

Ep #187: Certification: How a Trainee Helped Her Husband Eradicate His Migraines



Full Episode Transcript

With Your Host

Susi Hatelty

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Male Announcer: You're listening to *From Pain to Possibility* with Susi Hatley. You will hear Susi's best ideas on how to reduce or even eradicate your pain and learn how to listen to your body when it whispers so you don't have to hear it scream. And now here's your host, Susi Hatley.

Welcome and welcome back to *From Pain To Possibility*, a podcast that helps you to reduce and eradicate physical pain for yourself and your clients. I'm your host, Susi Hatley, and today I am particularly happy that you're here because today I share a story about one of my trainees helping her husband eradicate his migraines.

I have taken some raw audio footage from one of our certification training calls where she is presenting a case on her husband. Now, this is a series that we have followed over the past seven months. She started working with him seven months ago and bit by bit and piece by piece we have seen the change as a whole group inside of our program.

It has been amazing to bear witness to. It's nothing like being a trainer who has decades – I have almost 30 years of helping people reduce and eradicate physical pain. But to see my trainees really get it and get that change is possible is why I do this work. And this is a remarkable story.

Her husband is 60 years old. He has had migraines since he was a teenager. He hasn't had a full sleep cycle in years. And even though this is in audio, you will hear just how much he has changed. Not only have the migraines gone, his posture has changed, his face shape has changed, even the skin color has changed. And you'll hear these little pieces of times when Jen is doubting herself and what other trainees come in and then share about what they're seeing in her.

So not only are you hearing just the story of the change over the past seven months, but you'll also hear the interaction. I really hope that you enjoy this. If you are someone who has migraines, I simply want you to know that change is possible.

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And if you are someone who in your gut and in your breath and in your blood have been looking at my program, you're inspired by what you hear and there's a deep knowing that yes, this is where you want to go, then send me an email, health@functionalsynergy.com.

It would be an honor, truly an honor, to share with you what I know to be true and have my trainers work with you to help you become great at helping people to reduce and eradicate pain. Onward to our recording. Enjoy.

Susi: All right, so let's take a look at this fellow. And then how has his mindset shifted as who he is? How has the energy of who he is changed?

Jen: Well, I can tell you that he's no longer afraid of the migraines. And it's a very, very interesting thing because this has taken, what are we seven months? This started in January. And it's taken seven months to get to this place, but the mind shift happens so slowly that I don't think you even realize that it's happening.

But once it starts to happen and you have more control and choice over what's happening to your body, as in pain, then other changes start to be invited in and you make the other changes. Because I look at these photographs from March, May and July and even his skin coloring looks different.

Susi: Yeah, now it may also be the lighting that's coming in at the time of day. So I want to provide that just as devil's advocate for the sake of it. And his haircut is a bit different. But it's like even the shape of his face looks different. Now, he's also got glasses on, but there's clearly a shift, yeah?

Jen: Huge. It's huge.

Susi: Like a pulling down in March.

Jen: Yes, yes. And even though in July, this was actually done July 4th, I can still, even though it's a before photograph I can still see the buoyancy

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that Chris now has in his torso, in his pelvis and his abdominals and his rib cage. He just looks more present in his body instead of trying to avoid it.

Susi: Okay, so that's interesting, these are all before pictures. Okay, are you ready for after? After was in March, this is before in May. And then his after in May is like his before in July.

Jen: Yes. I mean, you can't make this stuff up. I'm looking at evidence that this works. I have to say it's not just the movements, it's also a whole shift in energy. It's a whole shift in energy. What I wrote in the summary is absolutely true. He now has a full sleep cycle, and that hasn't happened for years to the point where he is even surprised.

Susi: Yeah, look at his head position.

Jen: Yeah.

Susi: And how old is he?

Jen: 60. And he's been having migraines since he was a teenager.

Susi: And how many migraines does he have now?

Jen: None. None.

Susi: What are the whispers that he's now noticing?

Jen: So I'm not a migraine person, so I can only go by what Chris says. But he says there's a certain sensation that comes when he feels a migraine coming on. And with that sensation always came fear. Now there is an apprehension, but the fear isn't as intense because he feels that he has the ability to acknowledge the sensations. And he acknowledges the sensations and he knows what to do, but there's no longer that panic that's involved with those sensations.

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And I honestly don't know what those sensations are, whether it's a tingling or a pre-migraine. I don't really know. But even when he has a job at work that he's not particularly enjoying, that would be a trigger for him. It was, well, I'm going to do this so then I'm going to get a migraine. And it would be, of course, I'm going to get a migraine. And now that has completely reversed.

Susi: So do you see how this has everything to do with the movements and it has everything to do with the movements?

Jen: Yes.

Susi: Okay, how so? Tell me more.

Jen: So it's interesting for me because the way that this started was with meditation. That's how this recovery and journey started. The movements came a little later. But Chris will tell you that you have to love, love the migraine away. You can't force it. And that was the biggest thing for him.

The biggest thing for him was thinking that he could force it, even with the chiropractor, who we're still in touch with, Chris doesn't go on a regular basis anymore. But it was going to the chiropractor and getting adjusted, I mean, these were intense, forceful adjustments. And there have been a couple of occasions where it actually made the migraine 50 times worse. And he would call the chiropractor back in a panic because it was worse, it didn't help at all.

But the movements came over time. And as the shift in attitude towards the migraines started to happen, the movements started to come in. And, of course, it was a lot of discomfort and a lot of forcing and a lot of, well, I can't do this. But as his attitude changed, his attitude towards the movements changed and then we would just play. As you said, Susi, we would just play.

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So there was no expectation there for me, and therefore there was no expectation there for him. And that's how we started to play with it. And as I said, with this last July 4th session, legs up the wall was enormous. It was such a huge accomplishment because in May I tried to get him to do that. No way, no how, he did not have that amount of flexion available. He just couldn't. He couldn't do it.

And this time it was, okay, well, can we try this? Sure. And he just went into it. So do I have a 1,000% this is exactly what it is answer? No. But the proof is right there. It's funny because at the beginning of all this, a year ago, I wrote down a couple of ideas and I thought that I would need to know absolutely everything about everything in order to be efficient, good at this.

And there is most definitely a part of this that I can't explain. Not only am I okay with that, but the idea of a result, it was always a very visual thing for me. I need to be able to see the results. Now what I realize is how the client feels is everything. It's everything. Even if I don't see a perceived change, it doesn't matter. How is he feeling? That's what I care about.

Susi: Questions from the others about this? How many sessions did you do with him over the seven months?

Jen: It was probably, well, at the beginning of all this we did a lot of meditations. And I would be getting up in the middle of the night. Literally in the middle of the night because he would be awake. He comes out to our kitchen conversation pit area and he would be lying on the floor. And when he's not in bed, I know he's not in bed, so then I'd walk. And I would come out, and depending on the degree of migraine, and where he was at, I would be sitting in the middle of the night and I would be talking him through the meditation.

And the Meditation really is a comparison. Exactly what I wrote in the summary is true, how does this migraine feel comparatively to your heart space? And we would describe it and it would be anything and everything I

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could think of. Shape, temperature, color, everything. And as that started to shift, we would incorporate movements, and it was usually about every other week.

Sometimes if he came home from work and he was particularly uncomfortable I would ask him, what do you think you need? Should we just do a meditation or do you want to do a little bit of movement? And sometimes the movement wasn't successful, it wasn't. But there was always something in me that could feel the shift. And as the spaces between migraines got greater, then you really start to think, ah, this is working.

And I absolutely, neither him nor I, can believe the enormous change. It's enormous. Something that I didn't have any idea that this would happen.

Susi: Any other questions from people? So why do you think your use of language still needs refining?

Jen: I'm not really sure. I guess because I don't feel that I am as eloquent and professional as some of my cohorts. They are really magnificent at being able to explain it in a very professional way, whereas that's not the way I roll. That's not the way I roll.

So I maybe will never get to the point where I think that I'm great at this, but I know I can see the results for myself. I can see the results in my husband, I can see the results in my clients, I can see the results in my seniors. And even if I don't think so, it doesn't really matter. So I don't know, maybe I'm just rambling at this point.

Susi: If your language was more refined, how would that impact your work with clientele do you think?

Jen: I just think on a professional level it would sound more like I knew what I was doing. Not quite so leaving that mystery. I mean, I know that with my husband, I know with my clients, I know that when I go to the

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assisted living I get results. I know I do. I see it myself. It's that desire, I guess, to be taken seriously. I'm not really sure where that is.

And that may be just inside my head because, I mean, I've been there for years and I still have a job, so obviously I'm doing something right. But it's an interesting groove inside of my head. And that's okay too.

Susi: So tell me, where are you going to go? Or where does Chris want to go next?

Jen: Well, so now we've taken up cycling. So every evening we go for a bike ride around our neighborhood. So, first of all, when he comes home from work, he's not completely depleted. That has changed, he has more energy. He has more bounce in his step. If I'd have asked him to go bike riding with me seven months ago, he would have been asleep on the chair. There's just no way.

Now it's a case of do you want to go bike riding, and he can see that I'm chomping at the bit to do this. So we go bike riding around the neighborhood. That, seven months ago, his hips, no way, no how, and he would have had a migraine. It would have been impossible. It would have literally been impossible.

So with this newfound freedom, not only is it a freedom for him, it's a freedom for me because it really does affect the spouse. It affects the immediate family. It affects everybody. There's nobody that's not drawn into and life isn't affected by Chris's migraine cycle. And it was a cycle and we couldn't get out of it. And now we have.

Susi: Kim, you had a question or comment.

Kim: It's a comment. Jen, what strikes me is you said Chris said he had to love the migraine away.

Jen: Yes.

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Kim: I think you did that with him. Like the thing that shines through so clearly is your love. And I think this space that you created, I think this is a really profound story and I'm very moved by it. And really, the thing that shines through is love. And you loved it away with him every single step of the way, whether it was in the middle of the night, or on these video calls. There were probably a million moments of love where you just met him where he was at.

And yeah, I don't know, I think it's really beautiful and that's a gift that you have, and that I have no doubt you're bringing to every single client that you meet because it just radiates from you. So that's how I just am really struck by the love comment, because I think that's you, and him. But that's what you brought into that space.

Susi: Ruth Ann.

Ruth Ann: Much the same, I don't think there is a thing wrong with your communication skills, Jen. And I think you are clear and succinct. There wasn't a moment when I've watched any of your videos that I wondered, what's she doing? Or what is she saying? Or what does she mean? Or anything. I have an overly fine – It's to my detriment that I hear those things a lot. Like I pick them up. I pick them up. It's not a good thing after a point.

The second thing is, if I could venture a suggestion, if you go back in time and think about the times working with Chris or with anyone else when things did not go well, can you actually correlate that to your communication skills?

Susi: So good.

Ruth Ann: And I'll warrant that there's lots of times when you can't correlate it to your communication skills, something else is happening.

Jen: You are so good, Ruth Ann.

Susi: So good. Oh my God, I love that.

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Jen: Thank you.

Ruth Ann: Really good work.

Jen: Thank you.

Susi: Anything else you want to add, Jen?

Jen: No, I think we're good. I think that, yeah, both Chris and I are so grateful. We're so grateful because we could have never imagined that taking this certification would have, for all intents and purposes, cured him. Yeah, he doesn't have something that was getting worse. And it was getting worse and worse and worse and worse. And just that feeling of desperation alone, yeah. So I am very grateful. Thank you.

Susi: All right, so I think what would be really interesting, if you were going to go play around with posture now, just for fun, is helping him to get that head poke forward back. Now, that might sound really strange coming from someone like me, who's never really talking about posture. And what on earth is she talking about bringing the head back?

The only reason I'm saying that is because that is a tendency that's happened every single time we've seen his before and his after, is that head is coming back and that head is coming back and that head is coming back. And I would also bet that if you were to look back at your old videos, how much propping that you have under his rib cage and his head is probably different.

So if you were to look back and see what's actually changed, and obviously, there's deviations that are in the sagittal plane that are shifting. And those sagittal plane deviations, I'm going to bet, are related to what's happening transverse and frontally and how he's in his legs versus not in his legs.

And so without it being like, I've got to fix the head, going forward with the two of you I would say use that head position sort of as a measure now. If

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that's something that resonates, I should also add, because obviously the migraines were what your measure was before. But if you can start to bring that in because what's also striking me as something that Dr. Larry said in the mechanics of breathing calls.

Very briefly he spoke about migraines and he said that there was some huge percentage of migraines that are very much related to neuromuscular patterns, like they're more neuromuscularly-based than physiologically-based. And when he said that I was like, holy shit, that is awesome. Because if we can really kind of start to help people play in this realm of neuromuscular patterning.

I always say if your migraine is physiological or if it's neuromuscular, because there's a lot of people, A, whose migraines are physiological and you can throw everything from hormones to Chinook weather systems here in Calgary and wherever else weather systems impact people's migraines, and also food sensitivity. So I kind of throw all of that into the bucket of physiological. And neuromuscular truly being the relationship between our parts, like from a biomechanical standpoint.

And to hear Dr. Larry say that there's way more related to neuromuscular than the other, then I just think that maybe the other hasn't been studied enough. Or maybe there's a relationship to when people improve neuromuscularly that there's other things that shift with their abdomen. I know people, they've changed up the way their body is moved and then the way the digest is better, so then their agni is better and their ojas is better, and all the things, right? So whichever door you're coming into.

Anyway, so with all that said, because I'm more of a neuromuscular person, if you could actually start to sort of play with where you could start to increase load and increase complexity and really work that relationship between ribs and pelvis and pelvis to feet. Because I don't, I don't think it's a head thing per se, but I think it's a head thing on top of the pelvis thing on top of the feet thing.

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Jen: It's interesting because part of the video that you didn't see I had him in lunge and it was super tricky for him. And I had him do some tennis ball work under his feet and that made a huge amount of difference in stability in his feet. And I had some ideas about playing. So now because we managed legs up the wall, because we can now get into figure four, now I can start to play with other things to do with his feet.

I was already noodling and have some ideas on how to really support him with feeling supported.

Susi: Okay, so one thing I want you to look at here, I'm only pulling this up because it's got the gift that's easy to see.

Jen: Yes.

Susi: Don't forget this. Okay, so that foot is turning, you can see this, the foot turning.

Jen: Yep.

Susi: So this is coming from the leg bone connection to the pelvis, yeah?

Jen: Yeah.

Susi: So when we can start to shift this up, then what's happening – You can do all the work on the feet. Do the work in the feet, but remember, it's like how is that tissue from the feet being pulled up? And when we look at the feet themselves, let me get the foot out for you. When you look at the feet themselves, doing specific footwork is helpful. But when you're looking at the feet themselves, you've got the toes, you've got the metatarsals, you've got the tarsals. And then you've got how the talus sits in the calcaneus, right?

So this has to be rigid and stable and it also needs to be flexible. And so in the anatomy world when we talk about something being stable and flexible, the anatomists keep their head all wigged out because they're like how can

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something be stable and flexible? And for me, it's like, well duh, we're a dynamic human being and of course something stable can be flexible. In their physics brains they're just like, you can't have stability and flexibility.

So that's one reason why the foot has really flummoxed a lot of people in the biomechanical world. And I'm like, go up, go up to the pelvis. Go up and see this relationship and see the fascia relationships. Yes, do the intrinsic work here, get into moving that through its transverse plane, pull those toes, get into that tissue, do whatever little things you need to do to work this, right?

And then bring it up, like think about those lower glutes. Think about the abductors. Think about how that leg bone and how is that foot responding to that leg bone? Because when I was running those lower glute workshops what was so stunning to me was the number of people that even though in my head I was offering it because of knee stuff, that was where my head was. Even though I knew people benefited further up the chain, the numbers of people that commented on what they were feeling up the chain blew my brains.

So it'll be really interesting as he gets the platform of his pelvis and that leg bone and roundedness down into his foot and he can feel like that rebounding almost between the foot and the pelvis, that will be interesting to see where that head then starts to sit.

Jen: Well, what's exciting is because he moves so much more freely now, I have a lot more available to me than I did at the beginning.

Susi: Yeah.

Jen: What was your comment? He's like cement.

Susi: Yeah, he was a two by four, for sure.

Jen: Yeah. Yeah. And, as I said, I can do so much more and play with so much more now.

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Susi: Yeah. And the other thing that he might not be ready for, but he probably will be able to do very, very soon is the back bender.

Jen: Yep.

Susi: But put a lot of propping underneath his head, a lot.

Jen: Yeah.

Susi: If you can start to get into this, if you can think of a triangle from here to here. If you can get into that triangle, that would be sort of interesting.

Jen: Thank you.

Susi: Yeah, you bet. Really, such fabulous work.

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