



DRPAWLUK PAIN SOLUTION SUMMIT

- Dr. Pawluk: This is Dr. Pawluk. This is the Chronic Pain Summit. Welcome to the Chronic Pain Summit. So today we're going to talk about tapping into a bottomless well of energy. And I have with me an author, a famous author, Sue Ingebretson. She's written books, has a website; she has workbooks, she has done a lot of wonderful things and I'm honored to have her with us today to help us to figure out how we could tap into the resources that we have within our bodies to be able to help ourselves; but not only emotional resources but also mental resources. And I want to tell one little story before we start. I did a little bit of training in hypnosis, and this is one of the areas of expertise that Sue has. I remember this story about this kid who has warts on his hands.
- Dr. Pawluk: The doctor thought he had warts and the surgeon was going to clean off the hands, scrape them away because he didn't have use of his hands. And the anesthesiologist says, by the way, hypnosis can take care of those warts; because that anesthesiologist thought they were warts, they looked at them, said, they look like warts. And so the surgeon did his thing and he said, yeah, yeah, yeah, hypnosis. Yeah, yeah, yeah. Take away warts. Yeah, yeah, yeah. So a few months later, the surgeon meets the anesthesiologist in the hallway, says, by the way, you remember that kid with the warts said, well they're back. How would you like to have at those warts? How do I do your thing with those warts? So I don't know if you've heard this story, but anyway, so the surgeon, the anesthesiologist said, I'm going to show this surgeon. So he hypnotized this boy into getting rid of the warts on one hand, not the other one.
- Dr. Pawluk: Just one hand. Now let me show you what I can do with just one hand. Nevermind two. So he did it. He did. He did the hypnosis work with this with his boy and got pictures, and showed pictures to the anesthesiologist whose mouth dropped. He says, by the way, they weren't warts, they were congenital ichthyosis; it's like elephant skin on his hands. It's congenital. It's not an infectious process. You're not supposed to get rid of these things because it's congenital, you're born with it. So that was a great story about the power of hypnosis and we're going delve into that power, right Sue?
- Sue: Absolutely the power of the mind. Absolutely. It's one of my favorite topics.
- Dr. Pawluk: Well good. Well tell us about your journey. Tell us about your own personal journey and how you came to do what you are currently doing.
- Sue: Sure. I've been doing what I'm doing for a very long time. I probably sought a diagnosis for about 15 years. I was diagnosed in about 2000, 2001. So I figured it out myself. I did all the research, figured it out myself. So yes, I did have fibromyalgia. Technically I still do; I could bring the pain back right now if I wanted it by doing all the things I advocate to not do. And I, at the time, I was just very, very limited in my world and how I thought



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about things and in what I did. So I thought I had a life of disability ahead of me. I was given paperwork to file papers for a scooter chair. I walked with a cane. I thought life was over. I really thought that my life of ability was completely over and the information I received and, of course, now I come from a completely different space.

Sue: I am so grateful that I didn't know then what I know now, but I'm also grateful that the doctors didn't know either because I'm so glad that I had the doors shut in my face because it made me look for other options. It made me do more research. I'm a natural born researcher and it made me read more, learn more, figure things out and do it myself. And that particular journey is what brought me to where I am. I learned to heal my own body, figure things out myself, wrote my first book; ended up teaching workshops and seminars and enjoying it of course, working with clients. I just have followed the path that first led to my own healing. Then thought everyone else would follow that simple path; it didn't work that way. And then as I'm helping others, every time they're at a roadblock, they're like, Oh, I didn't get, you know, this didn't work out for me, or whatever.

Sue: And I'm like, yay, let's figure that out. What were you thinking? What was going on at the time? What are you doing in your environment? And then we get to brainstorm and figure it out. Why didn't that work? And then that goes into my arsenal. Okay, then we do this. Then we do this. And that's the way it is with every healing process. It's figure it out, learn more; results aren't what you expect. Keep going, keep going. I just love the whole process. I love every benefit.

Dr. Pawluk: Well, part of your journey was learning one of the tools that you learned in your journey. It was hypnosis, right?

Sue: Absolutely. I'm an advocate of hypnosis and I'm a master practitioner of NLP. I'm a certified clinical hypnotherapist. And the reason is, and a lot of people are uncomfortable with that term, but the reason is I wanted to understand how the mind works.

Sue: How does the mind affect the body? How does the mind, in what we're dealing with physically because it's a real thing. Don't let anyone tell you it's not real when you're dealing with chronic pain. It's a very real physical thing that we're dealing with. But I learned that the mind has everything to do with how much pain, a little pain, how when it stops, when it starts, when it grows, when it expands, contracts. All of those things are so impacted by the mind. And that's where I really found things to take off. I did things naturally that healed myself, but then later did the trainings that helped me help others do the same thing because everyone's different. Some other person had, it has a different non-conscious mind process than I did, or other problems or fears or anxieties or whatever. So that's what has helped me figure out, that's my favorite tool in my



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toolbox. I do tapping, I do NLP and they're all mixed together. I do everything together. But my favorite tool is working with how the mind works naturally, not against it, work with it, not against it.

Dr. Pawluk: What are some of the misconceptions about hypnosis?

Sue: A, that it's something done to you; and B, that it's something done against your will or that you won't have any say or that you're not a part of it. And none of that is true. In fact, almost 100% of the time when I'm working with client, we're doing guided imagery or we're doing processes where I'm working with the nonconscious mind and they'll say, was that hypnosis? Well technically, yeah, because watching TV is hypnosis, driving your car is hypnosis. Everything is hypnosis. So, technically, yes, but you won't think that you had this special process, but what will change are your behaviors later. You'll find, depending, I work a lot with certainly chronic pain but also weight loss and behaviors; eating behaviors and clients will say, well, working with you, I didn't really find I changed anything, but I also felt like eating better and exercising and I've dropped 15 pounds since our last conversation. That's how the mind works. You don't necessarily recognize the pinpoint when things change, but they do change and they change at a whole life level, not a temporary bandaid fix. That's why I love about the mindset and how the brain works. We are not doing bandaid fixes. I'm not doing a 30 day detox, helping you drop seven pounds and then you walk away and you have the same behaviors you did before. That's not what I do at all.

Dr. Pawluk: I got trained in Ericksonian hypnosis and Ericksonian hypnosis, I'm calling that not hypnosis, I call that a conversation.

Sue: Yep, absolutely.

Dr. Pawluk: Right? It's like a story. If you're telling a story and you've got a good story teller, then basically you become "hypnotized" by the story.

Sue: Absolutely. And the whole goal is to get your mind to just relax a minute because we all have these closed doors. And so as we're having the conversation, as we're talking about things, and the mind opens up on one thing or gets confused about another, and it's that confusion, it's really good. It's a powerful thing. And as you're a little bit open, a little bit confused, then your nonconscious mind is available to hear the things that we want to talk about, to hear about behaviors you may be doing that would worsen your pain, that would bring it up or would make it linger. And a lot of times it's situations where pain was there before and now you do the same situation and pain comes again because it automatically thinks this goes with this. Those are things that we unlink in our work together so that you can still experience this but not have to experience the symptoms that you don't want with it.



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Sue: I could never ever tire of watching people get better. Watching people heal, watching people improve. There is nothing more exciting. And seeing that change come across them. And oftentimes it's a very physical thing. You can see the shift in posture. You can see the brightness of the eyes or the true duchenne smile where the smile actually meets the eye. It's not a fake smile; total difference. And the posture, the shoulders, the neck, the spine, all those things really make a difference when you can feel an internal shift that says, I get this. That's something I can do. And that's the other thing I love is that with the mindset work, so many things are very simple. We're talking about changing how you think about this changing, how you verbalize that. Very simple, small little tweaks can have huge ripple effects.

Sue: And that is just so powerful.

Dr. Pawluk: Could you give us some examples? What are those tweaks?

New Speaker: Sure, sure. One that is pretty pervasive is this feeling that everything happens to me and that you're just driving in traffic and a car cut you off. That guy, he wasn't looking and he just is going to make me late for work. And it's the feeling that things happen to you and when you can make a shift to think about things happening for you, it's a completely different arena. And as things happen in life, you can take a look at it as the neutral observer. That's the other biggie. When you can look at things as the neutral observer, you can see that wasn't against you. That person made a non-intentional move. Or even if it was intentional, the point is it wasn't directed at you.

Sue: It's not about you. It's about the small things in life that happened and you can feel differently about it in your mind. And that translates to your body when you are no longer the target; walking around with this target on your back. And everybody's got an arrow in their quiver. It's a completely different feeling when you feel like you are in a harmonious working relationship with the world. That's a pretty big one. But there are smaller ones just like thinking about your pain. I love using shifts to define the pain, how does the pain feel to you? Where is it as it moved? Does it spin? If you gave it a color, what color would it be? And then we do some little physical, mental mind games of how to think about it in a different way.

Sue: And it is amazing how pain can shift. It can move, it can dissipate. And then that's just kind of a surface thing. But from there, then we'd like to do some discovery and do some fossil hunting. What was the source of that? When did the one was the first time that you felt that, what did it come with? What experience did it come with? Was it relationship-based? Was it an accident? Obviously there's that and that's another thing I want to clarify. Here we are talking about chronic pain and there's a big difference between chronic pain and acute pain. Acute pain- had an accident, something happened, you tripped and fell, sprained the ankle, whatever. Those types of things do



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take a period of time to heal, six, eight weeks, whatever. It depends on what the injury is, but when it goes beyond that, that chronic pain is what we're talking about today. That's where we're here to discuss that chronic pain that is so persistent that it completely derails your life. Life's going like this. Chronic pain arrives or going a different way. It's a completely different life and again, I'm coming at it from a different angle and I'm so grateful for that derailment. I'm so grateful because that changed what I did, how I think and who I am. I'm very grateful for.

Dr. Pawluk: It's turning lemons into lemonade, right?

Sue: Yes. With an education.

Sue: It's about understanding. So you can just say, yeah, I'm going to make lemonade out of lemons. But it's really about understanding how it happened in the first place. And so I want to make sure that our listeners understand that I know what it's like to be sitting in that place, feeling that nothing can change, feeling that you will have forever feeling that other people don't understand you. That's one of the biggest issues. No one understands me and I do get that. And those who are listening have that bond. They do know how it feels, although we each feel it differently. But that chronic pain, there are a lot of studies out about chronic pain, feeling isolated, that sense of connection. And there are even studies showing that a sense of isolation is every bit as damaging as smoking cigarettes to the body.

Sue: And that isolation itself is just in tandem with chronic pain; chronic pain, you're going to be isolated. A, you can't do something that you used to do. B, the relationships, expect from you, things that you aren't able to do anymore you don't have or you can't be or you can't withstand all those things change. So any type of change will affect your relationships. So it will affect every aspect of your life. And that's why it's like a phase when you first have it happen and then the chronic pain countenancing you're completely overwhelmed. You go through that phase of overwhelm and trying to get somebody to listen. Please listen, I'm in so much pain, I can't stand it. Or I have this and I am afraid of that or this is coming and I don't get it because it's here one day but not the next.

Sue: It's fear and anxiety and the unknown; and unknown always makes us look for what's worse, what's worse that's coming. What's the bigger thing? I'm on a little tiny train on a track. There's that big huge metro line coming at me. That's how chronic pain works. It makes us automatically look for what's worse. So the thing is when we have that pain issue, we go through the phase of, okay, first it happens. Then we're trying to get affirmation and we're trying to get acknowledgement and there is nothing wrong with that phase. We do need acknowledgement, we do need to feel that others are listening. And then when you get past that phase, then you can get through the education phase. I



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need to know more. I want to know how this happened. I want to know what I can do, what are some things that I can try and get through that education phase.

Sue: And then I love reaching people in that next phase that are like, okay, I've been there, done that, I've tried this, I've tried this, I've tried this, this kind of worked, but not really this work but not so much. And now I'm here. What can I do to blast through this? What can I do to get through these last steps? And there are different approaches at each one of those phases. So that's why our work, when we work with people, we need to do some pretty thorough assessments; figure out where they are, what are they looking for, what have they done and what are their expectations. And then from there we can start tweaking and working and helping them create this dance. That's really what it is.

Dr. Pawluk: In the case of somebody having to go somewhere to get some help, if I'm in chronic pain, what are some of the small things that I can do to help me to quench or quiet down that fire of chronic pain? Because every chronic pain starts with acute pain.

Sue: Absolutely.

Dr. Pawluk: Right? You have to start with acute pain. And we define chronic pain as pain that's been there for more than three months. Now, it can obviously become chronic earlier than that. But there's a transition point at which you're basically settled in and now is taking over your life as you were saying. So what are some individual little tricks that people could do with their own thought processes?

Sue: Well, I'm going to assume that others in this seminar, in this summit, are discussing the, what I would call external, things to do. There are things you can do for relaxation purposes and ways to reduce the anxiety, which of course makes pain worse. And there are physical therapy, things you can do and other what I would call external things. But when it comes to the internal aspects, the most important thing is how you think about your pain. And here's the real kicker. And I know what it's like. And I remember what it was like when we are in pain and resisting, we're angry, we're frustrated, we're hurt, we're disenfranchised, all those things. When we're in pain, all of those feelings and emotions will make that worse. And it's a subtle shift. But getting to that position of neutral observer where you can start to look at, for me, it started by trying to track my flares.

Sue: Flares happened and I'm just a natural inquisitive person. Why did that happen? How come I tripped and fell one day, got up and felt fine. I mean, it felt normal, pain, but another day I tripped and fell in a much less way and was in horrible pain. One time, this is silly, I went somewhere and I got a new jacket for Christmas and it had a fur lined hood and I was not gone for more than a couple hours. I came home, I had such pain across my back, neck, and shoulders. I would have sworn that there was a brick in my



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hood for it was just heavy enough that it created all of this extra pain. Those are the things I wanted to figure out. And now what I understand is what I was doing mentally. What was I doing? What was I thinking about?

Sue: So when I was thinking about, I happened to remember that day that I had that jacket and gone somewhere. I was very upset about something. I was upset about issues with my children in school and things that I was struggling with. I had this combative conversation, which is so not me. I will go anywhere to get away from anything confrontational, but I'd had a conversation that was just really a challenge for me. And then I put on that jacket and I went somewhere. And even though I'd gone somewhere fun, my mind was still going on. Everything I said and everything she said. It was an educator who was not helping by the way. So those things were linked. So my mind said, what I was telling my nonconscious mind, is that I bear the weight of the world for this thing that I was trying to fix in someone else.

Sue: I bear the weight of the world. So I felt the weight of the world, it was all on me, is all on my shoulders. And of course the hood didn't help. It exacerbated it. But how we think about our pain means everything. So you get from that place where you're angry, you are mad about it, you're frustrated, you're angry, you go through that phase, then you go into the phase of the neutral observer. To me, I think there's nothing worse than the programs that say track your pain every hour; so you go to that place of neutral observer of just trying to go through your day, paying attention to when you feel good, pay attention to when you feel neutral, pay attention to when you feel less awful. Whatever level you are, do that neutral phase and then you can move into an elevated phase where you can actually change thoughts, change how you think and then look at and see how your body reacts and how your body thinks. That's to me, the real exciting place when you can intentionally change what you're thinking and then physically change who you're feeling because it's all connected. All on the same pathways.

Dr. Pawluk: Thoughts lead to emotions, right? Every thought, every though, has an emotional component to it. Right? Every breath we take, there's an emotion attached to that breath.

New Speaker: And many times people think that they don't have self-talk or they don't have thoughts because I really had to do some spelunking to figure out that thought that I'd had when I was blaming my jacket. And of course that did make it worse. But I really thought about it later and realized what had happened just before it. So a lot of times people don't think that they have a negative thought.

Sue: They just have an emotion and that's okay too. So when the emotion comes, and oftentimes it's not necessarily, we're not able to define it, and say this emotion was grief, this emotion was sadness. That's why I work a lot with emotion wheels that will



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have 80 different words for emotions. They can really help. It helps to define, is it this or is it this one? Really it's more like this, and it can help you tweak that emotion that even without knowing the specific name for the emotion you're feeling, you can go into the body like we did just a minute ago. Where am I feeling it? Where does it feel like the most pressure? And when we start to notice those things, what's interesting is that emotion is always moving. And that's an awesome thing. We tend to think that it's static.

Sue: It's like, and you know, it's going to be the end of me. But it actually has movement and that's a great thing because we can manipulate and move that emotion; changing how we feel, changing how we think they [inaudible].

Dr. Pawluk: Well the idea of that coat and the hood, to me it reminds me that basically what it is a symbol. We gave it, we interpreted that event, that circumstance and we gave it a symbol and now that symbol has become real.

New Speaker: Absolutely. Absolutely, and our mind, we're the only creatures on the planet who are story-making machines. So everything that happens, we have to make a rational reason for why it happened. Like somebody pulling out in front of you. It makes a difference whether you make the rational reason that they were just distracted and didn't see you.

Sue: Or if you say they were coming for me, they were rude and just didn't care that I was there. I mean, two totally different meanings and we don't get to know which one is right, but we do get to experience our thoughts and our body. So that first person is going to be in more pain and poor tightness than the second person. And it's really important to understand that when we have the thoughts that are negative, getting back to feeling resistance about being in that first phase, that resistance has physical manifestations. Our digestion is slowed. Our respiratory is, we hold our breath, we take short, shallow breaths. Our anxiety is through the roof. The heart rate increases. We are not able to process, talk about fiber fog. We cannot really process well when we're under that type of level of thinking and that type of pain. The two are one, I always say it's in my book. My current book is that there's no dam at the neck. It's not like it's a mind thing or a body thing. It's both. It's always both. And so yes, we need to do physical things to help us heal and feel better. But when we can incorporate the mind, get that to work with it, then we are just amplifying our results by tenfold, a hundred fold, whatever it is.

Dr. Pawluk: So what are the stages for hypnosis? But let's call it a conversation, right? What are the stages to relax? So could you give us some tips on how people could enter that stage and some tips on relaxation?



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Sue: There are two that come to mind. Both of them are about getting into our body and feeling where we are right now. And that is something we are not familiar with it. We are always jumping out of the body because we don't want to think about what we're thinking about. We don't want to feel or feeling. So we jump out and we are not really present physically. So the ways to relax are to actually physically think about yourself and think about the chair you're sitting on. Think about the support on your back, think about your watch band. Is it tight? Think about how your waistband is sitting. You know, whatever you can do to physically bring yourself into your body. Those are very practical methods. And you'll notice when you start thinking about those types of things, your breath will naturally start to take deeper breaths, slow down.

Sue: And of course, deep breathing is all time one of the top things for relaxation is any type of deep breathing exercise. I have several in my book and something I practice every day for sure. But the other method is just similar getting into the body. I know a practitioner who says, I want you to think about being in your big toe right now on your right foot. What does that big toe feel like? And all of your emotions and all of your feelings are in that big toe. Think about that big toe. Now think about your shin and think about how that shin feels, and then the calf behind it. And then think about that knee. And now let's skip over the other knee. Let's go down that shin how about that calf, that foot, that big town.

Sue: Feel grounded. How wonderful that feels, feel the smoothness of the inside of your shoes. Feel the firmness of the ground beneath your feet. You can feel, you can do imaginative things from there. You know, what would it feel like if you had roots coming from the bottom of your feet and they went to the center of the earth and they wrapped around the center of the earth and it came back up, went through your feet and then go up through your legs. Whatever you can do to get into your body will naturally help you relax. And that's one of the things that is fun to talk about today, things that are just natural and easy and simple. So deep breathing, doing any kind of progressive relaxation or even if you don't want to do the body relaxation, go into one part of your body.

Sue: What does this feel like? Because you're directing your mind from all the spinning it's doing, you're directing it back into you. Once it's to you, then you have shifted brains. You've shifted from the fear, worry, anxiety to the here and now. And when you're in your here-and-now brain, you will come at problems from a completely different perspective. Solutions appear when they weren't there before. Opportunities show up. You are so much more resourceful when you are in that in-body feeling. And you know, that's the type of thing we can do. And I'm sure you and I both we can recognize just by facial cues, by breath, by tone, by all sorts of ways. We can tell whether a person is really with us or if they're not. And we can also tell their anxiety level and where they are. So sometimes, and in my mind, I'm calling it, talking him off the ledge, I'll have a



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client call and I always prefer Zoom, Skype, you know, I want to see, I want to see them, right?

Sue: And they'll say, everything's fine. You're talking like this and they're not breathing. And the eyes, everything tells me that that's not true. And we are the only creatures who do that say one thing and actually feel another. So I can see that. And then I'll say, you know, I had a really busy day. I'm just coming off of this. I just had another client left my office, let's take three deep breaths, and we take deep breaths and we get the person into the room physically, emotionally, and then we can work from there. Deep breathing is just an automatic go-to. Another favorite, and I call it triage for stress is the tapping. I do a lot of tapping, EFT tapping and that is always--

Dr. Pawluk: Emotional freedom technique.

New Speaker: Yup. It is always a go-to for me for anxiety. If someone that I'm speaking to, we do the deep breaths, we get them down and then we will tap, do a few rounds on what it is that they've told me when they first came. And then that tapping, as you know, now I've been doing it for 20 years, but now that it's scientifically proven people are a lot more likely to do it. And tapping has been shown to actually reduce stress and reduce stress hormones and help you to be in this more resourceful state that we're talking about. And from that state we can practice all the things that they're hearing from other practitioners in this summit about what to do, help heal the body that this is so primary and so important.

Dr. Pawluk: What resources would you recommend for people for EFT?

Sue: I have several in my book. Gene Mantra Stelli is a tapping Q&A. He has an amazing voice. I could listen to him all day long. He gets tired of hearing me say that. She has a wonderful podcast. So any topic you can think of, you can go there and listen to any, you can hear my interviews with him too. Obviously tapping.com, the Ortner's,; Nick Ortner and his sister Jessica, wonderful people. Dr. Mercola, which I'll give him credit, this is where I heard about EFT in the first place a hundred years ago. That's great resources. And of course I have it on my website too, so I give some sample tapping scripts and I have the tapping chart and that's the type of thing you can find on my website. So you would Google rebuilding wellness and tapping or EFT tapping

Dr. Pawluk: I think that's a tremendous resource and it's easy to do. It takes a little bit of training to get going with it. But what you do, it's very easy and you can basically script for yourself.

Sue: Absolutely. And you don't have to say anything. That's the biggest hang-up. People say, I don't know what to say. You don't have to say anything. You can tap and just feel that anxiety shift if that's what you're working on.



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Dr. Pawluk: Let's talk a little bit about breathing because there's a lot of people make all kinds of claims about breathing and you should do breathing; this holographic breathing. You should do this kind of breathing or gorilla breathing or whatever kind of breathing. What are your thoughts about "breathing"? What technique works best; if there is any?

Sue: Yeah, it's like my brother's answer to which is his favorite camera. And he's an amazing photographer. It's the camera that you have with you. So any breathing is good breathing if you're doing it. It doesn't matter what is the best if you're not doing it. So if you're doing it, there are so many deep breathing practices where you shift, we're getting into the parasympathetic and the sympathetic nervous system response, which is what we're talking about today, all about pain. And when we can shift into that relaxation response, the fastest, quickest way is with deep breathing. And so by starting out, you probably need to have even breaths in and even breaths out, you can just do that simply what feels natural? Count to 10 in, count to 10 out. Count to five in, count to five out. If you ever feel dizzy or lightheaded at all, you just go back to your normal breathing.

Sue: There's alternative nostril breathing which is very soothing. It's surprising at first when you're doing it, you're like, wait, right dang, wait, no. And you think too much about it, but when you do it often enough, and I do it in bed, it is very soothing and it really does regulate. So the goal, and I'll say that timidly because any breathing is good breathing, but if we can breathe out even slightly longer than we breathe in, then we're enacting that relaxation response. We're getting that parasympathetic response to kick in. So, you know, four, seven and eight is one of the other breathing techniques where you breathe in to the count of four. You hold to the count of seven, you breathe out to the count of eight. So any kind of number around in there, breathe in, hold a little bit, you know, breathe out; very, very effective, and you can set a timer.

Sue: My favorite method is pick an odd number like 11 or 13 or 43 and say, I'm going to do some sort of deep breathing. Even if it's just breathing in once and breathing out, I'm going to do it every hour at 43 minutes past the hour. And the thing is, you're probably not going to remember every hour, but what if you do 50% of the time you're miles ahead, your body knows the difference. So do that as regularly as you can. And that's another thing too is with tapping, you will notice that your breath automatically lowers; that you'll automatically start to breathe, and regularly, and I had no idea when I started all this, but I held my breath, I held my breath all the time. When you're in pain, you hold your breath and now it's habit. I'm not in pain anymore, but I still am challenged by holding my breath so that is something that I work on all the time.

Dr. Pawluk: Okay. So the key is it doesn't matter what kind of breathing technique you use?

Sue: To me.



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- Dr. Pawluk:** Well, no, I think to most people, but you have to decide. Pick one. Don't drive yourself crazy trying to say that there's the best technique. The best technique is doing something. But I think there's an interesting part of this too, which is that if you start doing a systematic process for breathing regularly, what does it do to your brain? I mean, what does it do to your subconscious?
- Sue:** The old cartoon now I can't think of what it is, but there is a cartoon that had a medieval fort and the one of the characters would walk around the top and say, four o'clock and all as well. When you do any type of deep breathing practice, you're telling the brain all as well and imagine and I really want people to do that. Imagination is awesome. Imagine the signals your brain is telling your body when you have just sent it, the signal that all as well, your body is in a completely different state than it was one second before, one minute before or five minutes before. So we want that pervasive all is well willing to be there as often as possible. And just like creating the habit of short, shallow breaths. We want to create the habit of deep breaths when we need something or when we're trying to figure something out.
- Sue:** That is one place where I really do have that down to the habit is that if I'm trying to think of something or if I am just ready to go somewhere or you know, anything; that's my go-to, deep breaths in the brain just becomes so much clearer and able to process because who wants to live life with that chatter? You know that brain that is constantly saying, you don't know. You aren't this, you haven't that, we can talk all about the negativity bias, but the deep breathing is just a perfect place to start to get us into that resourceful state where it will say, Oh, I feel like taking a walk; if you were in your go-go mode of the chatter brain, you're not going to feel like taking a walk. You're not going to feel like taking an Epsom salt bath. You're not going to feel like having a calm conversation with your significant other. And that's another thing too is that your energy is completely reflected on anyone and everything you do around you. So when your energy shifts, so today, awesome thing to behold.
- Dr. Pawluk:** Well, and the other thing I want to emphasize about counting, so creating breathing techniques that you're using on a regular basis. If you have a counting technique, especially at the beginning, you can't be thinking about something else, right? You're counting, and you get the parasympathetic benefit, the sort of dropping down to the stress level of the body. But you're also distracting. At the beginning, when you first start doing that kind of breathing, you may find that it takes longer to achieve the results you want. Then after you've practiced it awhile, then you've already got your army in your mind and your head and your body saying, okay, she's breathing. She's relaxing.
- Sue:** I've shared this for 17 years, I think. I love Tai Chi and I was in a Tai Chi class and I did it because it was available at the time that I had available, not because I thought it was



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going to help me. I did it to prove it wasn't going to work. I did a lot of things to prove it wouldn't work; so I thought it was stupid. I'm in Tai Chi, I'm in terrible pain and my brain is going through with groceries I needed to get when I left there; and pick up this kid from school and you know, my brain was going through all of that stuff and we were doing this move called floating hands, like clouds. It's a Chi Gong move. Anything that is in this figure eight. And I had done it enough to where it finally became [inaudible]

Sue: I've been doing this Chi Gong, my body's still in pain. I'm thinking of all this stuff. And all of the sudden I noticed the sun. My ring had been turned around and the sun came through the window and went through my refracted. It's just silly. And I saw this light. So I'm looking at that and then I was looking at the window with the light and I found that for the whole time we were doing it and then the class was doing something else and I was still doing it. I got lost in the moment and that's the biggest a-ha I had ever had up to that age in my life. If I got lost in the moment and I felt good and I had been in pain at that point for at least 15 years, I thought, how can I make that last?

Sue: That was my first thought. Then the second thought came in that said, that's a lie. It's just distraction. So it's not real. So I had to figure all that out. Distractions schmactions it doesn't matter if you are able to alleviate that pain for any period of time. Awesome. So, but my first thought was, how can I make that last? And that became a huge source of studying. And this is interesting. I was a writer then, hadn't written a book yet, but I was writing an article for a national magazine, which was, I don't know if I should say this, it's funded by some organizations that I would not have supported. And I wrote this article about Tai Chi and did as much research as I could and talked about the physical benefits; the strength benefits and the benefits of holding your body in a very secure way where your center of gravity makes you feel safe.

Sue: But all the movements are so slow. It's all within range of motion. Nothing pushes the pulse, you know. So I wrote this whole thing. I got photographer to my home because I was hosting a Tai Chi class. I didn't teach it. I had a world class teacher and we had all these photographs. So I submitted this article, big long article about it. It came back to me looking like a rejected World War II document. Anything in there that talked about self awareness or ability to change your physical state was removed because they were saying, well there's no proof of that; I'm saying, but this is about my experience, this is whatever. So that was some very early days education for me about, I don't really care. It got printed the way it got printed.

Sue: I had no control of them, but I cared about the results I was getting. So if I wanted to get lost in hands like clouds, yay me. If I wanted to figure out how deep breathing changed me physically, great. If I wanted to read more about that, learn more about that and then eventually take courses and classes and you know, study the brain and all that. That's where the trajectory started. And it's all about figuring out what works for you.



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And then as we work with others, what is kind of universal, that's why I love this summit. What we're talking about are things that are universal. So you want to talk about the nonconscious mind and how it affects the body that is universal. You know, what is your story telling you? What is your chatter in your mind telling you about your ability to heal?

Sue: I don't have the ability to heal. I would have said that all these years ago and I don't expect any client to say that they can. All I'm asking is for them to believe that I believe. And I'll hold that space open for a little bit. Let's work on that together. And that's how change comes again, going through those phases. So getting back to something I said earlier, I really want to emphasize it. When we are resistant to pain, when we're angry about it, and I don't expect anyone to overnight say, Oo, I'm not angry about it anymore. But just that act of resistance amplifies pain. So if you can move into states like we're talking about with deep breathing, guided imagery, relaxation, music, aromatherapy, taking a walk in nature, getting grounded in nature, playing with your pets, your grandchildren, I'm dating myself; grandchildren.

Sue: When we can do any of those things and feel better and bring it on, what else can I do that makes me feel better? What else can I do? And then that changes your mindset. That changes how you think. And then that changes what you do with that change in how you think and it just creates that beautiful symphony of healing. A brain. A body is designed to heal. That's just science. It is designed to heal. It is the most amazing machine designed to heal. And we you give it half a chance. It's just fascinating to see what can happen.

Dr. Pawluk: Right. You reminded me of a question or a problem: mind chatter. I'm thinking that the people who tend to be in their heads, particularly in their left brain who are questioning the science or questioning the details of the facts and they want the statistics and they remember the doctors saying that this is the lesion. This is the problem. This is why they well don't, are they the most difficult people to work with?

Sue: Yes. But here's the thing that's really interesting because that was me. So I tend to attract that type of client. The interesting thing is that type of client can be very resistant and even confrontational. But when that breakthrough comes, it is more glorious than even the client who jumps on the bandwagon from the very first session and said, you know, I'm in whatever you tell me to do, I'll do. Which is awesome too. But the ones that are very resistant, when that breakthrough comes and they realize they're resisting themselves, it's not me. It's not our work together. They're frustrated, they're angry. And I completely understand that and we work through some of these issues and they want it, the brain is like a big rubber band. So anytime you think one way your whole life, it wants to go that way.



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Sue: And when you start to shift it and stretch it and pull it this way, it's going to bounce back. And then we shifted the pull a little bit to go this way and it's going to bounce back. When they do it often enough to where they get a benefit from going this way, it is just, you see it, you see the face light up, you see the whole body change. It's like, oh, if I do this or when I do this, in the past I've always just felt like blah, and that's why I experience blah, blah. You know, when those connections happen, it's just wonderful to see. So yes, it is more challenging, but I have not yet had one who refuses the whole way through. I've had some that were challenge all the way up to almost the end of the program and then just really blossomed.

Dr. Pawluk: Well, it occurs to me that the people who are really into their left brain and they want the science and they want all the facts, et cetera, the most important thing to do is facts. And you can't deny them. Right? There's the thoughts. You shouldn't deny them. They're there. They're real. But let's have an experience, right? Thinking about batting or throwing a basketball is not the same as throwing the basketball, right? You have to throw the basketball, you can think about all you want, but eventually you're going to have to throw the basketball. So that's converting them from the thought to the experience. And then the experience will bring the emotional changes as you said.

Sue: And I love that example because there is science behind that example. There were three groups that were studied. The first group were given no mental exercise. The second group was given a mental exercise about shooting baskets. I believe it was free throws. And then the last group just got the free throws. And I think that the second group did just as well as those who shot and practiced or almost that the point is they did significantly better than those who had no mental game at all. And everyone knows that Olympic athletes do a whole lot of mental gymnastics before they ever walk out onto a track or get in the pool or whatever it is their sport is. So that mental process of going through something in their mind is just as important as the physical training and going through their body. And you know, that's the really exciting thing.

Sue: They will visually go through every single move of somebody doing a dive, but you know, the flips or whatever, they will go through every single move over and over and over again, getting that rubber band to go to perfection because it's human nature. We go to what went wrong last time. That's human nature. So it does take the practices that we're talking about today does take practices to help shift over into that other way of thinking, of possibility, of hopefulness, of opportunity, of change. And you know, my whole book is about change because we think of change as a negative thing, but change is where everything happens and we can't predict what's going to happen. That's the exciting part. It's always better than we could ever predict. They have some rocky parts.

Dr. Pawluk: Growth requires change. That's the one absolute in the universe, change.



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Sue: Absolutely.

Dr. Pawluk: You can resist it or you could go with it.

Sue: And I was very resistant to go with it. I grew up very resistant. I thought that there was this fake world of, I finally have everything right. You know, the kids are great and my job is great and this is great. And I just had this, you know, Nirvana existence that I thought was real. And it's not at all. That's life. It's doing this, this, this, this. You know, it's always up and down and up and down. And the most, the best thing you can do is for the places that go down that you didn't expect, which usually if you're challenged, it's not expected, is looking at it from that neutral perspective. What happened? How did that go down? How did that work? What happened? You know, why?

Sue: But looking at it from a neutral position, not from any type of self blame or shame or you know, no self slamming yourself at all, that doesn't work. It doesn't ever work. So looking at that trajectory that we think should be this, and it's never that. When we look at that trajectory, what did that mean and what would I like to do? Here's one of my favorite questions. What would you like to do differently next time? And it's not because that was a failure. It's all, you know, the whole NLP thing. There's no failure. There's only feedback. So when you had an unexpected blip in your path, what do you think preceded it; how do you think that happened and what would you like to do differently next time, if anything? Because maybe you've just learned something so phenomenal.

Sue: You'd still do it again. There's no right or wrong, but it's how you think about it because if you think about everything happened to me and I'm the Eeyore, it's your feel completely differently.

Dr. Pawluk: You're part of the ride for sure. That's cool. Back to the title of this section, this interview that we're doing today, just tap into a bottomless well of energy.

Sue: Thank you for bringing that up. We went a lot of these. Here's another universal truth. This is what I experienced with my clients. There is nothing more exhausting than emotions; fear, anxiety, frustration, anger. All emotions are okay, but you're right, the emotions that tend to create that exhaustion are ones that are often perceived as negative. But those emotions take a lot out of us. They're exhausting to feel because we're making up, we're trying to create a resolution for everything.

Sue: And a lot of things don't have a resolution. It's exhausting. So when we're trying to make our stories match what our experiences are, it's exhausting. And people who are in that constant mode of feeling all those negative emotions and feeling like they're wrong, they're bad. They don't measure up. They didn't do something right. They have failed; all



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of those things. They're the ones that are saying, I just need to take a nap. But even when I lay down, I don't sleep anyway. That anxiety cycle creates the whole sympathetic nervous system response and that overstimulation and all those things; there's nothing more tiring than those negative emotions. So when we can work through those things to where they no longer rule your life and we can bounce forward a little bit of deep breathing, a little bit of tapping, a little bit of guided imagery, of prayer, of meditation, of getting in nature, all those things that we talked about and even your sense of smell is amazing.

Sue: Your sense of smell can take you right to a certain place or time and completely change your emotions faster than I could snap my fingers. So when we can implement these things and help reduce that anxiety, that's where we can start to see the needle move with energy because we can get from that place that our relationships, better sleep, better decisions when it comes to how we eat and how we interact with things. And that is like the very nascent beginning of how we can change and improve our energies. Again, that's that little mustard seed. It's a tiny thing. But man, it can have exponential results when we start to change how we think and that we're no longer fighting against those negative emotions. I'll give an example, I don't even know if this is in my book because it's so silly that I had taken a dish to church, you know, a potluck meal and couldn't find the lid for it after the event.

Sue: And I'd marked them both like a good person, you know, the masking tape and your name. Every person in the Midwest does that and I could not find that lid. And I had a meltdown I did at home in privacy because I would never, ever show emotion anywhere. But I was so upset with myself. I'd had that same tupperware forever. I was careless. I was bad, I should have paid attention to who took my item out of the tupperware. I mean it's so silly, but I had such a litany of self shaming about this silly lid that I recognized it later. That was the type of thing I did to myself all the time. I thought, oh my gosh, am I that hard on myself all the time? Yeah. And worse, most people are very, very harsh in their inner language.

Sue: And very critical. And I love tying that into the fact that it is exhausting to live that way because people will always say, I want more energy. Okay, we need to address this. You need to shift this. Get into this state where we could do deep breathing or get into your body or practice these things. And from that place you will feel more energy and again, make better decisions, make healthier choices, do things that normally don't come naturally to you because you're so busy with the chatter. So I love that. That internal well of energy is just waiting and it comes from how we think. It also comes from our relationships and not letting others dictate our energy because that's exhausting. And that social connection is so important. And again, chronic pain isolates. So many people are isolated and if they are completely fatigued, it's very common that they don't have the social connections that they need. They're getting the hugs that they need, they're



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not getting that type of feeling plugged in that they need and being able to give back. And I know that's a different step. And I know that's hard when you're in the chronic pain phase, but all of those things help you plug in and they give you energy and that's where the place that we're shifting towards and moving toward.

- Dr. Pawluk: Okay. Well that's a very uplifting and very positive way to end our time together. So I want to thank you tremendously. Thank you for all the great ideas, practical suggestions. Now let me ask you again, if you could please give people some pointers on resources, including your book and website.
- Sue: Sure, sure. My book, my newest book is called Get Back Into Whack because I wanted to let people know what we all know, what it's like to be out of whack. So when we get back into whack, we can start to understand and it's a pretty good sized book. I have a lot of the science in here that is spelled out, but I want people to understand how you can go about making the changes. My website is rebuildingwellness.com and I believe in this summit. I've given a free sample too. Several modules of the course that I have on stress. So I would love to see people jumping into that course, get the benefits of understanding where stress comes from. And again, that stress is one of the major things that depletes energy. So I would love people to finish this summit and feel the energy that they deserve and that they would like to feel and feel things shift back to the way they felt before. And again, I always say I want people to become a 2.0 version of who they are and not go back to who they were because that person didn't know the things that they do now and that's how they got sick. So they can contact me on my website, sue@rebuildingwellness.com and I would love to give information to anybody that is looking for specific resources.
- Dr. Pawluk: Since we can't put you in our pocket and carry you with us, we're going to have to get your book.
- Sue: That would be a great start.
- Dr. Pawluk: Well thank you again so very, very much for your time. I wish you all the best. Thank you. Your journey, your personal journey, and thanks again for your help.
- Sue: Thank you so much. You're very welcome.