



EPISODE 1025

The 5 Most Important Things to Help You Recover From an Injury FASTER

With Guest Dr. Steve Sudell

You are now listening to The Model Health Show with Shawn Stevenson. For more, visit themodelhealthshow.com.

SHAWN STEVENSON: This episode is invaluable to getting back in the game and to staying in the game. Life is gonna happen. Injuries, pains, hurts are going to happen over the course of us living this human life of exploring our potential, of playing, of challenging ourselves. And that is okay. So often when an injury or pain occurs, we tend to shy away.

We tend to get more turtle-like and go within our shell and leave our recovery up to chance. But today you're going to learn some of the most science-backed strategies that are incredibly simple to help you to recover faster should injuries ever occur. Plus, and even more important, how can we prehab our bodies to be more resilient to help to reduce the risk of getting injured in the first place?

And so this is very, very special for me because I've known and worked with this individual for years, and to have him here today is truly a blessing. He is my on-the-ground physical therapist, the guy that I go to to help to get me right. Now, this is somebody who, and I encourage all of us to have a superhero team around us.

And this is something that when I was struggling with my health back in the day, decades ago now, and just thinking about how isolated I was and simply having the capacity to open myself up to make myself available for people to help me and to be of service myself and to gain these relationships over time.

This is something that I want to encourage and to replicate in others. And so whenever I have a little something, a little concern, I hit the bat signal and I call Kelly Starrett. He's the physical therapist physical therapist, right? And but he's not close to me. You know, we hang out from time to time.

He's been a incredible guest multiple times here on The Model Health Show, but I get that quick insight, that quick hitter, you know? And especially again, it's something that, you know, maybe it's just a little temporary thing, question about maybe a family member, friend,

colleague that I need some insight on, or even myself.

Then I've got my virtual guy, all right? Dan Swensko, and he's been on The Model Health Show as well, virtually helping me with some things over the years, incredibly insightful, and I could hit the, the superhero signal for him as well. But when I'm like, "I need a hand. I need some help. I need somebody to check me out, get me right," I go to Steve.

I go to Dr. Steve, and he's got all the on-the-ground treatments as well to help to address the acute issues. You know, so maybe that might be the inflammation or whatever the case might be. But also, where are any compensation patterns? Because a lot of times a pain isn't the source of the pain. This can be something up or down the kinetic chain, you know, up or downstream that can be resulting in the manifestation of pain or an injury somewhere else.

And so to have him here today again is an incredible blessing. I'm grateful to be able to share this with you, and this episode is filled with insights, so I think you're truly going to enjoy this. Now, a big part of this conversation and what we're thinking about here is in terms of longevity, and our movement practices are critical in that, but so is our nutrition.

And there's one beverage that is time-tested and has shown those results above all others to contribute to that longevity. And that beverage was highlighted in a 2024 study published in The Lancet, finding that people who regularly drink tea age slower than those who do not. There's something special about this practice that's been utilized by humans for literally thousands of years.

And today we are reaching back to this time-honored tradition. And sometimes we're freaking it out a little bit. We're, we're making a l- a Frankenstein version of that thing. And sometimes the Frankenstein could be cool, right? Like the Frankenstein like on an episode of Scooby-Doo is kinda cool. Like it's kinda funny, you know, it's Frankenstein.

But sometimes Frankenstein's ripping people's heads off. All right? So there's different possibilities of what we can do as far as utilizing these ancient practices, and one of those being Frankensteined a lot, ugh, gotta s- is the matcha. The matcha's gone crazy on the

streets, and we can create some phenomenal beverages utilizing matcha of course, but sometimes it gets kinda crazy.

But what people are really missing out on, unfortunately, what I would love to share is traditional matcha prepared in a traditional way that has all of these benefits without all the craziness. And why is matcha so valuable? Well, there's many reasons. Of course, we have the L-theanine aspect, which researchers have observed, and this was published in the journal Brain Topography, that L-theanine intake increases the frequency of our alpha brainwaves, indicating reduced stress, enhanced focus, and even increasing our creativity. Also, matcha has an influence on our GABA neurotransmitters, you know, just helping us to kinda reduce stress, feel more relaxed and centered.

I can go on and on and on with the benefits, and antioxidants. Again, if we're talking about antioxidants, anti-aging. But the quality matters more than you can imagine, especially now. There's one matcha that I drink, and it's actually shaded 35% longer for more L-theanine than other matchas. And it's the first matcha that's quadruple toxin screened for purity.

It's crafted by a Japanese tea master, of which there are only 15 in the world, and I'm talking about the Sun Goddess Matcha from Pique Life. And right now you get up to 20% off, plus a free starter kit with your purchase. The starter kit can include things like a frother, a hand frother that I actually utilize every single day.

So other cool bonuses, but check out their amazing array of teas, award-winning teas from Pique Life. Go to pikelife.com/model right now and take advantage. That's P-I-Q-U-E-L-I-F-E.com/model. Take advantage right now, up to 20% off, plus some bonus gifts. Head over there, check 'em out. Take advantage of this time-tested practice of having some tea to contribute to our longevity. And without further ado, let's get to our special guest and topic of the day.

Dr. Steven Sudell is a doctor of physical therapy, inventor, and health innovator with nearly two decades of experience helping athletes and active adults recover from injury, optimize performance, and build long-term resilience. As both a clinician and entrepreneur, Dr. Steve

believes the future of healthcare lies in empowering people with practical evidence-based tools that help them to move better, prevent injuries, and take ownership of their long-term health.

Let's dive into this conversation with the incredible Dr. Steve Sudell. All right, Dr. Steve, so great to see you. You as well. You are my guy. You're my guy on the ground, my physical therapist that I go to, and also my family members, my youngest son as well. You know, so you're a very trusted individual in my life.

And I remember the first time coming to see you. This was, like, seven years ago.

DR. STEVE SUDELL: Yeah.

SHAWN STEVENSON: And I just ... Well, and I, I don't think I was even finished writing my book. I was writing Eat Smarter at the time. Mm-hmm. And I moved to LA with a little bit of ... It's, like, my, uh, AC joint or something like that in my shoulder was having trouble pushing overhead.

And I had never really worked with a physical therapist in this era of my life.

DR. STEVE SUDELL: Right.

SHAWN STEVENSON: And, you know, I was like, "Well, I can't really do this particular thing." And I was shocked to see you have me do this particular thing. You were like, "Oh, well, we're gonna actually do that, and we're gonna load it, and we're gonna do it a certain way."

And you were helping me to build strength in ways that I didn't really consider. And it was so crazy how quickly I got better. And not just that. Like, that issue just completely dissolved, like, years and years later. It was something that was, like, nagging me for, like, months. And so, man, I appreciate you so much.

Your genius is real, and I'm grateful to have you here today.

DR. STEVE SUDELL: It's great to be here.

SHAWN STEVENSON: Well, first and foremost, people go through stuff. We get injured. Stuff happens. What are the three most important things for people to know or to do to help them to recover from an injury?

DR. STEVE SUDELL: I mean, the first one's a big one.

First of all, what happened? You know, you have to accurately diagnose what the problem is. You know, was this an overuse injury? What, were you deadlifting and you blew out your back? You know, was it a traumatic injury? So understanding the, you know, the what happened, the exact, like, diagnosis of that is really important for you to take any steps forward.

Once you figure that out, then it's like, okay, well, what can we do? And for most people, if you have an injury where you can't even specifically work on that immediately, a phrase that I love is motion is lotion, okay? The more you keep your body moving, the better. And so even if you can't work on that injury specifically there, just doing systemic mobility, blood flow, just get the whole body moving, that actually helps you recover from injury faster.

And then with the injury specifically itself, you know, just start with what you can do. You know, use pain kind of as your guide of, like, does this feel good? Does this not feel good? If it feels good, then okay, let's push it, and we can, um, figure out exactly, like, what your tolerance to those movements are. The other thing is, you know, you just have to trust your body.

Your body is incredibly intelligent. It knows how to heal itself. You just have to give it tools and the time to do so. And a lot of people can get really freaked out when you have this, like, debilitating injury that messes with your life, and you, you don't know. It's like, "Is this forever? Is this just who I am now?"

And the reality is, it probably is not. Uh, you will get better. You just have to give it time and the resources for your body to, to heal itself. The last thing is just, just focus on the basics

You know, what do you do for health anyways? You, you know, get a good night's sleep, um, have a, eat a good diet, focus on social, you know, focus on stress-free, um, reducing your stress.

If you just focus on those basic things, you don't need to worry about adding in, like, this supplement or this peptide. You know, just, just give it time. Just give your body the tools necessary to heal, and it'll heal. And, and along with that, too, is you also don't wanna delay healing by adding in things like alcohol or, or other things that may, uh, impair your ability to heal.

SHAWN STEVENSON: Mm. So th- we can get into some of the things not to do-

DR. STEVE SUDELL: Mm-hmm ...

SHAWN STEVENSON: as well, but this is such a great list. And I asked you, you know, before the show, like, can we do maybe three to five? We really just gave five there. Yeah. And I wanna dig in a little bit on each of these. And, you know, that first one is the, the what happened-

DR. STEVE SUDELL: Mm-hmm

SHAWN STEVENSON: you know, to really be able to identify the triggering event, right? So obviously, a lot of times, if it's, like, a trauma, you know, like there's an incident, there's something that happens, a fall or, you know, a sports injury, like you can identify. Sometimes it's a little bit more suspicious-

DR. STEVE SUDELL: Yeah ...

SHAWN STEVENSON: in how a thing can show up, and you gotta do some, uh, some investigation.

Let's talk about that a little bit because sometimes people don't know what happened.

DR. STEVE SUDELL: Right. A- and this is where it's like a little bit of detective work or even going to a professional at some point if you need to, but I usually give things like the two-week rule. If, if some sort of pain pops up and you're like, "What the heck happened?"

Give it two weeks, and a- a- and after two weeks, if your body is not feeling better, then you probably need to go see someone to get it checked out. But a lot of times your body can heal itself within that two weeks. And just because you have pain doesn't mean you even have an injury. It could just be like a warning signal of like, okay, let's pay attention to this.

You know, you go for a long run and your knee when you get back is talking to you. There's not necessarily anything injured that you need to freak out about right then and there, but there is something you need to pay attention to. Maybe it's did you get an effective warmup before you ran? Are your hips too weak?

Are you, uh, your flexibility, are your hamstrings too tight? So there's like a lot of things that you can go through and chip away at and say, "Okay, um, everything else I did is normal. Did I add in a pair of shoes? Did I not get a good enough sleep? You know, did I run 20 miles today when I normally only do five?"

So you have to do like a little bit of detective work, but also give it a little bit of patience and a little bit, little bit of time to give yourself, um, that time to figure it out.

SHAWN STEVENSON: Yeah. Well, what we tend to do, of course, is catastrophize it.

DR. STEVE SUDELL: Immediately. Yeah. Oh, I have cancer. You know, I have bone cancer.

You know, my back hurts. You know, that's immediately where people go, and that's where I like to, again, give people that two-week buffer of like, hey, just like pay attention to it. Maybe don't like try to push through it. If it hurts when you're ... If it hurts worse after you're doing something, you probably shouldn't do that.

But if it feels good while you're doing something, then, you know, you probably should do that. And, 'cause a lot of times it's like, you know, you might tweak something And then

you're afraid to, like, work on it for, you know, a week, two weeks. A lot of times, the next day you can go back to the gym, just start with some gentle mobility flow, do some foam rolling.

And if it's feeling better at that point, then you probably can start to do stuff. But if it's not, then it's like, okay, well, let- let's give it some time to heal.

SHAWN STEVENSON: Yeah. Yeah. And this leads really well into, again, this powerful sentiment. We all need to ingrain this in our minds, like sear it in there. Motion is lotion.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: And unfortunately, what tends to happen, still to this day, is if somebody is seeking out professional help for pain, like soft tissue or some kind of, you know, some kind of injury, it's to stay off the thing. Yeah. Don't do the thing, you know? That was my experience with, you know, uh, injury recovery, again, prior to this era of my life.

You know, just bed rest, don't do anything- Totally ... and stay off of the thing. When in reality, again, if you can do certain things and it's not too painful, like we really shy away from pain, and it's more body awareness. Mm-hmm. Right? And so again, we don't wanna make it worse. And if you're noticing, like, I do this thing and it gets worse, okay, yes, let's back off.

And also, we could just take a even a smaller window of backing off versus, like, six weeks, don't do anything. Totally. Right? And so understanding it's not just the act of, like... We- we'll just say it's, um, you know, uh, a leg injury.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: It's not just the act of trying to train that leg. It's just the act of movement.

As you mentioned, like, the circulation is so important. What it does for your mental health- Totally ... right? Just being able to be active and doing something. Maybe you're doing, you

know, some rows, you know, the row machine, or, you know, a SkiErg or something like that, just so you can feel this powerful sentiment.

Again, motion is lotion. So w- w- are, does this frustrate you, like, to hear... Again, some, before somebody gets to you and they go and see their, you know, their, um, their primary, and they have maybe a soft tissue injury, and they're like, "You know, you need six to eight weeks, and then you can return back to..." This is the thing, too.

They don't mention physical therapy sometimes. Totally.

DR. STEVE SUDELL: Yeah.

SHAWN STEVENSON: It's very rare. Yeah ... and you can return back to your normal routine.

DR. STEVE SUDELL: I- it's probably one of the most frustrating things that I deal with when people go see their doctor, and their doctor ... You know, you have, like, a marathon runner. Like, this is the thing that they're passionate about, they love, it brings them all the joy in the world.

And they go, you know, with an Achilles injury to see their doctor, and their doctor's like, "Well, you know what? You probably shouldn't run anymore."

SHAWN STEVENSON: Mm. "

DR. STEVE SUDELL: Just, just don't run anymore." Like, that's their solution. Or, or don't do anything for, for six weeks, eight weeks, whatever the case may be. And it's just so crazy to me, because it's like you are not helping the h- the healing process at all.

There's always something that you can do to keep the other tissues, you know, strong. Because i- imagine how would you feel if you injured yourself, and then eight weeks later, you know, you go back in the gym and you try to hit the same weights. Like, you're gonna be significantly weaker. You're gonna be way more susceptible to injury, because your body hasn't been moving.

It's stiff. It's weak. Uh, you know, mentally you're also probably not in a great place. So there's always something that you can do around that injury, and you should continue to do it. For example, I actually ... Unfortunately, one of my clients right now, um, he was hit by a car about s- five, six weeks ago, and, um, it hit

He had to have his leg amputated. Below knee amputation. He's a friend of mine, goes to the gym. And, uh, so I've been doing physical therapy with him. Like, right when he got out of the hospital we started doing PT.

SHAWN STEVENSON: Mm.

DR. STEVE SUDELL: And there's so many things that he can't do, obviously, but there's even more things he can do.

SHAWN STEVENSON: Yeah.

DR. STEVE SUDELL: And one of his doctors that he went and saw, who's gonna do his prosthetic, um, you know, my friend Jordan, he was, he was saying that, uh, "Well, you know, what should I do, like, for this leg to keep it strong so that when I get the prosthetic, you know, I'll be ready to go?" And he's like, "Oh, you don't need to work that leg."

W- what kind of crazy stuff is that? Like, you expect this man to go from, you know, this injury, go three, four months not working that leg at all. The amount of atrophy he's gonna have, the amount of stiffness that he's gonna have. Do you think he's gonna be in better shape actually strengthening, stretching that leg when he gets a prosthetic to just hit the ground running?

Or how much extra, like, time is it gonna take and, or potentially other injuries is, are gonna manifest as a result? And it just, when I hear stuff like that today, with all the information that we have at our fingertips, it's just so crazy to me. You know, it's like what some of these doctors learn in medical school, it just blows my mind.

And, and the fact that these, you know, there's so many people that take their word as gospel is just really dangerous to me. And, and it's, it's really unfortunate 'cause there's a lot of

people out there who don't live in this world, who don't know. And they just, whatever the doctor says, they listen to it and, and they get worse results as a result.

You know, it's sad.

SHAWN STEVENSON: Man, thank you for sharing that. Um, let's talk a little bit more about using pain as your guide.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: So again, I think that this requires, uh, a level of self-awareness-

DR. STEVE SUDELL: It does ...

SHAWN STEVENSON: That I don't, I don't, I don't think a lot of people, you know, the average person just with the distractions and just, like, being able to go within and, like, pay attention in the moment.

Um, but I think that it's a special occasion, a catalyst potentially, when they do have an injury-

DR. STEVE SUDELL: Mm-hmm ...

SHAWN STEVENSON: because they wanna get better. So when you say use pain as your guide, what do you mean by that?

DR. STEVE SUDELL: So, you know, there's good pain, there's bad pain, right? There's, like, that good, like, muscle pump that you can get doing a workout, like, that hurts, but we know that's good pain.

The bad pain is, like, anything that's, like, sharp or really just causes, like, apprehension for you not to do it. Those are the types of pains, like, that we want to avoid. Um, you do have to, with a lot of injury processes, go through a period of desensitization. So for example, let's say you injured your wrist, right, which is very common for people who do CrossFit.

The wrist is a very weak joint. One of the best ways to get the wrist stronger is to go through a period of desensitization where you do movements where maybe it doesn't feel great, as long as you're keeping that pain range like 3 out of 10 or less. You know, 10 is it hurts so bad I have to go to the ER, zero is no pain.

If you can do things like in that pain range, like two to three out of 10, then it's gonna desensitize those tissues so then they're more prepared for stimulus later on. So that usually, like the zero to 10, staying at a three or less, is usually a pretty good guideline for, for most injuries.

SHAWN STEVENSON: That's such great advice, man.

Thank you for breaking that down. That's great. Great advice. And you talked about as well, uh, trust your body.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: Trust your body, Enlighten us on that one.

DR. STEVE SUDELL: I mean, I've been a physical therapist now for 15-plus years, and I am just so astonished how intelligent of a machine, you know, we operate. And there's things that i- it's, our body understands how the healing process works far more than we do.

And you just have to, you know, listen to your body and push it, you know, understand when to push it, understand when, when to pull back. But ultimately, every night when you go to bed, your body's hard at work on trying to get yourself better, whether or not that's from an illness, an injury. Your body knows how to fix it.

You just have to give it the right tools to facilitate that process. And so, um, you know, that's where I just... It's really helpful when you're going through, like, a significant injury to trust your body that it knows, like, what to do. And then all the things that we kinda talked about around that will help kinda facilitate that process.

But ultimately, like, your body's gonna fix it.

SHAWN STEVENSON: Yeah.

DR. STEVE SUDELL: As long as you don't keep doing the thing that injures it. Mm-hmm. You know? So understanding that as well is really important.

SHAWN STEVENSON: Yeah. Just, this is such an important takeaway from this interview, is like, your, your body knows what to do. You're not doing the thing yourself.

Mm-hmm. It's just, like, creating conditions to either help or hinder the process. You know? Like, your body knows what to do. Trust your body. And with that, number five was the body and mind basics, is what I wrote down. Mm-hmm. You know? It, uh, I'm so big on this. We were talking about this before the show 'cause it kinda pisses me off when people are trying to do these extraordinary things, but they're not doing the basics.

Yeah. It's just like focus on the basics. It's like the 80/20. You're gonna get 80% of the results just by doing this 20% of the simple basics that your genes expect you to do as a human, let alone to recover from an injury. So the body and mind basics. So what are some of those basics that you recommend for your, uh, you know, your clients?

DR. STEVE SUDELL: Um, sleep. You know, if you can get seven to eight hours of sleep every single night, that in itself is just gonna help to, you know, keep your cortisol levels down. Uh, it's gonna allow your body time to heal itself. But if, if you're, like, one of these people who, you know... And I, and I understand this, like, not everyone has the luxury of getting seven to eight hours of sleep, but even if you can try to, like, sneak in, like, a, a nap during the day or whatever, just allow your body and mind to recharge its batteries.

'Cause if you are constantly just go, go, go, you're constantly breaking down, you're not giving adequate time for your body to build back up. And it kinda is like, you know, there's a lot of people who fall into this camp of the over-exercisers, you know, the people who work out seven days a week. You know, when you h- work out hard seven days a week, you're not giving your body adequate time to build itself back up.

Like, rest is so important, and it's one of those things that's, like, very overlooked in a lot of, like, rehab programs and exercise programs. Um, because if you're not allowing your body to rest, it can't heal itself, you know? And then going back to, you know, nutrition, just getting enough water, getting enough protein intake, making sure you're getting enough calories.

You know, I actually see a fair amount of, like, marathon runners, uh, female typically And, and that's actually not fair. Uh, men too, who they're just not eating enough. You know, they come in with these injuries and they're just, you just look at them and they're just so depleted that it's like, you, you gotta eat more.

You know, your body is not gonna be able to heal itself unless you give it the fuel to do so. And it just seems like such common sense, but there's, there's also, like, a lot of stigmas around, you know, getting too big as an endurance athlete, it's like that's, like, a bad thing, or getting too bulky. And they're so far from that, like, danger zone.

Um, but it's a real thing. It's, it's real- really a common thing. And even just the other things too, you know, like, um, social. Like, social is another area that people really overlook, that if you're just always just so focused on, like, doing hard things, you know, like, that's, you know... We now know that doing hard things is a really good thing, but it's good to also, like, have, like, time to recharge and reset with family, with friends, to then, you know, recharge you so you're ready to go.

So just kinda having those, those pillars and those foundations are just super important in both exercise and rehab. You know, 'cause there, there really is, like, a fine line between, you know, what is the difference between rehab and performance. You know, it's on a spectrum, and you're just, you know, at different ends.

SHAWN STEVENSON: Yeah. I wanna ask you about specifically the mind and the mindset because, again, we tend to c- catastrophize when, uh, an injury shows up- Mm-hmm ... or we're in pain. And I, I think it's just, it's kinda a normal reaction at this point for most people. And, you know, it's like being able- Mm-hmm ... to use our higher order brain functions to kinda reel it back in and understand how powerful our minds are in the healing process.

Mm-hmm. Because now we, again, we have entire vast fields of psychoneuroimmunology, psychoneuroendocrinology, and we know that our thoughts and our beliefs literally affect the speed at which we heal.

DR. STEVE SUDELL: Yeah.

SHAWN STEVENSON: And, uh, Dr. Ellen Langer, who's a great, um, kinda pioneer in this field, running clinical studies on this subject, and she's the first woman to receive tenure in psychology At Harvard and running these studies and just seeing even, you know, just your, your belief on the treatment that you're getting from, you know, a health professional-
Mm-hmm

how effective that is also influences how effective, um, I'm sorry, also influences how quickly you heal, right? And this is where the placebo comes in as well.

DR. STEVE SUDELL: Totally.

SHAWN STEVENSON: You know? Like, the placebo effect is so real, we have to account for that in clinical trials. Like, your beliefs, your mind can literally heal your body or it can inhibit it if it's a nocebo effect, right?

Some kind of negative injunction- Yeah ... just. So how important it, is the, the mindset, and is this something that you address with certain people when you can see, like, they're really down in the dumps about what they're going through?

DR. STEVE SUDELL: 100%. I mean, that's, that's, that's like one of the first things that I do is acknowledge that, yes, you are going through something that's painful.

Yes, this is not fun. Yes, you know, it's, it's unfortunate. It is what it is. But you will get better. And if you do these things, you will get better. And, and I a lot of times will anchor it into previous clients that I've had who are, like, the same avatar. You know, I had this same athlete. They really injured their back, you know, X years ago, and they did this and they got better.

Now, you also have to understand or explain to them that these things will take certain amount of time. You can't, you know, say this is, this magically you're just gonna get better in two weeks. It may take six, six weeks. It may take three months. But getting them to at least see the roadmap and understand that as long as they do these things with patience, they'll get there.

And because it's so true. It's like if you believe that this thing is going to help you, it's going to help you. You know, there's so many studies about that. And it's even funny, too, um, I can't remember the study, but- They looked at, um, people working out, like doing bicep curls. And they had them, you know, one, one group, uh, they were having them just kinda like watch TV as they were doing that.

And then the other group, um, they had them look at their bicep and really visualize the bicep growing as they were doing the exercise. And what they found is that group, their bicep, even though they did the same amount of work, it grew. I can't remember the exact percentage, but it was significant. Mm.

Statistically significant. And you can apply that with anything in your body. Yeah. Anything in your life. If you believe it's going to help you, then it will. You just have to also be realistic about how long is this potentially gonna take, and what is it gonna take to get it to heal. As long as you have the confidence in those things, then that's where you get to trust your body and your mind takes over, and it's beautiful.

SHAWN STEVENSON: Yeah. Now, what about struggles in that process, when somebody has, you know, maybe things are going really well for like a couple of days, and then, you know, maybe they have a pain that pops up or returns and, you know, they see it as like a setback. You know, I think we tend to see healing as like a straight line.

Mm-hmm. Like, I made it. Yeah. And that's the end of the story.

DR. STEVE SUDELL: This is something I use in the clinic all the time, is that success is not linear. It's more like this. And so I tell people straight up, especially, the most common one is

back injuries. People can be feeling a lot better, and then they don't feel any pain anymore, so they go out and they try to lift heavy, and immediately, like some sort of pain comes back.

And I tell them, "Expect that. Setbacks are going to happen, but it's just part of the process. It's just part of the process that your body is going to feel not great 100% of the time." And so that goes into the mindset of like, if you know that the process is not gonna be linear, you're not gonna freak out at the first time that it's like, "Oh, yeah, Steve was right."

You know, the, my, I, I woke up and my back feels like really sore. Like, what's wrong?" It's like, well, no, we knew this was gonna happen. But- It's one thing to tell someone that. It's another thing for them to actually live it. And usually, like, the first setback is, like, their learning experience of, like, "Yeah, I told you this was gonna happen."

It's like, "Oh, yeah. Okay." And then they get better, and then... So it, you also have to make sure that they're staying cautious because just because pain goes away doesn't mean that the problem necessarily went away, so you wanna still continue to build them stronger than what they were before they came in.

SHAWN STEVENSON: Mm. Amazing. Amazing. One of the things that I felt like, "Oh, I'm, I'm in the right place," because it was Jay Farrugia- Mm-hmm ... who recommended me to you seven years ago. And when I got to your office, it was upstairs from a gym.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: And so the gym was downstairs. I was like, "Oh, this is, th- I think this is, like, my people."

You know what I mean? And, you know, I, I came up to your office. You did some analysis and some treatment, but very quickly, you had me in the gym and doing work in the gym, and, you know, challenging the, the perceived issue.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: And what was so interesting, and even as I say it now out loud, like, I was able to do things that I didn't think I could do.

I was able to do them. They didn't feel comfortable-

DR. STEVE SUDELL: Right ...

SHAWN STEVENSON: but I was able to do them, but I had relented to not even try to do anything close to that stuff. Totally. And so, you know, you were helping to establish a healthy range of motion when it came, you know, with my shoulder, and also strengthening as well.

And so w- with that being said, how important is it, because it's not just doing this stuff when an injury shows up. Like, your, your brand, your company is Prehab2Perform.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: So how important is it to have, like, a base of strength and, you know, actually training? Because I think that that's also one of the things that really helped.

Once I started to do the things, I got better really quickly.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: So can you, number one, how important is it to have, like, a base of kinda fitness and strength, and what does prehab mean?

DR. STEVE SUDELL: So it's incredibly important to have that base because the reality is When a person comes into my clinic, if they're, you know, not an active person, if exercise is not currently a part of their lives, they're gonna...

It's gonna be a lot harder. Um, they're... Because a few things. Number one, they're probably gonna be a lot less compliant with the exercise. Number two, if they just see this as a

temporary thing that they have to do to get through the injury, then yeah, we might get them feeling better, but what's gonna happen is they're gonna recoil and come back.

You know, they're gonna keep having this thing, because most people, when they're in a deconditioned state, they're just in a weakened state, and they're just much more susceptible to all sorts of injuries. And so those are the most challenging people for me to work with, and I explain to them, I'm like, "Look, you have to make exercise a part of your life.

If you don't make... Like, it can't be just something you do for a few weeks or a few months. This has to be a thing that is just what you do. And if it's not, then you're gonna have a lot of challenges. You know, you can pay for it now or you can pay for it later, and you're gonna pay for it a lot later by not taking care of your body now."

And, you don't have to do anything crazy. You know, even three days a week of some sort of, like, strength program, and then if you can incorporate some sort of, like, conditioning, but that helps people get better so much faster. It's funny, CrossFit has this negative connotation to how it causes people to get injured, and it does cause a lot of injuries, 'cause the reality is it's, it's putting you through a full range of motion that, you know, we might have you come in and do snatches, you know, one day, but if you've been sitting behind a computer for eight hours before that, your sh- your posture's bad, your shoulders are tight, and you go to try to lift a heavy weight over your head, you're probably gonna tweak something.

So you have to put in the work before that, the mobility before class. You have to get those muscles, like, really primed on a daily basis so that you can do those things safely. But what's funny about when I see CrossFit athletes, though, they get better so fast. Like, I see them... Like, when they come in for an injury, like, the average, like, length that I might see a CrossFit athlete is, like, one to five sessions, whereas anyone else, even if they are athletic, um, it's usually, like, double that.

SHAWN STEVENSON: Mm.

DR. STEVE SUDELL: Because the thing about, like, you know, CrossFitters is they have built into them this, this mindset of, "Oh yeah, before class, I do these mobility exercises. I do the foam roll. I do, like, this and that." And so when that's already programmed into your brain, when an injury comes up, like, you heal from it quickly.

SHAWN STEVENSON: Mm.

DR. STEVE SUDELL: You know, 'cause you already know the process. You just have to, like, learn, you know, a different technique on how to fix those things. So being physically active, um, will definitely help you in the long run as far as injury prevention.

SHAWN STEVENSON: Yeah.

DR. STEVE SUDELL: And then as far as prehab goes I came up with the name because when I was first starting out as a PT, uh, I would see a lot of people for, uh, you know, they would come in before they got, like, a hip replacement, knee replacement, and we would do prehab before they got surgery.

And what I found was, and I don't know the exact stat, but we'll say maybe three out of four of those people canceled their surgery.

SHAWN STEVENSON: Mm.

DR. STEVE SUDELL: Because they weren't doing any of the things that we were working on, and then all of a sudden, when you start doing those exercises and you start working on the mobility and strength, all of a sudden, their knee pain goes away.

All of a sudden, their hip pain goes away. So prehab, for me, is just one of those things that, you know, if you're constantly keeping your body strong, then you never have to get to the rehab phase. You know, you're trying to avoid the surgery. You're avoiding, like, the next level of, you know, seeing a physician, um, if you can do those things beforehand.

SHAWN STEVENSON: Amazing. Amazing, man. Um, one of the things that you have identified, and you actually are an inventor as well, and it's one of the most common things that people struggle with and they tweak- Mm-hmm ... especially in our modern lives, uh, are neck issues. Mm-hmm. And you're the inventor of the Neck Hammock. So talk about that.

Like, what inspired you to create that?

DR. STEVE SUDELL: I, I got injured, you know, a lot. Uh, I grew up, you know, played football, so I constantly was having compression on my neck, and the one thing that seemed to give me a lot of relief was cervical traction, but I'd have to go into, like, a physical therapy office, lie down, and use this very expensive, uh, device.

There was no products out there other than, like, these archaic-looking things that were, like, actually terrible for your neck. And, um, so, you know, one day, I was actually doing a workout. I was doing some handstand pushups. Shockingly, tweaked my neck, and I decided to grab a band and wrap it around a pole and lie down on it for 10 minutes, wrap it around the back of my head to create cervical traction, and 10 minutes later, when I got up, my neck felt way better.

I was like, "Okay, so there, there's something here. I feel like I need to pursue this because if I'm feeling this way, how many millions of people out there could also, like, benefit from this?" So I spent the next, like, y- year to two years developing, you know, 13 different prototypes. The great thing about being a physical therapist is that I- it's my own laboratory.

Right. So anyone who came in, I'd be like, "Hey, Shawn, go ahead and lie down on this. Like, let me know, like, how you feel." And they'd tell me, you know, "Uh, it's a little uncomfortable around the ears. It's a little too tight," this, that. So I had my laboratory to test all these different prototypes. Eventually, I ran a Kickstarter.

We raised almost, like, a million dollars in 30 days. It was, like, one of the biggest Kickstarter projects, like, that, uh, year. I was not anticipating it to be that successful, so I had, you know, to figure out how to make that much product, like, that fast, which created some issues.

But ultimately, the biggest reason why I did it and why I'm so happy about it is, you know, by the time I sold the company back in 2021, we had personally sold over 500,000 units, and the reviews that people would send me were just so inspiring, and they were just so amazing.

And even, you know, I went through, like, a lot of hardships dev- developing the product. And I remember there was this one night, I think I was going through, you know, f- funding issues. Like, how am I gonna pay for this? Um, and one of my friends who I let borrow a Neck Hammock 'cause she had constant, uh, cervical, um, headaches She sh- shot me a text like, "Hey, you know, normally, you know, when I have these, like, really bad migraines, you know, I take Advil and I take this and I take that, and, like, nothing was working.

And then I tried the neck hammock that night and I felt so much better. Like, my neck pain went away, uh, my headache went away." And so it was, like, things that like that-

SHAWN STEVENSON: Mm-hmm ...

DR. STEVE SUDELL: that kind of brought me back down to, like, okay, this thing that I'm working on is beyond me. It's really important to pursue. And the mission was always, like, how can I...

I can't see 500,000 people, but how can I give them something that they can, you know, fix themselves with? And so super, super proud of the product and, uh, just very happy that I was able to make an impact on a lot of people.

SHAWN STEVENSON: Yeah. That's incredible, man. Like, that's, like, you made history. You know what I mean?

Mm-hmm. Like, that's so powerful. You've already heard the news that red light therapy is incredible for our skin health. A double-blind randomized placebo-controlled trial found that in just four weeks of treatment with red light therapy, participants had up to a 36% reduction in wrinkles and up to a 20% increase in skin elasticity.

Now, this headline is out there. People know that red light therapy is great for the skin. But what people still don't realize is that red light therapy has been utilized for decades in the treatment of pain. Yes, the headlines for red light therapy improving our skin health is true. It's powerful. But what most people still don't realize is how powerful red light therapy is for healing our bodies and reducing pain.

A powerful meta-analysis published in the BMJ sought to see if red light therapy can reduce pain in people with osteoarthritis versus a placebo. The study included over 1,000 people, and it found that red light therapy can significantly reduce knee pain in study participants. And not only that, the results appeared to have semi-lasting effects, with benefits seen up to three months after treatment.

The researcher stated, quote, "The positive effect from red light therapy seems to last longer than those of widely recommended painkiller drugs," unquote. Incredibly powerful. It's not only reducing pain, but it's actually making the tissues healthier. It's improving the body's capacity to heal. Now, we need to be clear.

There's a lot of sham red light therapy devices out there. The red light therapy device that I utilize, it's FDA registered, and it provides both red and near-infrared wavelengths, the same irradiance that's noted in those studies, and you can utilize this from the comfort of your own home. The quality of their red light therapy devices have been verified in third-party labs, and it meets key IEC safety standards for electrical and EMF safety.

And I'm talking about the red light therapy devices from Bon Charge. Go to boncharge.com/model right now and use the code model at checkout for 15% off all of their red light therapy devices. They have their classic best-selling red light therapy panels. They have the number one award-winning red light therapy mask.

They have the red light therapy sauna blankets as well. So many different red light therapy devices to choose from. So head over there, check them out, take advantage of that incredible discount. Again, that's boncharge.com/model. That's B-O-N-C-H-A-R-G-E.com/model for 15% off. Take advantage, and now back to the show.

Uh, question about, again, when we experience pain or an injury, we tend to be very focused on where the pain is. Mm-hmm. Like the local aspect of it, and not realizing that a lot of the time there's something up or downstream that is contributing, if not the causative agent of that pain showing up. You know, like you might have somebody coming in that's dealing with a hip, hip flexor issue, and you end up working on things with their lower legs- Mm-hmm

you know, or their calves or something like that, or their tibialis anterior or something.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: So can you talk about that? Like, why is it important to not just hyper-focus on the spot of where the pain is?

DR. STEVE SUDELL: Yeah, I mean, I would say most of the time the pain is never coming from the area. You know, it's, it's always an issue somewhere upstream, downstream.

You know, I've seen crazy, uh- patients to where by fixing their neck pain, we worked on ankle mobility. Because every time that they were doing, like, snatches, you know, they had terrible ankle mobility, so therefore, like, when they'd get to the bottom, like, their neck would have to crank back. And so you just always have to follow it up and downstream, 'cause, um, it's incredibly common for that to be the case.

But also explaining to the person, like, "Hey, I know that your shoulder hurts here, but I'm working on here to fix this. Because if you have bad posture, then you're gonna put your shoulder in a more, uh, likelihood or, or position to be impinged, you know, whenever you're lifting your, your arm over your head."

And so getting them to understand that that's why is really important. With that being said, uh, I always work on that area specifically, too, 'cause it is important to decongest the area, you know, get some blood flow to it, desensitize. But ultimately, like, the next few steps is working on everything else.

And, you know, that's one of the things that we do at our clinic, is we always treat the whole body. Whenever you come in for a neck issue, a shoulder issue, you know, we're gonna have, we're gonna test your squat. We're gonna see, like, what your hip hinge looks like. Because all those things, they work them, their way up the chain, and any breakdown in the chain, you know, can lead to dysfunction somewhere.

SHAWN STEVENSON: Yeah. So you mentioned decongesting, you know, the area, and I, I would love to know, like, what are your s- your favorite tools for helping to do that specifically, right? So, you know, somebody's coming in. Are you a fan of things like cupping? Like, what are, what are some of your favorite tools for helping people with that kind of, um, uh, that local pain?

DR. STEVE SUDELL: So when people come in and see me, my favorite modalities are, I love doing combination of Graston, which is, like, the, the, the metal tools that you scrape. Uh, combine that with the cups, I feel like is, like, one of the best two, uh, one-two punches out there as far as getting blood flow, desensitizing, decongesting that area.

Now, you don't have to have those tools at your disposal to, to benefit from that. You can also do something like, you know, foam rolling the area. Or in different parts of your body, you may need different tools. Like, if you have plantar fasciitis, maybe use, like, a golf ball or a baseball or a softball to get into the area where you need, like, more of a firm, um, you know, feedback. But the other thing that people can really think about is just mobilizing their fascia and doing it through means of, you know, soft tissue work, whether it's the foam roll, uh, a lacrosse ball, golf ball, whatever the case may be.

Um, that's a good way to get the tissues moving, get some blood flow without actually doing any activity yet. I, I typically will pri- like, start our session doing some sort of decongestion, some sort of desensitization before we even get into any sort of, you know, mobility or strength work.

SHAWN STEVENSON: Yeah. What's your opinion on, you know, again, this was in school.

DR. STEVE SUDELL: Mm-hmm

SHAWN STEVENSON: RICE, the RICE paradigm. Like, where are we at with that? Uh, w- what's your opinion on using ice versus heat, or is there a certain place where... Because the tendency is ice.

DR. STEVE SUDELL: Yeah.

SHAWN STEVENSON: Right? So talk about the education around RICE, like, this is, like, foundational stuff, and where we are today.

DR. STEVE SUDELL: Yeah, the idea with RICE is just you wanna protect the area.

You don't wanna create any f- further injury to it. You know, you wanna vasoconstrict to prevent any more excessive blood flow to the area, which conceptually makes sense. But the reality is, we need blood flow to go to the area to heal it. You know, we want to limit, you know, sometimes how much blood flow, uh, we get to the area, especially when it comes to things like disc injuries.

Like, we don't want excessive, uh, blood flow to those discs, like, while it's inflamed, 'cause then that'll, that'll cause, you know, sciatica-type issues and a whole slew of other issues. But, but I actually have a slightly contrarian view on this, although I don't use RICE specifically anymore. What is

SHAWN STEVENSON: RICE, by the way?

DR. STEVE SUDELL: Rest, ice, compression, elevation. And, you know, I think that for a while it was okay, and I think that I actually still am a fan of using ice, um, for immediately post-injury because of the desensitization component. You know, uh, 'cause me, anecdotally speaking, you know, if I tweak my shoulder, like, immediately and I put some ice on it for 15, 20 minutes, it feels better 15, 20 minutes later.

And what that does also is it, you know, re- reduces the overall, like, cortisol response. You know, 'cause when you're feeling pain, your whole body responds. And so if you can just

temporarily remove that pain without using drugs, then I'm certainly okay with it. Now, there's a window that I like to just use ice.

You know, I might use it for the first, like, three to seven days, like, max. But really, the sooner that we can incorporate heat, and not even necessarily topical heat, but heat as in just moving. Mm. You know, getting on a bike and just getting blood flow to the area is certainly better than, you know, the RICE method as far as healing is concerned.

Because- In the initial stages, it's not the worst thing to prevent, you know, excessive blood flow. But pretty soon after that, we want to encourage blood flow 'cause that, you know, that's how the whole healing process works.

SHAWN STEVENSON: Yeah. Now, obviously, this is a tough question because especially if people are active and they've got their sport-specific things to do.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: But what would you say for the average person? Like, what would be, if you, if everybody in the world, you could program, everybody's gonna do these five s- specific exercises. This is like, man, you could do other stuff, absolutely, but these are the five core things that you would have every human being work on.

Like, what would those five things be?

DR. STEVE SUDELL: I mean, my favorite, you know, uh, the back squat, the deadlift, um, bench press, pull-up, and then, like, an overhead press And the caveat is obviously I want you to be able to move well with all those things. You don't have to lift super heavy. You know, I want you to lift as heavy as your body will allow you to lift.

Um, you know, become harder to kill, you know, become more resilient to injury 'cause the stronger- the stronger and more mobile you are, the less likely you are to get injured. Like, the people, the... One of the very first tests that I have people do when they come in is I have

them show me their squat. You know, I have them do three air, air squats from the side, from the front.

I, I don't care if it's a shoulder injury, a neck injury, like, I see how well can this person move. And what I find is that people who have really good-looking squats typically get injured far less. Mm. But I would say the majority of people who come in, especially with overuse injuries or their, like, you know, desk job, they have atrocious squats.

And so I would say that you don't even necessarily have to do, like, a heavy squat, but, like, master the air squat. If you can get a really good air squat, that shows me that, you know, you have good ankle mobility, you have good hip mobility, you have good control, um, you have good posture. All those things are beyond just, like, it being, like, a leg exercise, but, like, just a total body movement exercise.

And so the ability to do those five movements for everyone, male, female, doesn't matter, I think is really important.

SHAWN STEVENSON: Got it. Got it. Now, what if somebody says, "I can't squat"?

DR. STEVE SUDELL: Well, let's work on that. I, I think that everyone... I shouldn't say everyone. Most people have the ability to have a pretty good squat, at least a below parallel squat, 'cause that's, like, what we're designed to do, to do.

If you, if you have kids, and I know you do, uh, but when you watch them when they're really young, all kids have this beautiful squat. Like, toddlers, they'll just hang out in that position forever. You know, they'll play in that position. It's effortless for them. They enjoy being in that position. But through Western society, us sitting all the time, we've lost the ability to squat.

It's, everyone has that in them to be able to do, but through, you know, throughout, it- when you get older and you don't do it, you know, if you don't do it, you lose it. Um, that's why people can't squat anymore, 'cause they just stopped doing it.

SHAWN STEVENSON: Mm.

DR. STEVE SUDELL: And so encouraging kids to continue to do those full body movements is so important.

SHAWN STEVENSON: Yeah. And we tend to compensate, you know, to find a way to get down on whatever kind of squat we could do. So is there anything else that we can do to work on improving our squats?

DR. STEVE SUDELL: So one of my favorite things that I always give people is I call it the seven-minute squat challenge, where every single day you spend seven minutes in a squat, and you do this for 30 days.

Now, you, uh, I don't expect you to do seven minutes in a row immediately. You can start out with, you know, seven sets of one minute. And it doesn't even have to be all at the same time. It could just be, like, throughout the day. But if you accumulate seven minutes of spending time in a full squat, by the time you get to day 30, you'll notice a significant improvement.

And, you know, as you're doing it, you're gonna go through some growing pains. You know, the first, like, 30 seconds you're gonna feel like your shin's burning, your back is sore, like, all these, like, little aches and pains and niggles. Um, and if you have to hold onto something at first, if your heels pop off the ground, I don't expect it to be perfect.

I just expect you to do the best that you can. And the more often that you'll do it, your squat will get a little bit deeper, you'll be able to stay out there a little bit longer. You'll get a little bit more comfortable. So it's a really fun challenge that's super easy, uh, that anyone can do.

SHAWN STEVENSON: I love it.

It's just having that target.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: You know, this seven-minute squat challenge, and just spending some time in that position. Again, you could do other things, especially once you start to get more comfortable. And so when you mentioned the squat challenge, just being in the bottom position of a squat, it's okay if your heels come up as well.

So I'm just gonna demonstrate for people that can see the video version of this, and also what it looks like to, like, hold onto something as well. All right. So we just get down into a resting squat like this and just kinda hang out here. That's

DR. STEVE SUDELL: a pretty good-looking squat.

SHAWN STEVENSON: I, you know, I, I try to just hang out here.

Or This is super helpful in building up to it, is finding something to hold onto. Maybe not necessarily like a stripper pole, you know, but like just finding something that you can kind of lean on and start moving around and working in some, some inputs as far

DR. STEVE SUDELL: as- Exactly. Just organically f- flow through it.

Like whatever feels stiff and tight, just kind of work that out a little bit. Um, yeah. No, it looks really good

SHAWN STEVENSON: All right, seven-minute squat challenge. Do it. And I think a lot of it, like you mentioned earlier, the ankle mobility-

DR. STEVE SUDELL: Mm-hmm ...

SHAWN STEVENSON: is cr- like, I think a lot of people, just the average person, uh, struggles with that. Like, what's going on there? Why do the ankles start to, like, get so stiff?

DR. STEVE SUDELL: We just, we don't take it through the full range of motion is ultimately, like, what it comes down to.

You know, we have a funny joke. Like, there's, like, the Asian squat. Um, typically, people who have Asian descent, they have this, like, beautiful squat, and obviously it has to do with, like, their, their tibia and, and, uh, femur length. But, you know, they had to go to the bathroom in a hole for, like, a really long time.

And so when you spend time every single day in that position, it just sticks. And so people ... I mean, when you ask the average person to get into a deep squat, they're usually pretty bad at it. It's like, "Well, when was the last time you've done that outside of, like, a chair?" You know, everyone, like, just goes to, like, 90 degrees, like, parallel.

But if you don't go down there, then the ankles never get stressed like that. Um, runners have terrible ankle mobility, and because they actually develop really stiff ankles, 'cause it's to their advantage with running. Mm. Instead of relying on the muscles, they use the, the, the tendons to kinda spring them along, which helps them be efficient running, but eventually can lead to some significant issues.

And they t- runners typically have the worst squats, because they just never go through that full range of motion. They just have developed so much stiffness in those tendons for their sport that it actually is really hard for them to do an anatomically sound squat.

SHAWN STEVENSON: I'm a big fan of the resting squat.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: Just kinda hanging out in that position. I do it all the time, you know? Like, I, I primarily sit on the floor at my house now, you know, thanks to some influence, you know, Kelly Starrett- Mm-hmm ... and just their work, and, you know. And if I'm not just kinda criss-cross applesauce, like ... And also, your body, you start to become more fidgety.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: You know? That's the, the, the inputs from your environment, from the ground. These, we have these sensors all over our bodies, and just over time, you know, that's, that's stolen if you're in a La-Z-Boy. Totally. Like, the La-Z-Boy is, it, the name is there.

DR. STEVE SUDELL: It's poison.

SHAWN STEVENSON: You

DR. STEVE SUDELL: know? I, I think, like, one of the worst things ever invented was the couch.

It's created so many issues. Why is

SHAWN STEVENSON: ouch in the name?

DR. STEVE SUDELL: I know, exactly. Amen. Come on. And, uh, and you know, it's funny. It just, it feels so good, and it's like after a really long day, it's nice to just lounge on the couch. And it's funny, I have a, a three-and-a-half-year-old and an 18-month-old, and so I spend a lot of time on the ground now.

And what I found was the more time that I would spend on the ground just, like, crawling around, sitting on the ground, like, your mobility just gets better.

SHAWN STEVENSON: Yeah.

DR. STEVE SUDELL: Like, things just start, like, moving differently. You're not stuck in this, like, position so that if y- I were to ask you to go squat, you know, if you've been sitting on the ground for a while, like, you're so much more prepared to do that than if you've been sitting on a couch for, you know, two-plus hours.

Um, so that kind of also goes into something that I preach a lot. When it comes to exercise, we have it wrong in many ways in that most people when they exercise, it's like studying for a test. They cram it all in 45 minutes to an hour one time during the day instead of, like, you know, in the morning you get up and you kinda do your stretches or you sit on the ground.

And then in the afternoon you do, you sit in a squat for, for five minutes, and then you go exercise later on. Yeah. Like, we just like to cram it all into one thing, and how effective do you think the last half of your workout is versus the first half? You know, if you went and did, like, really heavy squats in the first half, your, the second half of that workout was probably a lot less effective versus if you did, like, heavy squats in the morning, then you came back and did your conditioning in the afternoon.

And it applies to all of, like, the mobility stuff, is that you, it, people save all the stretching right before they work out. But if you did it, like sprinkled it in throughout the day, you don't even need to do that before you work out 'cause you're already- Right ... loose. Right. Like, you're already ready to go.

You've already put in the work. But everyone has, like, this, they just cram it all into that time, and then the rest of the time they're, they're sitting at a desk or they're sitting on the couch or they're driving in the car. And so that's where a lot of people run into issues, is that they just cram it all in, and then shockingly, they get injured, you know, by doing so.

SHAWN STEVENSON: I, absolutely, man. Like, that's ... Sitting on the ground gives you an opportunity to get all these movement inputs in. Yeah. Like little nutrients. And so, and again, like, the ground informs you to move, you know? Eventually you get uncomfortable and you find something that's more comfortable, you know? And so a lot of the ti- the time, again, if I'm not, like, sitting crisscross applesauce or just, like, sprawled in my legs or, you know, I'll do, like, a half-kneeling squat.

Mm-hmm. Right? So h- I'm gonna demonstrate and see if we can get it on the camera here. Yeah.

DR. STEVE SUDELL: But I, I'll sit like this a lot of the time. Watching TV,

SHAWN STEVENSON: you know, just kinda hanging out. You see this foot back here?

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: You know? Just like You know?

DR. STEVE SUDELL: People would be so much better off if they did that

SHAWN STEVENSON: And what's so crazy is, like, and it's, it's...

Here, let me get back on the mic. But there, I can't believe there was a time, like a couple years ago, before I sat on the floor so consistently, when I would, like, kinda need to decompress. Mm-hmm. I could feel, like, a compression, like maybe my lower back or something like that. And because, again, I, even though I stand a lot- Yeah

it can still be static.

DR. STEVE SUDELL: Totally.

SHAWN STEVENSON: Right? And then I'm sitting on the couch, hanging out with my boo, and that just complet- it just disappeared. Yeah. Like, I wouldn't feel like I, I gotta go hang on this bar. Like, I gotta go do it, you know? Just to get that, like, decompression. Now it's just like my tissues are just so much more adaptable and s- and supple and kind of just ready, like you said.

Like, I m- this need to warm, I feel like I'm already ready- Yeah ... if that makes sense.

DR. STEVE SUDELL: No, it does. And it's just, like, when you're on the ground, like, you just get fidgety, 'cause, like, things get uncomfortable and you have to move, so it forces you to move. You know, when you're in this nice, beautiful, like, you know, soft surface, like, you can just stay there, like, for hours and never have to have that sensation.

Right. 'Cause it, you know, and, like, this, this idea or this, like, feeling, this subconscious feeling of, like, needing to, like, hang on a bar, like, we're supposed to move. Like, we're supposed to move all day long. It's just inherent in how, you know, we function. And, um, yeah, there's just, people are just not moving enough.

SHAWN STEVENSON: Yeah. And then even something more recently- I, even if I wanna like, after a while, maybe we're watching a movie- Mm-hmm ... and I want to lay down, I lay on the floor, you know? And that, again, it's, y- sure, you can go to sleep. You can sleep on the floor, but you'll feel these inputs of like, "Well, let me put my foot up on this thing," or, "Let me turn this way," or like, "Let me actually sit back up," or, "Let me- let me flip around and, and lay on my belly," you know, whatever the case might be.

And we're s- I'm still doing the thing I was gonna do anyways- Mm-hmm ... which is hang out and watch a movie with my family.

DR. STEVE SUDELL: Yeah, you're still enjoying it.

SHAWN STEVENSON: You know?

DR. STEVE SUDELL: It doesn't take away from your experience.

SHAWN STEVENSON: Yeah.

DR. STEVE SUDELL: You know, maybe you're not, y- you're not gonna take a nap as easy. Uh, one of, one of the, there's a position that I love that people do not do enough, and that's just lying on your stomach.

SHAWN STEVENSON: Mm-hmm.

DR. STEVE SUDELL: Lying on your stomach, getting on your elbows, like watching TV that way. Yeah. We spend so much time in flexion-

SHAWN STEVENSON: Right ...

DR. STEVE SUDELL: sitting. You know, where every- everything is in front of us. We don't do enough extension. Yeah. And that, that leads to posture issues. That leads to back issues, tight hip flexors. Just, I mean, it's so easy.

Just, if you just lie on your stomach, you know, right after like you got home from like a long drive, it can just completely neutralize all those negative effects of sitting throughout the day just by spending time on your stomach.

SHAWN STEVENSON: Yeah. Yeah. I would've thought, again, I would've thought if I saw myself doing this now 25 years ago or 30 years ago, like super weird.

Mm-hmm. Like, you're, you're, you're being hella weird. But now it's just like, I don't care, you know? Even if, you know, people are over, I'm the g- I s- I sit on the floor most of the time, and it's crazy. If we have like m- more people over, you know, people tend to sit on the floor with me- Yeah ... you know, and just hang out.

We play cards on the ground. We I play with my son. We set up the chessboard, you know? Like it's just, it's normal and it's normal so many other parts of the world.

DR. STEVE SUDELL: It is. I know.

SHAWN STEVENSON: So yeah.

DR. STEVE SUDELL: We, there's a lot of things that we've normalized that we shouldn't have. Uh, you know, whether it's You know, you go to Thanksgiving and you're trying, like, not to drink or you're trying to, like, to, to lay off the stuffing or whatever.

Like, "Oh, what's wrong with you?" Like, you know, you trying to be healthy is weird. You know, you trying to be on the ground, you know, sitting and doing, like, what's best for your body, it's weird. Like, what are you doing down there? Like, come join us on the couch. You know, we've normalized this idea of, like, being healthy is, like, weird.

And, uh, I think that's why we have a lot of issues that we have. You know, we're very unhealthy as a society.

SHAWN STEVENSON: Yeah. Well, I get to ask you, you know, like, you're on the ground doing this work, and what is it, about 20 years now?

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: So that's a huge opportunity to see trends.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: I'm curious if the things that people are coming in for now are different from what they were 20 years ago.

Are there some things that are, kind of have increased more recently? Like, what are the most common things people are coming in for right now? And I'm asking that maybe, like, what are the top three things and then, like, what are some things we can do to help to prevent those things?

DR. STEVE SUDELL: What is the one thing that's changed the most technologically speaking- Yeah, the phones in the last 20 years is this: people spend all day in this position or on their computer, again, stuck in flexion. You know, so there's so many people that have tons of neck issues that never resolve, back issues, shoulder issues, and it all stems from being in this, like, flexed position. It's just so incredibly unhealthy.

And, um- That compounds over time. And so you see these issues that they appear as like a traumatic injury from the gym or whatever, but it's really coming from that poor posture.

SHAWN STEVENSON: Mm.

DR. STEVE SUDELL: And, uh, you know, that's where even ... I was just saying that my favorite position when I get home is just to lie on my stomach.

I'll still get on my phone, but like you being on your stomach in this arched position, you know, looking up versus down all the time, it's like a really simple hack for you to still accomplish what you wanna accomplish, uh, because so many people, they just spend so much time on that phone that it just creates all these, you know, issues that I just described.

Um, so that's been the biggest unwelcome trend, uh, when it comes to injury.

SHAWN STEVENSON: So are there any things ... O- obviously changing our, our positioning- Mm-hmm ... being more conscious, bringing the phone up a little bit. Um, but are there any things that we could do? And I know this is tough because, again, remove the cause.

Yeah. That's the best thing. But again, it might manifest in different ways. Again, maybe somebody has this triggering event when they're doing a lift.

DR. STEVE SUDELL: Mm-hmm.

SHAWN STEVENSON: But again, they spend so much time with their head down on their phone. Yeah. But now they're having these issues. Is there anything that we can do proactively throughout the day?

I think you already even mentioned just laying on our stomachs- Yeah ... and getting in that prone cobra position. Like, what are like maybe three exercises that we can do to help to kind of, uh, counter being on our phones all the time?

DR. STEVE SUDELL: I mean, to get you off your phone, that, that's beyond my pay grade. You know? The changing the psychology and the habits of people, like getting off of that. But there are definitely plenty of stretches that you can do to offset that. Uh, like I said, you know, I love laying on my stomach, but a, a flow that I really like, you know, from yoga is just up dog, down dogs. Uh, that's just a good way to mobilize, you know, the whole spine from your calves, you know, to your shoulders and neck.

Um, that's just like a great daily flow that people can do. Even if they just do, you know, five, 10 reps of that, you know, ideally a few times a day, but even just once a day will certainly be an improvement from probably what they are doing. Um, I love the couch stretch. Uh, do you remember what the couch stretch is?

Where you put one knee on the ground and the other foot, opening up those hip flexors. You know, so us sitting here all day long. So many people, they think that the root of all their

issues is tight hamstrings, and most of the times it's, I find, tight hip flexors are just as bad. Uh, so I really like the couch stretch.

SHAWN STEVENSON: Can you describe the couch stretch for people that are listening? Well, f- for the, on the video version, people can see.

DR. STEVE SUDELL: Yeah, yeah.

SHAWN STEVENSON: But

DR. STEVE SUDELL: Can you describe it? So for, so for the couch stretch, you basically put, um, it, it's the name implies where it's best used, 'cause the couch is usually a perfect height. So I'll put o- one knee on the ground, the knee that I, the leg that I wanna stretch on the ground, and then that foot up on the couch.

And then I'm sitting in this upright posture. As I'm doing that, it'll give me a really good hip flexor stretch. And I just hang out in that position for like two minutes. And, and ideally, you know, if you are watching TV at home, you know, you're just chilling, just get into the couch stretch position.

Spend two minutes on each leg. It'll open up everything in the anterior chain, and naturally it'll just make you feel like your posture's better. You can sit up taller. The third stretch that I love that we also don't do a ton of is rotation. You know, so like just lying on your back, rocking your knees side to side, you know, pulling your knee to one side and then, and alternating.

Everything that we do in life is very linear.

SHAWN STEVENSON: Mm-hmm.

DR. STEVE SUDELL: You know, it's up, down, it's forward, backwards. We don't do a ton of lateral movement. We don't do a ton of rotation. So by incorporating rotation into your diet,

it's actually a really great way to decompress the spine, again, all the way from the neck down to the low back.

So, so those three, if you were to build in like a daily routine, super simple, 5 to 10 reps each, or another thing that I'll even do is I'll just set a timer for two minutes each so you're not thinking about counting the movement. You're just chilling. You're just going through, trying to get a little bit more range of motion every rep.

If you did that every day, you would notice a difference in like a week. You know, i- immediately you'd start feeling like, "Oh, yeah, I feel like I can stand up taller." You know, it just gives you that feedback on where your body's at in that particular moment. So I, I... My practice, I like to focus on everything- keeping everything simple.

Mm. You know, you don't need to overcomplicate things to see results.

SHAWN STEVENSON: Amazing. Amazing. Funny enough, uh, last night when I laid, I was on the ground, laid on my back, and then I started doing the rotation, you know? Mm-hmm. And again, it's just another input. Get those nutritious inputs, and it's in the no extra time zone.

You know, you don't need to like, this is part of the workout. It's just so simple, man, and I appreciate that because you make everything so simple and accessible. And if you could, can you share where people can connect with you, follow you? And I know, of course, you see people here in LA. Mm-hmm. You're in, it's the Venice area.

Mm-hmm. Right by the iconic, uh, Gold's Gym right there- Mm-hmm ... as well. So give people, um, some insight on how to connect with you.

DR. STEVE SUDELL: Yeah, the best way to connect is just, uh, through the website prehabtoperform.com. You can also go on Instagram. We have, uh, our handle's [prehabtoperform](https://www.instagram.com/prehabtoperform). And, uh, that's just the easiest way.

You know, if you're dealing with any, if you're local and you're dealing with any, you know, issues. Uh, the one thing that I like to pride myself on is that I will not have you come in for

any longer than you need to. You know, I won't sell you on any packages that are, you know, you need to come in for the next six months.

If you just need me for one session, then that's all we'll do is one session. If you need me for more than that, then I'll tell you that. Um, I also do, uh, like, Zoom calls and online consultations as well because not everyone lives in this area, so you can always just shoot me an email online.

SHAWN STEVENSON: Amazing. Well, I appreciate you for coming in, man.

You know, again, you've been a part of my life for quite some time, and it's so great to have somebody that I can go and see whenever I've got questions. You know, especially when it comes to like, okay, I know that this issue is manifesting here, but maybe it's something up or down that I am n- not sure of, and just to get that certainty.

One of the greatest things about you is just this, this essence of certainty in being around you and what you do, and also seeing you instill that even in my son. Like, in leaving there, just like, it's such a great gift because, you know, you care, you know your stuff, and you know, you're prepared. You like, you walk your talk as well.

So you know, you're, you're one in a billion, man. I appreciate you so much.

DR. STEVE SUDELL: Appreciate you, brother.

SHAWN STEVENSON: The one and only Dr. Steve, everybody. Thank you so much for tuning into this episode today. I hope that you got a lot of value out of this. If you did, share the goodness. Share the information, share the inspiration with somebody that you care about.

You can send this directly from the podcast app that you're listening on. And wherever you're listening, by the way, make sure that you're subscribed. Make sure that you're subscribed and following the show so that you don't miss a thing. I can see the numbers. There's a percentage of our regular listeners that are not subscribed to the show.

They're just popping in and out. Let me pop in. Make sure that you're subscribed because that also helps to get the show out to more and more people as well. But again, most importantly, you won't miss a thing. We've got some incredible, incredible guests in store for you and some powerful masterclasses as well.

So make sure that you are ready. Take care, have an amazing day, and I'll talk with you soon