How to heal the biology of anxiety

Guest: Dr Aimie Apigian

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[00:00:10] Alex Howard

Welcome, everyone, to this interview where I'm super excited to be talking with Dr Aimie Apigian.

In this interview, we're going to be exploring some of the principles around the biology of anxiety and how early childhood experiences really impact on our physiology in such a way that really can set us up for a life of anxiety. And then we'll come to some of the ways that we can address that to really heal anxiety at the root.

To give people a bit of Dr Aimie's background, Dr Aimie Apigian is a double board certified medical physician in both preventative and addiction medicine, and holds double Masters degrees in biochemistry and in public health.

She is the leading medical expert on addressing stored trauma in the body through her signature model and methodology, The Biology of Trauma, a new lens that courageously up levels the old methods of trauma work and medicine by reverse engineering trauma's effects on the nervous system and the body on a cellular level.

Dr Aimie specializes in trauma, attachment and addictions, and having personal experience in foster parenting, adopting, and then having her own health issues that were a result of childhood and life experiences.

In addition to her medical studies that have included functional medicine certification, she has sought out trauma therapy training since 2015. A three time summit host, Dr Aimie founded a nonprofit called Family Challenge Camps and developed and ran weekend intensives for families with children who have experienced attachment trauma.

She is currently the founder and CEO of Trauma Healing Accelerated, where she bridges the two worlds of functional medicine and trauma therapy with a mission to help adults accelerate the healing journey by addressing the biology of trauma that keeps stored trauma stuck in the body, mind and spirit. And Providers certification course teaches providers to do the same for their clients.

Dr Aimie Apigian

Thank you, Alex. I am really looking forward to this conversation, really looking forward to talking about some of the more biology pieces around anxiety that get commonly missed. So, thank you for having me.

[00:02:28] Alex Howard

So, Aimie, I'd love to start by exploring the relationship between anxiety and trauma. Obviously, there are some differences between the two, but also there's a really deep connection and relationship.

So maybe start by saying how you would define anxiety and trauma and then let's look at how they connect with each other.

Dr Aimie Apigian

Alex, I feel like just with that one question, we could talk for 40 minutes. We've got the whole interview covered just with that one question you've started with.

This is amazing understanding because it gives us the insight even to how to pull ourselves out of a trauma response or chronic trauma stored in the body.

And so when we understand that the body is going to go through a normal neurological, neurobiological response to trauma, we see that anxiety is part of that. And the normal neurobiological response always starts with anxiety, in fact.

And there's this startle response. And so the startle response is something where the body goes a little into sympathetic, which is anxiety. And it's like, there might be a danger here, there's a potential threat, I don't know yet, but let me become hypervigilant, hyperaware, my eyes are going to dilate so that I can take in all of my environment. There are even changes that happen in the inner ear that expands so that I can take in all of the noises around me so that the brain, especially the amygdala, can assess that danger.

And it needs to make a very fast decision. This is the beauty of our nervous system and how it's designed to keep us alive and help us survive. It has to make a very quick decision of, is this a true danger? Is this a true threat or no, everything is okay and it was just a startle? Like the dog barking. You're going to look quick and be like, okay, the dog is behind a fence. Whereas if the dog is not behind a fence, your response is going to be very different.

So there's always this initial startle as the very first step in the body's neurobiological response. That will be a trauma response.

And then after that startle, say we do decide, our amygdala decides based on the information coming in, no, this is a real threat, this is a real danger. And so then we're going to even go higher in that activation of sympathetic.

And this is really where people will experience what they identify as anxiety. And it's a very biological, physiological phenomenon. That's how, in fact, people know that it's anxiety. It's because their heart is racing. It's because their heart is racing, their hands may start sweating, they get dry mouth, and you can feel the adrenaline rushing through.

Another thing that happens is that their breathing becomes shallow but fast. You can think of it as if you're running a marathon. Like running a marathon or doing heavy exercise. That's kind of like being in sympathetic. And you can feel those body sensations and what's happening because of the chemicals. And this is part of the neurobiological response. (Dog barking) What we want to do is be able to understand...

[00:05:55] Alex Howard

You've placed an actor in the background to highlight the barking response.

Dr Aimie Apigian

Yes, exactly.

Dr Aimie Apigian

With understanding, then that anxiety is always going to be a part of this neurobiological response, there's nothing bad about it. In fact, it's what helps us assess if something is a threat or a danger.

Let's talk about the freeze response and the trauma response, and then we'll come back to what happens if we get stuck in sympathetic.

But with a trauma response, what will happen is that the body decides, and by the body, I really mean, the autonomic nervous system. It decides that, you know what? We don't have enough of what it takes to meet this danger and overcome it. Our best strategy for survival, and it gets me every time that I walk through this, it's like my best strategy for survival in that moment is going to be to shut down and to go into conserving my energy.

Anxiety is a very high metabolic state, and your mitochondria are working like crazy to be able to give you all of the energy that you need to be actively responding to the stress. And the moment that you feel yourself go from a very active response to the collapse and the shutdown response, then that is part of, again, this is just part of the normal neurobiological trauma response.

And for many people, for various reasons that we may not have time to go into today, but many of them can even go as far back as early childhood and attachment and neurodevelopment where these patterns started to get wired then. They can have this default pattern to this freeze response, and they get stuck in the trauma response, and they get stuck in the chronic freeze response and they feel maybe even more collapsed. They feel the fatigue, they can have some depression.

And yet what happens is that as they come out of the freeze response, they don't normally land in parasympathetic. They reverse engineer how they got there. And how they got there was from that place of anxiety, very high anxiety.

And so they go right back to that place, which is why most people, no matter where they get stuck in their healing journey, and if they're stuck in sympathetic, they're going to be having anxiety. If they're stuck in the trauma response, in that freeze response, they're going to be having anxiety every time their body tries to bring them out of that.

And so all around you've got anxiety as a key component of trauma because it is part of the normal cycle. And many people, even because of their biology, are getting stuck in one of those states.

Alex Howard

In a sense, what you're saying is that anxiety is a symptom of, and a part of the experience we have of trauma. And so really implicit in that is we can't heal our anxiety until we heal our trauma.

[00:09:12] Dr Aimie Apigian

That and, as we heal trauma, it will be normal to experience anxiety.

Alex Howard

Right.

Dr Aimie Apigian

And if you're experiencing anxiety, you're not doing anything wrong.

Alex Howard

So say a little bit around, because you're starting to speak to this already, how trauma is ultimately, it's a physiological, it's a biology, not a psychology.

Again, so much of the time we get caught in this idea that it's this experience in my head, particularly in my head, therefore, I have to fix what's happening in my head, as opposed to what we've just been describing, as a physiological response that happens in our body.

Dr Aimie Apigian

Everything that I just walked through in terms of the neurobiological response of trauma, that is your biology, that is your physiology.

Now, the psychology part is that later on our brain makes a story about that, makes a story to provide meaning, because that's what our brains are very excellent at doing. And so now we have a story behind it, and we love to tell the story, we love to tell the story over and over again. But it started as physiology.

And so the path to healing is being able to look at the physiology, and what do I need to bring into my physiology to support the healing journey? Because otherwise time does not heal physiology. Time does not heal trauma. It only gets more embedded into your nervous system unless you're doing the work to heal, unless you're doing the work to rewire that.

And so there's this misconception, even around time and just like, oh, give it time, give it time. And it's like, no, not necessarily. If you're not bringing in the right pieces, time is not going to heal.

And that's where we see so many of the physical conditions and diseases and symptoms, many of which you work with. And it's the manifestation. This is the downstream effect that we can see. Time has not healed anything. It has just changed in its presentation into anxiety or depression or physical health symptoms.

And so the anxiety really is a symptom that we can work with, but we need to be able to understand that, yes, this is really the physiology. We need to be able to bring this down to the cellular level and know how to support your cells, especially your nervous system cells, that are currently in survival mode and keeping you stuck.

[00:11:52] Alex Howard

So walk us through a little bit about some of the early childhood impacts in terms of this trauma response and biology. Because I know that one of the things that you speak about is how even what happens in utero is having an impact in terms of setting up the system.

Dr Aimie Apigian

This is one of my favorite topics, Alex. And so I'm glad that we're going here. And rather than focusing maybe on the attachment, let me instead focus on the neurodevelopment piece.

And what happens, starting in utero our nervous system is growing, and maybe we forget that we weren't automatically born with a ready made nervous system. It's in the making.

And so everything that's happening, our nervous system is sensing that and adapting to that, which is the beauty of the nervous system. The nervous system is amazing at its ability to change, which is called neuroplasticity. And it's not always changing in the positive way. No matter what the environment is, it is adapting to that environment for our survival.

And so if you have an in utero experience, and my goodness, I have worked with kids, I have worked with adults from everything where their mother tried to abort them or their mother knew that she was going to adopt them out and so there was always this grieving aspect to the mom while she's carrying them. Or mom had an infection, she had to go into the hospital or she had the gestational diabetes. All of these factors influence the nervous system of the developing fetus.

And when we are born, our nervous system is not yet fully developed. It's still taking in everything in our environment and adapting to that. Taking in and then its response is to adapt.

And so this is where everything from the sounds, the noises, the internal biology, the internal physiology of how sensitive is their nervous system to those things? Because those babies who have certain genetics or certain conditions, that maybe we can talk about, their system is going to be more sensitive, more fragile, if you want to use that word. And they need more co-regulation than other babies.

And the amount of co-regulation that they need, may not be possible for their parent to provide them that amount. And so then you can have a scenario where these are fantastic parents, and yet the kids are coming out of childhood with anxiety, with an insecure attachment wired into their nervous system simply because they didn't get the amount of co-regulation that their physiology needed.

And then, there's one more piece that I'll bring in which is around the whole neurodevelopment. And this is where I'm seeing a lot of anxiety starting to happen. And I think it's one of the reasons why there's just this huge increase in anxiety over the last several decades. And that is, the nervous system needs to organize itself in its development.

We have all of these neural networks. I mean, it's quite amazing when you see images of the nervous system and the system that it is. And it needs to organize those systems. It needs to have a very efficient system of being able to sense our environment, process that through the thalamus, get it up into the limbic system for it to decide, am I safe? Am I not safe? And how the brain and the brainstem and those tracks organize themselves is through movement and sensory.

[00:15:52]

And oftentimes what is happening is that parents and daycare centers and everything, are thinking that it's good to put kids in these bouncers or in the high chairs, or they're spending a lot of time in the car seats or they've got these other gadgets, they've got the baby carriers, for example.

And those are things that are actually inhibiting the natural movements that babies need to do to organize their nervous system so that it's developed in a way that it can sense that information.

And so the result, the outcome, Alex, is that the nervous system, the brainstem, the thalamus, the limbic system is constantly getting the message from the periphery that we don't know if we're safe because we can't really sense where our body is in space. We can't really feel our hips and the stability of our hips because we didn't get enough of that type of specific hip movement that we should have gotten as babies. Or we can't fill our legs as much because we didn't get that specific type of tummy time crawling. We didn't get enough of that.

And so there's all of the sensory information, the proprioception, the touch, all of these things that inform our nervous system that, Alex, you are safe, all is well, your body is solid, you're grounded, you can pay attention to your studies, you can pay attention to Dr Aimie rambling on about the biology of trauma. All is good.

And without that, there's this constant baseline of anxiety that a person doesn't even notice because it's just unconscious and it's become what they think is their personality. And yet so much of this is neurodevelopment.

So in my attachment and neurodevelopment module for my certification course, I actually have them get on the floor, get on their tummy and see how they would move themselves on their tummy, keeping their belly button on the floor. And that tells us if there was a gap or an injury in early development, 0 to 6 months of life that will result in anxiety throughout their lifetime if they don't go back and fix that gap.

It's quite fascinating.

Alex Howard

It's amazing because I think one of the things people sometimes will say is, I just feel like I've been anxious my whole life. I feel like I've just been...

Dr Aimie Apigian

And they have been.

Alex Howard

And there's a point I was going to make is that, often they will be dismissed by professionals that will say, that's just your disordered thinking or that's just you who's got an identity which is unhelpful.

And what you're really saying is that there are certain developmental stages and milestones that we need to go through, and there are certain needs of things that need to happen. And if that isn't met the way it's needed to, one of the outcomes of that is anxiety.

[00:18:46] Dr Aimie Apigian

Absolutely. There can be a pons level, so we talked about a pons level gap. An injury would be something like there was abuse or neglect. And for many people, that was not the case, but they can still have a gap if they didn't meet, if they weren't given the time, the co-regulation, or the movement that they were needing to do. And they have a pons level gap or they can have a midbrain level gap.

And that goes right along with the cerebellum. The cerebellum is actually both involved in movement, but also in emotions. And so here you have this region of the brain that if it's not organized in its development, it will result in anxiety and be discoordinated in their movements.

It's quite fascinating how the brain and brainstem and nervous system organization really ties into this development of anxiety. And then what happens as a result of that, Alex, is that, of course, they have this baseline anxiety which puts them at a higher baseline for then just going into overwhelm, because they're constantly in anxiety.

So they're draining nutrients from their cells. By the time they reach adulthood, of course they're depleted in probably magnesium and zinc and some of these other nutrients that unfortunately contribute to even more anxiety.

And eventually their system just gives up, gives in and they're in the fatigue and they're in more of a collapse in that chronic freeze response because it's simply been too long of living with this baseline anxiety.

Alex Howard

And I think what you just made is a really important point that there are experiences that have that impact upon our physiology. So it's environmental or it's experiences that impact on our body.

But then over time there are physiological changes, which then mean that our body impacts upon our minds and our emotions. So in a sense, there's this vicious circle that we then find ourselves in.

Dr Aimie Apigian

Exactly. And this vicious cycle is where many people get stuck because how do you get out of it when both your physiology and your nervous system patterns, your life experiences are both leading you down this path of anxiety?

Alex Howard

Can you say a little bit about, we talked earlier on about the impact upon the nervous system, you just mentioned, for example, the impacts on magnesium. Can you tell a bit about some of the different bodily systems or some of the different bodily functions, that when we live in this heightened state through childhood, how that's then effectively changing our biology?

Dr Aimie Apigian

It's amazing. It's quite incredible when you see the effect that that has on what ultimately will become all of the systems of the body.

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I'm even thinking of the cardiovascular system, and many people associate anxiety with high blood pressure. And that's true. Anxiety, chronic stress will definitely result in, actually the tone of your arteries changing, to the point where these are chronic changes.

It's not just like, oh, go do some stress management, go on a vacation, and your blood pressure will come down now. No, it's like you're on these medications, you've got this high blood pressure because these are now chronic changes that have happened to your cardiovascular system.

But then there's the immune system, and the immune system is also greatly impacted by anxiety, especially childhood anxiety. And this is where we've actually been able to identify even some biochemical imbalances that are associated with autoimmune later in life.

And I want to bring up the pyroluria. So the pyrrole disorder, and that's something that is genetic but is also worsened or exacerbated in times of stress.

And pyroluria is a really simple process, but yet has significant consequences on the nervous system. And it's just simply that your body has a hard time breaking down the iron ring in your red blood cells that are recycled every three days. And so over time, that builds up, and that makes a difference.

And so when you're first born, you're born with this huge pool of a savings account when it comes to nutrients because you've literally just stolen everything from your mom.

Alex Howard

That's probably how she felt as well.

Dr Aimie Apigian

That's exactly how she feels.

Your savings account is just bursting at the seams with all of these nutrients. But then with time, if you have something like pyroluria, then the specific nutrients that are most impacted are zinc and vitamin B6. And those nutrients in particular are essential for the nervous system and even just the nervous system in its development, but even just the stability of the nervous system.

And so people with pyroluria do tend to have a lot of anxiety along with other things, like they tend to be more sensitive to things, sensitive to chemicals, sensitive to foods, perhaps. More sensitive to bright lights, more sensitive to sounds. Even tend to be more sensitive to the sun in terms of even burning.

So it's quite interesting, the impact that a functional zinc and B6 deficiency will have on the nervous system. But these people tend to be very anxious. And if they just have this, the kids usually struggle with schoolwork, not because they're dumb, they are very smart, but they just don't have the focus because their body is in constant anxiety.

And so we see this starting to develop around, I would say, 9 to 18 months of development, which is when your midbrain is developing. And your midbrain is that section in your brainstem that is responsible for all of the sensory input and organizing that system, so that it's efficient, it's smooth, and it's going up into the thalamus.

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And so we see, even with those with pyroluria, that again, it's part of the whole sensory overwhelm that they experience.

One more thing, though that happens with this one in particular, is that it impacts the levels, the activity, of three brain chemicals, three neurotransmitters that are essential. Serotonin, and so it causes lower activity of serotonin, which is going to result in anxiety.

It causes lower activity level of dopamine, which is going to impact that child's ability to form a healthy, secure attachment, because you have to have dopamine and oxytocin for a healthy, secure attachment.

And it also causes lower levels of GABA. And GABA is really the calming neurotransmitter for the whole nervous system. And so people can have these tight muscles, their muscles can get tight because they're low in GABA and they feel anxious.

And so here we just have one simple condition that's one example of many, but that it has all of these impacts on the nervous system and all of these other systems that are going to result in this baseline anxiety for people who have this condition.

Alex Howard

Fascinating.

Moving our attention a little bit to how we address some of these things, because I think first, just to summarize what you've been saying, that there are these different life experiences we have, but they are directly impacting on our biology at the time, but they're also impacting upon our biology through life.

And there's different ways, you mentioned, for example, the immune system, we talk about the nervous system, there's this impact.

When someone comes to see you and you start to map and figure out the different ways that, in a sense, their biology has been shaped and impacted, where do you then go? So then starting to map a path to healing and change, how do you approach that?

Dr Aimie Apigian

So it's a beautiful thing to be able to understand what the nervous system needs to heal and be able to pull in all the different tools, all of the different pieces to the puzzle.

And so this is where I am very much an advocate for finding all of the pieces that that person needs. And it's going to be multiple pieces, Alex. It's never going to be, oh, just go do that one thing. Just go do that one thing or take that one psychedelic and you'll be fixed, you'll be cured.

Alex Howard

Then there wouldn't be a conference, because it would just be like a video.

[00:27:39] Dr Aimie Apigian

Exactly, just one video. Go do that and you're done.

The nervous system is not that way. And so the reason why it got into this place in the first place, the reason why it got stuck was because there were multiple things that contributed to that.

And so the way out is being able to address multiple things. And so for you and the work that you're doing, it's so important to be bringing in all of those types of pieces. So I bring in somatic piece as well. I bring in parts work and internal family systems because I have never seen someone successfully move out of trauma and anxiety without addressing and bringing in those pieces.

But it's not only going to be those pieces because we do have your biology. And if you have low zinc, if you have low magnesium, if you have inflammation, if you've had any kind of a head injury in the past where you have neuroinflammation, your nervous system is going to be stuck, no matter how much therapy somatic work, parts work, you do. No matter how many other supplements you take. Your cells are still going to be stuck until we can bring in that piece.

So this is where really good history and me understanding what have been your life experiences, Alex. Have you ever had a hard knock to your head? Tell me about your birth story, tell me about your in utero experience, because that's how we figure out what are all of the different pieces are.

For many, I mentioned the neurodevelopment piece, and many of my practitioners who are in my module are getting on the floor and doing this tummy time crawl, and they are reorganizing their neurodevelopment.

I have 70 year olds on the floor, redoing pieces of their neurodevelopment that they may have missed. And the results are astounding because again, only do that and yes, you may see some improvement, but you're not going to get the full potential of what your healing journey could look like unless we're doing all of these different pieces and identifying all of the different contributing factors that got your nervous system this far in anxiety, this far in trauma and stuck there.

And so I love being able to work with the nervous system. I love finding, for most people who are adults, most people by this time also have an energy problem. And I talk so much about in my certification course, have a whole module on trauma is an energy problem. Let's give love to our mitochondria. Because until we can bring energy into the system, we're going to stay stuck in the freeze response.

The freeze response needs two things, time and energy, and then it'll come out, and that's where it comes out into the anxiety. And the anxiety needs safety and support and all of these other things. But if a person is in the chronic freeze, we have to bring in energy and we have to identify what are the energy drainers so that we can bring in energy to your nervous system, and it can even have the energy to start that process and come out of the freeze response.

So this is where, I mean, I love working with the biology and the physiology part because I can so support someone on their healing journey with the therapies that they are doing and act synergistically with that to really, again be able to accelerate their healing journey because we're addressing all of these pieces at the same time.

[00:31:11] Alex Howard

Of course, one of the challenges can sometimes be that someone recognizes they need to address all of these pieces, but it feels overwhelming.

And I'm curious as to how you help people prioritize. If there's recognition that I need to do somatic based work, I need to work on figuring out what nutrients I need. How do you help people organize and sequence all of that information?

Dr Aimie Apigian

Yes, I start everybody with somatic work. And so that's why I have my 21 day journey. That is a journey that I still lead myself, into their nervous system because I need them to have the basic foundational tools to understand their own nervous system, track their nervous system, know when they're in anxiety, and be able to shift out of that.

So I don't start with this, come see me back in 6 months. I start with 21 days of different somatic exercises that I've pulled from somatic experiencing, neuroaffective touch, because I really need to touch some on that attachment piece, and then some other modalities that I've been through over the years that are really fun in being able to give the body a sense of safety.

I'm thinking of one exercise that I actually got from a performing actor, and I saw him do this, and I'm like, oh my goodness, that is some of the best somatic work I've ever seen and I'm using that one. And I call it marking my territory. And so I teach that in my 21 day journey.

And I remember, it was Shannon. And Shannon is one of the members that came through that. And she had always had anxiety around bedtime and so had trouble falling asleep. And so she was always exhausted. And she went through the 21 day journey, did this marking my territory exercise in her bedroom, around her bed, and she was able to sleep.

Now, obviously, we have other work to do, because that's just an indication that her nervous system is in sympathetic and we've got some work to do. But some of these very simple somatic exercises can make a big difference. You know this. And just bringing down the system.

So that's a piece, but it's not going to be able to bring it down all the way. And so that's where I then come in and I say, you know what? There are the most common biological nutrient deficiencies and biochemical imbalances that I see in people with these kinds of trauma patterns. Let's start there.

And so that's where I start everybody. I start them with the most common things that I see almost across the board, and they're low hanging fruit and they make such a difference for the nervous system. And so that's where I start everybody then on their biology, unless there's some very clear history that makes me think that they would benefit from something else.

But then we just start peeling back the layers. And what happens is that as we address this piece, as we address the zinc or the B6 or the magnesium or the methylation, that's a huge topic around anxiety. Copper, copper excess would be another huge one. As we start to address this, they're noticing changes in their own personal somatic work, and they're noticing that their system is more available for the work, that they're able to achieve longer stays in parasympathetic than before.

That's bringing up new things for them because now that their system is available, well, now they're having more memories about this. Now they're having more, it's actually bringing to the surface the

issues that their body is now ready to work on as we're working on the biology and making it have more capacity for the work.

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And so that's where I start everybody. I start everybody with some basic somatic work, and then the most common biochemical imbalances that I see across the board, and then we go from there.

Alex Howard

I think what's also interesting in what you're saying is, sometimes people are looking for us, we touched on it briefly earlier. What's the one thing that I need to do that's going to fix it?

And also people are thinking, well, I've tried this and I've tried that. And I need to have some highly sophisticated personalized map, which they may at some point need, but what you're also saying is that there's a lot of low hanging fruit in those fundamentals. And going, I need to just look at am I in my body and what's my relationship with my body? Does my body have the basic nutritional support that it needs to function on a basic level? And actually that alone can have a meaningful impact.

Dr Aimie Apigian

When you think of a car that's broken down, the first thing that we're going to do is we're going to put gas in the tank. Once there's gas in the tank, then we can look at some of the more details and look under the hood and see if there's anything else going on. But first of all, if it's not running, we're just going to check the tank.

So you're right, there are these very low hanging fruit that especially, the nervous system is so predictable in terms of when it's been running on chronic stress and chronic anxiety, the findings that are there, that when we bring those in, make a big difference, and then we have even the energy and the capacity to go find the rest of the pieces that they will need for their personalized journey after that.

Alex Howard

So somebody who's watching this that's perhaps making some sense of their experience in a new way and particularly recognizing the impact of these childhood experiences and how their biology has been programmed and set up. What's a few simple things that they can start with for themselves now? What are some easy, simple starting points?

Dr Aimie Apigian

Easy, simple starting points would be to find a few basic somatic exercises that seem to make a difference for your system. For those going through my 21 day journey, they usually land on the VOO exercise. So the VOO exercise is something that is very simple, very quick, and yet can make a big difference for many people.

The push away exercise, find a few somatic based exercises that actually help you shift into a more safe feeling. We're not going to go for 100%. That would be reaching for perfectionism before we're ready for that. But I just want you to be able to go to a safer place in your body, a calmer place in your body, and that would be a good place to start for that.

[00:37:49]

And then go find some testing. And I would strongly recommend you get tested for three things, your methylation status, not your genetics, but your overall methylation status, your pyroluria, and then your copper excess zinc deficiency. So your copper and zinc ratio. Those are the three things that I would be able to highly recommend to anybody, everybody who is challenged with anxiety, because those are very low hanging fruit for biochemical imbalances.

Alex Howard

And just to point out, Dr Kara Fitzgerald is talking about methylation. So if people want to have a clue of where to go on that, that's a good place.

What's the potential for healing? I think it's important when we talk about the biology of trauma and anxiety, people recognize, well, I've had some of those experiences. And a lot of what Dr Aimie is describing is like, I feel that in my body, and, okay, we're talking about pathways to heal, but if it's been in my body for decades, is it always going to be that way? Or what's the actual potential for this to transform and change?

Dr Aimie Apigian

I don't think that we have even tapped into the true potential of healing yet, Alex. And this is where I get really excited, because the more tools that we have developed, and now being able to bring in this biology piece for people, it's going to allow a much greater potential than what they have experienced and as a collective field we have experienced before.

I see so much potential and at the same time, I also see that the healing journey never ends. So I imagine it as a spiral staircase. And, hey, we're starting at the bottom, and that's fine. And we're going to do this piece and look at where we are now compared to where we started.

Look at what we're able to manage in our life. Look at how we're able to show up for my work or these meetings. I used to show up and be anxious or I used to mentally check out or come home and emotionally eat. Look at where I am now compared to where I was before, but look at where I could go.

All right, let me keep going and let me continue. There's no end to what we can do to support our biology in a very intentional way for our nervous system. And so I think that we have not known how high we can reach on that spiral staircase. And I don't even know if we know where the very top of that spiral staircase is yet.

Alex Howard

I love that. Often the answer people will give is a testimony or a case study. I love the fact that what you're saying is, because I feel the same, we as professionals and we as an industry have so much to learn, but that also means there's so much more potential of what can happen in people's healing.

[00:40:51] Dr Aimie Apigian

Exactly. For the work that you do, Alex, and being able to see the impact that you're having to transform lives and just the excitement, the motivation that that brings you, because I know it brings me the same, and it's like the potential is huge and I think limitless.

Alex Howard

That's beautiful.

For people that want to find out more about you and your work, where's the best place to go and what's some of what they can find?

Dr Aimie Apigian

They can find me over at <u>traumahealingaccelerated.com</u>. They can find me over at <u>Biology of Trauma</u>. I've got my Biology of Trauma summit where, of course, you did your wonderful interview with me for that summit. So they should definitely come out and check that out as well. Lots of great speakers for that.

But then also being able to learn some of these biochemical imbalances and I have a download that they can look at that and learn more about these three low hanging fruit specifically, and even figure out how they would even get tested for that.

Alex Howard

Fantastic. It's always a joy. I always enjoy our time together. Thank you so much for your time today.

Dr Aimie Apigian

Likewise, Alex. Thank you so much for what you're doing here with the anxiety summit.

Alex Howard

Thank you.