and my bike is my place of freedom and peace. And I knew that I had to get back on my bike if I was going to ever be happy.

And so that was a big motivation for me to figure out why is this my body that is having all of these symptoms associated with the adverse childhood experiences?

And what I discovered was that we have completely misunderstood trauma, completely misunderstood trauma. And we have actually labeled much of what we call stress incorrectly.

There is so much of what we would call stress, and it's actually trauma. And there is a whole trauma response that happens in the body. And again, many people just think of, oh, trauma and your mind and you need to rewire your brain and you need to do all these things with the brain but not understanding, you know, like the body goes through a trauma response.

And this was so evident to me when I became an addiction medicine doctor. I mean, talk about living face to face with that trauma, seeing that trauma, walking in the door, their whole body embodied the weight of their life experiences and the coping mechanisms that they were doing to not feel that weight.

And when I look at the effects of trauma, not stress, the effects of trauma on the immune system and one of those patterns being long haul syndromes, whether that's a long haul syndrome from mold, long haul syndrome from Lyme susceptibility to Lyme, these are all things that are a result of this trauma response happening in the body and the body not having been able to come out of that.

It is still chronically living from a place of trauma. What's so interesting, because, I mean, so many of these things are what I see in our Lyme patients who walk in and and I should really it was I wanted to point out one thing in the beginning, you're like when you're talking about your son, you said he came with a lot of emotions and then he almost said another word, but you stopped.

And I think that this is so important. Everybody like the labels that we choose.

How the body enters a trauma response

And I just used one, which is why I'm bringing this up, because I'm going to rewind what I just said, because I hear the word limits and molds and this is these are just labels that we just reintegrate this into our body and put it even deeper. So Aimie stopped and she didn't say emotional baggage, which I felt like you almost did, but you said emotions.

And I think it's really critical to understand that even if you did say emotional baggage, you can rewind and say, well, I didn't say emotion. So I'm going to say a lot of people who come into my office who have experienced Lyme disease and other chronic tick borne infections, mold and mass activation, you can totally see it in their bodies. Yes.

And I think that we all know this and we all say this every day. So what how? I mean, this is like a totally different way because a lot of people, the way I learned it in medical school was it's all super territorial.

It's all up in your brain. And essentially, like I would have diagnosed you with a medication deficiency about 15 years ago. I now know differently. So what is it?

How do we why are we experiencing this so much in our body? And why am I numbing it with alcohol or drugs or escapism? Because one of the other things I find a lot in our patient population is they're not in their body and people don't want to be in their body.

They're like that. And that's part of the reason I think they don't heal because they're like, over here. And it's like anything that any little turkheimer, any little shift in symptoms triggers fear.

There is so much fear when it comes to our own body and our own body's reactions. And that is especially true when it comes to the trauma response. There are a couple of different names for the trauma response.

One word is the freeze response. Another word is talking about the dorsal vagal response. But in essence, we're still all talking about the same thing, which is a process that might be helpful for people to understand as we talk about why they want to be disconnected from their bodies and when we go into a stress response, a stress response is actually a very high energy response.

And if you can think of, you know, that mom that lifts up the car in order to get her child out from the car, that's the child. Or you think of these other superhuman actions, that is a stress response, a full blown stress sympathetic response.

And when the body decides that it cannot overcome that challenge, there is literally a switch that happens in our biology, and it takes that response from stress, which is all adrenaline, and it runs down the sympathetic chain down our spine.

It takes that response and it immediately switches it to what's called the dorsal vagal response or communicating through the dorsal nucleus of the vagus nerve.

And the vagus nerve comes from your brainstem, comes down your throat, down into your digestive system, spreads out across your stomach, into your other very tips, into your pelvis.

And it runs all of your vital organs, your vagus nerve runs your lungs runs your heart, it runs your digestive system.

It runs you and your machinery called your body in order to keep you alive.

And what happens is that when that switch happens and now the body is going into a trauma response, the whole body shuts down and everything from our metabolism shuts down, our digestive system shuts down, our heart rate slows down, our breathing slows down.

And it almost is like your body is going into a place of hibernation. It's shutting down because it thinks that, well, the best way for me to survive this situation now is for me to just try to ride it out.

And in order to ride it out, I cannot expend any excess energy, every little ounce of energy I need to conserve. And so it holds on to everything. It holds on to inflammation, it holds on to water, it holds on to calories and to fat.

It holds on to everything because it is in this place of I can't let go. It's not safe to let go. I need every possible resource that I have. So this trauma response is a whole body response and it is extremely uncomfortable because we go from fighting for ourselves, which we all love to feel that right.

Like we love to feel like we are fighting for ourselves. Her, and we love to feel that aliveness. And we love to we love to feel that adrenaline. And when we go into that trauma response, when our body experiences that shift and into the trauma response, what we feel is heaviness.

And there are certain thoughts that come with being in the trauma response. The thoughts don't cause the trauma response. The thoughts come as a result of the body going into trauma response.

And some of those thoughts are oftentimes around this idea of, I don't care, do whatever you want, I don't care. And it's not that I really don't care because I cared in the stress response, Oh, I cared a big deal in the stress response, right?

But now I don't have the energy to care. So kids run around the house, do whatever you want. I'm just going to sit here on the couch with my feet up, drink that extra glass of wine, turn on a movie, pull out my phone, get on social media, scroll mindlessly.

Anything. Anything to conserve energy but to also be disconnected from what I'm feeling happening in my body. And that disconnect is always part of the trauma response.

And so and this this is what I really learned in my years as an addiction medicine physician, is that as people come out of that disconnect, Tom, they start to feel. The.

Feelings, those that awful word feeling, they start to feel. And if we were talking about a diabetic who had started to have neuropathy and we started them on blood sugar control and a better diet and out walking and guess what?

Their nerves start waking up and they start feeling their feet again. Well, what is it that they feel? They feel the pins and needles. They feel the pain.

Now, for me and for the diabetic, of course, like we're celebrating. Why? Because you can feel your feet again, right? Like we know that we're on that path towards healing.

But someone who has been in a trauma response and there is a numbing effect that comes with that trauma response, it's one of the benefits that it gives us is that it numbs physical pain, emotional pain.

It numbs us a bit. And so as we come out of that disconnected, numbed out feeling, we start to feel all of the fear, all of the anxiety, all of the terror that put us into that place of overwhelm.

And it is extremely uncomfortable. And so that is one stage at which many people get stuck. And in that sense, they it can look like they choose to stay sick because getting better involves starting to feel again.

And that is a very uncomfortable place if you don't have the right tools. Well, that's so interesting because I see so many people and, you know, we're talking the same language, you know, sort of the whole dorsal vagal and the numbing and coming back to feeling.

And it's like the a lot of the folks that I work with and the people that I talk to and sort of the community that experiences some of these infections we're talking about in this summit are, you know, it's like they start to get better and and then it's just almost like there's like a rubber band that snaps them right back, right.

And it's like an every time. And so I see it two way, two main ways. One is the two, the two, someone who's not who doesn't understand it and experience it.

They think they're in the illness mentality and they're like, Oh, they just want to be sick, which is not usually true. And then the other side is my patients are very frustrated because they're like, I'm doing everything I can, but it's like they have this.

Safety, labels, and chronic illness susceptibility

I think of it as a reflex protective mechanism where the reptilian brain kind of pulls them back because they don't feel safe. Exactly. So, Tom, this is one of the coolest things that I want to share with you.

So I've designed a 21 day journey that I have started to have all of my patients go through. And then it was so successful that I opened it up online.

And now anybody can go through this 21 day journey. And I have started to measure the change that happens. The biggest change that happens, 60% increase in the false sense of safety.

People who go through the 21 day journey experienced a 60% increase in their internal felt sense of safety. Do you know what that results in? That results in them sleeping better.

That results in their digestive system working better, that results in less anxiety, that results in all this long list of things. But it came as a result of my body, actually, for the first time feels safe.

Most people coming in don't even know that they haven't felt safe. That's the crazy thing. They don't even know that they haven't felt safe. Well, I think the system just has this focus on the symptoms.

They're just like, oh, like and it's like because we're looking for a pill. And I think and maybe I'm going to go way out on the on the limb here. I think a lot of the reason the doctors aren't willing to go to that place to help you heal the way you really need to heal, which is to feel there is because they don't want to feel their own crap.

And I know how the best doctors I've met you just described you you're sort of experience of of emotional trauma and of the chronic fatigue and the overwhelm Lyme disease.

Yeah, heavy metal toxicity. I was in the same place they are. And originally, like every single psychiatric medication you could come up with didn't work, but no one was willing to just say, let's kind of take a look at it.

So, I mean, like the safety and getting what do we do? I mean, obviously, like we should just go do a 21 day journey with you, obviously. But I mean, like, what are the things like what?

How do we know that we need to actually start to get back in our body? Because I think that a lot of us are just kind of walking around. We don't we're just like, you know, right away and we're scared and like some.

But I think there's like the scared that we know and then there's the scared you're talking about because, like, I'm scared of Lyme disease. Say, and I'm scared of my joint pain.

And a lot of people are afraid their brains are never going to come back on. But what you just said is that's not the

thing I need to be focused on to begin with.

No, not at all. Not at all. And when we focus on that, we're always going to miss the mark, because that's just the downstream effect. We've got to go to the root cause.

And for so many people and I'm going to say for everyone with a chronic health condition, the true root cause is a true lack of a false sense of safety because the nervous system drives our health.

And when our nervous system is in a great place, meaning that we actually feel safe in the world, we feel safe, we feel secure, we feel that someone's got our back.

We know who we are. We're comfortable with who we are when those things are in place. And our nervous system is what's called in the parasympathetic state and at the appropriate times, sometimes stress is appropriate.

But when our nervous system has the health and flexibility, it will come out of that ripple effect and it will have us in our best health. We won't even be susceptible to the things that we are exposed to because my goodness, like we are exposed to so many things in the world.

But it's it's not the exposure, it's the susceptibility. And that susceptibility is created by our own internal system. And so many people don't realize that safety is a body sensation.

It's not something that you tell yourself with your mind. And this is where I see a lot of people doing the right things. They're doing the meditation.

They're maybe, maybe even doing yoga, they're maybe doing affirmations or mantras or whatever it is, but it's not getting down to their body level tone.

Right. And there are so many things that can stay as a head level, but they're not dropping down in the body. How would we know that it's not dropping down to the body?

How would we know that the body itself is still in a chronic trauma response by our health? There are three ways to know that the body is operating from a chronic trauma response.

Our physical health is one of them, and any time that you have chronic health conditions, autoimmunity, chronic pain, fibromyalgia, chronic fatigue, any long haul syndrome, all of those, all of those are clearly associated with a chronic trauma response.

So when you are having symptoms of that, your body, that is one way you can know that this is what's playing out in your body, whether you recognize it by your thoughts or or again, looking for events in your life to try to explain why your body has a trauma response is not as helpful.

It's just looking at what's going on in your body because that is a clear indication. It's one of the ways that our body gives us this message of, Hey, I'm operating from this place of trauma.

You know, it's just so much of this is exactly what the reason I wanted to have this conversation and really what our whole summit is about is saying, hey, guys, you have so much control over this.

And it's like when we reach outside, I'm just thinking about how we're always many people, often, not always, but often are reaching outside for the newest gadget, the newest medicine, the newest doctor.

Oh, my friend said on the outside, I'm like, But I don't usually have people come to me and say, you know, when I got when I really felt into my body and I did the practice that was allowed me to ground into myself and had that experience that just doesn't come across my doorstep.

No. And and it's been really hard for me to see some of the language that has developed around some of the

different the different spaces around this word suffering.

And even my physician colleagues will use that word and they'll use it in their intake and assessment forms. What are you suffering with? And they'll use it as language.

Oh, my patient suffers with this and then the patients take that on. Oh, I suffer with and then whatever symptom they want to fill in that space with.

And I'm like really? Do you really want to take that on? Because whatever you're taking on, like your body is embodying that. And when we use those kinds of words, it further deepens.

And in grains, this chronic trauma response that our body is in. So, no, I don't think that we can just use our thoughts and come out of a chronic trauma response that is not at all consistent with the science and the biology of what happens.

Right. And whatever we are focusing on and the words that we are using and the actions that we're choosing to take or not to take, it will either be moving us toward the healing journey or it will be further deepening our experience of a chronic trauma response in our body and actually making it harder for us to ever experience healing with whatever symptoms we're having.

I think two big things come up for me and again, go back to that label.

Physical illness, movement, and coming back into the body

I mean, so many I mean, even if I leave out like, you know, different infections and people putting monikers on themselves of what they are so they can be part of a community, which I do think that that's sort of it's an interesting place to be where like in that chronic trauma response and you get dorsal, vagal and frozen, you tend to withdraw.

So community can help you heal. And engaging in community is one way to potentially help you heal. But at the same time, if you go into a community where we all just label each other, but I see so much mental illness labels going on in society in general.

Like, just like, you know, I'm scrolling on something like if any of my friends know that, like if you send me an, you know, if you send me a Facebook message, it might be a month and a half before I even know it's there.

So but I know so many people are doing the scroll and it's like I'm just comparing myself to a snapshot of a picture that's been doctored of somebody else or, you know, it's like and we all label there's so much labeling going on these days and every kid I know has ADHD and bipolar and this and that and that and that.

I'm like, the label bothers me because, like you just highlighted, it brings it, it becomes a vibrational reality and it physically happens. But so I can take my emotional state and change my physicality is what we've kind of been talking about.

But what about what's the role of physical trauma in creating emotional trauma or or because a lot of people listening have actual infections. Right? So I don't want to like pretend that we're saying because Aimie just highlighted, we're not saying mind over matter.

It's like, no, no, no. Because that's where I think a lot of the mindset things get missed is there's not that direct experience. But what about when I actually have a physical thing, I feel fine, which is what happened in my life.

So maybe we can use me as an example, you know, I'll go on the chopping block, but I felt fine. And then I got found by my boss staring at a wall, drooling on myself.

And when I kind of went to the doctor, I'm like, Well, actually, my whole body hurts and I can't think and I have no

energy. And so he treated me for Lyme because I had a rash.

And over ten days I got better. And over the next eight years I was a complete disaster. I have chronic fatigue, fibromyalgia, bipolar, everything under the sun, ADHD.

It just all kept changing until I got a diagnosis. But I felt and yes, I had trauma before that. But I walked in and I got sick and I got partially treated.

So what happens when I physically have something? And how can I be a person who's physically injured or in fact, dead and and maybe not get into this cycle?

So let me share with you the definition of trauma. Trauma, the trauma response that we're talking about in the body. That trauma is anything that for any reason overwhelms our body at that time.

And so going into anything we can look at, well, how healthy is my system? What's the burden that my system is carrying or other things? Do I already have nutritional deficiencies or excesses?

Do I already have food sensitivities? Do I already have? Do I already have? Do I already have? Because that will increase your chances of that exposure being what breaks your body.

So again, the trauma response does not have to be emotional, it doesn't have to be psychological, it can be an infection. And in fact, when we get the flu as an example, our body naturally goes into a trauma response.

You feel achy, you feel heavy, you feel depressed. Like that's the trauma response. And so the trauma response is not bad. It is. And maybe it just needs to be given a new name because it's just the body's natural response to being overwhelmed.

And I need to kind of shut down, withdraw and conserve my energy until my reserves are built back up that I can come back out again. And so sometimes it is a line infection or a mold exposure that breaks our body.

And is that final thing that causes this chronic trauma response in our body? It does not have to be an emotional situation or a psychological trauma.

It can still be an infection that causes a chronic trauma response in the body that the body, it's like it's never the same after that, right? Like for you, it was eight years, right?

Like it just it was what catapulted your body into that trauma response. And it took a long time to figure out all the pieces that you needed to get you on your healing journey and be able to pull your body out of the chronic trauma response.

So a lot of us it's interesting, I feel like the flu is obviously a very good example because so many people talk about the flu and it's like they describe the symptoms and their normal symptoms of flu.

And I think about Lyme disease, which is often, I mean, in the basic literature talked about as summer flu. And yet when you get Lyme symptoms, very commonly people are like, I'm not supposed to have this.

Whereas like with flu, you're like, I have the flu and I don't want to have the flu, but this is actually normal, right? I mean, is this the place it starts?

Very much so. I mean, and that starts the shaming and the disconnecting from the body and then not wanting to be in my body. I don't want this to be my body.

I don't want my body to feel this way. I reject this rather than being getting curious, leaning into it and being like, what's going on? That my body would be having this kind of response, this experience.

What does it need? And that's where we start this huge disconnect of hating our body, not giving it anything, denying it. Blaming it. Blaming it now, nourishing it, rather than being able to get curious and learn a lot of lessons and have a much shorter path to healing when we can figure out what it needs based on why is it even having this kind of response so interesting?

Because when I talk about my healing journey, I, you know, I tell the story of it took eight years till I met the doctor who actually could tell me what was going on.

But about six years in, I was like, No, this ain't the way it's going to stay. But there were no I didn't have the tools in front of me, but then I started doing a yoga practice by coincidence, or someone handed me a DVD and I just explored it and I was like, This, this yoga is not right, but something about the movement which changed.

Let me go back to the original, like from India and I. And what I realized is that my mind, as I got more into my body in my breath, my mind calm down.

It wasn't like I covered my mind down. I mean, you know, me coming, my mind down is like kind of like but it's interesting, as you say this, it was like I learned the lesson, you know, by paying it, by just being open to the opportunity in front of me because I didn't have a resource like you to help guide me at that time.

But it was like the more and more and more I came into my physical body, my physical body got better, right? Kind of my mental, emotional state got better.

And then lo and behold, I had reserves, I would sleep. And all those things that you talked about earlier started to happen. But the main differences between stress and trauma Tom is that movement, peace.

And so what was also critically helpful for helping your body come out of that was the actual movement. So in the stress response, it's all about movement.

It's all about taking action, it's all about taking action. It is not about thinking about a problem. It's about taking action on the problem that is the stress response.

And so any time that we notice that we are not taking action and in our life we are in a trauma response.

Hope, one-step healing, and closing remarks

So even if the thoughts are going on the hamster wheel and we think that we feel anxious if we're not actually taking action, we're not in the stress response, we are in a trauma response.

And so one of the crucial elements of coming out of this trauma response is getting back into movement of our body. One of the ways in which the somatic work is so powerful, somatic work just refers to like working with the tissues because when we move our muscles, guess what runs our muscles, our nervous system.

And so that movement is actually one of the avenues that we can work with our nervous system, where this trauma, where this charge has been stuck and just opening up that freedom with the movement starts for many that that healing process.

I'm not at all surprised that yoga was what started to open up that for you through the movement. It's really quite cool because I mean, I tell the story all the time and I know the pieces of it and I get it.

But it's like even like I feel like the next time I tell the story, I have a different sort of perspective on the words because everything you're saying are things that kind of like totally resonate with me.

And I think that that's one of the things that I love about your messages. Everyone that I've ever referred over to you and anyone who's listened to an interview with you is like they totally resonate with it because you're speaking truth of how our biology actually works and how our physicality is.

And I think to me also, when you just when you talk about movement and taking action, how empowering, right? So today, everyone listening can do one thing where they move their body slightly more than yesterday, you know.

Because it could take one action to solve that problem in your life. So good. I love it, Aimie. I mean, this is just like a miracle and that's why I want to do it.

And I love this conversation and everyone is, you know, I know, like my whole goal with this summit is not just to provide you with the best medical information, because medical kind of is another label and it tends to be research based medicines and herbs that you take and detox and gadgets.

I want to give you the tools to actually find out what's holding you back so you can move forward and live your best life. And I kind of want to close the Aimie.

I'm going to say one thing that we talked about, you know, a week ago, and then I would love for you to do to maybe have the last word and then also close out with letting people know where they can find you.

And I will make sure that on our summit resource page that will have all the direct links to you. So it's nice and easy so nobody has to anything down.

But the thing is we were talking and one of the things my personal mission is I want you all to live your most amazing life right now. I don't want you to wait to your better because then it ain't ever going to happen.

And Aimie said this amazing thing is that, you know, the healing is in the living, right? So we're not going to heal and then do the living. We start living now take that one extra step and that's how you start to heal.

So, yeah. Aimie, what do you got to close us out today? My message is one of hope and empowerment. And when the trauma response hits our bodies, that is what it takes from us.

It takes away our hope and it takes away that sense of empowerment. And so coming back to just taking action, it's really easy to get overwhelmed with a lot of action.

And so we don't want to do that when we recognize that our body has been in a chronic trauma response, we just look for one action, one action today that I can take to, again, solve that problem or make one more step towards experimenting with my health and my main challenge at the moment or my sleep or whatever it is.

But take one action every day and you will start to notice that movement coming back into your body and your life. And then, along with a lot of other trauma tools, of course, people can finally over it.

Trauma, healing, accelerated outcome. And as Tom mentioned, I run a 21 day journey and that is the really the starting place for learning how to safely connect with your body again.

After we've been disconnected, we're having health symptoms. And yet we we don't want this to be the rest of our life. And so grateful to have you here, Aimie, and to I just appreciate you coming to share your message of hope.

And one of my friends back in the day said like, you know, she's a hope dealer and I know you're a hope dealer and an empowerment dealer. And, I mean, we need a lot more of you.

And so thank you for being here to share this message of hope. And there really is so much healing guides. I mean, this is just this is this is how everybody that I've seen really makes a huge change in their life, is that they they learn to believe in themselves again, safely get back into their body, as Dr. Aimie was telling us about.

And yet take that one action that helps you move closer to your your healing goal and you'll start to really, you know, you'll really see it kind of supercharger healing once you just make that habit.

One more thing for yourself each day. So, Dr. Aimie Apigian, traumahealingaccelerated.com love you so much.

And everyone, lots of love to all of you. Lots of well-wishes for healing.

And I'm Dr. Tom Moorcroft. We will see you in the next episode of The Healing from Lyme Disease Summit. Thanks for joining us.