

Ep # 34: Hypermobility with Amy



Full Episode Transcript

With Your Host

Susi Hatelty

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Male Announcer: You're listening to *From Pain to Possibility* with Susi Hately. You will hear Susi's best ideas on how to reduce or even eradicate your pain and learn how to listen to your body when it whispers so you don't have to hear it scream. And now here's your host, Susi Hately.

Welcome, and thank you for joining me for this episode of *From Pain to Possibility*. And with this episode I am delighted to have Amy Yapp with me. And Amy is a fellow yoga teacher working therapeutically with people. And she's been a client of mine and a trainee with my programs for some time now. And we're going to dig into Hypermobility Disorders.

And the reason I want to go here is I've been working with people with Hypermobility Disorders for over 20 years. And more recently there has been more conversation about Hypermobility Disorders, and there's a lot of link to many other conditions that are out there. So it's kind of cool, in some ways, that there's an understanding of what might be contributing to some other systemic persistent issues that people are having.

And along with that though, that can sometimes occur, is that there can be a lot of misinformation. Or there can be information that's so well intended but it lands for the unique person in a way that actually does not serve them. So this conversation that I want to have with Amy brings in this unique perspective.

For any of you who follow me on this podcast for a period of time, you know that I'm someone who really thinks that there's possibility. That it's not about the label, it's not about the condition itself, but it's who the person is who has the condition and then what's possible. Because just because there is a condition and there's statistics around that condition it doesn't mean you need to live into those statistics. There are limitations perhaps, but then what is possible knowing that information. So that's what I really want to dig into this with Amy.

And also just to let you know that the two of us are going to be running a course specifically on Hypermobility Disorders in April. So there will be an

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opportunity for you, the link is in the show notes. We'll talk more about that on this call as well. There will be lots of emails that we're going to share about it because we're super pumped. Because as Amy will dig into, and will share too, is that what initially for her was a bit of a life sentence transformed into something that was much more supportive, powerful, and dare I say, a lot more freedom. Would you say that Amy?

Amy: Absolutely. Perfect word. Freedom, yes.

Susi: Which is interesting, right? Because you're someone who didn't have a diagnosis for all of your life and yet you can look back and turn back the process of your life and see how this has been with you. You've been, kind of your tissue has had a unique expression all of your life.

Amy: Absolutely. Yeah, I kind of joke that the day that I got diagnosed with Hypermobility Ehlers-Danlos I felt like it was sort of a this is your life diagnosis, it just made perfect sense.

Susi: Now, when you got the diagnosis were you happy?

Amy: I was. I had this kind of just... And of course I had already been working with you for some time when this just sort of happened organically that led me to this doctor who diagnosed me. So I have to say when I received the diagnosis, I think I kind of, I was, I was at peace.

It actually empowered me, and it gave me a new language to talk with medical professionals, where I always felt sort of a victim or like I didn't have much of a voice in a doctor's office. And this just gave me a new language. And I can't tell you how many amazing doctors and other people too, healers, that have come into my life that have just made perfect sense.

I think with hypermobility, as you said Susi, there are no two cases the same. And I kind of feel like everyone sort of has their own little health team. But the most important person is you, that's the most important

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person on your team. And now I feel like things are sort of really come together for me.

Susi: What's really interesting is that when someone is experiencing themselves on the spectrum of hypermobility there is a quality of this because their tissue is what their tissue is. And yet, as you and I have spoken about, and how I talk a lot in this podcast and in my teaching is that healing is possible and there is a process of healing.

And what I want to emphasize here is it isn't meaning that your tissue is changing, it's what you can do inside of what the tissue is. And I think I remember you telling me something around being Gumby and the yoga that you practiced people would always say how awesome your poses were. And a lot of that had to do with your ability just to move into them. Like move into shapes so to speak. And that you weren't actually feeling the position because you didn't actually feel a stretch sensation.

So a lot the typical, and we can talk about stretch sensation as a typical feeling, which I have a whole bunch to say about anyway. But when it comes to someone with a Hypermobility Disorder it's not something that actually resonates, because you have to go so far to even experience that sensation.

Amy: Yeah, and I think flexibility is a lot of times associated in our culture with athleticism and sort of that wow factor. I remember walking up one day, it was a group of yoga teachers after we had had a big weekend together of training. And I walked up to where they were eating, and I didn't know they were talking about me. And they were talking about my amazing bridge pose. And I said, "Who are you talking about?" And they said, "You."

But, you know, it made no sense to me because it wasn't something I worked at and I toiled for. It just sort of like, "What? What do you mean? What about my bridge pose?" So, I think that was this sort of, you know, "Look at her alignment, that's amazing." Where, honestly, it just confused

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me more than anything. So there's that part of it that now it makes, again, more sense to me now than it did, you know, 15 years ago.

Susi: And I think part of the problem, which I alluded to a moment ago, is that so much within the practice, and even in general fitness and life, is that that sensation of stretch is a measure of something. And it actually isn't because anybody can contort their body into movement, or into a shape and have a stretch sensation and it not be a movement that serves.

And the tricky thing with someone who has Hypermobility Disorder is that they can move into these places and not feel a stretch sensation. So then they almost feel, some of them, that they have to push even further but yet the stretch sensation isn't even the measure to really pay attention to.

So, some of the work that you and I did together was being able to connect into what I like to call is the nuance. And sometimes people get a bit intimidated by the nuance because it requires them to become a little bit more still. But before we started recording you had made a comment about something I had shared with you, which was it wasn't so much about the sensation as it is about your pay attention to your body movement. Do you want to share a little bit about that with your side bend and your pelvis?

Amy: Yeah, absolutely. When you first spoke with me about feeling the movement, honestly it was like you were talking Greek to me. I didn't understand it. So, for you to teach me through moving my body and doing some therapeutic yoga that was, I think, the only way I could have understood it.

And just a quick example of that, one of the poses that you thought that I really, I remember you saying, you know, "I think your body really needs this." And it was rolling up, in our case it could have been a rolled up blanket, or a felt pad, or even a soft ball underneath my side body between the top of my hip and the bottom of my rib cage. And then supporting myself with that. And then just moving the pelvis in more of a frontal plane movement. Which was a new movement for me.

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When I first did it I went for sensation. It felt so small to me. I don't know, I couldn't quite understand what you wanted me to and I did what you said but I felt this strain and pain in my right hip. So in my brain I just said to myself, "Well, that's not for me. I'll have to find something different."

And then you and I revisited it and I kind of shared that with you and you said let's try it again but let's have you just try to feel your pelvis moving. Don't go for sensation. You know, we kind of laughed, "Don't go for the sensation." And I got it.

And honestly that's something I do every single day, usually more than once a day. It helps me breath, it helps my posture, it calms my nervous system. I mean I could go on and on about just this little movement. But that was where the, the language for that was, you know, feel the movement instead of the sensation. And that was really healing for me.

Susi: So let's drill into that just a little bit. So if you can be even more deliberate in explaining that, I'm going to call it the nuance, because that really is it. It's the distinction between going after or feeling for a sensation, which has its own connotation. And then feeling the actual segment of your pelvis moving. So can you say a little bit more about where your brain focused in order to feel that pelvis?

Amy: Yeah, I mean, let me go back for a second in time a bit. We were talking about my bridge pose back in the day. You know, maybe going back 15 years, and I did not have pain then. I was, you know, hypermobile since I came out of the womb, but I never had pain during that part of my life. So I would go up in to bridge and wheel and literally feel nothing, just sort of, "This is really fun."

But fast forward 15 years, you know, now I'm 53 years old and I have had a lot happen to my joints since then. And when I look back in time I thought, "Boy, if I had had this kind of teaching back then where we could have really slowed it down and really taught me how to feel and not grip and

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brace to get there, and kind of that superwoman, you know, feel. And really taught me this kind of, you know, focusing on the movement of the body.

So, I hope that makes sense, but I didn't even understand what going for sensation really meant because I didn't have a lot of it. And then at the end point maybe I would finally feel that sensation. So I kind of thought that's how it worked.

So, yeah, so I think back to the present day, oh my gosh, I do it now with everything I do exercise wise. But it's a practice, maybe it will become automatic but it's still not automatic. I still have to catch myself and say, "Just feel the leg bone and the pelvis. Just feel the pelvis moving as opposed to trying to make the movement bigger or longer." Which really, I had to undo a lot of that.

Susi: Which is so interesting because what I'm asking is the simple reality and the objectiveness of what parts are actually moving. And it's so interesting, and you're not the first person who has said this to me like, "I just didn't get it." Right? And I think part of the reason, initially anyway, like now you do. But I think initially there tends to be a focus toward something like a sensation or something of that because that's where so much of the focus is.

And a lot of fitness, Pilates, yoga, even just fitness stretching, it's I am doing this right if I feel something. And yet the reality is that how you do the movement is what makes it meaningful and significant, and if I could say accurate and right for you. Because then you can really see if you're compensating or not compensating. And if you're working it in the way that the segment is meant to be worked.

Amy: Which kind of brings my thinking to the distinction between a stretch and pain. That's also something I've had to really learn living in the body I live in. And one of my journeys with my joints was I just assumed I had pulled a groin one day and went to the doctor to kind of just, you know, I thought he would say, "Oh, you know, maybe you should do a little PT or

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rest it.” Or what have you. And what he said to me that day was, “You have a hip of an 80-year-old and I need you to prepare yourself emotionally and mentally for a surgery, maybe two.”

I was shell shocked. I mean really shell shocked; I remember going into the bathroom in the doctor’s office in tears of just like shock. And, you know, so that was probably one of my... I did have joint pain like puberty and things like that where they would just sort of, they figured it out quickly with I don’t know, you know, a quick treatment or something. But this was the first time something was chronic.

And again, looking back I absolutely, you know, didn’t feel the pain until it was so bad. So, again, that’s another kind of thing I’m always, you know, I’m a much different practitioner and teacher now than I ever was.

Susi: And I think what you’re saying is there is a greater level of discernment as to what it is that you’re experiencing in terms of sensation. And there’s a bit more deliberateness in how you’re going about your practice so that with discernment and being deliberate you’re actually growing an internal infrastructure that’s a lot more supportive. Because being hypermobile you can just move so far because it’s almost as if, if I could use this language, there’s a lack of control.

And so without increasing tension, because I don’t want to have you increase an inappropriate tension, like a braced, or rigid, or a grip kind of tension. It’s that there is an infrastructure, and I like that word because it’s like it’s got more like, if I can say positive structuralness to it. If that’s a terminology I can use. Versus like a gripping, bracing, duct taping someone together. It’s more an internal outward as opposed to external inward. And then it’s using less of your big muscles to control and uses more systemically a better overall relationship to allow you to be receptive to load.

And so when you can discern, like that’s the key, right? You said discerning between, you know, what pain is and what other sensation is. And I think

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it's interesting because that's something that everybody that I see ultimately learns and for someone for yourself where sensation was fleeting, that to be able to tune into it specifically for you is in some cases the challenge. But as someone takes on that challenge it becomes a bit of a superpower I think.

Amy: Yeah, absolutely. I mean, it's almost like finding the voice in your body or finding your body's voice or your body's language. Another amazing teaching that you shared with me was, you know, "Can you do this with 10% less efforting and still get the same results?" And that was another big, "I have no idea." You know? And so yes, 100% yes.

Susi: And what's cool about that is the last few words of that. Because most people can do something with 10% less effort. But when you add in the piece of "And get the same result" now you're needing to do something distinct. It's not just taking stuff off your plate, it's not just moving less, it's how you're doing the movement.

And the things that's interesting with hypermobility is that there's a spectrum where someone like you, who you're born into this quality. And then there's others where you train into it. And there's a lot of hard work and there's a lot of force in order to make that movement happen. And so for those folks this...

I mean for both groups of people the ability to do less effort and have the same result is important, but I almost find that those who are forcing, and pushing, and gripping their way and really attaining and, you know, digging in for it, when they can realize something that is less effortful and you'll actually get better results out of it, it can be a bit mind blowing. Because we often think that we have to push in order to get better results where, oftentimes that's not that case at all.

Amy: Especially since that's the message kind of the world gave me. You know, I'm thinking back in the 9th grade and I tried out for cheer leading. And I didn't make it and then I went back the next year and the coach was

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gymnast tough, you know, she was really really stripped. And I remember the whole gym being filled with girls and she walked over to me and that year I was in the splits. And I forced my way into the split to make the team.

Looking back and I remember her saying, you know, “Look at Amy, look how far she’s come. You girls need to do what she... You need to work this hard. You need to get into the shape that she’s in right now.” And I was like, “What? She’s singling me out.” And then I made the team and then I was a cheerleader.

So yeah, looking back at some of my very early messages was, “Yeah, you just, you know, if you can work that hard to get into that shape why wouldn’t you? Look at you.” And it was dangerous, you know, looking back. But nobody knew. I’m so grateful that there is such an awareness and understanding now of what this is. I am so grateful to live at this time. You know and learn so much about the years that are ahead of me.

Susi: Right, and that’s such a great way of looking at it because there’s so much learning and understanding that you’ve had from what you’ve been through. And what you can do now going forward, and you know the bumps, you know your tendencies, and you can work with those to really channel them in a way that serves them inside of this uniqueness that’s your tissue.

And sometimes people will say to me that I can sound like I’m Pollyanna, but in fact it’s not at all. Because when people get what that uniqueness in their character is, or the quality of their tissue, and they can really work with that then anything becomes possible. We don’t even know what’s possible really because if you’re pushing against something that’s not innate in you then like it’s just a bunch of resistance. Whereas if you really go with the flow of what is available and just provide that extra structure in this case then who knows what’s possible?

Amy: Mm-hmm, you know, it’s funny I think back, just thinking about the word hyper, I think I was always sort of hyper trying, hyper caring. And I

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remember when I first started working with you one of the things that was really getting me down was the fact that one of my favorite poses that feels really good is tabletop and pointer pose. And I just couldn't do it anymore.

And you helped me uncover why. And the day that you said can you just move. You know, because I think I had no idea that I was gripping and bracing before the action. So I would grip and brace then I would extend my leg and arm. And when you just said, "Hey, let's just try this just for fun. Just extend your leg and your arm." And I, again, it's just one of those beautiful moments of awakening and I love, I'm back to doing it.

So you know, I'm still processing so much of this learning Susi, it's just awesome.

Susi: So what you're highlighting is there's this new way of strengthening where it's a bracing or gripping first, which is often taught and then you move. It's not this anticipatory work. It's actually move and feel the response in your body when you move. Because when you're bracing you kind of shut down the connection.

And what I've actually noticed, one of the patterns that I've seen with people who are hypermobile is that they have patterns of hypomobility and it's up to me as the teacher to kind of see where that is. And sometimes symbolically the hypo is just the way that someone pushes aside symptoms, and pushes aside sensation, and pushes aside so they don't feel.

So if there's a bunch of gripping and bracing going on, in some ways that can provide a sensation, that can feel like they've got control but it's like this external almost like duct tape control that is not control at all. And can continue to lead to problems.

Amy: Yeah, I mean, I think for me that duct tape was compensation. Like you always say, compensation isn't necessarily a bad thing, it's gotten me to where I am now. But it was very quickly in the last couple of years

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hurting a lot more than it was helping. And I think for me, being so hypermobile that's where I thought I was feeling grounded when in fact I was feeling ungrounded every time I would grip and brace. And again, it's something I just didn't have... It was under the level of my awareness, simple as that.

Susi: So, one of the things that Amy and I will be doing is really highlighting these concepts in this program that we're going to be running this spring. And we're going to be talking about the spectrum of hypermobility. Getting into some of the anatomy and physiology around it so you get some really good understanding of it.

So whether you're someone with Hypermobility Disorder or whether you're teaching or you're working with somebody with Hypermobility Disorder, it will give you some good background of what the heck is going on. And then I'll walk you through the awareness clarity connection feedback loop that I teach people to really show you what to pay attention to. What to look for if you're a professional working with someone. How to utilize you're queuing and instruction if you're a professional.

And then if you're a student, you're not a professional teaching somebody else, then what are you feeling for? What are you paying attention to? How can this improve your own balance and receptivity? And really also, and in all of that redefine the meaning of strength and how to support you moving forward.

The other thing we're going to be digging into are a lot of the obstacles that are faced, how to find your team and cultivate a team. Because there is still a lot of misinformation that's out there, and then you get to grow your own bandwidth for understanding what works and what doesn't work for you.

And in the medical world there's a lot more understanding, like when you've said to people, "This is what I've got." They're up on it and then you can just be as a patient with a client, you can be a lot more clear, you can advocate for yourself more cleanly, and just have more agency when

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you're amongst medical professionals who might have otherwise looked at you sideways. So it gives a lot more confidence and clarity. And creating that team.

And so we're going to be running that over a three-month period to help you really dig in and support you. We'll have practices for you that you can, as a student follow along and really support yourself. Which will also help you then if you're following other YouTube videos or if you are following other teachers that you can utilize the concepts to really support yourself.

And then as the teacher you'll get some good ideas of how to queue and instruct in a way that is supportive.

So we're really looking forward to it because, I mean, as Amy has said it's like you're in the next half of your life and you're excited about what's possible because of how much you now know and what you know in your own body.

Amy: 100%, and I feel like, you know, I think us hypermobile people, we are used to something's broken, need to fix it. You know, that kind of jump in and try to fix it, which creates more hyperness in the system and in your life. So, I think one of the things, one of the messages I hope we can really help people to cultivate in their lives is to really start to think in terms of feeling as opposed to fixing.

Susi: Love it. So, where you can find information on that, the link is in the show notes. We would love for you to join us. If there's questions you have specifically to this email us please, at health@functionalsynergy.com and we will see you in the hypermobility course. Take good care.