THE MODEL HEALTH SHOW

EPISODE 948

The Hidden Cause of Neck Pain, Headaches, & More: How to Break the Pain Loop

With Guest Dr. Joe Damiani

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SHAWN STEVENSON: This episode is so important because we're gonna be talking about some science backed solutions for some of the most common ailments affecting our friends, our families, our communities, and often ourselves. We're gonna be talking about science-backed solutions for neck pain, headaches, back pain, really messed up posture just hunched over. All right, kyphotic. All right. Walking around like one of those, like a bulldog, but we are not. Bull nor dog. All right. How do we address this and get ourselves in healthy positions, but also most importantly, how do we get ourselves out of pain?

And that's one of the most powerful parts of this amazing conversation is we're gonna be digging in deep to understand what pain actually is, how our experience of pain manifests, where does it come from, and the truth about how much power. You actually have over your pain. Again, this episode is vital and incredibly valuable, so listen in and make sure to share. Now let's get to our special guest and topic of the day. Dr. Joseph Damiani is a doctor of physical therapy who's treated countless patients suffering from TMJ disorders, headaches, dizziness, and chronic neck pain. After personally experiencing chronic headaches and neck pain and brain fog, Dr. Joe was driven to develop a signature process that integrates musculoskeletal and neuroplasticity science over the past decade.

He's refined his system to help individuals worldwide to achieve a lasting relief and restore normal function. Let's dive in this conversation with the amazing. Dr. Joe Damiani. Dr. Joe, welcome to the Model Health Show. Good to see you, man.

DR. JOE DAMIANI: Thank you so much. Really appreciate you having me.

SHAWN STEVENSON: Of course. All right. We're gonna talk about resolving neck pain. Headaches so much more. But I wanna start off by talking about some common causes of neck pain that most people might not be aware of. It's a very common for people to experience neck pain.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: But oftentimes they don't know some of the root causes. And I wanna start off with the connection between neck pain and our butt.

DR. JOE DAMIANI: Yeah. So pelvic floor core, and then all the way up the chain to the neck and to the jaw, to all of it. So there's a couple different levels we could start with. So we can start with fascia. So there's fascia connections and lines throughout the entire body, feet to head. Many of those lines. One specifically, the deep line goes through the pelvic floor and it goes all the way up through to the neck. So imagine trying to treat neck pain in a vacuum. This vertebrae is pinching something between the next vertebrae or this muscle is really tight. We can work very locally.

That's what I would call the pain generator. So you have neck pain, there's a specific structure and it produces, that's what's producing your pain. That's the pain generator. We can release that, we can stretch it, we can get it to move and you feel better. But if you zoom out, why was that pain generating structure dysfunctional in the first place? You have to look at the bigger picture. So when we look at fascia, if it was restricted in a certain area, it can pull you down and then it starts getting compressed, it starts generating the pain, et cetera. Another important distinction is our pelvis. The bottom of our spine, and then our spine goes all the way up and it holds our head.

And there's three distinct curves in there, right? So the low back or the lumbar spine has a curve. The upper back has a curve. That's why you get rounded shoulders or hunched forward. And then the neck has a curve in the opposite direction. And this is important because it allows you to have shock absorption. So imagine someone just pushed on the top of your head, if it was stacked straight up, everything would just compress into each other. But when you have these three curves, they can give, they can bend, they can work together. So if your butt or your booty is not stabilizing your pelvis well enough. Then that movement that has a domino effect up the chain to the neck.

And so we, whenever I look at someone who's suffering with pain, we look at, where's the pain, where's the structure that's generating the pain? Let's get you feeling better, but then

let's zoom out and figure out what is actually driving that from a far, and then the hips could be a part of that.

SHAWN STEVENSON: Hmm, interesting. Yeah. Okay. So what are some common issues with the glutes that might be affecting the neck? Like maybe one side of the glute is firing and the other isn't, or just the glutes are just sleepy overall.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Maybe they're hypertonic.

DR. JOE DAMIANI: Yeah, absolutely. So, it's actually better for us to look at the bones before bone positions before we look at the muscles. So if our thighs, which are sitting under your pelvis are not holding the pelvis equally, like it's not sitting perfectly and it's tilted forward, that's what we call an anterior pelvic tilt, or it's tilted backwards. That would be a posterior pelvic. Something in there is pulling it in a certain direction. It could be tight muscles on the front, which would be your hip flexors, which everyone knows that tight hip flexors are common. That automatically has a relationship to the muscles on the back, which are the glutes. So those, so while the front, the hip flexors are tight, the glutes get overstretched and then you can lose power and that can tilt your lower spine forward.

If you have too much strength or activation on one side, then you can start actually driving the pelvis towards that side and now you start putting a lateral, more scoliosis type of, I'm not saying that's the cause of scoliosis, but that type of curve into the spine. And so all of these different things, if one side's tighter than the other, if generally they're too tight, if generally they're too strong or overactivated, it's gonna change the position of the spine and then that goes up the chain.

SHAWN STEVENSON: So maybe the way that somebody's sitting chronically you know, maybe they're sitting on a wallet, maybe they're.

DR. JOE DAMIANI: Yes.

SHAWN STEVENSON: You know, constantly like leaning one way as they're driving.

DR. JOE DAMIANI: Yeah. So if you're like a mother who's holding the baby all the time on one side, if you're sitting for a while, maybe you are really good with exercise and you've overcorrected, you know, there's so many different factors, but it's just, it's, you have to just think of it as the foundation. It is the foundation and everything on top is dependent on you finding balance in those structures.

SHAWN STEVENSON: Mm-hmm.

DR. JOE DAMIANI: And the glutes being a driving structure.

SHAWN STEVENSON: Okay. One of the things that you said earlier is really already just like, got me, just like my mind is blown. Because what we tend to do is we tend to attack where the pain is happening.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Right?

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: And so we come in, maybe it's massage. Maybe it's some kind of like decompression tactic. Maybe it's acupuncture. You know, there's all kinds of ways that we can attack it and go at the pain, but we're not necessarily resolving the pain and it's very likely to re-express itself.

DR. JOE DAMIANI: Right.

SHAWN STEVENSON: And so we need to step back and look at the bigger picture.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: And so I think that a lot of people listening who do experience back pain or neck pain or constant headaches, it's like, it's something that tends to keep popping up again and again and again. And so I wanna dig a little bit deeper on some of the common causes that people might not be aware of when it comes to, let's just stay in the realm of neck pain.

DR. JOE DAMIANI: Sure. So if your pain starts coming back again. So, some of the common reasons why someone would have pain in their neck. Again, let's go to that pain generating structure. The vertebrae, how they sit on each other. It's out of balance. So the discs in there, the ligaments, tendons. On one side, it's too tight, and the other side it's over lengthened, right? So the structures themselves call it pain. Then the muscles that are on top of the spine, which are supposed to hold it in position again, one is working extra hard to pull it.

So basically imagine the structures on one side are tight, so the muscle on the other side have to work extra hard to try to pull into alignment. Now you have a working a muscle that's overworking, and then when the nerves come outta the neck, they are what determine if you feel pain or not. So if there's compression, inflammation or irritation, those structures as well will be irritated. Okay, so now you want to calm down those structures. So you start mobilizing the spine, you stop being, having it being tight on one side versus the other. You start balancing out the mu, or you start releasing the muscle, so the muscle's painful to the spasm, you release it, the pain goes away. You unlock that trap nerve.

So now your sensation just flows naturally. But again, if some of those structures beneath our, if you're on a faulty foundation, if you have the leaning Tower of Pisa, if you just start trying to fix the upper part by, you know, bringing the building back the other way, without fixing that foundation, the fact that it's tilted, you're always gonna end up back in that same position. And so those are the structures that get irritated. But again, it's that foundation that keeps it coming back. And we also have to talk about the nervous system. So this is a very important piece. Let's say that you achieved that alignment in the spine. Let's say that everything below the spine, the foundation, the hips, everything's working properly, you're moving better, but you're still having pain.

You have to understand that your body is incapable of producing pain. The only thing that produces pain is your brain. So your body, the muscles, the joints, they send signals up to the brain and the brain interprets it. And if it looks at that signal and says, eh, we're fine. This isn't a threat, then you don't feel any pain. But if it says that's a threat. You're gonna experience pain. So there are two totally different things, and that leads us into a bigger discussion. Sometimes we, I've worked with people who have had intense scoliosis, terrible posture, no pain at all. And I've seen people who are in optimal position have pain. And if the nervous system, for whatever reason, is stuck in a loop and it feels threatened or it feels that there's danger, it's gonna make you experience pain in the absence of a physical injury. And so that is the bigger piece of all of this.

SHAWN STEVENSON: Ooh, man. Okay. Yeah. But we gotta talk about how do we break that chain? Break that loop. You know, this is so fascinating because I think a lot of people have had the experience, for example, like again, the brain decides whether or not you're going to experience that pain.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Like, maybe you get a bruise somewhere, like, maybe you, like, are you in the mirror and you notice like, how the hell did I get this bruise on my back? Like, but it would be painful if maybe if you saw it or you know when it happened or you could see the bruise.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: Right. And so it's just, again, it's a perception thing is a huge part of this. And to have those examples, again, when somebody's body is expressing what we consider to be severe dysfunction.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: And having no pain versus somebody who just, everything seems to be really optimal and they're experiencing pain.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: And we struggle to find a reason why, and it's just, it's based on the brain and nervous system and getting the body out of this, I guess a threat response or stress response.

DR. JOE DAMIANI: Yeah. So there's three ways that I've identified over time that, that this can happen. And it's through either your emotions. Right. So your beliefs and your emotions, it's about your awareness of the situation, and it's also about trust. So let me just break those down for a second. When we talk about the nervous system or neuroplasticity, let's start there. It's your brain's ability to learn from experience, right?

So you have an experience and your brain learns from that. But it's not just the learning, it's the way your brain interprets that experience. So an example I like to use is, let's say you had two friends. You have one friend who's very levelheaded, cool, calm, collected. You have another friend who has a tendency to get who's very emotional, tightly wound, and you forget both of their birthdays. So you forget the one friend's birthday, the calm level head of friend. And he goes, you know what, he's got a family, he's got a career. He is busy. I can't wait to see him again. You forget the other friend's birthday. The other friend's, like, they always do this to me. They put me last. I just, you know what?

Forget it. I'm done with them. Same exact experience, completely different interpretation of the experience. If you have pain that. Started and has not gone away. And now you start saying, Hmm, it's been a week, it's been a month, it's been six months. Is this gonna impact my career? I have that vacation coming up next year. Is that gonna impact that? Like, why am I getting different opinions from different doctors? You're fearful, you're worry, you're putting more emphasis on it. Those emotions ignite the fire and the nerve and you're going through a fight or flight response, stress chemicals come in there and now you start having this pain over and over.

So that's one way emotions can ignite it. Trust is another piece. So let's say that one day you turned your neck all the way to the side or something happened, you had an injury, your

brain says. I let him move all the way over there 'cause I trusted him and then he caused an injury for me. So now I'm only gonna let him move 20% in that direction because last time I let him go all the way, he caused an injury, so I'm gonna protect it. So now you start moving and you're like, I can't even move any more than that 20%. There must be something horribly wrong inside my body. You don't realize though, that it's the nervous system trying to protect you. And the last piece is the awareness. So if you've ever been shopping for a new car, you go to a dealership, you see a car you never saw before, and you say, you know what?

I kind of like that car. Lemme go home and think about it. And then on your way home, you drive home and suddenly that car is all over the road. Did everyone just buy that car? No, it's actually your brain is now tuned into it. You're aware of it. And that's what happens with pain. You wake up in the morning, is it still there? Yeah. You get in the car. Is it still there? Yeah, I'm working out. Is it still there? Oh, it's still there. Think, think, think, think, think, think. And this focus starts driving your awareness. And sometimes I tell people, I want you for five minutes to put all your focus into that same area. Your body on the opposite side.

Just think, think, think, think, think, think. And they start saying, huh, it's kind of tingling. I feel pressure here. I feel this going on. They're picking up things they never even tuned into. And so when your emotions, when your awareness, when your trust are off, your brain goes into this protective mode and you start experiencing pain in the absence of physical injury. So I know I just went on a whole thing there, but like that's, and you have to address it in different ways based on what's driving it for every person.

SHAWN STEVENSON: Holy moly.

Are you about that? Snack life, the paradigm of snacks have changed dramatically. In recent years, I grew up my snacks, animal crackers, little Capri sun, maybe some random candy from my grandma's purse. You know, she's got the butter scotches and peppermints in there. All right. Of course, we got little, little chips, little cookie. Listen, that's all fine and dandy, but our paradigm of eating candy has really messed us up. And so trying to get healthier, I started having granola bars right at granola bars as a kid as well.

Super sweetened with a picture of a guy with a wig on, you know, look like one of the founding fathers on the box. You know what I'm talking about. But trying to get healthier. You know, I switch over, I do the granola, healthier, lower sugar, or low fat paradigm of these cereal bars, but still really missing the point. And then today we had all these innovations in these newly invented chemical complexes to try to trick our bodies with fake fats or fake sugars, and we end up with a ultra process conglomeration of a new kind. What about something real? What about utilizing the paradigm of a food bar, something on the go, but with all real food ingredients?

And that's what we have with the Paleo Valley Superfood bars. Not only does it have over eight organic superfoods and collagen rich, 100% grass fed bone broth protein. There are no added sugars or sugar alcohols. They come in a variety of flavors, including red velvet, lemon meringue, apple cinnamon, and what I have right here, dark chocolate chip. These are the only food bars that we keep here at the studio for our team and our guests. And I keep these at home for my family and I travel with these as well. Huge fan of the Paleo Valley Superfood bars, and right now you get access to 15% off their Amazing Superfood bars when you go to paleovalley.com/model. That's P-A-L-E-O-V-A-L-L-E-Y.com/model for 15% off their phenomenal Superfood bars, plus all of their other incredible snacks and superfood whole food-based supplements. So much more. Head over there, check 'em out. paleovalley.com/model, and now back to the show.

SHAWN STEVENSON: Let's just start to tap into some solutions here. Yeah, I know this is complex. Yeah, it's individual.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Based of course, but there are some tendencies, I'm sure.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: What about the idea of like really going into the pain? For a moment? Yeah. Because I think we're just kind of like trying to not look at it. Just a vague awareness.

Like is this, is it there? Is it there? What if we really like, because I think there's two, two major ways, like polar difference ways of like addressing this.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Really digging in looking at this pain.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: To see how small it really is potentially, or completely like turning the focus to something else and not being focused on the pain at all.

DR. JOE DAMIANI: Yes. I love it. That's a really good distinction. And what I've found to be effective is first going towards the pain. So you have to explore it. It's just like anything in life. You get an uncomfortable feeling when you encounter something you don't understand. But then you go into it and you understand, you're like, I can't believe I was so weird. Like scared of that. So with the pain we have to explore it. That doesn't mean you go full speed with no breaks into the pain, but you go a little bit into the pain, you explore it, can I actually move into this? Can I use different strategies to calm the nervous system down to move into that area? And you tinker and you learn and the more, the deeper you go into it, the more cures you are, the more you explore.

That's when you really see people start opening up and doing things they couldn't do before. Now it gets to a point where if you've achieved the result that you're looking for or you haven't yet, but you've been looking in, you've been exploring that pain going towards it. If you can't extract any new information from that pain.

There does come a time where we need to actually. Shift away from it. So we need to stop that awareness that that car that you see on the road everywhere, we need to shut that down. Because sometimes if you keep thinking about it, you keep thinking about it, there's something called a reticular activating system in your brain. It starts searching for it more. It's like that term's always in your search bar. So like the search engine keeps giving it to.

So we do need to bell. So it's all about exploring the pain and then understanding when have you gotten to that point where you can't extract new information by going into this. And once you get to the point, that's when we need to change the approach. If that answers your question.

SHAWN STEVENSON: Of course. Yeah. Yeah. I mean, we could, there's so much, this is the most amazing thing about it. Like we've got the solutions already built into us.

DR. JOE DAMIANI: Oh yeah.

SHAWN STEVENSON: But we have to acknowledge that the pain we're experiencing is a result of our brain and our nervous system and it's perspective about things. Right?

DR. JOE DAMIANI: Yes.

SHAWN STEVENSON: And so we can personify the pain.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: We can. You know, investigate. Like, is it a certain shape, is it a certain color? Is it, and start to just really break down and see the different parts of it and bring some tangibility to it versus like this darkness.

DR. JOE DAMIANI: It's so true. It pain when, you know, you grow this fear of it and you know, for a reason, but when you explore, like you said, you give it characteristics and traits and you understand it better and it stops becoming this big hairy thing. And I think a lot of people just, they really need permission.

SHAWN STEVENSON: Yeah.

DR. JOE DAMIANI: So, because if you think about it, if you have pain and you don't have permission to go the other way and stop being fearful and worrying about it, why would someone stop doing that? Because they're gonna think I need as much information as I need

about this because this, what if this turns into something terrible? Especially when we're talking about head, neck, and jaw pain. A lot of people secretly under it all think they have some type of tumor. This is gonna end their life. Like something horribly wrong is going on. So they need that permission. And a lot of times, I'm sure a lot of listeners can relate to, they've had the tests, right?

A lot of people freak out. So you and with, well, for a good reason. So you have these headaches, this dizziness, this jaw pain, burning eyes. It won't go away. You go get a brain scan, you go get an MRI, you go to the ENT, you go to the dentist, you go to the neurologist. And 99% of the time, people who I interact with tell me, nothing came up. Nothing came up. And once you've checked all those boxes, that's another thing. It always comes to checking the box. And you've gotten to this point and you're starting to explore the pain. If you can have that permission that says it's okay, this is your nervous system, they will follow. But until you get that permission, again, there's a real consequence to not focusing on the pain. What if I don't figure it out and it grows into something worse? So it's, you know, it's, it can be messy.

SHAWN STEVENSON: Yeah. Just to hear from your, again, your clinical experience 99% of the time , it's not this big.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: You know, gigantic issue. It's a brain and nervous system thing that you can address. I would say that we probably need to be more adamant about doing that work first before we go so far as to like, because as you know, things are changing. We have wonderful access to imaging and just like, it's just getting better and better and better.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: But you've seen this where imaging comes up and somebody has a terrible scan. Yeah. But then they don't have pain versus, you know. Somebody might have, you know, everything looks functionally correct. Like you, we didn't find anything. Yeah.

And yet they're experiencing this pain.

DR. JOE DAMIANI: Yes.

SHAWN STEVENSON: And so if somebody, but. Here's the thing too. They often find, especially as people get older, some kind of problem. Correct. It's just like there's the thing.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: But you don't, it's a correlation. You don't even know if that's the thing.

DR. JOE DAMIANI: Yes.

SHAWN STEVENSON: Or when it happened, or, yeah. You know, and it's a static thing. So we can be, can you talk about that first of all?

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: And also I just want to encourage us to like, let's do the brain and nervous system. Training and reframing.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: Proactively anyways. Because you might not even need all this other stuff.

DR. JOE DAMIANI: Yeah, absolutely. I think that's really good way to put it. And you know, movement. So the gold standard for determining what approach you should take is what your body responds to and what makes you better or worse. So if you do have imaging and you have arthritis, let's just on the left side, right. And theoretically you shouldn't turn your head or tilt your head to the left side. Right. Now if you, so you have that piece of information. Now you go to someone who can an, who can assess movement properly and

they find that bringing you to the left side makes you feel better and the pain doesn't come back.

Are you going to trust that piece of information or the medical or the imaging piece of information that says you're gonna have pain if you tilt left? Of course, you're gonna trust what is actual real and tangible in life, which is your body's response to movement. And so imaging workups, brain scans, all of that. There is nothing that's gonna be better to rule out any type of dangerous or red flag dysfunction than having that imaging. It's the gold standard. But again, very commonly people have this and nothing shows up. From a red flag standpoint, and it's all this gray area in between. You have a little arthritis there, you have a little disc bulge here, you have a little compression here.

You're not gonna treat them like a robot at this level. We do this at this level, we do this, this level, we do this. We're gonna treat it based on your body's ability to move. And then we explore that movement, and that's how we start figuring out, all right, this guy's, the bucket really is the joints of the neck. This guy's bucket is really more driven of nervous system. This one is more habits, and you start working and playing with it. And, you know, having, taking accountability for your own health is a, is what really gets you over the hump. Understanding you know, what you need to do and taking the right actions.

Most people don't get to that point until they're suffering for a long enough time, unfortunately. But the people who I find who really fix themselves are the ones who have been suffering a long time. And they say, all right, you know what? I guess I'm gonna have to be the advocate for my own health, and I'm gonna have to start. Testing and trying things, you know, with other providers versus just like, I have this imaging so it's over so I can't do anything. You know? And so that's what it really comes down to.

SHAWN STEVENSON: Alright, so how do we do this? Yeah. How do we help to start to reestablish our perception of our pain?

DR. JOE DAMIANI: So, alright, so when we're talking about we can stay in the head, neck and jaw region, we begin with movement. So we begin with having someone move in a certain

direction, assessing and seeing what makes the pain better, what makes the pain worse, what does not change the pain at all. And we identify those movements that actually are gonna produce that pain. So now we have that and we need to determine how much nervous system is involved, how much is it actual physical restriction.

And so there's movement assessments, which is like very technical, which we don't have to get into. But the nervous system piece, we have strategies that we can use to see if the, if there can be improvements. So one strategy would be multisensory, multisensory strategies. So where if our nervous system is in pure protection mode, in order to get it to calm down and trust movement, we can first preemptively calm the nervous system.

So you can do things to stimulate more of the parasympathetic system. You can do your deep breathing. You can try to stimulate the nervous system with, you know, gargling and cold water, but, and so you can try to get yourself in a situation where you're ready to accept the healing. Using heat and hands-on work is a really good way to calm the nervous system massage. Again, it's not gonna fix that root cause, but it's gonna get your body in a state where it's telling the nervous system we're good. Like we can relax to actually achieve better movement. We can do things like focusing on background noise, playing low level, relaxing music, doing simple things like tapping your fingers, rubbing your arm during the triggering movement, and you can see if those mo those actions improve your range of motion and your movement, which is completely in the absence of a physical strategy for the neck.

You can start saying, okay, maybe this is more nervous system based. So we just either we're testing the movement and then we're testing the nervous system and we have to do both of them in a vacuum to just like any other type of good health or medical procedure. We need to test check the box and move to the next thing. So it's just like a very high level way to look at it.

SHAWN STEVENSON: Yeah. Would you say that the average person that's experiencing pain, it's more of a hurt rather than like a true injury?

DR. JOE DAMIANI: The people that I work with, it usually starts with t some type of physical insult. So. There's two different things here also. So we have the trauma world of, it's something going on from a younger age, from, you know, if you read some of John Sarno's work, he talks about how your, if your brain had to decide between processing some very traumatic event or having back pain, you're gonna be able to survive and thrive in this world with back pain more than having to process and face this horrible thing.

So your body gives you physical pain in so that it distracts you from processing that memory or that trauma. So in that world, journaling, working into it, working with the therapist. And, those people will unlock pain because of that. In the world that I work in, which I have some of that, I see a lot of people who are like, no. Like I've always been happy. I've had no pain, but I just, this thing happened. It was a physical injury. And then after a day, week, month, three months, it went away. And now I'm worked up. Now I'm worried. Now I'm freaked out. And so with those people now, all of these things kick up because of the original, it produces health anxiety.

SHAWN STEVENSON: Hmm.

DR. JOE DAMIANI: So to answer your question, what do I see more? I see that it really did start with something physical. And for whatever reason, there's many reasons that it could be. It triggers this nervous system response where it still thinks it's in a threat. And then we have to use physical movement. You can't read a book and unlock this type of pain. We need to rebuild that trust.

SHAWN STEVENSON: Yeah.

DR. JOE DAMIANI: With the system. We need to calm down the emotions. And it works altogether. You build the trust, you move better. You see it's improving. You stop like freaking out and worrying. So now the emotional piece comes and once to bring it full circle, once we get all that kind of revving, we go to the awareness piece and we say, now we need to kick your brain outta this mode. So we're done focusing on it, looking for patterns. Now we're gonna, when we do like neuroplastic strengthening exercises where we have people focused

on. You know, a colorful object that's very distinctive. You think about the patterns and the colors and the shape, and you try to do it for 30 to 60 seconds, and if the pain starts creeping in, you acknowledge it without emotion.

Like, okay, pain's coming in, I'm doing something else. I'll deal with you later. You try to see if you could bring that 30 seconds to 60 to multiple minutes and you start strengthening that muscle. And just one other thing with it. In our society, there's certain things, we are really good at this point at recognizing behaviors, physical that impact your body physically that we should avoid, right? So it's like if you're an ex-smoker. Or we just know you shouldn't smoke. Right? If you're an ex smoker, stay away from cigarettes. If you were an alcoholic and you're sober now, like stay outta bars, it, you know that if you started a habit where you eat cookies before bed, you know, that's fine, but then you should kind of kick that habit eventually before it turns into something worse.

When it comes to pain, for whatever reason, we see no problem. We don't, with just thinking about it all the time, like, I have pain, what can I do? I gotta think about it. But you actually do have power over it. You can, you can work that muscle, just like you work the muscle to resist alcohol, cigarettes, sugar, you can resist the pain as well when it gets to that awareness point. And that's something, it's one of the harder pieces, but that's really where the major unlock can occur down the road.

SHAWN STEVENSON: Amazing. Okay. Wow. We've already got quite a few tactics per perspective shifts.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: You know, just even thinking about. How, you know, you just, you mentioned like being able to activate that parasympathetic.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: AKA, this rest and digest Yeah. Aspect of our nervous system and how that can be helpful to help calm things down. So this can be before some kind of movement treatment or during, right?

DR. JOE DAMIANI: Yes.

SHAWN STEVENSON: And so just thinking about kind of, you know, if there's a pain. Point that we're experiencing. And again, we're, there isn't like severe tissue damage. But our body's just caught in this pattern and just being able to like lean into it and just breathe, right?

DR. JOE DAMIANI: Yes.

SHAWN STEVENSON: And just activate that is incredibly valuable. Thank you for mentioning that.

DR. JOE DAMIANI: Yeah, that's You're welcome. And great questions because it's a huge, huge piece and you have to learn how to control that.

SHAWN STEVENSON: It's like just again, just telling your body it's okay.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Telling your brain, your nervous system. It's okay. Yes. It's okay.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: I know that I did this thing. Got a little upset. Yeah. Yeah. You know, just being able to communicate with yourself, communicate with your body, with your tissues , and have more agency. You know, that's one of the things I also picked up from you in this conversation is how powerful we are, you know? But we tend to be, you know, so externally focused. So we're not having that relationship as well. But also, you know, we don't receive education when it comes to pain. And it's one of those things that every human being is

going to experience, and yet it's just this like there's no context, there's no conversation, no education. It's just like pain is pain. It is what it is.

DR. JOE DAMIANI: Exactly. Exactly. And a lot, you know, I can't tell you how many times I've worked with someone who given them some strategies that made them better, and they're like, but I tried this two years ago. It gave me pain, so I stopped doing it. I'm like, yeah, you know, it was, it gave you pain and you were scared, and that's fine. Like you just didn't have the education behind it, or you didn't use the nervous system pieces around it. But I can't tell you how many people are out there who have probably tried the things that will unlock it, but it's like it wasn't the right progression. You started too quick. You didn't, you fought yourself or your nervous system. So when you really focus on that signal, it all comes down to the signal, how, what's the dosage of the exercise and how are you communicating that with the nervous system?

SHAWN STEVENSON: Hmm.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Alright, let's talk about another common, exceedingly common thing today when it comes to neck pain, which is the way that we're using our necks.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Right? Tech neck. Constantly having our head down and what it can do to the spine itself, muscle imbalances. And so talk a little bit about that, but also can you give us a couple of ways that we can proactively help to reverse the issue? Maybe, you know, some exercise that we can do.

DR. JOE DAMIANI: Yeah, for sure. So, you know, classic sitting for too long, looking down at your phone, just being hunched, being spending too much time on a comfortable couch. You know, what it does is if you look from, again, we can actually tie it back to your first question about the hips.

You look at the pelvis, it rolls back so the entire restless spine rounds forward. And if my hips are rolled forward and my, or if my hips are tilted back, my spine's rolled forward. If you don't make a correction at the neck, you're gonna be looking at the ground. Right? Even if you're standing in hunch, you're gonna be looking at the ground. So you make that correction and that correction is extending at the neck.

Okay? Now what this does, we separate the neck into the upper neck and lower neck, or mid lower neck. So the mid lower neck, when it shifted forward like that, that's when you start getting compression. That causes pain down the shoulder blades, tops of shoulders, even to fingertips, and of course on the sides of the neck. But at the same time, your head tilted this way compresses the upper neck when you compress the upper neck. So I gotta control myself 'cause I could go on tangents. But just to make it real simple, when you compress the upper neck, there's a connection point between the upper cervical spine and the jaw.

So you can have jaw pain and it's coming from the neck and you have no TMJ issues at all. It can also produce dizziness, headaches, neck pain. So you end up with these symptoms. Why want my dizziness go away? Why won't my head go ache? I got this persistent jaw pain, or I'm getting paint down the shoulder blades. I should use a tennis ball back there. But it's really driven from the neck. So just so classic, just hunching forward looking down, or that correction coming back up. It causes issues. Simple things you could do. We know that trigger points kick in once you've been in the same position for 20 minutes or longer.

Really 60 minutes is when they really drive. So just changing your position. So you can do very simple without overcomplicating it. Just get up and move around. Do what you want. March your feet, roll your shoulders, sit back down. Very simple one. Another one is actually just activating the neck. So there's a few different things that you can do, but I think most people at this point know what a chin tuck is, where you just bring your head back over your body.

SHAWN STEVENSON: I don't know if people do, what is it?

DR. JOE DAMIANI: Yeah, okay. Fair. So a chin tuck is basically when you're sitting there, if you look up, your spine bends backwards. If you look down, your spine bends forward. A chin tuck is when you take that leaning tower of Pisa and take all the floors and shift them on top of each other. So an upright tower, so you didn't tilt it back or down. So it's where you basically bring your head straight back and make like a double chin, but your eyes stay on the horizon the whole time.

So if you think about your face, it doesn't tilt up or down, it comes straight back. That is an optimal position for the upper and lower neck. Just by going into that movement, a few things happen. You reduce compression, but you also activate muscles throughout the whole neck that hold you in a better position. And once you do that, it's kind of like you warm up before you exercise, right? Your muscles get activated and then you can actually generate more strength, or you can be fast or whatever your goal is by actually going into more of a chin tuck and activating those muscles. You can now be good for the next period of time. 'Cause you produce that activation and then just, you know, you can do turning left and right. Just once you're in that tucked position, move the head around the spine.

SHAWN STEVENSON: So how many sets.

DR. JOE DAMIANI: So for that, I like to keep it simple. I tell people to do like 10 reps of it, maybe.

SHAWN STEVENSON: Mm-hmm.

DR. JOE DAMIANI: And then you can give it a rest after that until you're, until the next time for a couple hours. I usually tell people every couple hours, go into about 10 of those and just reactivate if you're a person who sits a lot.

SHAWN STEVENSON: Mm-hmm.

DR. JOE DAMIANI: So you can get up every 20 to 30 minutes just for a minute and sit back down. You can go into those talks.

I like to tell people to get a timer and put it on their desk because at this point we don't pay attention to the notifications on our watches or phones. There's just too many. Get like a cheap $5, $2 timer from Amazon. Put it on your desk, hit it every 30 minutes, get up. And then there's all these different ergonomic things. I mean, I don't know how deep you wanna go, like keeping the screen of your computer at or slightly below eye level, making sure that your feet are flat on the ground.

Your knees are at hip level. Your elbows are supported. So these are actually really good chairs you got here. Your wrists are neutral on the keyboard. Everything matters. Making sure if you're in an office with windows, you should actually have the windows, to your side. If they're in front of you, they're glaring in your eyes. If they're in back, they can bounce off the screen. So it's best to have the windows on the side of your desk. So yeah, there's a lot of stuff you can do.

SHAWN STEVENSON: Wow. This also has me thinking about the, you know, it go, it goes both ways with this, but like vision issues.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: And how we would extend our neck out forward just to see stuff over time and how. Helpful it would be to do those tin chuck, chin tucks. Tin tucks.

DR. JOE DAMIANI: Yeah. Chin tucks.

SHAWN STEVENSON: Chin tucks several times throughout the day. You know, as you mentioned, just like 10 reps.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Every couple of hours at least. Yeah. You could probably rack up, you know Yeah. 50 reps a day. Oh yeah. And just putting your body back into a more optimal position.

DR. JOE DAMIANI: So, yeah. And that goes back to making sure you have the right screen to make and no glare from the windows so you don't have to like tilt forward and your eyes checked. But you bring up an important point too, that if you want to fix yourself, you could have the best routine in the world. And Exactly exercise and nervous system stuff. It's perfect. And it's a 30 minute routine or whatever, 30, 40 minute routine. And you do it right in the morning and then you say, did it. And then you just go about your day and let the world and then your day, just do what it wants with you. And it's going to make up, it's going to wipe away all of your good efforts from that session in the morning.

When you really wanna start unlocking change, it's about taking strategies and sprinkling them in throughout the day. Gravity work stress. You're doing this all day long, so one little routine doesn't do enough. So I would rather, instead of a 30 minute routine, have a one minute routine, you know, five, six times a day, and those five or six minutes we'll go so much further than a 30 minute routine. And this is to reduce pain. Not saying from a fitness perspective, just to be clear.

SHAWN STEVENSON: Got it. Amazing. What about. If we are in a situation where we're experiencing some neck pain.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: Or, you know, maybe it, we commonly have neck pain and we just want to do something therapeutically or proactively. Some prehab.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: What about some simple things that we could do? Maybe just with basic stuff around the house? Like, you don't gotta get fancy equipment. Like, maybe like a towel or,

DR. JOE DAMIANI: Yeah

SHAWN STEVENSON: something like that.

DR. JOE DAMIANI: So a towel or a band, a TheraBand or an exercise band works really well. So what you can do is you can put that behind your head and just hold it forward. I actually have a video that's gonna post this week. We were just editing this morning. You put it behind your head and then hold it and you bring your head back and forth. Again, a deeper activation of those muscles. You can take that same band and put it out in front of you, bring it out to the side.

So now you're gonna activate some of those scapular muscles through there. And then. You can in standing. So if you wanna sit at your desk, simple things like, just like moving your feet, marching. The exercise I just showed with the bands are great. If you wanna stand up and do it, you can go against the wall, bring your arms back. They're called wall angels, just coming up and down. It gets your whole body upright. You get your chest out, your head back, your arms overhead, up and down. So now you've brought everything into the opposite direction of where you've been. So, you know, to simplify it. Whatever position you spend the most time in, you wanna do the opposite.

If you're standing all day, you know us, these strategies are still effective. 'cause usually your posture just can't hold that. So you end up falling into that same position as sitting. But you do wanna sit then you want to, like, you wanna let your legs rest. So it's just about switching position. Your, you give your body movement and you're gonna feel better.

SHAWN STEVENSON: Yeah. Because you could be standing sedentary

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: As well. So a chin tuck with a resistance band.

DR. JOE DAMIANI: Correct.

SHAWN STEVENSON: Just a very light.

DR. JOE DAMIANI: Yep.

SHAWN STEVENSON: You know, adding some resistance to that. But what about moving band?

DR. JOE DAMIANI: Bullet pull parts

SHAWN STEVENSON: Bullet pull parts. What about moving a band or t down a little bit lower and maybe doing the head tilted back.

DR. JOE DAMIANI: So, a chin tuck brings your head straight back.

SHAWN STEVENSON: Mm-hmm.

DR. JOE DAMIANI: Some people will also benefit from once you're back going up. Because now it's a further extension of that original movement. If you're one of those, I have pain in the middle and lower neck. And it goes down to the arms again, that mid lower piece that works great. If you're one of those people that has the headaches, neck, jaw, dizziness, that piece of it. I shouldn't have said neck there. So, headaches, dizziness, or jaw that's coming from the upper neck going back can actually provoke it because you're going to an extension for those people you may want to go forward and pull down because now you're taking that upper neck and you're lengthening it. So the lower neck gets too far forward and the upper neck gets too far back. So when you fix it, you want the lower neck back and you want the upper neck down.

SHAWN STEVENSON: Mm-hmm.

DR. JOE DAMIANI: So you can look down and pull down like this for a hold. You can also, one I really like is put your hand on your chin. Scoop, kind of the little notch on the back of your head is the occipital bone. And try to pull your head almost like 10 degrees forward, 10 to 20 degrees forward, but straight up. And again, imagine that upper neck getting a little more length and that can decompress it. So if you're someone who has dizziness, you know, the jaw pain, the headaches, focusing on that upper neck is really good.

And if you can do these in standing, that would be great. So if you could get up, do the chin tucks, add a band, open up the head up like that and stretch down, and then go hit some wall angels. I don't expect you to do that every 30 minutes, but if you can throw that in a couple times a day, I think you'd be in really good shape.

SHAWN STEVENSON: Amazing. You mentioned this term early on.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: And I want to get, since we have you here, a little bit more understanding of what it is

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: And how it can be a one of the culprits behind pain in some ways.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: But you mentioned fascia.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: So can you talk a little bit about what fascia is?

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: And how does this potentially relate to pain?

DR. JOE DAMIANI: So, fascia is a system of tissue that's woven through our whole body. It goes through your muscles and your ligaments, and your tendons, your organs. It engulfs everything. And this system of tissue also has nerve endings. So it's one of the richest areas of the body that actually has nerve endings. Meaning that it can perceive stretch, it can perceive tension, it can it, it can give you information about proprioception, which means

where your body is in space. If you're about to fall over it, it'll tell you, Hey, you're leaning. Take a step so you don't fall. And mechanical receptors, which tell you if your body's stretched or compressed.

So it gives you so much information about the body and. When you have a restriction and it goes in the front side, the backside, it's, there's a spiral line that goes around you. It goes into the arms when you have a restriction on one area of the body in that fascia, because it goes. All over it can restrict you somewhere else. So if my, if the area over my right side of my front rib cage was compressed that fascia and I couldn't get outta there, then the upper back left side, which is the opposite part of my body, is gonna be rounded forward, right? So now that piece of fascia is getting overstretched as well, and then that would move up into the neck chain.

So if you feel like, man, I just can't fix this left side of my neck and upper back issue, I fix it. To your point earlier, and I feel better when it comes back. And you don't realize that you're compressed through the fascia on the opposite side. That's why you keep falling into that area and that pain generating tissue keeps getting irritated. So the different ways to get fascia, one important piece of fascia is hydration. Also making sure the tissue's hydrated. So you can use regular diet for that and you know, drinking water. But if we can get in there and deeply release with medicine balls and other tools, there's essentially like a pulsing effect where if there's adhesions, it can break them up.

But also as you create that pressure, it creates a negative pressure and then you release and it opens up, and then fluid wants to rush in there. It's just like a sponge, right? You squeeze a sponge when you let go, it pulls everything in. So getting in there and actually putting forceful, sustained controlled pressure releases, different tools can help. But then moving the body as a unit. So there's all these different ways to, you know, be on the floor and drop your head down and rotate to one way. And so you're trying to get the entire piece of fascia from head to toe. And so if you have someone, just to give a concrete example, let's say that they can't bring their arm all the way back, right?

So like imagine for anyone who's listening a baseball pitcher, how they have their elbow up a shoulder height and they cock the ball back and then they throw it forward if there's a restriction there, if we wanna get more movement, we can address the capsule and the muscles and the tendons right at the shoulder joint that once we loosen them up, you can rotate your arm better. Great, we did that. But if the fascia that goes from your fingers across the elbow to the shoulder, down to the opposite foot is tight, you've locally released the shoulder, but now that bigger picture is gonna pull you forward. So we need to work on both of them. So there's a time and a place for each of them.

SHAWN STEVENSON: The overall nutrition in our food has taken a nose dive in recent decades. In fact, an analysis published by scientists at the University of Texas made an alarming discovery. 43 foods, mostly vegetables, showed a marked decrease in nutrients from the 1950s to 1999, according to that research, everything from vitamin A to calcium to iron and more has significantly declined. Again, if it's not in the soil, it's not in the food. It's the unsustainable farming practices that have obliterated our soil quality. But this is changing thanks to farmers who are dedicated to regenerative farming practices. And this is not easy to do in a market that is slanted towards quantity over quality, but select farms are stepping up to do the right thing.

And this is especially seen in the domain of animal foods. Research published in the British Journal of Nutrition found that beef from animals fed an abnormal diet of conventional pesticide laden grains that decimate the soil quality contain up to five times less Omega-3 fatty acids than what's found in grass fed beef and research from the College of Agriculture at California State University has found that grass fed beef contains elevated precursors of vitamin A and as well as increased disease fighting antioxidants like glutathione and superoxide dismutase activity compared to conventionally raised grain fed beef with unsustainable farming practices. Whether you're eating plant foods or animal foods, you'd better know the difference when it comes to organic practices and regenerative farming.

And this is what I truly love about wild pastures. Wild Pastures delivers 100% grass fed and grass finished beef pasture raised, pork pasture raised chicken and wild, caught seafood directly to your door, all born, raised and harvested entirely in the US and raised on

regenerative family farms. These pastures are free from synthetic pesticides and other chemicals. There's no antibiotics, no added hormones, and right now with the Wild Pasture subscription, you're gonna get 20% off for life, plus free shipping and $15 off of your first order. Absolutely incredible. Go to wild pastures.com/model. That's W-I-L-D-P-A-S-T-U-R-E s.com/model, 20% off for life free shipping and $15 off your first order. Head over there. Check them out. Wildpastures.com/model. Now back to the show.

SHAWN STEVENSON: That pitching motion just got me thinking about Ohtani.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: And he had, I think he had two Tommy John surgeries.

DR. JOE DAMIANI: Did he really?

SHAWN STEVENSON: Yeah. I know he had at least one, but I think he had twice in there. Again, he's just like still one of top pitchers in baseball, let alone one of the greatest hitters. Like, it's really incredible to see.

DR. JOE DAMIANI: Yeah, a lot of those, you know, that's not my area of expertise, but the, a lot of those tendon injuries have to do with genetics as well. Like obviously if you throw harder and you have poor mechanics. So I actually did, when I was at Hospital for special surgery, I did a little presentation on this. And from what I can remember, 'cause it was a while ago, mechanics and throwing speed and power do impact that. But ultimately I believe what it came down to was just genetically how thick and strong your tendons are. And don't quote me on that, that's not the latest research, but that's what I remember about it. So there's always a big genetic component to everything.

SHAWN STEVENSON: Mm. And I didn't mean to bring him up. I know you're a Yankees fan, you know, but, you know, it's just, it's really incredible. You know what, and you're seeing this as, as well in sports.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Just the innovations that are happening as far as like prehab and you know, integrating more physical therapy into the culture.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Itself outside of just when players get injured.

DR. JOE DAMIANI: Yeah. It's such a beautiful thing. You need to, you know, be just moving the right way. And, it has to do a lot of people who fall into pain. It's. Because the right habits may have not been in place prior. So when we have injury, we have injury that freak accident injury, but then we have overuse injury. So I was doing the same things over and over again improperly. So kinda goes both ways.

SHAWN STEVENSON: So just to emphasize again what the fascia is. So is this like a, is it like a casing around our muscles? Like what is this, can you help us to visualize?

DR. JOE DAMIANI: To visualize it? I mean, it's basically like when you're eating chicken and you have the stringy stuff around the muscles and you kind of pull it off. But imagine that you had that picture of anatomy of someone just standing there with the arms out and you see all the muscles and they're just very defined muscles. This one begins here and it ends there and this one begins here and ends there. That's like the picture perfect image of muscles. Fascia is like if you took a spiderweb and threw it over the whole thing. Right? And so now you see this white tissue and it thickens at different places and it's bigger and broader in different areas. And if you pull the arm, if you take the right arm and pull it back, the left, the left leg and hip is gonna pull back also. So just imagine a spiderweb got thrown over all the muscles of the body and that's what it is. It's just engulfs everything.

SHAWN STEVENSON: You mentioned rounded shoulders.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: Earlier as well. Like this is this kind of kyphotic like a lot of people are , you know, we're kind of devolving in a way.

DR. JOE DAMIANI: Yeah. Unfortunately.

SHAWN STEVENSON: And, but there are some solutions for this as well. Again, you've already addressed like some of the different components. But are there any specific exercises that can help with kind of opening our body back up and something we can like start to incorporate?

DR. JOE DAMIANI: Yeah, absolutely. So, when we talk about rounded shoulders, we talk about, there's a couple things we have to look at. So the spine, it's itself is typically forward. So just imagine your upright spine and it's rounded forward. Now the shoulder blades, which are next to the spine, move out to the side and the shoulder blades are connected to your shoulder. Your arms are what most people would consider the shoulders. And so those come forward, right? So now you have the muscles on the front of the chest are tighter 'cause the shoulders are rounded forward, but they're also shrunken down because you're, it's a, it's a two part thing.

You're forward and you're rounded. So it's two different planes of motion. So we need to get you upright more in a extending you so you're taller movement. And we need to also get you back like we're pinching your shoulder base together. So couple things you could do. Simple ones are using a foam roller. This is a great one. So you can lay back over a foam roller. Sometimes I even tell people to take a dowel, like go to Home Depot and get like a one inch dowl and roll a towel around it and put it perpendicular to your back. So you lay it on the ground and then you let you lay on it. So it's going basically across your shoulder blades and you take another dowel and hold it in your hands and bring it over your head.

And so what happens is as your arm, as the dowel goes overhead, it puts more force on the upper back and it pushes you deeper into the foam roller or that dowel, and it takes your vertebrae and it kind of pushes it forward a little. So you're mobilizing yourself. You do that for a little bit, then you take that foam roller or dowel that's under you, move it to a different area. Oh, that one's tight. Bring your arms overhead, do some reps lean on it and you can

open up that area. Okay. And to get the opposite piece, which is the shoulder blades coming backwards. You can put the foam roller vertical now, so it's on your spine and just lay on it with your arms out. Like you're kind of like making a like a U shape and let it stretch back.

SHAWN STEVENSON: Mm-hmm.

DR. JOE DAMIANI: So when you think about what we've done so far, we've got, we've stretched the spine so it gets upright and we've stretched the muscles so that the shoulders can be unrounded. Now you're more flexible, but how do you actually hold that position? We can do strengthening exercise for that. So if we wanna strengthen the shoulder blade to come together, keep it simple, we could use that same band exercise, or you could do this one where your hands are, your elbows are by your side and you rotate out and squeeze or which, so that gets the shoulder blades squeezed more, right? So now we just, the only missing piece now is strengthening your ability to come upright. And with that you could do like a simple, probably Superman is a good one where you lay in your stomach and kinda lay down and bring your shoulders back and chin tuck.

So you always have to think about. How am I loosening up the structures and then how am I activating them? But I will say this. Outside of some restrictions in those areas, the research also shows that fixing your posture not to just go all in a nervous system the whole time is, it's a very habitual, so you could do all the things I just told you to do, but you don't use your mind to sit up straight and it's not gonna change a thing. So re again, multiple times throughout the day, reinforcing that habit of just standing up straight, that fixes your posture more than any of the other things. So again, if we're talking about what's the pain generator and what's the second piece? The problem generator is you not remembering to sit up straight. Then we can look at, oh, he remembers to sit up straight, but he keeps getting pulled forward, then we can find those other restrictions. Does that work?

SHAWN STEVENSON: Yeah. Yeah.

DR. JOE DAMIANI: Because there's a lot of different ways to attack the answer.

SHAWN STEVENSON: Of course. And the great benefit of having access to you is being able just understand that we're all unique.

DR. JOE DAMIANI: Yeah.

SHAWN STEVENSON: There are certain tendencies of course, but just being able to ask questions to, you know, to tinker, to find out. Because there is a solution, there is a way to relieve your pain. And just so that people know, again, to reemphasize this, like you are a wealth of knowledge. You share so much if people are following you on social media, of course your YouTube channel, incredible instructional videos. But the great benefit today more than ever is like actually having access to you. Right. And having your online programs where people can actually ask you questions where they can get that specific training and being able to look at other aspects because we're just scratching the surface. Because the body is so complex and we're living at this very complex time. There are a lot of different external inputs and Yeah. Internal things as well that can put us into pain. So can you talk about a little bit about where people can get access to your course.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: And what you have available within that?

DR. JOE DAMIANI: Yeah. Thank you. And I, and I'll say, you know, everything's out there that you need, but understanding what to do and what progressions, you know, that's really the key. 'cause there can be so much overwhelm out there. So if you just have systematically try, check the box, move on to the next one. You get closer to that solution. You can find me on social, uh, Dr. Joe Damani, DR Joe Damani. My website is physio loops.com, and this goes back to that loop that is integrated between the body and the brain. And if you don't work on it together, you can't break the loop. So physio loops.com. And so, yeah, I have a I program where people can go through these processes and then I do group calls with them. We do masterclass, we bring on other guests for masterclasses.

It's a community where people can, you know, work with each other. I also have a coupon code for your listeners Model Health. If they put that in, they'll get 20% off. But yeah, I'm available. I try my best with dms, but you know, I'm sure, as you know too, it's very hard to manage. But yeah, that, that's really where they can find me.

SHAWN STEVENSON: Amazing. And this is where, again, they can get more exclusive access, you. Yes. Yeah. And that's model health together as one word.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: And also, people go there. You actually get, I believe, seven days free

DR. JOE DAMIANI: Yes.

SHAWN STEVENSON: Trial anyways, just to take advantage to get in there and check everything out.

DR. JOE DAMIANI: Yeah. So you get seven day free trial, you get to start going through the modules. We have every, so it's a 12 level program, so there's nervous system work . There's the musculoskeletal progressions, habits, all that stuff. And yeah, I mean I just, every day we try to put, we try to just break down the information as simple as possible on my social, so it's like we obsess and we try to figure out how do we make this simpler? How do we make it simpler? How do we make it simpler? And I love it. It sometimes it drives you crazy how many times you gotta try to rework something. But I've just learned that if you can pass that information over to someone, that's what makes the difference.

SHAWN STEVENSON: Amazing. So again, we'll put that for everybody in the show notes. Physio loops.com. You know, the thing that really resonated with me the most about you was of course, like yeah, the information is incredible. How you're presenting things, you're communication, very tactical. But the main thing was your dedication to your family. You know, like even reaching out to us. 'Cause I know like this is a really special event and opportunity to have you here and to be here, but you reached out to us like Sean. Is it

possible, like we could change the day? Because I don't wanna be away from my family that long because, you know, you got four kids under five.

DR. JOE DAMIANI: Yeah, I know

SHAWN STEVENSON: But you know, just the way that you're structuring things and thinking about things and, you know, having a priority on your family and being there. Yeah, is really special, man. So thank you. You know, huge shout out to you for that.

DR. JOE DAMIANI: Yeah, I really, really appreciate that. I appreciate the opportunity and you know, I was taking advice from you earlier on how to balance everything, so thank you for that as well.

SHAWN STEVENSON: Yeah, yeah, it's my honor. So again, everybody can follow you on social media, all the socials. What's the handle again?

DR. JOE DAMIANI: So it's Doctor Joe Damiani, DR Joe Damiani.

SHAWN STEVENSON: Amazing. It, you should be following you just in case anyways. We tend to follow these accounts when something happens, but you know, as mentioned, the great thing is prehab, like this big movement for prehab, if, you know, you have certain tendencies towards, you know, certain pain showing up, you know, you can do stuff proactively now, which is really awesome. And so, last question for you.

DR. JOE DAMIANI: Mm-hmm.

SHAWN STEVENSON: What is the model that you are here to create for other people with how you live your life personally?

DR. JOE DAMIANI: The model I wanna create is understanding your body and pursuing it with passion. So being genuinely interested and excited to actually fix yourself. Because if you don't have that obsession, if you don't have that joy in pursuing, you will give up along the way. And so understanding that it's a process. You're gonna check the boxes one by one, and

with the right information, you'll make it to where you're going. It's just about really falling in love with the process.

SHAWN STEVENSON: Yeah, that part. Amazing. Well, thank you so much again for coming to hang out with us today.

DR. JOE DAMIANI: Thank you, Shawn. Really appreciate it.

SHAWN STEVENSON: Awesome. The one and only, Dr. Joe Damani. Thank you so much for tuning into this episode today. I hope that you got a lot of value out of this. And in the words of the Wu-Tang clan, you gotta protect your neck. All right. Our neck, our spine, and our nervous system, our peripheral nervous system, our brain, all of this stuff is uber complicated, but there are some very basic tenets for us to establish and to retain proper function and also to help us to get out of pain if there is some malfunction dysfunction, and we were not protecting your neck.

All right? So following individuals like Dr. Joe is just priceless. Again, this information was something that you had to be in the highest order of esteem in society to be able to have access to information like this, to experts like this. And today at the click of a button, we can get access, we can get education, we can get empowerment, but. It's up to us what we do with it. And so please share this information with the people that you care about. Put it into practice for yourself. And if you've been struggling with pain, this is something to invest your education, your time into because there is a way where there's a will, there's 10,000 ways.

And you being here today, something in you knows that you can get better. That you can feel better. And you know, I really appreciate you for taking the time to share your time with me and Dr. Joe today. And listen, we've got some incredible masterclasses and world-class guests coming your way very, very soon. So make sure to stay tuned. Take care, have an amazing day, and I'll talk with you soon.