

Now, I would like to hand over to our speaker Dr. Jamie Clapp.

Thank you Carla. Good afternoon everyone happy to be here talking to all about therapeutic movement and different types of therapeutic movement forms that can be for patients with chronic pain and we will dive into the presentation and disclosure. This will be our agenda and plan for the afternoon. We'll start out talking about exercise the background for my full movement in the treatment of chronic pain and discussed largely tai chi at the beginning of the afternoon and talking about the different types available there. And that is our plan.

These are the objectives. We hope to discuss current evidence for therapeutic movement in the treatment of chronic pain describing benefits of incorporating therapeutic tai chi and Chi gong and different tai chi and benefit or contraindication. As well as evaluate therapeutic principles of tai chi and yoga. And how they may be applicable to the treatment of chronic pain and we will have an experienced, experience movement moment, and movement where you get to practice some different forms along the way. Should be a good time.

Before we dive in, I would like to ask everyone to take a look at some of our activity recommendations. These are from the CDC guidance and how many minutes of physical activity we should all be getting each week. 150 is the minimum and we want at least two days a week to include some form of strength training and so these are the baseline to prevent disease and to maintain our health. We will have some pop quiz questions here to start the afternoon off. We will talk about what physical activity matters and why we need to pay attention to this not only from a pain perspective but also from the physical cost of inactivity and they say one out of 10 deaths are premature deaths contributed to by inactivity and a huge financial burden related to the different physical ailments and different consequences that occur from the levels of inactivity and we have to consider what our healthcare system burden is. That is something that affects the US more than some other countries and just because of our lack of prevention a lot of different areas and really getting our patients aware if experiencing chronic pain. Defining gateways to become more active or if they are front-line patients we see every day and chronic pain situation our society as a whole we want to get moving more often and moving well.

It is relevant to our Army population it is a growing problem of obesity in our nation that there is now difficulty finding enough service members. To keep filling the force and consider the impact of readiness as continues to move on and one in four adults are too heavy to join the military and so we have to consider the consequences we have coming from that angle as well and there's a direct effect on readiness within activity and getting the shift to help promote activity and having that conversation run how many minutes of physical activity should be occurring is an important thing from all levels of healthcare.

And the pop quiz I was talking about, how many do you think of our percentage of adult get 30 minutes of activity every day? And Carla will bring the poll over and you can vote and we have A. 5%, B.12%, C. 25% or D. 45%. What do we think it is?

Most believe it is number be 12% of adults getting 30 minutes of activity daily in the answer is 5%. It is a sad truth we are of a society not moving as much as we should be so promoting that physical activity is important and hopefully today we can show you some new ways to help starting patients not necessarily used to moving or little bit afraid to move on ways to start moving them toward that and help them engage and become more active.

So now here's another question for you, activity recommendations we know it is 150 minutes for average adults and do you think that number of minutes per week would increase with age and disability? Or think it would decrease? The question is activity recommendations increase in minutes per age, is that true or false?

We are at 50-50 now. The answer is true. We know that physical activity demands need to increase if there is an increase in age and increasing disability. To prevent the development of further disease progression or prevention of disease and as a whole, we need to increase our total numbers. We want them to work up to closer to 300 minutes per week timeframe and that is in reality five hours if we have an hour five days a week they would meet the requirements. We want to inch them in a way that will help them get moving more and more safely and is not easy and that is the challenge. We have to help them understand that we do need to stay active. I teach in a group we offer here at Fort Bragg and see a lot of service members toward the end of their career and had 16 or 18 or 20+ years in the service and in the beginning they didn't have to work to maintain their strength, they did not have to work to maintain like Spiller they could do that job and did not have limitations and now as we are getting older, there's a difference in how they feel they can perform and allow more pain involved. That's how much of the program includes flexibility training and program include strength aerobic and etc. and there's an consistent theme they pretty much stay the same as what you started but as they were unable to do that at the same level it declined and did not shift the programs in order to meet the needs they did to maintain their tissues and flexibility is one that I see forgotten and I'm excited we will have the second half of this talk today that is something that is a nice way to bring flexibility training and really make differences in routines and wellness plants. I think this is very important to recognize our number of minutes should increase as we get older or as we develop limitations.

Therapeutic movement what does that term really mean? It can mean a lot of different things and can apply to a lot of different types of exercise and types of movement. When I picked up therapeutic movement, I'm thinking of rehabilitation activities. Like therapeutic activities prescription exercises and physical therapist is the world I'm coming from and it can be functional movement. It can be graded activity progression. Can be cardiovascular exercises. There's a lot of things that fit in that category of therapeutic movement and what we will focus on today is a little bit more of the mindful forms of movement where we are also trying to work with the nervous system of different type of way than we did in some of the other forms of exercise. This is a general list of a lot of different types of exercises that are available to our

patients and not one is better than the other it is just things to get them engaged and find what were your patient has the most interest in participating in and it will be a very important thing as you work towards getting them to engage. Giving you an overview of different ideas there.

The benefits of exercise, so why is it as important as we age? There are countless benefits to getting them moving. I will promote to my patience is the anti-inflammatory effect that we get when we exercise regularly and usually I will say I want them to get up to 20 minutes of moderate physical activity enough for increasing the heart rate and doesn't have to include resistant. It doesn't have to be formal cardio but I need the moving consistently ideally around the same time of day and not necessarily a requirement but I want them doing it often and if we could get to what we are doing 20 minutes every day from an anti-inflammatory effect it will be a lot better place and we used to as a physical therapist working with patients.

We used to think when there's a flare-up. We decrease activity but research is showing is that is not the case. Exercises going to have a more positive benefit on bringing down the inflammation then with just having them be sedentary for a period of time. It doesn't mean you're asking them to go off and run ultramarathon but there is an approach to that and getting them to where they are being consistent in getting heart rate up and getting physiologic changes to happen is going to have benefit in the performance and management of their health. The other one I like to promote is the immune benefits and teaching ourselves the good things and those are huge and exercise if you're not maintaining her health it is often we will see chronic conditions and different illnesses that will come up over the long-term and we want to get them moving and get them active and get all those health benefits from that standpoint. We can talk about the different pain benefits we get only not the endogenous opiate system activated in exile. Those are things we can get to with exercise and we want to get the right form of exercise and we want to educate them on what they need out of wellness routine and help them find ways to move forward and have these different benefits you see listed here.

Why wouldn't someone exercise? We've all had the patient we are familiar with the person that is hard to get them activated to do much of anything and there's lots of barriers to movement. Sometimes it is all on the list and sometimes just the pain itself stopping them from engaging sometimes the fear of pain coming back or pain picking up or getting high and they can't do something else and sometimes it is not knowing what to do with the pain when it occurs and lack of coping strategies to help them manage their symptoms. Sometimes is misinformation about exercise and injury and often times I have patients were told don't do X wires because it will cause further injury and their third of times for that is true and also in a window of time and sometimes patients do that to be a fact and this is how to be a never get the reinforcing encouraging message. That now its okay to start during activity and this is how we should increase activity and is not just related to acute injury are bad for patients. Don't ride a bike you'll make her symptoms were then there's a time and place for that to be true and it doesn't mean the patient should never

write a bike again. That is not where we want to guide them and so we want to avoid talking in those absolutes when talking to them about exercise and when you know they have been giving that information in the past breaking some of that down for them and the other big one. I share this they if don't run anymore because running will make things worse running will speed up the changes and if we do a return to run progression inappropriate manner that's not necessarily true. So when we think about it and the art osteoarthritis in patients diagnosed with disease already if they maintain active activity and maintain a running level of activity were there running up to two miles a few days a week then they will have a slower progression of disease and less likely to require joint replacement surgery in the future. That's her evidence you want to find the happy ranger we keep the moving and moving successfully and there are check boxes. I will use when working the station to make sure they are appropriate and stable and have the control to do that successfully without setting themselves up for injury but taking away that misinformation that you will never run again or should never do X wires again. Thinking about resources and asked questions to go into things and not necessarily reality and would covet axes became a bigger limitation. I think with COVID we've had a big surge in online options with videos and things of that nature and it doesn't necessarily give them that supervise component so there is still a little bit of struggle within the COVID environment. We want to make sure we are helping them get as many things as we can help them get to get moving again.

When we start to address inactivity program getting patients who have not been moving for whatever reason. I will say we often see patients that are either persistent or they have pain and continue to do whatever they need to do because they have to do it. Oftentimes those are showing up in the end of the career, when they've done that their strategy for 18 years or 20 years and they are pushing through it and trying to do all those things but they end up on a roller coaster of a good day bad day. And what we see with that is on a good day they try to do all the things they need to do and do that PT test in pay for it for a week. Afterwards and whatever the case may be on the type of activity but is still tend to end up as a roller coaster and we have avoiders on the other side of the spectrum who don't want to do the activity because they are afraid it will cause them pain and they don't do that activity and on a day where they actually feel good and they try to do all the things they saved up and been avoiding and again pay for it with the down slope and what we see with that the peaks of the good days is never going in an upward trend that is a downward trajectory and not able to do as much as they used to be able to do when they were at the beginning of the cycle. So we always want to try to get them off that roller coaster ride and do that by using pacing and activity planning and we start low in stair step are way up. It's hard for some patients particularly per patient used two pushing through whatever they need to do and we want to identify our baseline what can you do without causing any kind of flare up and start up and it's hard for them to bite off making structured plan having input into writing things like that are always helpful to get us there and we do 80% an increase by 10 percentage week and moving in an upward trend and not the downward roller coaster spiral.

This is a slide the path to the dark side is Yoda and there's a quote by Stephen [Indiscernible] quotes about their and one of the big reasons patients have stopped doing a lot of different things. We want to help them overcome some fear and here is recognizing fear avoidance and the model of what will happen with the patient and overall optimism and perception of the threat basically. Working with patients, I'll explain this as a river and I used to live in San Antonio. We would go float in the river and mostly patient knew at least what that was and could have a conversation about the different chutes on the river and the first river you come to the water gets tight and shoots out quickly and when you shoot out in the tube you would go left or right. If you shoot out to the right you go down the river everything is happy having a good time with friends and family floating down the river no stopping you. If you go out the first to the left you get stuck in recirculating water and it is current coming out quite that is hard to get over when in a tube and also 200 people shooting out of that to better now barriers for you to also cross the water and there's a lot of limitation to getting over that hump and don't be afraid of this or don't do that is not what we are saying when we talk about fear avoidance. We need to help throw a lifeline and learn ways to get over that barrier, they will have an they'll be how we break them out of it and they can continue down the road toward what matters whether live to the work towards purpose.

Hope you can appreciate all the different nuances to the little chart one of my favorite once I shared often you may have seen it before you want to break up the cycle because the negative feedback loop they get stuck in one avoiding and again being able to do more things generally comes with four conditioning more limitation and start to do things that more pain and less activity and things of that nature and we want to break the avoidance path. Here is where start to talk about tai chi specifically one of my favorite forms of exercise introducing it to folks with chronic pain. There is balance training and strength training happening and isometric strength as you imagine resistance working against a lot of different factors that have overall benefit for help and strength and relaxation. Flexibility there's a lot happening with tai chi movement and getting you all to experience that today.

Take a look at the list and the different benefits that tai chi has to offer. These are the principles of tai chi not only external principles thinking about body alignment posture weight shift and transfer is a lot of different control movement control watching what's happening and continuous movement and generally I talk about [Indiscernible] the internal principles of Chi and internal flow of energy. Song expanding from within, we will talk about opening up through the joints as you're standing doing tai chi you want to imagine that expansion things are opening up and not that contracting when you want to think about expansion and Dan TN similar to in the lower abdominal area where a lot of focus will do will that she exercise and breathe and bring hands toward that Dan TN trying to improve energy flow and those are some internal sensible and we have roles.

Reapply for safety and I'm starting to introduce spoke to tai chi there's a few rules I want them to follow and want them to only go to 70% of available range when they do their first movement so for example there is

a cervical rotation movement for warm-up and I want them to go to 70% of our they feel like they could go when they first start that movement and those are not pushing through barriers with tai chi. This isn't going to be necessarily a huge gain in flexibility it will have an effect on the nervous system and sometimes you will see improvements in flexibility but we are not thinking of it as a range of motion increase or and balance consideration you want them to be safe a lot of tai chi is about control and weight shift and if we can't have that because we don't have the strength and have neurologic issue. Making sure we accommodated that so there's options to do tai chi sitting in an upright support and different things to work on improving that balance it has benefit in a lot of different neurologic conditions. Parkinson's different balance limiting conditions as they progress those respond really well to tai chi and it is something we want to encourage and considerations and want to make sure they do it in a safe manner. And modifications for everything I said we have options for Chair and change the depth of the movement and length of the movement time spending in certain positions and tai chi is safe for pregnant folks and elderly folks and okay for healthy active young folks so there's not a group of patients were this is really not something for them to consider.

Different therapeutic principles balance is a huge one often times with patients and the general public have heard about tai chi preventing falls and elderly a lot of studies relating that to balance and its alignment consideration for posture and helping patients relate to posture coordination and some will struggle with tai chi in the beginning the getting coordination because that rhythmic movement and some patients will compared to dancing. Some patients compared to martial arts taken very on perceptions of what it feels like they're doing but there is a coordination component to getting your hands facing the right direction moving at the right speed and pace and all those things. Proprioception there's a walk in of patients for balance perspective will start to introduce that and getting processing proprioception inner information getting them doing that in a way they're getting information and information being used for purpose not just [ Indiscernible] they pay attention to messages and put them to work and have them work on the balance and now listening to other information coming up from the body and you have the full list and I won't go through each one and it is a nice way to grade activity over a period of time gradually because you can progress tai chi in its different types and speeds and movements you bring together to the form.

Dan Tian breathing is an important piece we like to bring into tai chi early on getting them to connect with their breath it is similar to diaphragmatic breathing and that is the example I used. I have a video here that's going to explain some of the how to teach a patient about diaphragmatic breathing during belief with you and also go through the video and when you come back I believe the Colonel Hing will take over on tai chi presentation.

The link is in the chat and you will get to do diaphragmatic breathing exercise thinking about getting your core as well as pelvic floor working it and enjoy the video we will see you back in five minutes.

>> [Video playing.]. >>

Hello everyone. I think most of us are back and I am Doctor Hing and thank you for the great presentation and I think everyone here for our audience Jamie is a compassionate and caring healthcare professional and I can remember my first tai chi class with her after the class she was on a tight schedule she was going back to the pool and I saw her at the entrance to my Clinic on the way to her car helping an elderly person up the steps and that just for me symbolizes what tai chi is about. It is about the mental emotional and spiritual aspect, being open to the present and being compassionate not just with yourself and your own healing process but also with the healing process of other people. So thank you Jamie for sharing those things and you guys are definitely up for a treat with Lieutenant Commander Dee as well.

And today I will focus on Qi Gong and I'd like to talk about tai chi. Tai chi is originated as a martial art itself. As such it would be practiced slowly and also practiced quickly, so I think anyone who has done any sort of athletic or sports knows that slow is smooth and smooth as fast and so tai chi can be practiced slowly and I think over time in China originally and then eventually across the world we began to see it could be just used actually as an exercise form. Qi Gong is a modality of exercise that was in many sections of China throughout history used as a supplementary form of drills and meditative mindful exercises to supplement martial arts training. But in other populations and sectors of China, it has also been used historically for its mental spiritual or psychological benefits if you will. I think whether you are practicing tai chi or Qi Gong, the last five minutes she's been working on breath is actually the foundation and as a matter fact with one of my teachers I spent probably about my first month focusing on just breathing because it is so foundational and we know that. We know that as we go through for pain champions how important breathing is for reducing that physiologic fight or flight response, and even giving a public presentation let's say.

These next two slides Jamie and I had a lot of fun putting together. We wanted to talk about a few structural principles that are actually quite common to both tai chi and many forms of Qi Gong. One of the first principles if you will is what we do with our feet. I think Jamie has alluded to that being firmly grounded is very important and this is why tai chi and Qi Gong can be so valuable to our geriatric population not just the geriatric population but those who are recovering and trying to really work on balance. If you've ever been to one of Jamie's classes, she enjoys teaching soldiers about foot placement and transfer of weight across the soul of the foot, and one of the illusions she gives to her soldier patients is if this is a lot like stealth work like when you are on patrol and I thought in tai chi or Qi Gong we want to remain firmly planted on the ground. The center of gravity is actually can be one for the [Indiscernible - Audio cutting in and out] center of the foot and we like to have the weight where we can maneuver the best when we are in martial arts or trying to be mobile and everyday life and this slide Jamie and I put together, we have what to do and what not to do. We don't want to transfer too much of our way toward the balls of the feet or on the heels because that makes us top-heavy and unstable. The most stable would be having your weight distributed over the center of the foot. And

for acupuncture is, one kidney one -- moving further up in the body another structural principle we like to incorporate is soft bending the knees and isometric where you are able to go through some of the training we have in the workshops, any osteopathic physician any DO knows that part of being relaxed and efficient is having the muscles unwind themselves and if we lock up our knees, or have too much tension in the hamstrings or quads that puts a great deal of strain on the patella and what happens when you have a lot of strain on the patella is you have over time wearing of the cartilage and we like to have the joints as tension free as possible especially so soft to bend in the knees is the next best one. Just by way of quiz question, what was the first principle? The first principle was grounding your feet. So let's go further up the body, and here is another important area of the body to think about and that is the tailbone or sacrum. A lot of times in the stress of our lives or even in our culture, we sometimes will put a great deal of strain in our lumbar par spinal muscles in the tailbone kinds of juts out. As far as yoga practitioners, you know that one of the important principles of good alignment is having a slight flattening of the lumbar sacral curvature, very slight talk of the tailbone and it can be more of a feeling or a sensation and even kind of an imagery than actually a muscular exertion. Do we have any horseback riders out there? My fiancé and I went to Montana and went up horseback riding and while I had quite a bit of soreness after that, there has to be a little bit of a talk in the tailbone to be stable and I think that's great for the horseback riders you can understand this as well.

The first principle again was have your feet firmly planted on the ground. In the second principle was softening your knees. In third principle is having your tailbone slightly talked. And the fourth principle is having a straight spinal alignment. We talked about tucking the tailbone and we say that in these exercises whether Qi Gong were tai chi we are not striving in most cases for what you see here in Arnold Schwarzenegger where he is trying to show off his abdominal muscles and what you will see with Arnold in the photo is that his thoracic rib cage is actually caved in over the abdomen. And as our functional medicine providers know, the importance aspects of mitochondria working at their best is thoracic mobility is hard for you to maximize your thoracic mobility when you are just as caved in. In your abdomen is in an exaggerated flexion and on the left-hand side we see more of what we are really striving for in towards in these types of physical exercises. There is a slight talk and Bruce Lee in his tailbone and another straining of the spine there is some engagement of the thoracic muscles and the thoracic muscles are important of course stabilizer and we don't think about. We often think about the abdominal muscles when we think of core stabilization but I've learned this one from Jamie and we could not resist showing the two photos.

We addressed the foundation which is the feet and addressed the knees, tailbone and spine, and next we want to talk about the head and central axis of the head. A lot of times when we are in our office, we tend to think of our spine and neck as holding up the head and any soldier knows the head weighs about 10 pounds. This is an important principle because of that very reason in import imagery that can be very helpful in freeing up thoracic mobility is imagining that the crown of the head is suspended



by an invisible string going straight up into the sky. This is a little bit of a paradigm shift oftentimes for those of us that are sitting in front of for extensive hours slaving over notes and something we can incorporate when not doing tai chi exercises is -- the feet as the foundation we talked about the knees and have a soft band and slight talk in the tailbone and straightness of the spine and I'd like to talk about the upper body and here's what not to do. First of all we don't want to have a lot of tension in the wrist so or acupuncture's out there in the audience you know that there are certain points that are kind of like circuit breakers in the ribs and acupuncture points to access other organs or regions of the body and so there's an important principle in tai chi. Known as the beautiful ladies wrist which is a softness a relaxation in the muscles around the wrist and you remember from human anatomy there so many of them, [ Indiscernible] all the things and let's face it, in our day-to-day lives when we are slaving away at computers with the mousepad and things like that you can build up a lot of tension and in modern days we can benefit from this principle and another principle is for the upper body is we have a soft band in the elbow similar to the knee, a soft band in the knee as well as the elbow. And why is this? It is because when we are loose and we want to be at our best having muscles that are unencumbered by tension can be beneficial. All you have to do is observe Olympic athletes from the past summer and watch some videos and how they prepare themselves by shaking their bodies, and unwinding movements they do and they are getting themselves unwound and there's a natural bent to the elbow's and that doesn't go for every single stage of movement in the exercises but it can be a great principle to go off of.

So I went to show these principles with you because as Jamie mentioned there are a lot of resources out there with some great exercises and during the pandemic. We don't always have access to teachers face-to-face or maybe even finances and we thought that offering some of these principles could help you build a foundation and hopefully get you off to a good start. There's nothing like learning these types of exercises from a teacher in person. There's nothing like that direct transmission. The best we can do is watch some videos and might as well have a good time added and benefit as much as we can and hope you found this helpful. We have a video that Jamie helps me build and I hope you guys enjoy that. They last about 35 minutes. I would encourage you to hydrate really well and take some water before you do the exercises, hydration is something that's important for the optimal function of our mitochondria. And functioning of our gut in the microbiome's and so many cardiovascular transport systems so many of our things metabolism and transport hormones and exercises in Qi Gong and tai chi are designed to really stimulate movement and flow and different areas of the functional matrix that we study and the function that is a paradigm and with that, enjoy it when you get back you will get a real treat with Lieutenant Commander Dee.  
>> [Video playing.] >>

I will give it a minute and we will get started again.  
This is Jamie again and I will get started because we will have a break coming up in a few minutes so hopefully you will have a few more come back in in a minute. We will go ahead and start talking about patient engagement. So we know as providers working with service members and

dependents, there is a higher percentage of current pain in our air population and part of that is the physical demand and we know that 6 to 12 out of every 100 service members get injured even in basic training. We are dealing with a lot more musculoskeletal issues and it is not only just the musculoskeletal side of things. I always like to reference there's a New Jersey National Guard study they did when they looked at returning soldiers from OEF in Hawaii up deployment and found the soldiers returning with three times more likely to develop PTSD major depression and twice as likely to report chronic pain. More than 90% of them were likely to score below the general population on physical functioning and those are pretty sobering statistics to know that many of our folks are coming back and having issues. Getting our patients to engage in physical activity, in the form of mindfulness or we can address all the different domains is something that can be very powerful. That is one of the reasons that I am a big fan of tai chi as well as yoga. We will bring the tai chi portion talking about patient engagement. It is not just hugging it for the sake of saying we need to do tai chi for this many minutes a day you want to meet the patient where they are at and I like to go out to different benefits of tai chi and wavy you are moving differently when you do tai chi. So I like to talk about the system and how they can interact differently with different speeds of movement and so getting them to understand the different potential benefits of a certain form of exercise as well as general health and wellness. Those will be important steps and if they don't have any knowledge that there needs to be changed then definitely will not be moving this any word on the paradigm and you want to meet your patient where they are at recognizing if there needs contemplation stage where they are interested in you giving them something to control her pain. We need to help them with understanding the different patterns strategies and managing chronic pain it is not always going to get. We want to get them active and engaged in doing things to help manage their situation. Moving them down the timeline a lot of it is related to education and there is a lot of counseling around that acceptance commitment type of framework so often times our patients have gotten to the avoiding strategy with her not doing activities and sometimes we need to take a step back and identify the steps that matter to them whether it is family, people, activities, profession whatever the case identify what matters to them. Allowing them to take a step back and look at what they've given up in order to try and control the pain and having that little realization moment and also a lot of tears involved in that realization with a look and see what all they've given up and it is not to bring them down it is to empower them and help them understand that we need to move forward with this and knowing that pain is a part of that picture and something we have in a suitcase and take with us and start moving towards that stuff that matters and want to do it in a nice way. I know there's acceptance commitment there. You get to jump in on that it would be a great thing and sometimes it takes things like that to help move them from the contemplation to preparation and to action and getting them to take steps to move. It is nice to have exercise like tai chi that can get them moving in a gentle way and not going to below the nervous system if they have not sensitized nervous system throwing them back into a cardio event and getting a lot of match intervention with the thing that is good for them physically, mentally and not dashing consider that helping the patient get engaged in different things. We prime them for positive

outcome and there's a ton of research knowing the worst we use when talking about different interventions and activities and help prepare outcomes. We want to make sure we are putting in good words and if you refer someone to go do yoga and refer someone to go do tai chi, we want to give them encouraging words and help them understand, that you will learn a lot about posture in these things built into it don't have to think about what you are doing and you want to find the positive expectation of there will be something good that comes out of this and be successful and safe to do that. You want to use those words that will promote that expectation and help move them down the line. Also the encouraging independence. I also really like to achieve form sets we can teach them and package it in a nice little 4 to 6 week time period and they can be confident as they move forward. We want them to not feel like they always have to go and attend a class to be able to do that. You can do tai chi walk in your kitchen and have a powerful new mindful moment get your body moving differently take a break from every day sitting in those things can be independence builders that they can do and moving them toward health. We want to make sure we are dressed in the gears helping them understand what is safe to do in promoting the atmosphere of safety, not telling them what you should do but tell them what they should do. Encourage them change or narrative a little bit and we want to make sure we are setting them up for competence and independence and reducing the fears because our words can build as much berries as anything they have going on structurally or physically. Thinking about our planning and preparing patient to engage is very important. And we want to use motivation. Education is a large part of how we are moving them down that line towards action and understanding pain. I use a lot of pain neuroscience education when I'm talking with patients and want them to have a good understanding of the pain process and all of the different components that go into that. Not just the structural tissue issues but the different things that are part of how they process the information traveling up to the brain and the how the brain assigns meaning to that how things can get blurred if you will at times and what we can do to promote change of that in promoting neural plasticity. We know our exercises good novel moving things have not done before will be very powerful and help build a new connection, see things and doing things they haven't done before. Living a healthier life out reducing inflammation, eating right, eating well and sleeping well, socialization both all these things are very powerful towards promoting neural plasticity and sedentary lifestyles. Repetitive movement alcohol use all those are general vices people will have something going on in their life that and they'll have an inflammatory back and do promote neural plasticity want to get those reduced and really put the positive and put in the things they can do to help promote change and we want to continue to promote that. Self-efficacy is very rare that I have a patient that makes it all the way in the pain clinic that has not done well with the self-efficacy usually they become a passive participant in the care if they've gone through multiple specialist in different trajectories to get the and we want to empower them and encourage them there's things I can do in actions they can take to affect change in their life and management of their pain condition. All these things are going to be powerful and tai chi is one of the avenues you can help promote them to get there.

Other behavior change and powering empowering activities you can encourage beyond just exercise you have coping skills, addressing perceptions of the stressors, different things going on in life and I use the balance and we will talk about how the dangers versus safety will be in different things. You can fill each bucket and what can we do to affect stressors our perception of them and how we are doing them and what things we dump in the positive bucket that can shift the balance and the social support and medical support belief system all those things are buffering types of behavior in those things they can do to help promote change. Of course, I will do this multiple times and you can see it will hit you every way and improve your sleep and help improve immune profile. All the positive benefits you will see there are going to overall have a positive effect in can we apply it in a way that is going to be safe, reduce the fear that's going to cause more pain and do it in a way that we don't [ Indiscernible]. I like to use tachometer on a card getting harder to use know it is more [ Indiscernible] you can go to the red in pusher engine a little bit but don't keep pushing it stay in the pain a little bit when doing an activity but we stop activity. We expect pain to come back down if it stays up and angry we are pushing a little too hard for our nervous system to keep up with that if we are dealing with a sense of nervous system that will have a step forward. To step back effect and want to make sure we're doing this in a way that will be safe for them.

So the next video we are at 2:47, your break time so we have another video for you and it will be your option the video is about 14 minutes long and it is the tai chi for rehab form and you can download that video and you can do it now. If you need to take the break scheduled for this time, then you can do that as well and you have that at your leisure and it will be a standing movement and will be getting out of the chair hopefully. If that is not safe for you, then please remain seated and follow with the portion. They're seated form sets for all of these activities and we don't have videos for everything available right now. One of our goals the last month has been a stressful time around here and did not get you guys as many video options available as we hope and we have some great ones in need for you if you will.

We have a scheduled break from 1500 to 15:15, so you should have almost enough time to get to the video and Carla put a link in the chat. We will switch to commander D taking over and she will speak around yoga and that will start at 1515.

Thank you for joining us and I hope you enjoy the form set.

>> [Video/ break until 1515 Eastern military time:]

>> [Captioners Transitioning]

>> [Captioner standing by.]

All right, well it's get started. Hopefully everybody had a good break. Awesome to be here. We will continue on learning about the awesome movement. So yoga is tied in with tai chi and what I want to do with it actually. PowerPoint here is I wanted to, number one, bring a little bit of understanding about yoga itself, and then how to talk about different

ways and different elements of it. We would do some practice together. So that should be pretty fun.

So I need to see on the slide, a lot of people think of this as just the physical piece. So really what you're looking at is a unity, an oneness, and what is about yoga supposed to stand for. We spent a year talk about it but I will go deliberate more depth on the next slide.

We kind of talk about [Indiscernible] dimension so perception. You know we are not just physical, we're other things too, we are emotional, we have intellectuals, and some of us a very spiritual and spiritual things mean different things to different people, right?

So that is really where yoga is at that, just meeting the mind, body and the spirit. So the eight limbs. And if anybody has ever heard of one of these, this is really not all instructors will teach this kind of stuff, our focus on it, in the Western world, a lot of places just focus on [ Indiscernible ]'s I just wanted to give you guys an idea of what these were and get it known. So these eight limbs and why they are important. At the very type is llama and you do states are you look at five at the teachings? So things to be like don't lie. Sit still. Don't waste resources, don't be greedy. It's all those normal oral things that most of us grow up and especially for the service. Yama.

Then Niyama. Observances. But that's really looking at Chester self-pity know yourself. So kind of going into that awareness of self.

Then you have Asana and posture. Everything's yoga and flexible and all that. Right? Will not really. [Indiscernible] is often a good thing when related a way to open your mind. So help you might not be restless at is. As a working into breathing entities points that are outside come inside or feeling the energy body or the sensation.

And so a lot of people really focus on that flexibility and strength piece, and absolutely, yes, some people can get that. And that's amazing. But really the optimum purpose is really developed there. He goes into that just straight into to 12 and the breath control. So we would do a little briefing today about breath control and that is -- breathe control. That is life, without breath we have nothing. So to help with energy, tai chi and Qi Gong. In this many many out there.

And she come all the way down you see Pratyahara. So when you're talking about Pratyahara, that's where someone is kind of withdrawing the sensors from the outside world. Looking inward. So they are not letting maybe the birds chirping in the background, someone mowing the lawn, whatever it is, they are not letting anything but them. They are very focused on what they're doing a point and as we kind of move around, to Dhyana or Dharana is concentration. For a lot of us concert one thing is hard. So sometimes we will concentrate on Montrose. Objects, feelings, thoughts. To kind of at least get themselves focus to that poin.

And then Dhyana. I always say some of these wrong but it is a mind focusing on meditation. So I don't usually use the investment with meditation will concentrate and that's really how when I'm teaching this,

I talk to my students. This is probably the one that a lot of people really struggle with. I had some clients that can't even count their exhalations to number four. The thoughts are all over the place for they forget what number they are at. And so we just work on that. And Samadhi where people say oh you have met enlightenment. But it could be sleep for some people, it could be that inter-separation of being kind like ego and identification of the mind and body.

So he's done all have to be practiced in order, and I will kinda bring this back in at the end of why this is important to kind have an idea what is, and when clients are coming in, especially paying clients, looking for a way to deal with their pain. Have a lot going on with pain in the body. So [Indiscernible] [Indiscernible - low volume].

I know Jamie already talked about neural plasticity. Or Samskaras, I know some people talked about this and that's a learned way to increase and decrease distress, so you pain increases the threshold. They will fill paid more often. [Indiscernible]. So they are looking at this is a memory of the body. So working through that, what emotions do you have when you are having that? What thoughts he having we have that? Allowing people to kind of work through that. [Pause]

I went ahead and also when we're talking about the brain, I will bring some more stuff and about meditation in the brain, but systematic step that does happen meeting the increase in gray matter very different operations in the general neurotransmitters is done. You can see some of those changes happen, the changes happen with meditation. But the rain really becomes an expert on pain. So as the brain becomes the expert on pain, this is a way to kind of start to help the adaptive toxicity that occurs. I was talk about it as being a roadway. You have a highway right now and that highway is a pain and as a single country roads, and this is what we're trying to get into the highway so getting to the country road and eventually travel those roads enough that they become highway.

So again, I just kind of put this off here so you can think about, we have top-down or bottom-up. So obviously when we are really stressed out and the amygdala is really activated, you have that popular. So as is happening, is the helps you we concentrate getting back into the top down peace?

Really those places that are hyperactive or hyper aroused places start to affect the mission. Some of the things I would see with our patients where they would come in and Eric I don't know if I the other, I'm not fixable and they can see it really wasn't what they thought it was. What we're doing in the patient and the pain clinic and what we're offering was very different than what they experienced before. We worked with them. [Indiscernible] looks at the look for them in return to focus on that not just mental peace, and working into the relaxation response is.

And their sometimes resettle. Small things register to happen. And let me know that the client to the patients are coming back, and then a lot of these are good at finding [ Indiscernible ] more often than Hattie come into the pain clinic.

And then we talk about this a little bit with the patient on hey, if you're feeling pain, your stress, where to go, because the more stress you have pain we have, more will have that attention.

We will have the job kind of [ Indiscernible ] so these [ Indiscernible ] are set off by the [ Indiscernible ] they are set to go up and happy all the time.

So kind of like them to think about it and we talk about it and he can I be okay I really notice when I start [Indiscernible] this happens and we will walk with these techniques so they will be in have a chance to users when they needed them.

So we are going from saying chronic pain, chronic healing. So relaxation and you can turn that into a good thing. On those roadways, we can maps and allowing the body to have care so week can be self-nurturing so helping themselves, unraveling things that they didn't know where there. And on one of the things with some of the medications that they talk about is, and I will kind of bring up Iraq here in a minute care, we don't, we are teaching [ Indiscernible ] we will have the patient kind of the pain for the bit. They don't, we don't want them to run away from it. We want to allow them to start to relax around it.

So, with that, I think we are, so we will do some breath work in a minute. And I really just wanted to the exercise. So hopefully everybody kind like if you're sitting in the chair or on the couch, wherever you are at, try to find a comfortable position that you can be in, but we can get you with your feet on the floor, that would be even better.

See, are you asking questions in here.

Way to post a video. Are you asking me or Dr. Clapp?

So when to play the music because it is sometimes helpful for people. And [Indiscernible - low volume]. >> [Pause] now working with the breath. And this practice if you are seeing in chair, you might want to sit up nice and straight, feet on the floor. And we have the five point's meditation. And gently tuck your chin. You can look forward. You have soft gaze. And if you feel comfortable at this moment, tens of the lab and [Indiscernible - low volume]. >>

Just imagine, that you're going to inhale if you're going to exhale into different parts of the body.

And the nostril were moved to that part.

So bring your [Indiscernible] to your feet.

And imagine your breath entering the body. Right to the soles of your feet. And exiting through the soles of your feet.

Bringing awareness to the soles of your feet. Breathing in and breathing out, and [Indiscernible - low volume] [Indiscernible - low volume]

feeling, imagining. A flow of energy in your feet [Indiscernible]  
[Indiscernible - low volume] into the soles on out to the soles.

And replete this visualization for other parts of your body. Start with  
your lower legs and your knees. Your upper legs your hips. Lower back.  
Go back.

Upper back. -- Your belly.

Shoulders.

Upper arms.

Elbows.

Lower arms. Hands.

The neck.

The forehead. The crown of the head. After you get an area as painful,  
uncomfortable, don't move the on that come back, stay. And visualize and  
direct the breath and direct to the [Indiscernible - low volume] of  
discomfort or pain.

The location of comforter pain. Discomfort or pain.

Imagine focus on the pain in the area.

Imagine the tension, the pain finding space. Inside the pain. Sending  
the attention back and forth. And from an uncomfortable area to a more  
comfortable area. [Indiscernible - low volume] for a few breaths. Without  
switching to the other. >> [Indiscernible - muffled speaker/audio]  
tension and pain and finding shifting attention and focus a whole body.  
Take a moment to recognize the journey they just want. And when you're  
ready, let your eyes. >> [Indiscernible - muffled speaker/audio] very  
very very close to [Indiscernible] but not quite.

The your breathing exercise can be used, whole body with parts of the  
body a lot of times when we're working with we really want to make sure  
they are very comfortable and can kind of work through this process.

And [Indiscernible - low volume]. Our inhaling and exhaling. Expect the  
simple things that we sometimes forget to breathe. We forget to relax  
into her breasts and that is a simple way to also trigger the system and  
a lower body to find a calmness.

I want to stop here for a moment and kind of talk about meditation and  
[Indiscernible] have been on a slide about a good as questions about the  
site a meditation and I want to kind of talk about what our viewpoint is  
and when I'm working with clients and patients kind of talking to them  
about.

So they have a lot of similarities that can overlap, but they are not  
exactly an attainable. So a lot of times the people were thinking about  
medication or meditation, thinking about a more formal practice.  
Something. [Indiscernible - low volume] and they don't have to be that  
way, but usually it is formal. There's different types, and I have on the  
next slide we will kind of go over this very quickly. And kind of what we  
did a little bit with reading awareness meditation and lovingkindness is  
another one. Mantra based. Visualization, guidance. Systematic, there's  
like a lot of different types of meditation that are really that formal



piece of that intentional practice for calmness, concentration, awareness and finding emotional balance.

So a lot of individuals will [Indiscernible] it's a little easier to kind of meditate. I had some people do practice standing up, takes a lot of, a lot of studying. But you could definitely do that. And so when you're seated, it allows you to be more comfortable and deeper position and we kind of a talk about that with our clients. Like what he needed to be in a comfortable [Indiscernible] how many pillows did they need? How do they need to set? And not cleaning the thoughts. A lot of people are like I call my friend, I have the mucky line. So with mindfulness, it's different. With meditation, were thoughts flow by just like they are on a cloud. We know it and keep going.

And this is really helpful and people have a lot of negative feelings are things, colleges acknowledging is desperate acknowledging it and allowing to pass on. And something for judgment is really important. And also to know that sometimes it is really hard meditate. Sometimes there's just things going on, and some things are better than other things.

And so that is one thing that I really think that when working with people, you're like I can't sit longer than 35 minutes or a minute, and some of the things are people I work with really struggle because they used to multitasking. And so the brain is going all over the place. So the mucky line, and you think about monkeys jumping from branch to branch is kind of where that came from.

But mindfulness, it's a simple act.

I'll give you guys, see fit guys into this tonight. Before I go to bed. But this is paying attention, you're noticing, you're being very present. It's very intentional and actively mindful, you notice things around you, thoughts and feelings.

But you are informal, does the present moment. So focusing on something simple could be like washing the dishes, feeling the soapy water, the warmth of the water or is it hot or cold, one of the things I do every morning is my coffee MIT, so whatever I have with coffee. That is a big mindfulness and moment for me in the morning, it is quite, have coffee and think about while this is muggy so warm and I'm allowing myself to smell the coffee before I drink the coffee and taste the coffee. And so it seasonal things, you start to use all of your senses. I think of anything else, I'm thinking about is the coffee employee my hand. And he can practice this anywhere, anytime. Walking, sometimes it is interesting if you what kind of neighborhood and you have done it with like music or while you're talking to a neighbor or friend or family member, you walk around the neighborhood and really be present. And it's kind of interesting that you might find things you didn't see before.

And so we go about around our daily life, we are wandering all over the place. And sometimes we don't remember how we did it. Totally not being mindful. Our mind is not like where it needs to be.

And so kind of bring it back. So almost half of us are always thinking of that out something while we're doing something. Always.

They really feel like a wandering mind is not happy mind because you're kind of all over the place.

So allowing the unawareness to kind of dominate your mind versus to dominate my actions.

So being very mindful, being very open to those things.

So I would see if it's challenging to you to see if you want to try this out if you are wondering mindfulness. When you need to the pressure T? So you going to go brush her teeth, right lecture going to be sure too pasted is your toothpaste come he didn't put in your mouth or anything. Before you brush to take ahead and change your toothpaste. You have like the cinnamon one, I don't know, like what does it feel like a mouth? 20 start to brush her teeth? And it really brings up a whole different perspective when you can really start to hone in and be very mindful.

So they support each other, but they are not the same. And so a lot of practices will help you find mindfulness they will be more meditation and vice versa but they are really actually [Indiscernible].

So the cyber here, it's just an idea of some of the types of meditation that are out there. And the one that I highlighted I certified it and certified in and I think it was 2010, the Surgeon General was talking about for PTSD, and that it is fantastic for that.

And lots of other things like pain, he see people all the time and pain with these patients.

But this multiple techniques and different ones so I always tell people like if they tried it not going to work for me. To something else. Probably different one. Maybe they need a different instructor are more guiding, and need to take it slower. There is also coming I put on here but there's also a nap that a bunch of numbers on our subcommittee did meditation four. And mindfulness activity where they going to plug into that.

And some of them are just imagery, some of them are mantras. And if I were to find out what works for them.

There are so many, right?

So I think this is how some of the still, I meditate, I am meditating on my inability to meditate. When I meditate I can't stop. I meditate when I think about that and abilities to meditate, is that correct?

So giving them time. Some of my clients start out with just one minute. One minute and then we had on slowly.

And so with iRest. Comes from other principles that are really great. Welcoming to self. Learning to welcome yourself. Everything is that

messenger. I think a certain way, that's a messenger to me about something it's going on. And I said it best and doing the practice, maybe you have mucky brains. Maybe it's that's where mask day. And being aware. But also when we practice longer practices, is a very interesting concept. There's so many great research studies out there. That will be the parietal lobe. Helping in some way, allowing their brains to fill connected it's harmonizing so it helps normalize the brain. This helps open the door not just been able to focus and also clear thinking. And you see all these things and it's like it's my has its are always been there? And that's it's always been there.

And [Indiscernible] with happy hippocampus. Going to the changes Some of the changes with depression go hand-in-hand. So there have been some really great studies have shown that, it does increase. So these studies showing about how there's more depth, more great matter that's going there.

It's passionate [Indiscernible] so people that seem to meditate tend to be more compassionate towards others. And emotionally intelligent. So being able to be there for others. Right?

And calming the fear [Indiscernible - muffled speaker/audio] its love, the caveman. Always have the caveman thing and its [Indiscernible] and we have a real hard time shutting down what gets activated so this is one way to really learn how to shut that down and working into been able to be with the top down from the central cortex.

So we only good sleep. Without this sleep we can't heal. I just faxed everything in our life. So that is another great thing about iRest is very helpful. And you can help them to sleep at night and work through a scan and get really helpful or even of these things in class with people when they go through the process and they have taken healthy five minutes or 40 minute class, a lot of them will wake up because your be [Indiscernible] and iRest, you know asleep and awake. You wake up a bit tired and then like oh my gosh, so good. I took a nap but I heard everything he said. It's very interesting area, you can get the clients right there where the quite asleep when I only awake. Just listening.

And keep in mind on what is the meditation [Indiscernible] meditation versus stress, I the top down bottom up.

So really to talk to my clients about knowing how the body builds strength and knowing to be aware of the little tiny things that start to happen. Maybe their job is not as [Indiscernible] they so those are and are able to do some reading practices.

Breathing processor breeding practices.

Is also different things up there and this is not all of them, but these are some of the bigger ones that you will see. And I would just go to this really quick because a lot of it we don't know what it's like and this is just a good yoga for me and sometimes it's hard to know. So the first one, Hoffa, that's most of the styles that you will see here. So it's usually more action, more sensuality. There's no set theory. So the

thing about half that is it's a little slower Hatha. But something like Iyengar is kind like breathing in the yeah. The trainings are always looking at the alignment first. The Lopez and [Indiscernible] so this as much movement from here to here to here. And then pogrom be crumb Bikram. There's only 26 poses and only special teachers can teach it. Some people say its hot yoga and it's not really Bikram but just the other in a hot room.

So 110 degrees, 26 poses and when they say 110 degrees it's like Yuma did everything and if you ever taken class like that, it's definitely interesting.

Yin, holding poses, mostly on the floor. Sometimes you need a couple poses. You do poses for 10 minutes. Very little warming. The muscles are in and really not a ton of music, just require.

And restorative. And he kind of say like Yin's cousin. More restorative and rejuvenating. Lots of props of these two.

Ashtanga. These are the one of the ones we see the really cool people holding the legs certainly and stuff, a lot of times that is Ashtanga. Six different serious. That's where you are, they increases in intensity as a person who is on and they usually say had to practice three times a week. And that's actually videos the people are studios people going to practice and the instructor comes along and corrects the alignment. Vinyasa, that's where we go our Western people going to want to work out. So Vinyasa yoga, people going to because I want to stretch a little bit, and it can be slower and meditative and it's moving from post to post to post. Not really sure what you get. When you go cost class. So little bit more on restorative yoga because we're talking about pain. I'm teaching and working with clients, this is a big one. We don't want to increase pain. To keep them moving so gentle poses. Working with the breath and those poses so hearing at I time, excelling, and keeping on the body all the things that are comfortable. Using lots of support props. So lots of breathing, each poses health, sometimes 3 to 5 minutes, depending on what is going on, and on the body to drop into it even deeper relaxation. Say things use things like the wall, pillows, couches, really everything. Things to cross over it the eyes and look at room which is helpful.

This should be that should be active yoga poses I correct in the body with the mind and breathing. And in thoughts and emotions.

Here's a sample very calm and that's a common restorative poses. I would say my favorite so you can do this with like pillows and tell people like work on it or work on it in the studio and then letting them go ahead and figure out what works for them and what they have at home. They don't need to spend the money. Because some of this type of those can be expensive.

So you have like nesting, like Social Security. So that's the lady who is kind of curled on her side, and it's kind of a comfortable position for a lot of people, so finding that convertible position where you can't see

it but she does have a pillow between her legs. And people will breathe and they will listen and let the body kinda fall into that support.

Supported found angle. So relaxing, shoulders, the deli. This may restrict [Indiscernible] as he deftly want to be careful replace the pillows. So making sure at [Indiscernible] and I tell people like play with that, figure out what works for you, and do that. A supported backbend. Just opening. So this really might be interesting to people who are going through a lot of emotions. And have a difficult time sitting in some of these were course of the having tension in the back and shoulders. For those of us who might have essential to long are sitting too long working under desk or driving.

And then you have the support forward again.

So with yoga for diagnosis which yoga for diagnosis. After a couple out here for some ideas. How little conversation about it. So fibromyalgia is a good one. Restorative yoga and have to and Hatha the other. This also modifications to help increase the range of motion. And general flexibility. Arthritis, I put Hatha in there so Yin yoga can help with that. And hot yoga. And you should definitely consult with the provider. Because I definitely things that one should be doing with hot yoga, like they say if you have a people with multiple scrubs so should be doing hot yoga, but again, to the patient what they need.

Acting. So we have a lot of back pain alignment. Looking at yoga affecting the joints. And you instructors are taught that way. It helps the patient learn how to decrease as muscle aches. So that might be overcompensating for an injury and also restorative health and releasing it.

So we have like one that's a little more moving and when that's a little more filler.

So this is just the part of the primary series. This isn't even a whole series of Ashtanga if you've ever seen before. But again, there's a lot of benefits doing off the first choice because specifically is not a lot of verbal instruction and modification. And in fact there some hot year for reason, but in the crumb certain yoga doesn't have a lot of instruction. Many people in the back that look like they are in a lot of pain are going to injure themselves. So nine modifications, I think that the other thing to, they learn okay I need to modify this this way. And this is what works for me. And that helps them feel comfortable work competent. But that's can write aggravated somebody issuing so Rhonda might alignment they may get overwhelmed and up, do that anymore.

And that can be great. And I do all these things. I like to try them all and just do one. I think it's kind of funny that overall benefit finding the overall benefit.

So how you tell submitted teach a yoga class. This is actually the heart hardest thing. It's unregulated. There is international of alliance and that's where it people to try to go to that because people will be at

least the training has been approved by them. But not all the good instructors are even registered yoga alliance instructors.

Good instructors are someone who is like people to [Indiscernible] on vacation and different types of classes. I was tell my patients go to the instructor, tell them what's going on before class. If you have any pain. Again with you back, this is what I have going on. This, you should be able to help them modify to put measures to again, that's another one, right X so I always tell people, I am like oh, people passout in the class. I take it, I love it. But it's not for everybody.

It's a 90 minute class.

So possible outcomes. So things that we know from research. So again at the cognitive function piece and the mindfulness meditation. But also as a moving through these the body movement, social interaction. Some people are really disconnected for everybody, like their team, they just don't want to do anything and people still don't understand. When I first started teaching a class, that's one of the biggest things I didn't expect. That was really fun to watch. And so stress reaction. And I find that not getting is angry or frustrated as easily.

Meet not be as tired. Sometimes people are a little tired, do [Indiscernible] and so little better. Getting the body moving. Again with depression, same thing. Getting the body moving. Added strength and flexibility. So as their body starts to get stronger, they might be really excited to see what they can do, but they didn't think they could do.

So I had some client thinking and and they were doing a yoga my, so every day, and I can tell when they would come in. Pain tolerance, right? That's huge. Using the variable to decrease that be able to have their pine living the pain [Indiscernible - low volume]. And Amy come up later in the day, the pain may come back later the David I think one of the best things and not taking the class for pain is there is a constant night, it was a slow. Class, new certain entries were so I need to [Indiscernible] RN what was going on. And I caught it during the craziness of COVID, and one of the clients testament district texted me the next day and said I haven't slept all night because of my shoulder pain and last night was the first time I slept since whenever. And it was a great thing to hear that that work for them.

It doesn't always happen. But it's great when it is great.

So consistency is key. If you're not doing it, you going and not applying herself, it's not going to work. So the more, all the studies point to consistency being the team the key to utilizing it, for the pain or emotions or whatever. This is one of the biggest factors, no matter what you do.

All right. We get to do the fun stuff I wanted to make sure we have time for a little practice. See how much you guys can see.

So I wrote mind full or mindful. We have all the stuff going on and I try to eventually teach my clients when you step on the mat that is your time. Everything else will be waiting for you get back.

And reminding them of that and allowing them to have a moment before class starts to kind of just try to get there. And sometimes you can, sometimes you can't.

I don't know. I do notice to say, I don't think that video uploaded right to play. Which is fine.

So we are going to do some chair poses. Because I'm at work. And a lot of us, excessively or at work need something. To such during the day.

So find a moment. Get to pull in your chair. Or wherever you are at. Wi-Fi we can read [Indiscernible - low volume] try to make this as easy as possible.

You might have to just listen. [Laughter] [Indiscernible - low volume] a little music.

Okay. So take a moment, find yourself in a chair that hopefully doesn't have the spec if you have that has roles, be very, a chair that roles, be very careful.

So as you just can is sitting there, take a moment to sit in the chair, feet on the floor. A couple deep press. And try not to [Indiscernible] try to pull up. Be nice to have it chair that has handles but you may have to scooted a tad bit forward they don't them.

And as you take a nice big inhale up we will bring our arms all the way up with a big inhale, which debris breathe in through your nose and we come down, freed out and you might find this silly, but try it.

What we call ocean breasts and we breathe out, I want you to breathe that when you do this movement. We would do it a few times.

Inhale up. Look up. When you're ready to exhale again, nice big breath, exhale out. I want you to try that again. And as you are in Haley up and in hearing out and I sound, try not to close your mouth all the way. To develop a little bit open. And allow your ears to hear the sound of you. [Indiscernible - low volume]

Hold on. I don't know, it just went off. That is very strange.

All right, so just activating and allowing us to calm down. Maybe taking some good shoulder rolls back and squeeze everything all the way back and forward. Just a little, like really get in there.

Look up and down. And I will move to the sites he can see. So textiles here. It's going to be like you are on all fours, you can curl and most of you can, just pushing against your knees, checking your chin. So feel comfortable, inhaling up and forward. And [Indiscernible - muffled speaker/audio] exhaling it all out. And inhaling it all up. Grab your

knees. He can use your knees to pull your body forward. And then curling back like a cat. And there's a movement there.

And take your own breath and time.

And then come back to center. And inhale this time. Right, no care. To the chair. All the side of the chair. And you're going to turn in just inside and touch your ears. Stop at the shoulder.

Pressing down the chair with your hand. You to the opposite shoulder.

You can play around with it, you can look down. Look a little more up. And inhale up. Make a sound if you want. And we would take that hand placed at other hand down and over to the other chair place that done next year had.

Again, play with it. Ear to your shoulder. [Indiscernible - muffled speaker/audio] the areas of tightness that most of us have. And come back and shake it out a little bit. So we are going to go into a little bit of [Indiscernible - muffled speaker/audio]. If you have a chair that this tab your knee will be pointing out this way, my right hand is pointing straight out to the side, like I'm going to be doing, but I'm still sitting on the chair. Allowing people to say don't have to on the floor. And these are some of my videos because I found the spec [Indiscernible - low volume] I found them to be very helpful with a lot of patients. Pull the weight straight out if he just trying to do a high one. Making sure your knees are [Indiscernible] and you're on the [Indiscernible] and placed the back foot down. I would say worry or fear looking at Hill to heal or heal to arch alignment.

And if the chair doesn't have arms, he can be actually seeing kind of in the middle the chair and it's a little more comfortable for a lot of people.

And switch to the side. And the other side again. And the other one, so again, me out. My left knee and pointing straight to the siding going into just to highlight, but I am not off the chair. I am still on the chair. And to walk watched a video, you've got to go up and down play around a little bit and get enough strength. And they said he can with arms up or have their arms down. Always give them options. I what they can do. With your vegan with the back foot which would be my right now.

So it goes from being this way to in the front. As much as is comfortable with you.

Locking in, lock it in, like you like sent but it would be like a nice wide stance here. And they can come down and maybe come up on your heels little bit. I don't know what is happening. Okay, just pressing those legs open, coming forward a little bit. Yes, so like if you go into the warrior pose and lift your arms up and you're on a chair that does not have [Indiscernible] it connects to be interesting and challenging on the chair. He can make it nice and challenging. Let's go ahead and bring that right leg up, took it in. -- Tech it in -- pull it in. [Indiscernible - low volume]. So those of you who do yoga instead of laying on the floor



flat, we are working through those poses on the ground [Indiscernible - low volume].

Time to bring the right leg up in Crosetti so your ankle is on your side. And if your way up like this, I tell people you can go ahead and hold it and support it. Find that edge that is your edge, not someone else's edge you are comfortable here, you can gently press. And you're like I still feel much of anything, start leaning forward and put the as well as the foot on the ground is nice and funny you have that's going to roll. The kitchen gently start to hold your body of that leg.

And take a few deep rest here.

Yes, thank you.

Put your legs out. I always tell my clients or patients that I'm working with the most important thing is [Indiscernible] with your body. Nothing should ever be sharper painful. Again if you are good here, you can start to find your way all the way over, even allowing your head to hang up a big bowling ball.

In your ankle underneath.

And I have my lake we will be able to see it. And I plan on posting some more. Kind of what [Indiscernible] looks like. Kenneth rock [ Indiscernible ] [ Indiscernible - low volume ] and he can do it on the spot on the floor like I get the videos of [ Indiscernible - low volume ] with the smaller camera. So we can work the shoulders little bit more. Hold your arms up each other and a big hug. This is great. Or if there here, you can always put something there like a washcloth. And the other side. You want to go only to hear.

Modified [Indiscernible - muffled speaker/audio] were not on the floor. For those of you that maybe [Indiscernible] [Indiscernible low volume] [Audio fading in and out]. On the table, I will tell them to put their hands flat.

So our hands are flat. Although it over to you like [Indiscernible] which would be a whole [Indiscernible] and I can do this on a video put on the table. With your palms flat on the floor, go ahead and start, or on the floor.

Gently pull [Indiscernible - low volume]

There might be a couple of Cal movements. Is actually so much we can do with our hair? You can use the back of the chair. It's for people who have a hard time getting down. Using the back of the chair. It is kind of allow yourself to stretch out. And then you can use the front of the chair. Rolling. Kind of like a modified down dog.

I tell people like show different things allow them to start working through their own modification. What works for you? If I hold it right here feels like exactly what [Indiscernible]. So those are kind of some of the things that I find really helpful. I found that a lot of patients like like all kind of movement and fill like were holding up the leg I

care. A lot of people are really tight, they would like to have some of it in there and I'm like if that is important even that's what you need to be doing. And learning how to [Indiscernible - low volume] it something that a lot of us spend a lot of time outside the body. And Pena back in.

It could be the connection I'm having here.

Going to look into just a few moments of some [Indiscernible]. So this is you can do. You can send a chair, or wherever you are actually sitting if you want to try to you can. If you want to been far islets give you I come in here so. Those types of things to comfortable coming to do that.

Find a comfortable spot.

Hopefully all of you have found your comfortable position, whatever you want to stay in. Arrange yourself so you can be 10 percent more comfortable. And if you are sitting in a chair, just gently find that support and sit back and relax. Feet flat on the floor. [Indiscernible - low volume] pay attention to any of your sensors. [Indiscernible - low volume] outside or inside your body. And even [Indiscernible].

Sensations for your body. Touching the floor. [Indiscernible - low volume] somebody want to support. And listen to your body and every experience with the messenger with that sensation. [Indiscernible - low volume] welcome and respond to each [Indiscernible - low volume].

Let me call your attention for today's practice. Be here and be alert. [Indiscernible - low volume] maybe it's work on a particular sensation. But fully welcoming a firm [Indiscernible] [Indiscernible - low volume] so follow your heart desire, switch permission. [Indiscernible - low volume] the spontaneous desire you're looking at more than anything else. A firm experience that's true in this very moment. >> Bringing attention to [Indiscernible - low volume]. That self of being in your body and finding [Indiscernible - low volume] that refuge to help you feel secure.

You I see people images that come to mind, (alignment.

And object and placed [Indiscernible - low volume] [Indiscernible - low volume] for resources and images, responsibilities and [Indiscernible - low volume] for your team. [Indiscernible - low volume]. And secure.

Now allow my words to be your words, and you rotate through your body. Do your job. Lips. Feet and comes. Mouth. Feeling of the mouth. [Indiscernible - low volume]. The right to the left. Tongue. Back of the throat. Entire job and mouth [Indiscernible - muffled speaker/audio] Instead welcome sensations just as they are.

The new left ear. Right here. The years at the same time. [Indiscernible - low volume] left nostril. Right nostril. The flow of air sensation inside both nostrils.

Left Eyebrow. Simple. Cheekbone. Your entire left eye. Right I. Eyebrow. Temple. Cheekbone sensation.

Eyes at the same time. The field of radiant sensation.

Not analyzing, just making a way. For. Crown. Back of the head. And neck. Sensation within the neck. Inner walls of the throat. Left shoulder. Left upper arm. Elbow. Forearms. Wrist. Left hand and fingertips. Entire left arm with the vibrating [Indiscernible - low volume].

Right shoulder. Arm. Elbow. Forearm. Wrist. Right hand and finger. Entire right arm vibrating [Indiscernible].

Give up analyzing. Letting go of thoughts. [Indiscernible - low volume] [Indiscernible - muffled speaker/audio] both arms and the radiant sensation.

Upper chest and back. Mid chest and back. Belly and low back. The torso. [Indiscernible - low volume]. The entire torso. [Indiscernible - low volume]. [Indiscernible] higher torso, sensations. Inward and outward. In all directions.

[Indiscernible]. Entire left leg. And vibrant sensation.

Right leg. Right thigh. The. [Indiscernible - low volume]. Calf. [Indiscernible - low volume]. Entire right leg. [Indiscernible] sensation. Both legs at the same time. Vibrant. Radiant. Then move into [Indiscernible]. The front of the body. Back of the body. The left side. In the right side.

Inside the body. [Indiscernible] sensation. Welcoming the entire body to the vibrant sensation. And all directions, inward and outward. [Indiscernible] that you are now aware of how sensation [Indiscernible]. Go back into awareness itself. [Indiscernible]. Unchanging. In which all the changes and sensations are arriving [Indiscernible - low volume]. And since the body breathing itself, listen to the body breathing itself, letting go, analyzing [Indiscernible - low volume] sensation.

Fill the air enter and leave the body. [Indiscernible - low volume can begin counting 71. Seven. And inhaling [Indiscernible - low volume] and expanding fill your belly rising and expanding. [Indiscernible - low volume] inhaling. Exhaling. [Indiscernible - low volume] continue counting with the body's own natural breathing rhythm. Alert. Attentive. Counting is the body breeds. Counting as the body breeds -- Breathes with the flow sensation inside and outside the body.

Welcome sensation to join happiness. Into your body.

Maybe recall a memory. [Indiscernible] of an animal or someone who loves you. [Indiscernible] invite you to feel that in bring a smile. Experiencing sensations of joy throughout your body. With the torso, arms, legs, and to your entire body has a [Indiscernible] sense of joy.

Setback upon the journey you just check. Welcome the qualities that are [Indiscernible - low volume]. Feelings. Emotions. Thoughts. Sensations. Unchanging awareness in which everything is [Indiscernible - low volume]

And gently welcome herself into the present awareness. [Indiscernible - low volume] [Indiscernible - muffled speaker/audio maybe allowing that thought was a joy to smile on your face leaving your toes. And taking a moment before you come back to the full and present [Indiscernible - low volume]

And wide-awake.

I hope that you enjoyed that. Usually it is longer. There are shorter versions and longer versions. Sometimes people fall asleep. [Indiscernible - low volume]. But the goal is to try to stay awake and allow yourself to find that in between. Pretty interesting have been there and you have done it.

Anybody experience being between [Indiscernible] it was a lot faster than normal.

You're welcome. No comments? I know it's late in the day.

Want to give time for questions that we cover today.

If anybody has any questions with the video. Because are using those [Indiscernible - low volume]. [Laughter]I write these out some less restricted. We are top of there's a certain way we should go through it that is a very systematic process and I didn't give you guys everything that iRest would have because it's a lot more. We talk about like office it is a big one. So between opposite and having maybe you are feeling kind of sad. And you want to fill happy and can you help us visit the same time. Initially interesting if you miss of this type of things and emotions to feelings. We do a little bit of the breath work at the beginning but there's also some other breath work when we talk about breathing on the left side breathing on the right side and sensations of different things like that.

So I did not record iRest meditations, but I was thinking I might put in there at some point or if anybody reaches out, there are apps a lot of us have recorded to the military and there's an app out there. There's a lot of other great apps also. That will have iRest for free and if you want to do it like [Indiscernible] taught me. And [Indiscernible - low volume]. Tempering the questions. I could talk with us all day

If anyone has any questions, you can put in the chatbox and you can always press star # to unmute your microphone. I switched to another layout so you can access the files pod where we have the word document that has the link for the video that Lieutenant Commander Dee recorded.

We have some people typing on the chat box.

I think we have a question. What is the name of the app you helped develop?

Thank you everyone for joining us today. Thank you so much all the speakers for this really great presentation you had for us. Attendees, please make sure that you fill out the CME sheet and return to us to receive your credits, and also please know that it can take up to four weeks to receive your credits

Thank you all so much.  
[Event concluded ]