

# Ep #151: Exploring Your Breath Part 9 – Mechanics of Breathing: The Relationship of Your Psoas and Breathing



**Full Episode Transcript**

With Your Host **Susi Hatley**

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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.

Hello, welcome and welcome back. With this episode we continue our miniseries on exploring the breath, which is the lead up to my multi-week series on Mechanics of Breathing that begins on January the 16th. And with this episode I want to explore the psoas and breath. And if you find that you really enjoy listening to this, you'll probably really love the program. And I recommend that you check it out at [learn.functionalsynergy.com](http://learn.functionalsynergy.com).

Now, I have spoken about the psoas on this podcast on two different episodes. One is episode 14, the other episode is 62. So you might want to go back to those episodes if you want to dig in a little bit more to the psoas in general. What I want to cover on this one is that, you know, typically when we think about breath, we think about one key area. Other than the respiratory system, we think about one key area.

We don't tend to think about the psoas and how the compensatory strategies around the psoas can play a big role in our breathing. I then want to take you through some release and stabilization and talk a little bit about the smooch factor as well. So that's what we're going to dig into today with this episode around breathing. And your psoas, so let's get going.

Now, what's interesting here about the psoas is it's not often a muscle that we typically talk about around breathing. I mean, obviously, we talk about the diaphragm, we talk about the musculature around the ribcage, we talk about the pelvic floor. There's often conversations around the canister, which is also the canister that's often spoken about around inner core, right?

We have the diaphragm at the top, and we have the pelvic floor at the bottom, and we have the abdomen in between. And that canister plays a big role in breathing because the diaphragm and the pelvic floor work

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together for full body breathing. And when they're not functioning well, then that can impact breath.

Now, you might not function well, those areas might not function well because they themselves are not functioning well. It could also be because tissue that surrounds them are not functioning well, as a result the diaphragm and or the pelvic floor aren't functioning well. And then that can impact breathing.

It can also not function well because the actual respiratory organs have some issue going on and that might impact the way breath is moving, which can impact the diaphragm and the pelvic floor. So a number of different ways.

But again, the idea here is that it's not often the psoas that comes into that conversation. When you look closely though, the psoas, again, is a muscle that attaches to T12, down the lumbar spine and then on to the leg bone. And what's so interesting about it is I've heard some anatomists talk about it not as one muscle, but as separate muscles because of each of the individual attachment points on the vertebrae.

And that makes this very interesting because the lumbar spine has its own curvature. So the top of the spine, if the psoas is pulling at the top versus pulling near the bottom, then its impact on the spine is going to be different. So that's a very nuanced kind of look at it, but kind of fascinating as well. So just something to think about.

Now, it hugs in nice and lovely into the spine, how I like to think about it. But so do the crura of the diaphragm, right? So if you think about an umbrella, which is often an image that is used for the diaphragm, and think about the handle of the umbrella. The crura are the handles and they connect along the spine and some right down to the sacrum.

And they can, in some bodies, interweave or can be really close in proximity to that psoas. So there can be some neighborly love or some neighborly conflict perhaps between these two sets of tissue. Then it would

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make sense that there could be some impact on the way that the breath moves.

There's also a lot of conversation about the impact on emotional body and the psoas and emotions in the psoas and various kinds of emotion that can get caught up inside of that psoas or what's related to the psoas. The verbiage can be utilized in different ways, but just this idea of the impact of the psoas and how it can then in turn impact breath. So it becomes really curious to explore.

Now, the other thing that's interesting about the psoas here is that it's a sagittal plane muscle mostly. So when you're looking at its impact, it moves the vertebrae in a sagittal plane when it's working well. And then when you're moving your leg bone, it mostly works in a sagittal plane. And so that becomes kind of curious when we are standing vertical.

I mentioned compensation patterns, the psoas, I like to call it the queen of compensation because the psoas kicks in to just save the day for so many muscles that might have decided to, for whatever reason, stop functioning as well as they could. I see this happen with abductors of the hips, adductors with the hips, deep rotators of the hip. The psoas will come in there and try and do the job that is not really theirs to do. But in order to get the day done, something has got to be the glue that holds it all together.

But what's also interesting is so much can compensate for a psoas that's not functioning well either, right? So until we actually get the shoulder girdle functioning well, and the ribcage functioning well, and the pelvic girdle functioning well, until we can stand well on our feet, how that psoas can kind of remobilize itself with better motor control and coordination, like until those areas are involved, we're not going to get the gains that we really could get.

So that's why I'm including this in the miniseries, because in order to help us retrain the psoas, in order for the so as to receive the retraining, there needs to be some down regulation. There needs to be some really

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purposeful, intentional relaxation of letting go, of settling in. And that can be difficult for a lot of people. Letting go is not easy.

Letting go requires support, which requires us to improve the motor control and coordination elsewhere. It requires us to play around with release patterns. So that's what I want to work with coming up, because we want to help the psoas be the powerful muscle that it is. We want to reduce compensatory patterning through the body so that we can enable muscle tissue to do what it's meant to do, enable fascial tissue to do what it's meant to do, and to really allow the breath to do what it's meant to do.

So we're going to work with some stabilizing in just a moment. The last little piece that I want to make mention of before I go there is the idea of smooch Factor. I see this a lot in women and men, but a lot in women as women become older. It's not that they are rounded forward a lot. For many of them it's that it looks like their spring has become less springy, right?

If you want to think of a slinky, like the slinky just has last spring. And I find that there's this sort of smooch factor, like the ribcage almost looks like it's smooching down into the pelvis. I mean it's not really doing that, but it looks like it is. And there's this heaviness that can occur between the ribs and the pelvis and it can get very stiff and just not move really well.

But then as the tissue starts to regain some suppleness, as the breath returns, that springiness can then spring back. And I see this a lot with my older clients as they move better, and that psoas starts to become alive again. And not simply from doing the release work, but the release work plus overall body better movement. And in some cases, they're doing some body work, but overall, integrating better body movement and breath throughout.

So if that's all sort of ringing a bell, then you'll enjoy what we're about to go into, which is a release and restabilizing practice. So where I'd like you to go is find a place that is comfortable to lay down on. And if lying down is tricky, then find a position that is more comfortable.

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And I'm going to walk you through an interoception practice which really means tuning yourself in, improving the awareness of. That ability to feel is really important as we explore this retraining of motor control and coordination. And then following this we're going to get into a little bit of movement.

So the first place I want you to bring your attention to is your feet. And imagine that you can feel the bones of your feet. And feel the toes of your feet. And then feel the ankles of your feet. And then how those ankles give rise to your shin, and then into your knee, and then up into your thigh and your pelvis.

And then feel how the spine arises out of the pelvis. So the spine connects to the, the very base of your spine is the sacrum and the coccyx. So the spine coming up and out of that up towards your shoulder blades and ribcage. And then right up through the neck to the skull. So tune now into pelvis, spine, ribcage, head.

And then taking a breath. And then feeling your arms out toward your hands. And what I'd like you to tune into if you can, is as you're lying or sitting here in the position that you're in, and you're now feeling more of your body, you're now perhaps feeling more of your breath. Are you able to discern tension and relaxation?

So there might be some areas of your body that you feel relaxed, maybe even in your mind. And then there's areas of your body, maybe even in your mind, that you feel tense or have tension. And it's okay to have either or both, we're not trying to get rid of tension. Not yet. Tension is not a bad thing. I just want you to be able to feel them.

Okay, now specifically come through to your belly and your ribcage, placing one hand at around your navel area and then one hand on your breastbone. And without trying too hard, simply allow your hands to receive the movement of your abdomen and your ribcage.

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So your hands are acting as feedback, like biofeedback. And so as your breath moves your belly and your ribcage, as it comes in your hands will feel them expand. And then as you breathe out, you'll feel them move away from your hands. We're not trying to make you breathe deeper. It's really tuning into what it is you're actually doing.

So because the psoas has a reputation to be a muscle that can hold a variety of different emotions, being able to tune into relaxation and tension and where these are being felt in your body can be really, really, really helpful. Also, if you're someone who's done any body work where you've had your psoas released, you will have likely had the experience of it feeling really good.

So many people, when they get their psoas released are like, oh, this is heaven on earth. One of the downsides, however, is that about 24 to 72 hours after the release, things tighten back up again because of the compensatory patterns I spoke about earlier as well as the emotional piece to this. Because if those things don't get resolved to some degree, then we'll just return back to our habitual patterns, right, like anything.

So we can get those lovely releases happening, and we need to help the retraining process. So this first piece is tuning into relaxation and tension so that you get to know them. You don't need to get rid of the tension, as I've mentioned, but you can tune into what it is and the quality of what it feels like. And then as we move through a few exercises here, you might notice that it changes as a result.

And then once you notice the change, then name that quality and start to notice the variety of this, not to sound totally flaky on here, but it's like noticing the bouquet of qualities, like the variety of qualities that exist in your body.

It's so key to the listening of your body and being able to help retrain this motor control and coordination so that you can retrain the psoas. So you can retrain how your breath and psoas interact, and how that then change

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your overall demeanor, your performance, your state of mind, your pain levels.

So with your hands here now, we're going to start just by moving your leg bone. So in this one, I'm going to ask you to come onto your back. If you're not comfortable on your back, stick with the breathing exercises that we're doing.

But on your back you're going to gently, with your knees bent, both of them, you're going to gently straighten one leg out away from you. And then you're going to bring that same leg back up. You'll straighten that leg out from you, and then bring the leg back up.

Now the idea here is that notice if when you move that leg, your pelvis wants to move with it. And notice at what point the pelvis wants to move. And what I'd love for you to explore is can you move your leg only as far as that pelvis doesn't move? Whether it's rocking left to right, whether it's going into an anterior or posterior tilt, or a combination of those. So you're straightening the leg out and then bringing it back. And then when you've done enough on that side, then switch to the other.

And with this particular practice, I don't suggest when to breathe, I just want you to breathe. So if you've got a practice where you only breathe inhale on one phase of the leg movement, and then exhale and the other phase of the leg movement, then go right ahead and do that. That's just not something I typically do. But it doesn't make you or me right or wrong, it's just a different way of doing it.

Okay, where I'd love for you to go next, when you're ready, so you can pause me if you're not quite ready to move on. When you're ready with both knees bent, feet on the floor, we'll play with the right leg to start with. The right leg, the knee is going to fall to the floor, gently.

And it might not go all the way to the floor, but you'll be rotating that leg bone in the socket, and then straightening the leg out away from you. And then you're going to bend the knee and bring it back up. Do the same thing.

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Let that leg come away from you, and then straighten that leg and then come back up. And then one more time.

As you're doing this, again, remember the pelvis. Can you do this initially with your pelvis staying quiet and just the leg bone moving in the hip socket so that you're only moving the leg as far as that pelvis doesn't move. Same with the ribcage, same with the spine. And then begin to move on to the other side, same thing.

So what we're working with by doing this is really focusing on how the leg is moving in the socket, the hip socket, tuning in with the breathing. So we're helping mobilize around the pelvis and the leg. And with easy, easy breath this can go a long way into settling through that abdomen area and settling through that psoas.

When you're feeling like you're balanced on each side, then just rest back with your knees bent. Really, really easy breath. And notice if you feel any distinction in the relationship between relaxation and tension. If there's a difference of quality in your abdomen, in your breath. And if there's another state other than relaxation or tension that is present, then can you name that?

This is especially helpful if this exercise has benefited you and the tension has settled out. What has it settled out to? Can you name that? And I've mentioned this on other episodes before because the naming of the new state once something has let go is really important. Because letting go often doesn't happen consciously.

It happens as a result of more support or some other part of the body settling out. And then the thing that was hanging on can also now settle out, right? We don't tend to let go as a specific action, it tends to be a result of other things.

So now if you can notice what the quality is, you can tune in to when that pattern might be coming back, which in the early stages of recovery does happen. But the more you can notice when it's fading, the good feeling

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starting to fade and the old symptom starting to arise back, then you can intervene more easily. That's the great thing about recovery and really tuning in and listening.

Now, you can stay here if you'd like, or you can follow my voice and come up to standing. And for standing, coming on to a yoga block. Holding onto a wall, just let your one foot come on to the block and the other leg, just let that settle. So one foot is off the floor, the other foot is on the block. And then you'll begin to gently swing the leg.

Now, as you're swinging it, recognize that your leg bone moves in your hip socket about three to 11 degrees before the pelvis starts to go into an anterior tilt. So notice that we're just, we're not making this a big movement. We're making the movement very, very, very small.

Notice if you want to drive the movement from your psoas, like further up in your spine below your ribcage. Or if you want to drive it from any other part of your abdomen or your back or your ribcage. Can you quiet that down without holding your ribs and just be soft through your abdomen while that leg bone moves very, very gently.

You might even feel like the leg is starting to settle and depending on your height, your toes might even start to touch the floor. And then come off of that and stand on your feet. And notice what it feels like standing on your feet.

And then when you're ready, let's switch to your other side and stand on the block with the opposite foot and the other leg is hanging from that hip socket. You might need to hold onto the wall for extra support. And then when you're ready, beginning to swing that leg.

And remember, the leg bone, depending on the anatomist, the leg bone can extend about three to 11 degrees before the pelvis moves into an anterior tilt. So consider that mechanics and can you just move that leg bone, it's really small, without that pelvis moving? Really, really good.

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And then when you feel like you've had enough here, come off of the setup and just stand on the floor. And people sometimes are amazed with how much longer they feel. Other times there's been some release that's happened and they're like, whoa, this feels a bit weird.

So if you're feeling a bit out of sorts, you're not really sure where you are in space, come to the wall and do a very, very, very small wall sit. So what I mean by that is place your back against the wall and just slide down like an inch or two. We're not doing like a wall sit that you might do in CrossFit, for example, where you need to burn up your legs. We're not doing any ski training.

But when you slide down the wall by like an inch, and you're moving your hips into flexion, your knees into flexion, so the same thing is happening on both sides of your limbs, there can be a very grounding experience, especially if you can feel the bottoms of your feet on the floor. And this can help recalibrate and reset.

And if you've done that, then slide yourself back up and then come away from the wall and notice what you feel now. Tune into your breath, tune into your abdomen, to your psoas, to your legs and your feet. And also tune into what the qualities of relaxation and tension feel like in your body now. How about the clarity of your mind, yeah? Lovely.

Now, if this really resonated with you, you can certainly repeat it. The key is to really tune into your body, right, and recognize when it's too much. So you've got to pay attention to the sensations that you've uncovered in your body. And allow yourself to really tune into the relaxation and tension relationship and this relationship between psoas, your leg, your diaphragm, your breath. Allow your brain to explore that and it will help you make that decision around if it makes sense for you to consistently and continually do.

And if this has resonated with you, then do check out the Mechanics of Breathing course, it would be such an honor to work with you and it's a really, really terrific program. You can read more at [learn.functionalsynergy.com/breathing](http://learn.functionalsynergy.com/breathing). Take good care.

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If this episode has resonated and you're looking to deepen this idea of getting your body back on board, of listening deeply to your symptoms, of listening to the whispers so you don't have to hear the screams and you're looking for one to one support or professional training, then reach out to us at [health@functionalsynergy.com](mailto:health@functionalsynergy.com) where we can customize your learning path. That's [health@functionalsynergy.com](mailto:health@functionalsynergy.com). Looking forward to hearing from you.