Introduction to Pain and Posture

Hello and welcome back to Mastering the Menopause Transition Summit 4.0. I'm your host, doctor Sharon Stills, excited to be here with you and have another really important conversation.

I have a great guest in the House today, Doctor Yoni Witten. He is the brains behind the pain fix protocol and pain is something you know. I can guarantee everyone is listening, has had pain in one sense or the other at some point.

And probably a lot of you listening are dealing with pain. And I think as we are aging, we're often fed a line of B. S. that, you know, you're in pain because you're getting older and it's just part of aging. And suck it up, buttercup.

And you got to deal with this and so Doctor Yoni is a chiropractor and I love I love the skeleton in the back. So like a real chiropractor I've got a skeleton with it.

And so he is going to enlighten us, give us a different lens. And I was telling him before we became, came live, I interviewed him for a summit, a couple of years back.

And that, like, his voice is still in my head because the stuff he talks about is so powerful and so applicable to us all, and it's about our structure and our posture.

And we often we skip our anatomy when we're thinking about aging and we're so consumed with what herb do I take? What what form of blueberry or salmon do I eat that we forget about?

Like we have this very important structure and how to behave in it that can really give us great health benefits. So we are in for a treat today. Welcome, doctor Yoni to the summit.

Happy to be here. Thank you. Yeah I am I know you're I was like you're like in my neck because we had and I'd love to touch on it again. This whole how we're always looking down.

So like I walk around and I like specifically put my phone down and say doctor, Yoni, doctor Yoni, it looks like straight ahead I stand up straight, I, I do all the things because, you know, we're all guilty of it and I think we're just we're evolving into this hunched over structure because of our devices, so.

Well, it makes me happy that, I've made an impact last time. One of my favorite quotes is that awareness precedes change. Yeah, it certainly does. Although sometimes I feel like there's a little bit of a, a chasm between getting from, like, the awareness to actually making the change.

So I was excited because I'm sure I'm going to learn or remember a lot or be re informed from what you have to share today. And I'm going to use it myself. Right.

And so let's talk about pain. And you know, most of the women listening are in their 40s, 50s, 60s, 70s, 80s, 90s. And so pain starts to happen. And what why is it happening is we're aging and what can be done.

Do we is it really our sentence that we're going to have to be in pain? Well, a couple things that you said there are interesting. It is true that the incidence of pain tends to increase as we age, but that's not really the disturbing trend from from the research that I'm looking at.

Like, it makes sense that. It to use a very simplistic example, tissues break down over time. So if you have an older vehicle for example, that you drive around and stuff is much more likely to go wrong with that vehicle than, brand new vehicle.

But that's the easy way to understand it. The really disturbing trend is that the incidence of pain is increasing across all age groups, even down to people in their 20s.

Why Sedentary Behavior Causes Pain

So that's, I think, where the where the the meat of this conversation is, if you will, because it's easier to it's a write off to say like, oh, you know, as we get older stuff tends to break down, but that's a cop out because it's like, okay, well, like you said, suck it up, buttercup.

Like that. That's not helpful. But now we're in a situation where we're we're dealing with something like we were dealing with a few decades ago with type two diabetes, which used to be called adult onset diabetes when I was a little kid, because only people in their 50s and 60s got it or older.

It used to take that many decades to wear your body out to that level, and we had to officially change the name because so many little kids were getting it.

They were essentially using a good portion of their life's ability to cope with insulin in the first decade or so of life. And we're seeing something similar to that in pain now where people are, for lack of a better term, abusing their bodies.

And the body's responding by giving pain. So, I mean, it might be worthwhile to note, like what pain is. It's just imagine that you're driving down the highway at night.

It's a black highway in a rural area, and you see a bright neon sign. That's what pain is. Pain is there to catch your attention. Yeah, you're low on gas.

You see the gas station you pull off to get gas. Same thing with pain. Your body's getting your attention so that you can change your behavior. So if that's happening in a in a young person and it's also happening more in older people as well.

So the trend is going up across all age groups. So it's yes, we have larger segments of the population that are getting older. That explains some of it, but it doesn't explain why younger people are doing it, why younger people have the same the same type of pattern happening.

So what's really happening is we have a lifestyle that is not nourishing and providing our body was with the things that we need in order to thrive or function optimally.

And when you're functioning sub optimally, your body sends you signals. One of those signals is pain, like so the classic example would be like, for the person who has the sedentary job and they're sitting on their rear end all day long and they start getting back pain, or you start getting a sore butt, or you start getting cramps and in your legs or something.

This is the same thing that happens when you're sleeping at night, and you get pressure underneath your hip because you're lying on your side, or you get pressure underneath your back or something else.

And what do you do? That's you get that neon signal, you change position, you get the pressure off of that area. So that's pain working. It's magic. It's eliciting a behavior change.

And that's essentially what I would hope to communicate in this conversation is, I'm the pain whisperer. So what I've learned in almost 20 years of practice, which is hard for me to believe, is that I've learned to speak that language really well.

And so when the body is saying something and the person is confused and they think that it's just happening to them, I can give them some agency over the situation by saying, no, it's the reason that your body is sending the signal is because it wants you to understand that this, this and this is happening.

So let me give you a classic example, to, to really bring this into, reality for most people nowadays. So the research is indicating more and more that the average amount of time that people are spending sitting per day is in excess of 12 hours.

Some people are sitting as much as 15. Which is remarkable because if you factor in another eight hours of sleep, when are they standing? That's exactly right. Yeah. When are they moving?

When are they going to get their mail or groceries or. Yeah. I suppose you don't have to go get groceries anymore. You can get them delivered to your house.

So it's just it's a very different world that we're living in. And that's why we're seeing it in these younger population. So there's a lot of research now on sedentary behavior.

And it's fascinating. It's all new because this, this, this level of being sedentary just didn't used to be possible. Like you couldn't go through life and possibly be that sedentary.

You couldn't get life done without without moving more than that. So it's very bizarre that this this is actually a new area of research, but that's the world we're living in.

And it's worth noting that the two most common types of pain that's neck pain and back pain are directly linked to sedentary behavior. And the relationship is linear.

The more sedentary you are, the more time you spend sitting, the more pain you're going to get neck and back. Are you saying like for anyone who's listening, who has a neck and back pain, that just moving can get rid of your pain?

Or is it more complicated than that? I love where you went with that because it shows that you are a very good clinician. What we're after is the low hanging fruit.

We want to help our patients as much as possible, and to do that, we want to make it as easy as possible. So you're exactly 100% right. You got to move your body.

You have to the body needs movement the same way that it needs water, like you just drank. And the air that we're breathing right now, you got to get up and move.

And so the really cool thing is to piggyback on what you just said is we have very solid research that even if you need to sit to do your job, I get it.

You got to put food on the table 100%. Nobody's telling you you can't sit. What we're saying is you have to break up your sitting. And so here's the jam that's wrapped in all of this.

The research shows that if you just get out of your chair for 66 minutes per work day, what that works out to is 8 to 10 minutes per hour. It's nothing. It's not a it's not a big ask.

You can slash neck and back pain by 54%. Wow. That's significant. It's massive and it doesn't cost anything. And maybe if you if you want to be able to continue working during that period of time, you get one of those, standing desk converters that's like adjustable.

And you can lift it up and lower down. I have one just off screen here. So I have a couple different, working stations and that's one of them. And I'll get up and I'll move workstations.

Not everybody has that luxury. So they just put a, standing desk converter on their existing desk.

Standing Breaks and Active Sitting Solutions

A lot of big companies now will get you a sit to stand desk if you just ask for it. I used to write those requests for

patients of mine all the time, and, and big companies have no problem doing it because it really reduces their costs in terms of sick days, and it improves productivity and it makes people happier.

They like the research is incredible on this doctor stills that it shows like people are happier, they have less pain, they're more focused, they're more energized.

And they just in general feel better by standing 8 to 10 minutes per hour during their workout. Is this just standing up or do you have to be moving? No. You can just get up out of your chair and stand and continue working.

So just by standing, it's that easy. That's I mean, 54% is nothing. That's like ginormous. And it was a gigantic project that went on for a very long period of time.

And here's the craziest part. They gave this this group of workers, these these, adjustable working stations. And they they tested it out together. The research, and then they documented everything.

And then at the end of it, they took the standing workstations away, and they did a follow up, and they found that all of the benefits that these people had gained over the period of time, I think it was I think it was six weeks, all of the benefits that they gained over that period of time were gone within two weeks, of going back to sitting.

So that's how easy it is. All right. Well, when you come to my office and you see people standing up, you're going to know, I'm like, I have to control myself because, you know, my son runs my office and he's sitting right outside the door in the other room, and I want to go tell him because he will get neck and back pain.

Yeah, I want to tell him to stand now. And we're going to we're going to do our own little research project now. Good. I'm excited to hear the results the next time we talk.

And let me give you another one that's directly in line with this thought process. So I don't want people to think that there's only one solution. It's like a really good mathematician looking at an equation.

If you're really good at math, you understand that there are multiple ways to solve that equation, and you can get to the correct answer through a lot of different roads.

And so the same thing here, another option for people because it's sedentary behavior that's the problem. It's being in external support and having armrests and backrest and neck rest.

Holding you up instead of your body doing the work. That's what our muscles are for, to hold us up against gravity. So another option is to do what I call active sitting and that's what I'm doing while I'm talking to you right now.

So I'm on a kneeling chair. These were really popular in the 1980s, and I can get off of it and hold it up for you. If you'd like to see it, but it's a it's a Scandinavian kneeling chair.

Let me just do that for you. I love it so it's got a rocker bottom. You see how it's not completely flat? Yes. And so what happens, when I kneel on it, is I can rock to the front of those panels, and then it feels like I'm falling forward.

And so my body's response. Yes, you got it. So you engage all those postural upright muscles and then guess what? I'm sitting. But I'm not sedentary because my muscles are still working.

So that's a second option. Either way, you know, get yourself a standing workstation or better yet, get both. So when you're seated, you're still active.

And when you're standing, you're in a different position. And again, you're active. But these are two ways to be less sedentary throughout your day. And there's some really cool studies as well that show that like standing for X number of time.

And I don't I don't want to misquoted, but it's not a large amount of time per day is the equivalent of going for like a

two mile walk in terms of like caloric expenditure.

So it's it's just it's a way to be more active very, very easily. And like I said, when we were starting off, this is stuff that just used to be normal activities of daily living.

Like I live in a rural town where there's a lot of, like agriculture. And so like we have cowboys and we have people that are just like the amount of work that they do in a day just to do their life is remarkable.

Well I was going to ask you so we get the chair and is, is there like a special chair. Do we just go to Amazon and go kneeling chair. So the, the one thing that I always recommend to people I don't own a chair company or anything like this.

But the one thing that I recommend is getting one that has a rock or bottom, because what it allows me to do here is I can rock back and I can take a little break when I get tired, and then I can rock forward and I can really engage those muscles.

Either way, they're engaged a little bit. But if I rock forward, this is there's a lot of muscular activity going on here. So some, kneeling chairs have, like wheels on the bottom.

And those are not as good of an option because you can't really rock forward into that intense position. And I just like being able to, like, change positions.

Yeah, that's very cool. Now what about so we've got the standing we've got the kneeling chair. An exercise ball is also an option if it if you're going to be on an exercise ball less expensive than a kneeling chair, you got to be in the right position.

This is one that, I'm a biomechanics nerd, and I'm going to take your audience with me on this nerdy biomechanics journey for just a second, so that they can get the full benefit of sitting on an exercise ball.

If you're going to sit on an exercise ball, you need to make sure that, number one, you have the right size ball and how you're going to know that is that your hips should be positioned above your knee, so you don't want to be balled up where your knees are above your hip.

Because if your knees come above your hip, it rounds your lower back, which is going to push your discs backwards. And it could end up being really uncomfortable and putting pressure on on spinal nerves and things like that.

You want to make sure that you maintain a nice upright posture when you're on that ball. So get a ball. That's enough. That's high enough that your hips in a just when you're sitting in the middle of the ball are slightly above your knee.

So hip here, knee here. Does that make sense. Yeah. And and I can I can share a link for a video where I demonstrate all of this if you're interested, at the end.

But, so that your audience doesn't just have to visualize or we can even splice it into the interview. And if you want to do that, but, so get a ball that's tall enough.

And then number two, and this is really important role yourself forward to the front one third of the ball. So roll your butt towards the front third.

And you're going to feel that that creates more arc in your back. And it brings your head back automatically. It's really cool. And if you do the opposite you're going to know you're in the in in the wrong position.

Because if you roll to the back third, your back is going around and your head is going to push forward. It's automatic. It's your body recalibrating itself with the gravity line.

And so you want to take advantage of that. Be up at the front of that ball. You don't keep all of your postural muscles engaged, and it'll automatically push you at your head into a, its best carry position.

So front third of the ball and get a ball that's tall enough. And that is the end of the biomechanics. Geek, adventure. So I have a driving question. So where do does walking need to be a part of like so we've got the standing.

We've got the sitting. But what about actual walking. What are your thoughts on walking.

Walking, Joint Health, and Movement as Nutrition

You know, you hear ten steps a day or and can you walk the wrong way instead of the right way and do more harm. Like if you could just talk a little bit about that.

Yeah, yeah I a walking is is fantastic I get it. It's, it's funny to me because if we were having this conversation, you know, a few decades ago, this would have been like, oh yeah, just go do life.

But now these are things that we have to talk about. I know. Yes. So I started with the, the, the sitting stuff. I like starting with stuff that's very easy.

Like it's so easy that it almost takes effort not to do it right for a walking. It takes a another, it goes up a notch in terms of the amount of effort that you have to put in, but it's certainly worthwhile.

The, the flat amount that ten steps a day. There's been a lot of research into that. And it's true that there are just a certain amount of overall health benefits that regularly occur in people that are hitting, that step count.

That said, blanket recommendations are tough because for the person who is in very poor health or low fitness, or maybe they're recovering from some kind of an injury or situation like that, you can't just say ten, ten, ten K steps a day.

It's more important that you're heading in the right direction. Yeah, it's better to be like a one and heading for a two then then a rapidly heading for zero.

Yes. Yeah. So the main thing is that your body is designed to move. And like I said earlier, we require movement as a nutrient the same way that we require water, the same way that we require air when we don't move bad things tend to happen.

So on a joint level, joints don't get their nutrition when we're not moving. So joints don't have a direct blood supply. So like going into my elbow or my my knee joint on the inside of that joint where my cartilage and where my ligaments are, there's no blood supply going in there.

So most of our the cells in our body get their nutrients by blood pumping, nutrition in and then carrying waste products away. That's how the tissue stays healthy.

It's cellular respiration, which I'm sure you talk about with your patients all the time. So joints don't breathe the same way that cells do. Joints breathe only in the presence of motion, only in the presence of motion.

This is really, really important. And there was a killer study that came out. Wow a while back. But it compared age matched peers in the United States and China is a large group of people.

And they looked at the incidence of hip osteoarthritis. And in the Chinese group, the incidence was 80 to 90% lower, of course. Wow. Almost nonexistent.

Why? Well, there was a few things that they speculated, but one of the things that really stood out was eastern toilets. Every day for a couple of minutes a day, you are taking your hip through an extremely deep range of motion that most Westerners never get anywhere close to.

And when you're doing that, you're forcing nutrition in and waste products out of that joint. And one of the things that's really interesting about nutrition to a joint is it's delivered in proportion to how much you use the joint.

So this is an oversimplification, but the idea remains if I bend my joint 10 or 15 degrees, I'm getting 10 to 15% of the nutrition that I should be getting to that joint.

If I bend the joint all the way to here and then take it back and forth and do that a few times, I'm getting the full complement of nutrition into that joint.

Yeah. So that elbow is an easy example because it's it's a hinge joint and it doesn't move in a lot of different directions. But when you start having like a shoulder or a hip that's a ball and socket now it can move in all these different directions.

And so in order to get the full complement of nutrients to that joint and pump out as much waste products as possible because of waste product stays in there, basically causes the breakdown of the joint.

And if you don't get nutrition and it also causes the breakdown of the joint because you're not replenishing those cells. I mean, most people don't know this, but cartilage is actually like a sponge.

And you compress it and it pushes everything that's in it, out in terms of nutrients into the joint capsule. And then when you take pressure off of it, it sucks a bunch of nutrition back up.

It's really, really cool. But if you don't move, that mechanism works against you. Again, it's like going back to how we started. It's like you didn't used to be able to go through life like that.

You used to have to move. Not moving meant you couldn't gather food. You couldn't get water means you're going to die, means you don't pass on your genes to the next generation.

It means all of those things. So movement was a necessity. Now we live in a world where movement is no longer a necessity, and we're getting these abnormal, normal responses from our body because we're living an abnormal life.

So the idea is basically 10,000 steps gets us closer to our evolutionary norm. That's, That's fascinating. I love the toilet connection. It's amazing.

It's amazing. It's like I when I, it's funny because you're building your clinic right now. And when I redesigned my clinic years ago, one of the things that I wanted to do was put in an eastern toilet.

And the idea was that was part of the examination. Either you're fit enough to go to the bathroom if you happen to be in Asia or you are not. And that was going to be one of the questions on my exam because it's relevant.

It's very relevant now. I love that. So but it's a good goal. It's a good goal. So I don't mean to make that, dare anyone who doesn't know what an eastern.

Could you explain the. Yeah, yeah, yeah. So an eastern toilet is, a fancy one. I've seen fancy ones, and I've seen very basic ones, but an eastern toilet is basically think of a porcelain, rectangle in the ground, and it's got a foot, positioned on either side of a hole in the center.

And the idea is that you squat, you put a foot on each of those, platforms, and then you squat your rear end down and you do your business into the hole in the center.

But you have to hang out in that squatted position. Unsub ported, for however long it takes you to do that. And, you know, in the Far East, people will break out a newspaper just like they do here in the West.

And they'll read a newspaper while they're in that position until they're done. And, and it's quite impressive when

you start comparing those aged match peers, to the United States, because, frankly, that's not a position that most Americans, or people in the West can hope to get into, let alone stay in for a few minutes.

And what about I mean, our toilets, right? I feel like our toilets are not very anatomically aligned. And how many people are on the toilet reading their phone and sitting there for longer than they need to be?

And what kind of damage that. Yeah, yeah. So you there's a bunch of layers to this conversation. You definitely bring up an interesting point. And there's research on that as well showing that that squatting position is is certainly more conducive to, complete evacuation.

The that's it's just that's the position that we were in in nature. And so, you know, having a toilet, where, where you're really high up, kind of like what I was saying.

You should be in for the position that you're in on a ball is not where you want to be.

Squatting, Toilets, and Functional Mobility

When you're on a toilet, you actually do want your back rounded. And, and you do want your knees above your hips. That's where the idea of those, like, squatty potties came in.

Where it's like a toilet store. Yeah, it's specifically to get your knees above your hips and to to cause more rounding of the back. And the same way, take it back to the biomechanics, nerd.

Your head will push forward when that happens. So. Yeah. So, I can talk about this stuff all day because it's fascinating and so. Well, it's neat how you how they kind of, like, intertwine.

Who knew we'd be talking about toilets? I did not come prepared for that one. That's. So before we wrap up, because I like, can we just talk about our necks and our heads and our phones and our computers and can you just give us some real life like advice of what the ladies watching should be looking out for, that?

Maybe they should stop doing so much and what they can replace that with. Yeah, yeah, yeah, this this one's really interesting. And, and I am, I am fully prepared because I, I just made a video about this one for my audience.

So I had been gathering the data from individual studies, but a meta analysis just came out that confirms that somewhere between 61 and 85% of our entire population now has a forward head position.

That's a big deal, because it's worth noting that what a forward head position is from a structural perspective is the loss or reversal of the normal curvature in the neck.

So a lot of people don't know this. If I say picture in your mind the shape of the lower back curve, pretty much everybody can do that. But what most people don't know is that the neck has a curve in it.

That's very similar to the lower back curve. That's the natural curve for the neck. It's not quite as pronounced, but it's the same shape. When you lose that curve, the head comes forward.

As the head comes forward, it does a bunch of things that you want no part of. First and foremost, because of the audience here that we're talking about, it increases your fall risk dramatically, dramatically because it alters your relationship with the gravity line.

When your head is out in front of you, your brain thinks that you are falling all the time. And so what happens is that the middle back shifts backwards to try and pull your weight away from falling forward.

Does that make sense? Yeah, yeah. So now we'll touch on vanity as well because nobody wants to have that darn hump here on the back of your neck because it makes you look old and it doesn't look nice.

So two things massive increased risk for falling doesn't look good. Number three, for every inch that your head shifts forward, it gains 10 pounds of weight.

I probably gave this example last time, but you can imagine if I'm holding a heavy 10 pound dumbbell or a 10 pound dumbbell here, and then I move it. This my bicep doesn't have to work very hard when it's close to my gravity line, but as soon as I start going like this, if I get 10 pounds out here, my bicep is working a lot harder.

Make sense? Still 10 pounds on the end of it. But the relationship to the gravity line dictates how heavy it feels and how hard my body has to work. So if you've ever seen somebody walking around who has a really thick neck, even though they don't lift weights like I lift weights, I have a pretty thick neck.

But if you ever see somebody who's like thin or petite and they've got a thick neck and these muscles are really big, it's because they got a forward head position.

There's research that shows that really thick, heavily developed trapezius are a reliable indicator of a loss of normal curvature in the neck. It's called cervical kyphosis.

Upper trapezius sign. And only I know that because like I said, I'm a biomechanics dork. And there was one study done on that. And if those researchers are listening by chance, I'm sure they love me because nobody talks except for me.

So is there anything that the ladies listening can do to be more conscious and bring their necks not so forward, bring them back? Yeah. So the there's also a meta analysis that just came out that showed that the more time that people spend on their phones, the greater the association with neck pain and forward head position and all these things becomes.

But it doesn't have to be the case because, you know, you could use your phone in an elevated position where you're not looking down. That would help.

Number two, you actually need to start working on the muscles that hold you up against gravity. And again, you know, we started off in a in a really nice way to, to arc in this direction.

We started off with things that you can do while you're sitting where you're taking little breaks, very low effort.

Forward Head Posture and Neck Health

Move into walking takes a little bit more effort when you start getting into reversing a forward head position, you're going to step up a little bit in terms of effort because you do need to get stronger.

What's really happening when a person's curve has been reduced or lost or reversed in the neck in really severe cases, is your body has lost the fight against gravity, Gravity's winning.

And that's a scary thought because we come into this world in a fetal position with one curve in our spine. It's a C shaped curve. It's called the primary curve.

The first secondary curve that forms anybody who has kids knows this is the neck. They start wiggling and then they start like Bob in their heads around.

The reason that the neck curve forms is so that the muscles don't have to hold them up. The curve is actually supporting that 10 pound head. And then the muscles just do a balancing act.

If you've ever held like a baseball bat in the palm of your hand and balanced it like that, yeah, that's what the neck muscles are supposed to do. The curve is actually supposed to support the neck.

Same thing with the lower back curve. That's the secondary curve. And the second secondary curve is in the lower

back. It holds the weight of the torso up.

And then the other muscles just support us and allow us to move around. But we're not working hard to hold our torso up unless you have no curve. And then you're sticking out in front and you're working like hell and white knuckling it just to get through your day.

The third secondary curve is the arches of the feet, and those recycle energy when we walk. So all of the secondary curves do exactly the same thing. They massively enhance human functionality, making it so we can enjoy our lives more and spend less energy and less muscular effort.

This was an absolute necessity for a species that could never guarantee, whenever its next meal was going to come from there, so nourishing the secondary curves absolutely essential for avoiding pain and maintaining maximal functionality. So whacking people with the stick is good.

I love the carrot. You're going to enjoy your life more, and you're going to be able to move better. Because if you maintain those secondary curves, then the joints are in proper alignment.

And when joints are in proper alignment, they move way better. So this is really the benefit. And to restore the secondary curve you need to get stronger.

You need to get stronger the same way that you get stronger in any other area in the body which is progressive overload. Yeah. Progressive overload means whatever your current level of strength is over the next month you should try and get to here.

And then a month after that you should try and get to here. And then a month after that you should try and get to here. So I created a device called the Active Traction Unit.

You wear it over your head and then it engages all of your body's natural postural muscles to kick on the moment you put it on. You don't have to learn the technique.

All you got to do is put it on, and it's going to immediately begin overloading those muscles, and it's going to kick on the right muscles. And then there's a situation in, a theory and strength training that's called the said principle side.

It's specific adaptation to impose demand. In other words, I train the body specifically for the task that I'm trying to accomplish. So if you're trying to accomplish a better posture, you train it for better posture, meaning postural muscles work subconsciously, they work for extended periods of time, and they work in an upright position.

These are very different than how we train other muscles in the gym. If I want to work my biceps, I contract, relax, contract, relax over periods of time, put it down, take a break, pick it up, do it again, do it a few times, blah blah blah.

Postural muscles they contract and hold. And so that's how you have to train them. You have to train them for what you're asking them to do. And I can I can share a video with your audience that, that basically shows how this device works.

Yeah. Can you send it? Can I'm like, I want an active. Yeah. I'm going to, take you can you give us a website that we can go to? Yeah. So it's on. It's on, pain fix protocol.com, and, and I'll send you a link.

So that your audience can see how it works. And then I'm going to send you one so that you can try it out. Really? Yeah. Thank you. I'm like, I want an active track because that's what I want you to try it.

I want you to try it. And then. And then you tell me how you love it. Yeah. Then I'm going to have everyone in my clinic wearing that because it's such a.

It's always been one of my personal things. Like, I always know I can improve my posture and as I'm getting older,

I'm like, this is getting more and more important and it's never too late.

And it's like brushing your teeth, doctor stills. It's like you got to brush your teeth every day a couple times a day, because you want to take care of that tissue, because you know what happens if you don't?

Well, it's time that people understand that you have to do the same thing with your posture. Eating is something that we do on a regular basis. We brush and floss specifically to counteract that thing that's constantly happening.

Well, gravity is happening constantly as well, and we need a regular practice to counteract that so that we can stay upright and healthy and moving really good and feeling really good.

Oh my God, I love this conversation so much. Oh my gosh. Pain fix protocol.com and you're on YouTube. Is it YouTube. And I'm going to I'm going to send you a link so that you can put it with, with this interview so that they can see how it works.

And I'll link the other video that I was talking about as well. Well, thank you for being here. This is this is a such an important conversation. I hope you, you know, we we've kind of got our doctor yoni roadmap now, so, I'll see you all in eight minutes.

Standing on. Well, that's the cool thing is, for anybody who's overloaded, they can start with that super easy stuff. Just think, like, if I can slash neck and back pain by 54% by doing something that easy, what a great place to start.

I'm literally going to go into the other room now and take away the chair, and I'm standing for the next ten minutes. Then you can have your chairs back. Yeah, yeah, yeah.

Well it I'll be I'll be excited to hear the results the next time you chat. Well thank you so much for being here as always. Bringing the wisdom, bringing the knowledge, bringing the action I love it.

So thank you so much for having, and you know, we're laughing at the super serious subject. So please take it to heart and get involved. And you know, the benefits are just ginormous. So.

All right everyone, we'll be back. See you then.