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With Your Host

Susi Hately

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 welcome back. I am so glad that you're here because today is the second episode of rethinking hypermobility. Where last week I was sharing about how the people that I work with, they have persistent physical pain for the most part. And there is a subcategory or a subgroup of people who come to see me who also have hypermobility.

And it's usually a diagnosis of EDS and the piece here that's vital is that they're not seeing me specifically because of EDS and hypermobility. But rather because they have pain and they want to get rid of it. They want to reduce it and it just so happens that they have hypermobility.

And I think that's really important to be clear about. I'm not like a hypermobility trainer per se. But rather the people who see me are people who have physical pain and persistency of that physical pain and the subcategory of people also have hypermobility. So there are a lot of people who I see who have hypermobility, and my jam is the physical pain piece.

And so this mini-series is really about how I work with those folks. Because to a fly on the wall a lot of what I do or what it looks like I do looks similar to those folks I work with who don't have hypermobility. The principles are very much the same, however, how I actually do the work, the words that I use, where I really direct my focus is distinct because of the nature and the patterning that consists and that exists with people with a hypermobility situation.

So, last week I spoke more about that and I kind of veered into a little bit on the ideas of interoception and proprioception. And today I want to speak more about interoception and proprioception and offer up a beginners guide to these concepts.

Now, I spoke about interoception and proprioception in other podcast episodes. The first time I did that is in episode 161 and also in episode 164 where I talk about the key difference maker for many of my clients for helping them reduce and eradicate symptoms of pain was this ability to feel.

And I mean, I love the word feeling. I know that there's so many people out there who do not love the word feeling and when I bring it up they roll their eyes and all the things. But the reality is it is the difference maker because feeling really is another word for interoception and proprioception, and I'll explain why that is in just a moment.

When I reference episodes 161 and 164, in those episodes we talk about when it's difficult to feel and tips and ideas and suggestions on how you can support yourself or your clients along this process of feeling. So as you listen to this whole show that I've been running for a while, I bring up feeling quite a bit.

People don't necessarily want to do it because they just want to get stronger. They think that they just need strengthening exercises or stability exercises or flexibility exercises. But the reality is if you build strength on top of patterns of unawareness or compensatory strategies that you aren't tuned into, then what you're really building on some level is a bunch of strength on top of tension, right?

And so you're building the strength and stability or flexibility on top of movement patterns and neuromuscular patterns that aren't ideal. So at some point you're going to have the house of cards fall down.

So that's why it's like I'd rather just work in that space where we can resolve and tune into some of those spaces that you can actually build better patterning between your neuromuscular system and your skeletal system. And start to make foundational gains that when you start then adds strength and stability and flexibility and mobility and all those aspects, even balance and agility and all those things.

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It's just done on a base that's so much more supportive, so much more integrative. I recently heard a line, which I'll probably share more and more in this podcast because I really love it. I heard this line recently and it's attributed to Navy Seals. I don't know if the Navy Seals were the ones who came up with it, but alas this is where I heard that it was attributed to and that is, "Fast is rough, slow is smooth, smooth is fast."

And so how I liken that in the work that I do is that when we build out smooth and coordinated systems of movement we've got better neuromuscular connection, guess what happens? The tissue that does not need to be involved in a movement, I.e. those compensatory strategies that don't need to be really used fall away. Things fall away in a positive way when we have better integrated patterns.

And we just become more efficient in our movement, become more effective in our movement, it becomes easier, we become lighter, we become taller. All that stuff that our systems really crave and are moving toward and we just need to allow it to happen. And so when we force it, when we push it, when we try to go too fast, it doesn't work quite as well.

So then that leads us into what I'm sort of dubbing this episode as being the beginners guide to interoception and proprioception, where I'm focusing on my hypermobile client because most of my clients who are hypermobile, most of them generally but specifically those folks who are hypermobile, they don't really want to do that. They take a big sigh, and they're like, Okay, I will do it because I know that the work you do, Susi, works, but I really don't want to do it. And we're going to explain how you can go about doing that in this episode.

So let's begin with interoception. If you do a quick Google search on interoception, what you'll find is that interoception means sensing internal signals from your body. Think about those five senses of touch and smell, taste, sight and hearing. So think about hunger, or when your heart is beating fast, or when you need to use the toilet. That's the idea of interoception, being able to tune in to those signals.

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But also, in my mind, interoception is feeling other sensations as well. Stretch sensation, strength sensation, other sensations that might not be called stretch or strength. Maybe it's warmth, or maybe it's a ratchety breath, or a smooth breath, or a full breath. Maybe it's gripping or bracing. All of those are sensations that if you can tune into them, you are able to have interoception and you have grown your interoceptive capabilities.

These are really important signals and sensations to tune into, particularly if you are someone with hypermobility. Because one of the factors being hyper mobile is that your interoceptive skills are not as strong in an innate, intrinsic sort of way compared with people who don't have hypermobility. And so one of the things I'm doing with my clients with hypermobility is helping them grow those skills.

So I really want you to hear that again. People who have hypermobility have a lower capability innately for interoception and it's a skill that can grow. And it's an important skill to grow, much like proprioception.

If we go to Google again and we look up proprioception in a quick Google search, what you will find is that proprioception is a sense that lets us perceive the location of movement and the actions of parts of our body that are involved in movement. So it's enabling us to feel or perceive joint position and also muscle force and effort.

So another way to think about this is your body in space. So can you feel the segments or the structures of your body moving? So when you combine this ability to perceive your body in space and you combine it with feelings of interoception, you start to get a really great amount of data and information about what is going on in your body and with your body. So then you can make better and better decisions about where and how you're moving through a variety of exercises that you might be doing.

One of the major things that I see with my clients is that they go too far because they can't feel what the appropriate range of motion is for themselves because of what they are not able to tune into. And then as

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they tune themselves into their interoceptive sense and their proprioceptive sense, then they can tune in to those signals. And then they do know where their range is and then they can improve their overall ability.

So again, and I might be over speaking this, but more than ever in the world I want those of you who have EDS and other hypermobile issues to know that you can grow your skill. And in fact, if I can say it this way, as you grow that skill of interoceptive and proprioceptive ability, your ability to move really, really grows and in some ways you move better than people who don't have hypermobility.

It's when what can sometimes feel like a life sentence and something that's a real burden can really change on a dime where you see the capability of what hypermobility offers you. I know that sounds strange. But I would say that in many ways those of my clients who have really taken this on have really tuned into specifically what they need. And not in a narcissistic way at all, but in a way that really serves them.

I even had a client recently who came back from the dentist and the dentist said for what I am seeing on your scans, you should have way more pain and not be operating at all in the world the way you are. And you are just a great example of what is possible. I know that is a possibility. I hope those of you who are listening who have hypermobility know that it's a bit of a journey to get there, but it's a very, very possible and probable journey if you're willing and able.

And I will say that in the upcoming program that I begin on June the 19th on understanding hypermobility, I'm bringing in some fantastic speakers along with myself and one of my great, awesome clients and grads, Amy Yapp, and we are going to be helping you get there. So do look at learn.functionalsynergy.com/hypermobility to read all about it because I would love, love, love, love, love to show you that it does not have to be a life sentence, that it really can be an opportunity and I'm not being euphemistic.

Okay, so let's get further into this. So what I want to do in this episode is walk you through a process, what I call the beginner's guide to interoception and proprioception, and it will be a breathing exercise to help you bring your attention to your ribcage and to your breathing, all right?

And as you go through this process, you might also notice other sensations elsewhere in your body, maybe through your neck or through your head, maybe down to your pelvic floor, or even through to your feet. And as you notice your ribcage moving and the other aspects of what you're perceiving proprioceptively and interoceptively, just know there is nothing that you need to do with any of the feelings that you're experiencing. You can simply just notice them.

Now, if you're noticing that you're feeling unsafe, if you're feeling concerned, if it's too much, then yes, stop the process. The key is for you to feel comfortable and to be with that level of comfort as you continue to experience your breath and your body parts and your movement.

So with that, find yourself into a position where you can feel yourself breathing. This position could be in sitting or laying down, it could be in standing. And be aware of first how your breath is moving through your body. And as you breathe, what parts of your body move? Maybe it's your belly. Maybe it's your ribcage. Maybe it's feeling the air coming in through your nose.

When I'm speaking about breath, what I like to say is before breath was breath, it was air sitting in front of your face. And then there was a pressure change, there was a vacuum. Air comes into your body, does its breath thing, moves through the respiratory system and then out it goes again.

And something we sometimes really step over is the fact that even though there is this vacuum and this pressure change and there's a lot of different anatomical and physiological functions that can either accentuate or impede breathing, our body is this mechanical pump as well. And the tissue

and the relative tightness and tension will and can impact the way that the air comes in, the way that the breath moves through our system.

So when we can tune into the way that our ribs are moving, or the way that our belly is moving, or the way the pelvic floor is moving, we can tune in interoceptively just to what that reality is. Nothing to do, we can just sense into it. We can even notice the relationship between the parts. So the relationship between the pelvic floor and the ribcage and that becomes more proprioceptive.

And are you noticing if the breath is ratchety or smooth, warm or full? You can then bring your hands to your belly and let the palms of your hands rest on your belly with the middle finger around the mid-line. You might even have the tips of your middle fingers touching.

And then without trying to move your belly per se as you inhale and as you exhale, notice how the belly moves. And you might notice that your hands naturally move away from each other as you inhale and then come back together as you exhale.

And these hands placed this way can be very useful in noticing how your body is moving, both from a proprioceptive perspective and what you're feeling interoceptively Your hands can provide a sense of groundedness and connectedness, of noticing where your body is in space proprioceptively and also noticing the sensation of your breath interoceptively.

So then move your hands up to your ribcage. And just let your hands rest wherever it's comfortable and just initially feel the ribs themselves. And see if you can compare the feeling of the ribs being the skeleton, versus the abdominal tissue that's below the ribs or the tissue between the ribs. And feeling the distinction between the tissue that is skeleton and bone and the tissue that's anything but skeleton and bone. Feel the distinction of those sensations.

And you might also notice how the breath moving through your ribcage is different in quality than how it moved through your abdomen. Maybe it moves more, maybe it moves less. Or maybe it's different simply because you're feeling the skeleton pieces of the rib cage versus non skeleton pieces of the abdomen, right? The abdomen is the soft tissue between the ribs and the pelvis.

And you can even slide your hands over to one side of the ribcage and just feel the one side. So let's start with the left side. And if you slide your left hand over onto the side and bring the right hand over to meet it, and bring attention to how the ribcage is moving into your hands.

So thinking about without changing the volume of your breath, can you let those ribs move wide? Watch to notice if you want to bring the upper shoulder area towards your neck. So don't raise the shoulders up. Or if you notice that they are raising, can you only move the ribs wide as far as that doesn't happen?

Or if there's any other gripping pattern maybe in the pelvic floor, or in the jaw or in the eyes. Can you just allow the ribs to move laterally only so far as there's not that increase of tension? That it's easy. Not straining. And if there is, can you dial it back?

So allowing the ribs and the breath to have a conversation, not an argument, but just letting the ribs move with that inhale and the exhale. And again, notice what the sensation of the breath is. Is it warm or full, easy, grippy, ratchety, braced, hard, soft?

And I really want to impart that none of these words are right and none of them are wrong. It's really just noticing the quality, much like noticing if the sky is blue. What shade of blue it is. If there are clouds in the sky or not. You're just paying attention to just what is the quality of the breath that you're noticing.

And then bring your hands over to the right side and notice how the ribs are moving there. Same idea, same qualities. Or maybe there's different qualities that are showing up. Maybe the ribs are moving differently. How the breath and the ribs are interacting might be distinct here.

And notice the relationship perhaps with your legs, pelvic floor, down to the feet even. There may even be this other subtle vital energy that you're noticing as you continue to explore the sensations of what your breath is, and proprioceptively the relationship between your ribs and your pelvis.

Easy, easy, easy. Allow those hands to come back. And then noticing if anything new has arisen, hands on the ribs or hands on the belly. And maybe you notice any sense of new space or other feelings or sensations that you didn't notice before.

In some cases, people might notice physical pain that has settled down or anxiety or agitation has settled down. Maybe there's a new state that's present if physical pain or anxiety or an agitation is settled. What is that new state?

And I don't want to put words here, but maybe there's a state of peace, or lightness, or ease, or calmness. Maybe there's a groundedness, or a heaviness, or a tiredness. Just notice what's now there. These are all examples of data of what goes on in your inner world as you do something as simple as breath. As simple as noticing what your ribcage does and what your abdomen does, maybe what your neck or your face or your pelvis does.

Now, you might be asking, well, what do I do with this data? And I will get into it in a future episode, for sure. We have two great speakers coming up in subsequent episodes, so you can tune into how we might utilize these new sensations to support you to continue to help grow your own inner awareness and grow strength and grow stability, help you reduce pain.

But for now, just pay attention to what the data is. Remember, fast is rough, slow is smooth, smooth is fast. When we can be in this place of just gathering the data, of noticing what is going on, we have a better chance at growing these smooth and coordinated patterns, of recognizing the tolerance of our tissue, of tuning into when we need more rest and all in all growing our capacity to perceive our inner world and the state of our tissue.

So that then when we go and seek support from other health providers, we have great data to share with them so that we get the help that we need. We get the support that we need. We get accurate diagnoses. We're bringing very clear data about our own inner world and own inner experience so that when that health professional provides a suggestion or an idea, or specifically works on ourselves, we can feel the difference that that stimulus, that that idea makes for us.

And when we have a baseline interoceptively and proprioceptively, we can really tune into what difference those ideas and those stimuli, those offerings that other health providers give us. And that information is gold. You really gain your own sense of inner power and inner resiliency and a true inner sense of support for your own self.

All right, so now tuning in to your breathing. And feeling all of your body now, from your feet through to your legs, your pelvis, your torso, your shoulders and your arms. Up through to your neck and your head. Allow your focus to gently rest through your whole body, whatever you can perceive.

You can come back to this episode to continue to practice this idea of tuning in both interoceptively and proprioceptively. And if you want to take the next step and really dive into it, then join me this June. We're working from June 19th to July the 14th. I've got some great speakers coming in, all with some serious credentials around working with people with hypermobility. You can read all about it over at learn.functionalsynergy.com/hypermobility.

It would be such an honor to work with you. I know the struggles that people have who have hypermobility. I know the struggles some health professionals have with working with people with hypermobility. And things can change. You can get better. You can recover, you can reduce and eradicate the chronicity and persistency of symptoms. Absolutely.

So please join me. Have a read at learn.functionalsynergy.com/hypermobility. Thanks for joining me here today. We'll see you next week.