Introduction to the Biology of Trauma

Welcome back to another episode of the Restore Your Mitochondrial Matrix Summit. I'm your host, Laura Frontera. I'm bringing you experts to help you boost your energy and fix your health so you can build the life you love.

And today, my special guest is Doctor Amy Opinion, a dear friend of mine. Hi, doctor. Amy. Welcome to the summit. Thank you. Laura. Can I just say, like, how much this is needed?

Like, this topic is huge. It's it's huge for stress and trauma. So I'm glad that you're bringing that on. But just in general, like, thank you for all the work that you're putting into this.

Absolutely. And thank you for your expertise here. You are an absolute authority in your space. The biology of trauma. I'm going to explain what that is.

This really applies to mitochondria health and restoring your health at the cellular level. If you don't handle this piece, it is unlikely that you're going to ever restore your health.

So that said, your interview here could be the most critical interview for people to hear. So I'm so glad you took time to do this. I know you're super busy with everything you have going on, but let me introduce why you're such an authority in this space.

You're actually a leading medical expert on how life experience is gets stored in our body and cause health problems, and you help people restore their body to this optimal, best state of health through your model and methodology.

It's called the biology of trauma. So you basically reverse engineer the chronic effects of trauma on the nervous system and your body at the cellular level.

That's why I was like, we have to have Amy here. It's it's cellular. It's all about cellular health. So a little bit more about you, your board certified, your medical physician and preventive medicine and addiction medicine.

And in addition to your medical training, you are over the top qualified in so many ways. You're a functional medicine physician, and you have certifications and training specifically in neuro autoimmunity, nutrition, genetics, addiction, mental health, mood, behavior disorders.

And you have certifications in various trauma therapies, including instinctual trauma response, somatic experiencing and neuro affective touch. There's nobody more qualified to be here.

That does sound like a lot. That sounds like a lot of stress, actually. Well, you you are, I know you well, and you're a bit of a, you know, perfectionist and overachiever.

Like, you're not going to mess around if you're going to learn something, you're going to learn everything there is to know about it. That's my experience of you.

This is true. And I've actually worked on that. Laura, so that I no longer am a perfectionist, but I am an excellent artist, an excellent host. That's good.

So let's have an excellent talk today about the biology of trauma. So can you start off by telling us what is stored trauma in the body and its effects.

And when you're talking about its effects specifically, I mean, we're a bunch of people here listening to a summit

about mitochondria health. So what does it have to do with cellular health?

So I'm going to tell you that exactly what you said, like this topic of mitochondria is actually the central piece of the trauma response. And I've got the certification course that I track.

And this is what I teach them in that is that trauma is an energy problem. And so I have a whole energy module where we dive deep into the mitochondria, because if we had more energy, we actually would not have had trauma.

Okay. So all soma, all trauma, all trauma, every everything that ends up being a trauma for us in our life comes down to it having been an energy problem in that moment.

Okay, wait, wait. So I know people's heads are spinning right now.

Trauma as an Energy Problem

You got to unpack this. So you're telling me that if I was abused. If I was, if I had some trauma where I was verbally abused physically abused, sexually abused, that has to do with energy, has everything to do with energy.

Okay, tell us how. So I want to walk you through the trauma response so that I can show you then how energy is at that crucial moment. The defining moment of what was a stress and what is now beginning to become a trauma.

And then we'll have it really clear for how this is actually the first step that we take to reverse engineering trauma. So it is stress. And I and I almost like, you know, like where what what stress would you like to pick today.

Right. Like say we're walking in a park, Laura. Right. We're walking in a park and all of a sudden this dog that's off leash is running towards us. That that will be our stress for today.

And in that moment, our nervous system is designed to keep us alive. And it's going to initiate the stress response. The first step is always startle.

And you've seen that, right? Like you'll see pictures even of a deer. If you've never seen a deer, do this in the moment yourself, live where they'll their ears, they'll perk up, they'll stop what they're doing and they'll freeze and they'll be like, you know, you can see their ears picking up everything.

Their eyes are scanning the environment. That's the startle. And that's always the first step in a stress or trauma response. And then the moment that we decide like, no, like this dog running towards us in the park right now, Laura is actually a real threat.

Like this dog does not look like it's coming to say hi to us and wag its tail and and love on us like it's it looks like it could be coming to bite us.

So what do we do in that moment? Well, let's say we decide to run, right? Because that's that's that's one of the the stress responses you have fight or flight.

Those are your two options for the stress response. And so either way right. Like maybe you decide to stay and to fight the dog. And I decide to run away from the dog.

Whatever we decide we have this surge of energy that comes through in that moment, and that energy comes from adrenaline. So when we think of a stress hormone, it's actually adrenaline that plays a bigger role and actually vasopressin than cortisol.

Cortisol is not going to kick in until another 20 minutes. All you've got in that moment is adrenaline and vasopressin. And so we we're given this surge of energy.

And what is the purpose of that energy. The purpose of that energy is to be able to move, to mobilize, to take action. What happens if whatever I'm running away from the dog and the dog catches up with me and the dog is faster than me, right?

If then then we go into what would be a trauma response where we realize that even with all of the energy that we have in that moment, it's not enough. Laura.

Oh, okay. Body enough. I'm tracking, you know. Yeah, yeah, yeah. Okay. This is the same thing that happens with the deer or the impala or the zebra or whatever it is out there on the on that plane.

Right? When it sees the danger and it starts running, running the amount of energy that it has, it determines how fast and how far it can run. The minute that it realizes that it doesn't have enough energy to outrun, the stress, it actually goes into the trauma response.

Right? And when we watch that, the camera rolls really carefully, we actually see that they go into that trauma response before the pounce actually happens, before the claws actually touch them.

They've already realized, I'm giving up. I'm giving in because I don't have as much energy as this threat requires. And so the trauma response happens when we have a threat.

And it it matters how much energy we have to face that threat. If our energy level does not match the level of threat we experience trauma from that event say we have enough energy and maybe we have more energy than what the threat actually requires us to give.

It only stays a stress more. We we can stay present because we've got the energy to address that threat in our life. In that moment. Okay. And so it's only when we reach the end of our energy.

To fight, to stand up for ourselves, to say no, to push them away, whatever it was in the moment. Then that's when something becomes a trauma and we feel the collapse.

There's actually an exhaustion of fatigue, a collapse metabolically that happens in the moment that a stress response changes to a trauma response because of energy.

Okay. Now you've got this trauma that's occurred and now it's in your body. It's stored inside of you. You've experienced this trauma. So, you know, a lot of your work is working with adults who have had traumatic experiences as children and younger adults, and this trauma doesn't leave them.

So now, what are the effects on the body of this stored trauma and all the way down to the cellular level? Thank. Yeah. So what happens is that this pattern of going into the trauma response actually becomes our default.

How Trauma Changes the Body and Brain

And so now what happens is that what usually what was a stress before. Now we just see that stress. And we immediately go into that overwhelmed place.

We immediately give up. We immediately say like it's a learned helplessness if you want to look at it that way, where these are default patterns that just play out and we see the the email come through from from that person.

We see the phone call, we see the text message. And just because of who the name that's associated with it, like we already feel like, nope, I don't have the energy for that.

I don't have the energy for that. I don't have the energy for that. And so it actually becomes this pattern of going into that metabolic state of energy concern.

And whenever we go into that state of energy conservation, it actually shuts a lot of things down in our body. For

those in your audience who may know of Doctor Stephen Porges and the dorsal vagal, poly vagal theory that he has written about now for many years, we understand the physiology effects that this is going to have, because that dorsal vagal response is this break is this switch that happens that will take us from a very active stress response, which is a high metabolic state.

Talk about burning calories, right. Like we're going through a lot of not only calories but nutrients, magnesium, zinc, the B vitamins. We're using them up because we are in a very high metabolic state in order to meet the threat.

But the moment that our body is like, oh, we don't we don't have enough energy to meet this threat, it goes into that energy conservation state. And if your body goes into the energy conservation state, what's going to happen to your gut that shuts down?

It shuts down. That is not the biggest priority. What's going to happen to your brain? You're going to start experiencing decision fatigue. You're going to start experiencing sensory overwhelm where lights bother you sounds bother you.

Textures start to bother you more than what they did before because your body just does not have the energy to deal with all of the sensory you start to get, you know, irritable with your kids and your family because you just don't have the energy.

Can you just be quiet? Can you just do what I told you to do? I don't have the energy to talk about it. I don't have the energy. And so we start to see all of these things play out in our body, in our relationships, in our life, in our career.

Right. Because if we don't feel like we have the energy, we're not going to be putting ourselves out there. We're not going to be looking, we're not going to be showing up at our best.

There are many times in my life before I got to this state where I was able to work with my nervous system, that I would be showing up for meetings and walking out, being like, I really wasn't there the whole time, right?

Like my mind was somewhere else. Yeah. So what I'm hearing is that this, that this response, it starts to leak all over your whole life. Everything gets it all over.

Okay. So now we're talking you're talking about the biology of this, the biology that gets people stuck on their healing journey from trauma. What is that.

Yeah. So this is one of the most fascinating things that I've come across in my work, where I started noticing to myself that as I was doing these trauma therapies, because that's what I was told to do. Right?

And I'm doing these trauma therapies, and I'm reaching this level where it's like, I feel like I'm hitting a wall and I can't seem to get past this, and I'm doing the work and I can get up to this point, but I can't seem to go beyond.

I had really worked with this, what we call the freeze response, that collapse, that giving in, that giving up, that energy conservation state. I had worked really hard on that.

On the trauma therapy side of things and gotten it down to where it would only last, you know, maybe about four days where I would, you know, have a hard emotional impact or something.

And then I would just go into that collapse and I couldn't move the dial on that. Laura. And I was like, what is going on? Like, this really cannot be the best that I'm capable of.

There's got to be another level. But how do I even tap into that level? And what I started realizing as I was working on my health was that, wait a second, like, there are actually these biology factors, and some of them are even biochemical imbalances that we can have that actually will be preventing our nervous system from even being able to do positive neuro plastic activities.

So even if we're doing the best of therapies, if we're not bringing in that biology piece, our nervous system will literally stay stuck. And so that's when I started combining the biology pieces with the trauma therapies.

And it's like magic happens because they feed off of each other. And the biology piece allowed my nervous system to actually have more capacity for the healing work, for the emotional work, for the trauma therapies, because my nervous system was now able to actually integrate it and be able to implement that into this healthy neuroplasticity that we need to have if we're going to change the way we've always done things.

So are you saying that people who have tried and tried and tried to heal, who feel like a failure because they haven't been able to truly aren't a failure, that there's actually a biological reason that they're stuck.

There are always reasons. Yes. And for me, like all of this comes down to biology, because even what people would consider their psychology or their emotions, that's actually just their physiology of their nervous system.

And we can figure out what are those things holding you back? What are those things that are keeping your nervous system stuck in a survival state? And some of these are things that we were actually born with.

So I'm thinking of like the methylation imbalance. That's an epigenetic condition that influences even how available your system is for the attachment and bonding process.

For example, under methylation is usually have a low activity of serotonin and dopamine. Well, dopamine is necessary for healthy attachment. And so if as a baby you already have low dopamine, you already kind of have the cards stacked against you for coming out of childhood with insecurities simply because you were an under math later and that was your biochemistry.

Wow. I think people are having light bulbs go off right now. People are thinking, that's me, that's me. There's hope. There's hope. So any other, any other biological reasons you want to share that people get stuck in?

They're not able to heal from trauma? Yeah, I can share with you the other two top biochemical imbalances that I see across the board and all the people that I work with with chronic stress or these pump patterns.

And that would be copper excess and zinc deficiency kind of goes with that.

Biological Blocks to Healing

And then something called pyro or chiral disorder. And pyro disorder causes a deficiency in zinc and B6 specifically. And what it does is that it actually makes the nervous system very sensitive.

So these would be people who feel like they are highly sensitive people, where they even don't feel like they can keep energetic boundaries. And when they walk into a room, like they can feel the energy and it drains them and, and they almost become introverts because it's like, like people's energy is just too much for me.

Like, that's actually many times a biochemical imbalance that when we can fix that, it puts the nervous system into a place where it can hold more capacity for all of that, and it can have these stronger, natural, healthy boundaries, and you can have your emotions, and I can have my emotions, and your emotions don't become my emotions.

And the copper excess has been something that's been a huge influence for many women and so much and so, in fact, that they have found that women who experience postpartum depression, postpartum anxiety, and for sure any aspect of postpartum psychosis, over 95% of them have copper excess.

Whoa. And so we've done wrong by sending them all to therapy, thinking that all this is all just emotional, right? Like there must be some, some underlying reason which which there may be.

Right. And for most of us, we actually did come out of childhood with some degree of insecurities. And now having our own children. Right. Like that can trigger some stuff from our childhood.

So it's not to say that there's no purely emotional aspect, but these biochemical imbalances actually drive our emotions. And so for women who experience that, have had that in the past, this is something that I would so want them to go check out.

How do you go check there. Yeah. How do you so you can do a blood test and there's a blood test that I use that actually will check your methylation status and your copper and zinc.

We do need to bring in serial plasm in order to be able to calculate the free copper in your blood. And that's what we're looking at. So I'm happy to give you that link.

I do all of my testing through Da labs for that because they can all just do it in one blood sample, and I want to see it all. And so happy to give you that link.

And that would be where people can go to get this testing and know for sure that they're getting the right testing, that we need to calculate that copper excess the right way.

Okay. Perfect. Perfect. Now you're talking about the biology that gets people stuck on their healing journey. Is that different from the biology that predisposes us to experiencing trauma?

No, it's actually all the same thing because the biology that will keep us stuck, includes those things like the mitochondria that are a result of chronic stress and trauma.

And just as an example, if you're low in magnesium because you've been running on empty for so long right now, that is actually going to be what's keeping you in stress and trauma.

But also if you're in under methylated, if you have copper access, if you have a zinc deficiency, those are things that will keep your nervous system stuck no matter how much therapy you do.

So those are would be things that are both going to predispose you to a trauma and keep you stuck. Again, kind of going back to that example with the underneath layers and even just an insecure attachment for the under methylation.

Laura, they are what I'm finding is that they have what I call gaps in the neurodevelopment and attachment process in 0 to 6 months of their life, and I can measure that based on actually their belief systems about themselves and some very specific things that I can look at that includes what is called a tummy time crawl.

And so I even have those people going through my courses get on their tummy, send me a video of them on the floor, on their tummy, and trying to figure out how to move and scoot themselves down the floor with keeping their belly button on the floor without using your hands.

No, I'm not saying that you can do whatever you want. I just need your belly button on the floor. Okay, you can use your hand. You can use your legs. I just need you to figure that out.

And based on what I see in the video, I can tell somebody if they have had gaps and disruptions in that 0 to 6 months of life, that they are not going to have any conscious memory of, because that's certainly all pre-verbal.

And yet, if they have gaps in that, Laura, like that was when your pons was developing in your brain stem. And so what your experience will be is always feeling a little, like you've got no power in your life.

Your, you don't really necessarily even know where you are in space and you don't feel your body as much as other people feel their bodies a little bit disconnected, very disconnected that, that pons level gaps and that 0 to 6 months of life for the neurodevelopment.

Is really where we establish our sense of grounding, grounding in our hips, grounding in our feet. And so this is where we learn how to thrust ourselves forward in life.

And so if you have had disruptions at that 0 to 6 months of life, whether that was because you are an under math later and have one of these biochemical imbalances or for other reasons, then that's kind of the pattern that you can expect, both on a cellular level and then throughout your life as it spills over into all these areas of your life, like you're just having a hard time moving forward and completing things in your life.

And there's a solution for that. Totally. Oh my goodness. Yes. And it's so exciting. In fact, I'm thinking of, Lisa right now. And she sent in her first video, her first video of her doing tummy Time crawl.

Laura I looked at that and I was like, oh my goodness. Like, we've got we've got some pons level gaps and disruptions here. So I had her do tummy time crawling 5 to 10 minutes every day.

She sent a video one month later and the progress was incredible. And just correlating with the progress in her tummy time crawl. Then she's also experiencing that increased sense of being able to move forward in life, and her sense of grounding.

And it's like these were things that she didn't even realize that she lacked until she started to notice that it was appearing in her life. The other thing with the Pons is that, again, these people generally, because these disruptions happen so early in life, they experienced a lot of overwhelm in infancy because of the lack of regulation in their nervous system.

And so they are used to having to brace in order to get the cut off sensation. So they may not be ones that feel their hunger. They just eat because they know that they should eat.

They don't actually feel hungry. They may not feel full until they've stuffed themselves. So there's all these things that start to come into their life that then we can look at their coping mechanisms.

Right? Because then now they've got maybe health issues from their coping mechanisms, from not actually being able to feel their body as much as they are intended to feel their body.

You know, what's coming up for me right now while we talk is so the word safe is coming up. This all feels so safe. And I know there's people listening right now who are having relief and feeling safe with you.

So the relief that, oh my gosh, I'm not a disaster. I'm not a big mess. There's actually some biology and some science behind what's happening here. And somebody has figured out how to help me heal from those things that occurred when I was younger, or the lack of whatever they lack biologically or whatever happened to them.

And yeah, so that feeling of this is also safe to, to do this and it makes sense and it's so hopeful. And that's exactly what it should be, Laura. Right.

And that's exactly what it has not been. Yeah. No, because people are like, I don't know, I can't help you. I've tried everything. Clearly you have some psychological issues that you haven't fixed yet.

So here I'm giving you a referral to psychology. Go talk to somebody. Right, right. And there's actually a very specific sequence that we need to do to reverse engineer all of this.

And it doesn't need to be confusing and it doesn't need to feel unsafe.

Early Development, Attachment, and Pons Gaps

It doesn't need to be done in a way that I describe as like jumping off that emotional cliff. Be like, oh, good luck with that landing. It's like, no, no, like that's actually how we retraumatize ourselves.

That's actually how we stay in a place of, of bracing for, oh, how bad is this going to hurt? And that's the wrong way to be doing things. So I've, I've worked on like what is the essential sequence, what are the specific steps and modalities that we should bring in at the beginning.

And then as we build our capacity with those, then we can bring in the other things, then we can bring in the eMDR, then we can bring in the talk therapy, then we can bring in this other stuff.

But those don't belong at certain places. In the healing journey, there actually is a specific sequence on how to reverse engineer this. Wow. This is this is remarkable.

So we've been talking about, you know, that very young age, 0 to 6 months. Is there kind of a magic cutoff age when childhood trauma affects us more than.

I mean, what's the age range we're looking at here? What if you are traumatized? By what age do you really, would really benefit from some work? Yeah.

And, I mean, I think that my answer is going to surprise you. And I will also say that the more that we experience trauma early, early in life, the more trauma that we experience overall in our lifetime, because we it's almost like we attract more because now we're living in that place of feeling powerless or we're reactive or we're not thinking right, or we've got to kind of survive the rest of our childhood, even though we don't feel like we belong or we feel out of place, or we feel different.

So it it accumulates and it really builds. And certainly people can look back at their childhood and remember certain things, certain events, certain experiences and be like, oh, that was trauma.

And I'm going to come in and tell them, Laura, actually these trauma patterns were in place before that. You went into that experience already having the groundwork laid for that being a trauma for you.

And this is where we really need to redefine trauma. And what is trauma. Because when you're asking like, what's what's the age? I'm going to say three, three years of life and there's not that many people who can remember that much of their life before three years old.

You might have 1 or 2 memories, but we don't have a lot of memory of that. And so again, this is where we're not we're not actually looking at the explicit memory that's in your hippocampus is we're looking at the implicit memory.

That is your body memory. And this is why we will find ourselves reacting in certain ways that we may not understand logically, or we may not even want to do, but we can't seem to stop ourselves in the moment.

And it's not until afterwards that we're like, I hate that I keep doing that. I hate that I keep reaching for that. I hate that I keep reacting in that way.

And we're not able to break those patterns. That's because the body literally has taken over, and it's self-defense and protecting because of these implicit memories that happen early, early in life and get imprinted.

And then there's the kind of trauma that occurs. And let's say you let's say you had wonderful parents. You were loved. You were nurtured. Everything was amazing.

You went through life amazing. And then, you know, you're you're 26 years old and you're standing on a street corner and you get hit by a car, or you get mugged, or you get like some horrific, traumatic.

It causes trauma. What do you have to say about those types of traumatic experiences and how they affect us? And is there is there a set up for that, or is it just being in the wrong place at the wrong time?

Oh my goodness. You're going to you're going to make us go there. So again, what I'm going to say is probably going to surprise a lot of people, possibly even offend a few people, and I'm okay with that.

So when we look at childhood, we really need to redefine trauma as anything that for any reason at that time overwhelmed us. It does not need to be abuse.

It does not need to be neglect. There are many, many people and I'm going to say Laura, many parents in this generation right now, the younger parents, they don't realize the common social practices that are actually causing overwhelm to their young children.

They are wonderful people. They have amazing hearts. They are great parents, and they just don't understand that these common social practices are actually causing trauma and overwhelm to their young children.

So when we look back at our childhood, I don't want people to say, oh, I didn't have any trauma because I didn't have abuse. I didn't have neglect. No, it's not the definition of trauma.

The definition of trauma is anything that for any reason overwhelmed us at that time. Wow. That just totally opens up a whole new level, opens up a whole new level.

Probably all of us could be supported with this work. Exactly, exactly like this. Really? Then just becomes how are we navigating life? Not how are we?

How are we just addressing trauma? Because it's like no light life. Life is challenging. And so if we notice ourselves reacting in certain ways to just normal life challenges, that informs us, oh yeah, like I've got some I've got some work to do.

And I do think that everybody, everybody has some work to do. So let's go back to your story of your 26 and you get mugged.

Practical Steps and Where to Find Help

Were you just at the wrong place at the wrong time. Is that going to be a trauma for you. Those are all really good questions. And I'm going to tell you that if it ends up being a chronic trauma, like a trauma that gets stored in your body causes lasting changes, then your system was set up for that.

Going into it. If you're able to go through that experience, process it, integrate it, reach out and connect and complete the trauma cycle, it's not going to become stored trauma in your body, and you're not going to go around always looking behind your shoulder for the next time that you're going to get mugged.

So not all trauma becomes stored trauma because there is a way to work through trauma okay, this is really big. So if you can work through trauma then at the cellular level, then you're going to have a healthy recovery.

If it becomes stored, then it's going to cause all these biological problems that cascade. Okay. And how do you know it's becoming stored? Because it's it's leaving lasting changes on your life.

You're staying hyper vigilant or you're noticing that you're you just want to, you know, curl up and pull the covers over your head. Yeah. Or you notice health changes or you notice, again, like you're you're now living your life differently because of that experience in a in a, in a bad way.

Right. Like not not because like, oh, I became wiser and stronger and kinder and you know, I'm so I'm living my life differently when we look at even PTSD.

Laura, we see that it's really not about the event. So trauma is not about the event, and trauma is not an event. When we look at PTSD, we see that people are going over and they're experiencing the same event.

Some are coming back with PTSD, some are not. So it's not the event. It has more to do with your nervous system going into that event that determines what your experience will be in the middle of that event.

That's why a group of people can go through the same experience and they all react differently on the other side. Beautiful. That makes sense. Okay. We went deep today.

Let's give people some hope. What can't? Because people are probably now wondering if you're watching this like, oh, do I have store trauma? Is my trauma affecting my ability to heal from my chronic health conditions and my gut health and my autoimmune conditions and oh my goodness.

So what are some practical tips that you can give people right now that they can start putting into place, to support themselves? So, I mean, right now this summit listening to the summit is amazing, right?

Because you're bringing to them this mitochondrial piece and this energy piece and for those people that I'm working with who have chronic stress and stored trauma, energy is where we have to start.

Because if trauma was an energy problem, energy is our way out of the trauma problem. And so energy is the first thing that I use in my protocols for someone who is now in a chronic freeze response.

So, and I have a whole guide that I can I'm happy to share with you on how to actually support your body and your physiology. If you realize that you are in this chronic freeze and energy conservation state, because it's definitely going to impact all ability to do, healing work, trauma, healing work and all of that.

I also have a guide on steps to identify and heal trauma, so I'm happy to share that with you. I'm happy to share share with you all that I can. But my my first recommendation would be, if this is resonating with you, then watch this summit, because energy is going to be a really important piece to the trauma, not just to your physical health, but actually for the first step in reverse engineering, that freeze response specific.

Lee. Yes, thank you for your generous offer to give that support to the audience. We'll make sure we get that from you and that there's a link where, where they can get Ahold of it.

Anything people can do on their own at home while they're waiting to get access, you know, to you, to your programs to, more support. What are some things people can do right away to start healing?

And it really depends on where they are in their healing journey. So if they notice that they're in more of the stress response, it's going to be different than if they're more in that shut down and energy response.

So is as simple as it sounds. Being aware and starting to learn those three states of your nervous system and knowing which state am I in, because that determines am I, what what is my next step to do?

So there's a lot of somatic practices that I use to kind of help with that. If they're dealing with stress or grief or loneliness, then I use some really basic somatic techniques.

One is really to kind of do a containment hug, and you can experiment around with like, where exactly do I want my hands that feels the most supportive for my body?

And then once you find that, just hold that for at least 60s and start with that three times a day. And that will even just help you start this process of being able to drop in and notice, hey, where is my body at right now?

Is it is it seeming to react to stress and trauma at the moment? And how can I bring that under and under kind of more of that healthy person, but that state that we want to be in.

Amazing tip. Amazing. Amy, can you also tell us where can we find you? Where? I mean, we're going to have your link and everything, but for people listening right now, where can they get access to your stuff?

Yeah, they can find me over at Trauma Healing accelerated.com, because that's what we do is I help people accelerate their healing journey, not waste any more time than we need to.

Oh, thank you, Amy, so much. And you know what I would say too, is, you know, people who are working with me that they're doing gut restoring health and, doing toxin removal from the body.

This piece is critical. It's common. You know, I might I might say to you, have you checked out? Amy. Doctor. Amy. Opinion stuff yet? Because I think this would help support you in your healing journey.

And it really like I really encourage you to embrace building a team of experts around you. This is Doctor Amy's expertise, which is different than other practitioners on this, on this summit.

They have different expertise, and it's not uncommon for you to work with a couple of different people to help you restore all the different areas and aspects.

Because this, this, this healing journey is not linear. It's not and it's not just one thing that's going to get you where you want to be. There's a lot of layers.

And so build your team is what I'm saying. Build your team and just be in that mindset that I probably am going to work with more than one practitioner to get where I want to go based on, you know, there are different levels of expertise and what's going on in my body.

Yeah, yeah. Thank you, Doctor Amy, so much for being here and for the work that you're doing. This is so vital. And I will be continuing to send my clients your way.

What you do is so important. Thank you. Laura, you take good care now. Bye.