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SLEEP
SUPER CONFERENCE

Improving pain and sleep

Guest: Dr David Hanscom

[00:00:09] Meagen Gibson

Hello, and welcome to this interview. I'm Meagen Gibson, cohost of the Sleep Super Conference.

Today I'm speaking with Dr David Hanscom, whose orthopedic spine surgery practice focused on patients with failed back surgeries. He quit his practice in Seattle, Washington, to present his insights into solving chronic pain which evolved from his own battle with it.

His book, *Back in Control*, is associated with an action plan which guides patients in solving mental and physical pain.

Dr David Hanscom, thank you so much for being with us today.

Dr David Hanscom

Yeah, thank you. I always enjoy being on your show.

Meagen Gibson

So I want to talk to you about chronic pain. I know that the breadth of your experience and research goes beyond pain, but that sleep and pain are so intricately combined.

So I definitely want to talk to you about what the basis of chronic disease is and how that impacts people's ability to rest and sleep.

Dr David Hanscom

Well, as we talked about before, the program is that the concepts about chronic disease go really deep, but in a way that's simple is that basic science research, in a bunch of different fields, cell biology, immunology, metabolism, et cetera, are all point to the same thing, that there's a common link for every chronic disease.

So it's basically a sustained elevation to inflammatory markers, and sustained exposure to increase the metabolism, which is fuel consumption. So when your body is in fight or flight for a prolonged period of time, it's like driving your car down the freeway in second gear. It is going to break down.

And so, for instance, we know one of the biggest factors in creating chronic disease is chronic stress. Not acute stress, but chronic stress, this unrelenting, day after day, where your body can't regenerate.

So it turned out, in retrospect, that, I'm a surgeon, I thought everything was structural. It turned out the vast majority of symptoms, probably 90% plus, are based on the body's physiology. When I say

physiology, it's how the body functions. Your temperature, blood pressure, heart rate, kidney balance, all sorts of things are the physiology, or how your body functions.

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So it turns out that when you're in fight or flight, humans have a term for that physiological state called anxiety. So it turns out anxiety is physiological, not psychological. It's a result of stress, not the cause. It's a million times stronger than your conscious brain, and you can't control it.

So anxiety and anger are inflammatory states. They are not subject to rational control. They are a million times stronger than your conscious brain. So there are a bunch of ways of lowering inflammatory markers, with sleep probably being number one. And why is that?

So let me just talk about the evidence about why sleep is such a critical aspect. So, for instance, there's a study out of Israel done about six years ago that showed that lack of sleep actually caused chronic back pain. So I was not aware of that in my clinical practice. And so I go, huh.

But what was really interesting, I always thought that chronic pain caused lack of sleep and of course, there's some data on that also, but in this very well done study, they did not find that to be true. They found out that lack of sleep causes chronic pain, and chronic pain was not what caused lack of sleep.

So what causes lack of sleep is a fired up nervous system, fired up metabolism. Your whole body is on fire. So when your body is activated, how can you sleep? Right? So the lack of sleep is an activated total body response to stress. And when you can't turn it off at night, your body stays fired up, you stay on high alert, and you can't sleep.

So then they've done studies showing that lack of sleep, one night of bad sleep, actually increases your pain 50% the next day. Just one night of sleep. Then they found out that lack of sleep is a higher predictor of disability than the pain. So as a surgeon I'm going, well, the pain is bad, disables you, you can't work.

There's actually a higher correlation with lack of sleep than there actually is with the pain. So with lack of sleep, a bunch of things happen. So at night time, your body needs what's called the glymphatic system. So it's like lymphatic system with a g.

And what the lymph system does, it's like your, how do I say, it's like a waste bag, I won't say garbage can because it's not garbage, but your waste products are cleaned out through the lymph system, which is a separate system, different than your bloodstream. So your bloodstream is exchanging oxygen, transporting inflammatory cells. But it's the lymph system that cleans the house.

So just a few years ago, they discovered an equivalent in the brain called the glymphatic system that happens mostly at night. So why this is so critical is that for human beings, about 20% to 25% of our entire metabolic energy is spent running our brains, whereas most mammals it's between 4 to 8%.

So, for instance, in a chess match, they've seen chess players lose 15 pounds during a chess match. They think that 50% of the body's metabolic energy is actually in the brain during a chess match. So it's a tremendous energy requirement of the brain in general.

And then sleep is critical, actually to clean up the waste products. So half your brain is neurons and half your brain is what's called glial cells. They're little cells that provide structure, framework. This

also is where the glymphatic system goes to work. They also have inflammatory receptors in this glial system. So the brain is actually an extension of the immune system.

[00:05:47] Meagen Gibson

Relatively new information, right? We used to think that, at least medically, we used to think that the brain was disconnected from the body and didn't have its own immune system when now we know a lot different, right?

Dr David Hanscom

Well, remember, the brain evolved late, so it's completely entwined with every cell in your body. And see, as humans and mammals specialize and develop different organ systems, then they had to communicate over long distances, hence neurons.

Then as humans develop consciousness, they have what's called the neocortex, which other mammals don't have. But if you look at a chimpanzee or an orangutan or an ape or a gorilla, they're actually 99.9% the same genetic material of humans. And some have a partial neocortex and they can actually think pretty clearly. What they don't have is language.

So what gives humans the differentiation and gives us a competitive advantage, by the way, is language. So we can cooperate. We can survive better. And so humans, for millions of years and, again, my source is the book *Sapiens*, I'm not an expert on anthropology, but his point being that humans consumed about 20% to 25% of the metabolic energy just around the brain, whereas other animals had only 48%.

So from a food, physical, survival standpoint, we were at the bottom of the food chain for millions of years. So when we learned to cooperate about 1000 years ago with language, we started actually, unfortunately, destroying a lot of other species and went to the top of the food chain.

So anyway, the neocortex is unusual. Humans are the only species that have it. It creates a tremendous amount of energy. It's really critical to have sleep in order to maintain your brain's functions.

Meagen Gibson

All right. Gosh, you said a lot. I'm taking a deep breath on behalf of everybody that's watching. All right.

Dr David Hanscom

I'm going to try to keep it simple. I'm not doing very well.

Meagen Gibson

No, it's not that you needed to keep it simple because this is all fascinating and I'm keeping up. I just want to circle back to a couple of things that you said because it's fascinating.

And so obviously, let's go back to inflammation. I think you said anxiety is more of a response to stress and is the symptom of stress. We've got all of these thought patterns that are activated and get us in an aroused state. And who's going to be able to rest when you're aroused?

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So, where do we go from there? We have that piece of knowledge. Now how do we transition arousal and agitation and immune response from all of that stress and arousal and agitation? Since we're not in physical control of it, as you said, how do we then transition that into a more restful state?

Dr David Hanscom

It was a friend of mine, Bruce Lipton, who wrote a book called *The Biology of Belief*. And his point is that we have no control. We have no control over our survival responses. So again, this activated threat response and hyperactivated threat response that we call anger, anger and anxiety are the same thing, we have no control over.

So to try to change those and control those, you must be talking to the hard drive of your computer. So it's very bidirectional. So, for instance, an activated nervous system causes lack of sleep, which is inflammatory. Then your lack of sleep is inflammatory, which causes an activated nervous system.

So everything we talked about, every part of the healing journey, is bidirectional. So what I want to talk about is how do you heal, let me just jump back just a little bit in the whole story about how the whole DOC journey evolved.

So in my process, it started with sleep. So I was at Sun Valley in Idaho. I went from being a major tertiary spine surgeon to being in a small private practice in a small town. So I basically became not only a spine surgeon, but also became a primary care physician as a spine physician, but also had done two years of trauma medicine so I knew a lot about primary care. But I took a surgeon's approach to it. That was the difference.

So I had read a book that a person gave me in Sun Valley called *The Promise of Sleep,* written by Dr William C Dement, who started the whole process in the 60s. His point being that only 5% of physicians actually address sleep issues.

Now, I think the number is better now, but probably not a lot better. So we have all these symptoms created by lack of sleep, including chronic pain. And I would ask the audience, how many of your physicians have actually asked you, how are you sleeping?

Simple question. It is always solvable, believe it or not. It's a different topic we'll talk about in a second. So I said, okay, I can do that. So I took a surgeon's approach to sleep. I did sleep hygiene. I had to read some books to calm down. Mindfulness. Relaxation.

And then the thing that really started the process was this expressive writing. Because you write down your thoughts, and you can't control your thoughts, but you can separate from them.

So it turns out, I didn't know this at the time, that expressive writing actually helps you induce sleep. It doesn't keep you asleep. The research shows it helps you get to sleep. It doesn't necessarily keep you asleep, but it is a tool.

So between what we call sleep hygiene, getting people to relax, not drinking caffeine late in the day, not over exercising et cetera, there's a bunch of sleep hygiene rules that we started putting into place. And then if you weren't sleeping within two to four weeks, I would put them on drugs.

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So my goal is in six or eight weeks, everybody was sleeping. Now what happened, and again, I was not expecting this, I was just trying to manage their pain, manage who they were, about 20% of people just went to pain free. Just with the sleep. I'm going, huh. So that caught my attention.

So actually, it turned out that was the beginning of the entire what we call the DOC journey, the direct your own care journey. So it turns out that there's a bunch of tools you can use to get sleep, but unless you can actually consistently get an adequate night's sleep, you're not going to heal. You can't do it.

So then, I don't want to rant too much here, but I'll just vent for a second. We're doing major, huge, damaging, risky spine surgeons on people. They're getting bigger and bigger. We're seeing a higher and higher failure rate. And I still don't know of any surgeons, or hardly any surgeons, that are saying, are you sleeping?

So why would I do a ten hour operation on you when the first thing I need to do is just get you to sleep? So even if you do the surgery, we know that the surgical outcomes are optimized dramatically with adequate sleep. So back to my evolution of the process of the DOC journey. Sleep is number one. It's still number one.

Now, when I say number one, expressive writing is the number one tool. Active meditation is a very high level tool. Another tool is never to discuss your pain. No complaining. No talking about your healthcare. So what you're doing, you're calming the input down.

So between not discussing your pain, not discussing healthcare, expressive writing, relaxation, plus sleep hygiene, that's the start of the DOC journey. So what I like to propose is the model that we now call dynamic healing.

So every living creature processes their environment and stays alive. I'm sorry, every creature stays alive by interpreting their environment and sending out signals to the bodies to act accordingly.

So if you see a dog rushing at you, you're going to run away. Your body says run, so you run. But it also happens chemically. If you have a bacteria invading your body, your body fires up and fights it off. So, the body is always looking for danger, always putting up defenses.

So we call it the input, or your stresses. Then you have your actual nervous system, the brain, that interprets the signals. Then it sends out signals to your body, that's either fight or flight or safety. We call that the physiology.

So, the essence of chronic disease in every realm is sustained exposure to fight or flight physiology. Again, we call that anxiety. But it's not anxiety. It's not the cause of the threat, it's the result.

So there's ways of directly dropping your physiology from fight or flight into safety. And what you're trying to do is stimulate what's called the vagus nerve. It's a parasympathetic nervous system. It's highly anti inflammatory.

So things like slow breathing, breath work, humming, for instance, stimulates the 7th cranial nerve, which stimulates the 10th nerve. Certain pitches of music stimulates your 8th cranial nerve, or your auditory nerve, which calms things down.

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Even your washcloth on your forehead, or rubbing your forehead, stimulates the 5th cranial nerve, which stimulates the vagus nerve. So those are anti-inflammatory interventions that just directly drop it down right now. So that's the output.

Now with the nervous system, you have exercise. So you want to increase the resilience of the nervous system, so that's diet, exercise and sleep. So again, sleep by itself doesn't usually solve the problem but it's one of those critical steps.

So then the final thing is if you're going to do trauma therapy, if you need trauma therapy, which a lot of people do, again you're increasing the resilience of the nervous system. So again you have the output in the nervous system, then the input is really critical.

So if you're talking about your pain, complaining, gossiping, giving advice, being critical, your body is fired up. So that's the cardinal role. No complaining. Any realm. Remember this is mental and physical pain. So no complaining.

So expressive writing separates you from your thoughts. Again, changes the input. Cognitive behavioral therapy allows you to recognize your thinking patterns and change those, so we can change the input. But the biggest one is anger. Forgiveness.

So the way the human brain works is that 90% of people in chronic pain are still angry at the person or situation that caused the problem in the first place. But guess who they are the most angry at? Themselves.

So it doesn't help you if you're angry at yourself, you're in fight or flight all the time. So it always turns out that some level of forgiveness, I'm going to call it anger processing, I don't like the word forgiveness anymore, it's too big a word, but some form of anger processing allows you to dramatically drop down everything.

So again, lack of sleep calms things down, allows you to lower the information so you are less reactive. Allows you to sleep.

Then the other thing is as far as the input allows things to calm down. So it's very back and forth all the time. So again, dynamic healing. When your stresses, what we call Allostatic load, exceed your coping capacity, you go under fight or flight.

Now, humans have another problem that we may talk about in another day is that thoughts have been documented to be as inflammatory, I'm sorry, unpleasant thoughts are as much of a threat as a physical threat.

They share the same circuits in the brain, they have the same physiological response. And we cannot escape our thoughts. And it turns out that suppressed thoughts are actually more of a threat than expressed thoughts.

So suppressing thoughts actually causes shrinkage of your brain. It shrinks the memory center of your brain called the hippocampus. So when you express the thoughts or repress the thoughts, it's a problem.

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So, for instance, what the expressive writing seems to do is simply separate you from your thoughts. Just an exercise. That's why it is the one necessary starting point in the DOC journey or a similar healing journey.

So again, human consciousness, okay, let me just check this out just for a second so we can think about this more clearly. So, unpleasant thoughts are your psyche. So, they are sensory input that's unpleasant. Your emotions is what you feel. Your emotions is what you feel with your physiology.

So your unpleasant thoughts are the input, your unpleasant emotions are the output. You can't control your thoughts, but you can separate from them. You can't control your anxiety and reaction, but you can change your physiology.

In other words, there's ways of calming things down. You can change the input. You can directly, well I say you can't control your physiology, I mean, you can by stimulating the vagus nerve, but you can't do it...

Meagen Gibson

There's things that you can interrupt maybe?

Dr David Hanscom

But see, what doesn't work is mind over matter because it's a million to one ratio. So mind over matter doesn't work. Positive thinking doesn't work. It's a way of suppressing.

So anyway, I don't know how much detail I want to go into to the whole project, but the idea is that sleep is in the middle, right there increases the resiliency of the nervous system. So in the dynamic healing model, you're working on the resiliency of the nervous system.

And that's where sleep comes into play. And it's a big one. Sleep is a huge factor in solving, again, not just chronic pain. You remember, mental pain is a bigger problem than physical pain. Every chronic disease is affected by lack of sleep. Every one of them.

Meagen Gibson

And they're all exacerbated, right, in severity and I think a lot of people think of it in the reverse order. So I really appreciate that you shared the data with us, that it's actually the other way around.

I think most people don't notice they're not sleeping well until all of these other things are getting out of control. But it's in fact the sleep lack and building of sleep loss that has brought it to their attention and made it severe enough.

Whether it's mental illness or physical limitations or pain and things like that, it always ends up coming to a head with a lack of sleep. But in fact, the sleep has been, because there's different types of sleep and different quality of sleep and things like that.

And so even if you're sleeping 6 hours a night, if you're only getting light sleep and you're not getting all the stages of your sleep, then your quality of sleep is super low.

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People use sleep aids or they substitute alcohol or things like that in order to help them sleep. They think, I went to bed at 10:00 P.M. and I woke up at six. I don't know why I'm still tired. I don't know why I'm so fatigued. I don't know why I don't feel rested.

And all of these things play into the quality of your sleep and how well you're actually sleeping and therefore the glymphatic system, how well you're able to get all of the waste products out of your brain from processing, same with your body, all those systems that are working and harmoniously humming along without your direct control are impacted. Kind of like domino's, right?

Dr David Hanscom

Right. Well, if you think about it, as I'm listening to you speak, which I think you hit it right on the head, is that sleep is sort of a symptom. It's one of the symptoms of a fired up nervous system. Right?

So, again, that bidirectional thing where sleep is a symptom of a fired up nervous system. But yes, lack of sleep also fires up the nervous system. And that's why it's never a single approach that solves chronic pain, mental and physical. It's always bi directional.

Again, when I was in primary care, I was unapologetic. You just had to get sleep. So probably 70% of the time I used medications for six to twelve weeks to get it done. And again, I took a surgeon's approach to primary care and said, look, instead of seeing you back in a month, I'm going to see you back in five days or make a phone call.

So I'd see people every week until they were sleeping. I can't even tell you how critical that was. And then it's pretty fruitless to try to pursue other treatments if you're not sleeping.

Meagen Gibson

Well. That accountability, I bet, is really important too, right? It's hard to change. It's hard to make behavior changes and adaptations, I mean, that's the human condition, right? Most of us know the right thing to do. We just struggle to do it.

I'm currently battling against getting my phone out of my bedroom at night, and lowering my caffeine intake in the morning. And these are simple things, but it's just hard for human beings to adapt to change even when they know what they're supposed to do.

Dr David Hanscom

So this is an entire podcast on...

Meagen Gibson

So we could do another talk on that, right?

Dr David Hanscom

Well, I mean, I just wrote a blog today on diet because we know how we should eat, but why don't we always eat healthily, right? So here's the problem.

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I have a belief system about my diet. Mine is different than yours, and I follow it 80% of the time. Then the 20% of the time that I don't follow the diet, I am critical. Self critical. So being self critical is inflammatory.

Now, what happens when your body is inflamed, anxiety or anger, the blood supply of your brain shifts from the neocortex, or the thinking centers, into the survival brain. So that's why we behave in ways that are less than ideal, because we actually cannot think clearly. That make sense?

Meagen Gibson

Yeah, it does. I want you to say it again, though.

Dr David Hanscom

So when you are anxious or frustrated, it means you've been triggered. So something in the present reminded you of something in the past that was dangerous or perceived as dangerous. So you go into fight or flight.

Your blood supply shifts from your thinking centers to the survival centers, and you physiologically cannot think clearly. You cannot. It's impossible. So there's a whole way of dealing with that. And it's again the million to one ratio, mind over matter does not work. So, we're in that reactive state. You just have to intellectually say, okay, I'm not in the present moment.

So I have a person who I'll have you talk to for another podcast. He's just brilliant on this. Also a friend of mine in Australia. If you're smoking and you want to quit smoking, you know you shouldn't smoke. Why do you keep doing it? So you might quit for a week or a month. Some people do quit, of course, but it's harder to quit smoking, by the way, than it is to give up heroin. It's that an addicting a drug.

So what happens? You go off for three months, six months, maybe even a year, then you fall off the wagon, and of course, you're self critical. So what happens? We call it cognitive fatigue. You have a desire to smoke, or you have a desire to eat badly, or you have a desire to do this and this.

But again, such a massive force about anxiety and anger driving it is that you get worn out. So, the key issue is, and this is an overstated phrase, but it's actually fairly serious, you have to learn to love yourself no matter what.

Okay, so I ate well five days of the week. I ate terribly for two days. That's fine. You can't stop judging yourself, but as you become aware of judging yourself, it starts to dissolve it. So whether you follow your own internal rules or don't follow your own internal rules, it's okay either way. Does that make sense?

Meagen Gibson

Yeah, yeah it's like you just stop assigning meaning to information.

[00:24:48] Dr David Hanscom

Well, see, the problem is we keep living our lives by our self critical voice. This self critical voice is incredibly inflammatory and, of course, incredible anxiety. And so it's a whole process. Again, you can't just stop it either.

And that's where, again, I have a process called the DOC journey called Direct Your Own Care Journey. So there are seven legs. The first leg just gets you some tools to start calming down. Then the second leg helps you understand why you're doing what you're doing. The third leg is anxiety. Then, awareness. Then the fifth leg is anger.

That's where the rubber really hits the road. But you can't get to solving anger from just thinking about it. It's a whole skill set. So if you decide to do the process, I recommend strongly that you just do maybe 10 or 15 minutes a day. That's it. Because this repetition allows you to program your brain for things to become automatic.

So, again, sleep is right in section one. You have to deal with it, and you may not be successful for three to six months. I mean, you may not be sleeping as well as you would like, but you can get some initial benefits pretty well, because you have to start healing in other domains for actually sleep to become an issue.

In other words, lack of sleep is from a fired up fight or flight response. So again, there's the input nervous system and the output. All things actually contribute to a good night's sleep. So that's where it's a very dynamic process. It has been extremely consistent. The key is learning the tools and just making them automatic with repetition.

And it's been exciting to watch people's pain honestly disappear. Now, I say that tongue in cheek because if you quit practicing the tools, the pain does come back. They are permanent circuits. So again, it's a day to day process. You get very good at processing the stress, absorbing it, moving forward.

And so again, it's just been really a rewarding process to watch people heal. And as you know, I quit my practice to do this. I was so tired. I watched people being badly damaged by ineffective spine surgery and expensive, risky, totally would destroy people's lives. Then I'm watching hundreds of patients get better with essentially no resources, no risk, minimal resources, and they got so much better so quickly.

I said, I just can't do this anymore. So I quit my practice about three years ago to pursue what I could do, trying to change things. And so yeah, it's been an incredibly rewarding phase in my career.

Meagen Gibson

It sounds like it. And I think what you just said really highlights both doctors and patients, I think if I could speak for them, they want to help people, right? They want to give people a solution.

And often the process that you're talking about, as you said, is going to take weeks to months, right? And to make small incremental changes over a long time can result in a need for no major interventions as long as you keep up those practices.

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But most people, they want to help people. They want to give them a pill or they want to give them a procedure that's going to automatically eliminate the problem, when in most cases that's not necessary and, as you were speaking, can cause more damage than it does heal.

And so that's the human condition where it's such a challenge to get people to sign on to something that might take a while. I'm going to get you to sleep and I'm going to get you to sleep well, but it's going to take a while and you're going to have to do it every day. And they're like, but will it take longer than it will to take a pill?

Dr David Hanscom

Well but also in medicine, we're treating just the symptoms. Remember, you have your stresses and your nervous system. So if you come in to me with a stomach ache, I can give you medication. I'm treating just the symptoms.

But if I send you home to an abusive relationship, you have an abusive relationship, your coping skills are marginal. That's the root problem. We're not addressing the root cause. It takes a little bit of time, not a lot of time to do it.

So that's the whole dynamic healing process is addressing that root cause of the mismatch between your circumstances and your coping skills. And so that's what's been so effective about it. People heal themselves. My excitement is seeing people heal that thought they had no hope.

But once you actually change the way you process your life, it keeps growing in the direction you want it to go. You always relapse up and down on a given day or given week, but very, very few people go right back into the hole they started in. It's been very rewarding that way.

Meagen Gibson

That is rewarding. All right. So, before I let you go, we talked about a lot of things today, but I mean, the thing that stands out for me and is part of the DOC journey that you talked about, if I heard you correctly, that people could start today is that expressive journaling piece, right?

Dr David Hanscom

Right.

Meagen Gibson

And so could you describe that to us and how somebody could get started with that today?

Dr David Hanscom

So I did put together an eight page PDF that describes it in detail what to do, but the simplest form of it and, again, there's a bunch of different forms of it. There's over 1200 research papers that documents that it works, but you simply write down your thoughts and tear them up.

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And the more that the writing reflects your emotions and feelings, the more effective it is. But it doesn't have to be that way. Most of the research has been done on negative writing, where you should be writing down negative thoughts. That's a little risky. I don't encourage that. So just any writing that you want to put down on paper is fine.

And it's just an exercise. So it could be 30 seconds, it could be an hour, it doesn't really matter. You just write down your thoughts and you tear them up. Now what happens, I think, and again this is not a neuroscience explanation, but your thoughts are here and you're here.

There's now a space, you're now separated from your thoughts by vision and feel. And so that's part of the unconscious brain. So you tear them up for two reasons. One is to write with freedoms, because the crazier the thought you get on paper, the more powerful it is.

Secondly, I think it's more important that when you write, all these issues start coming up, right? They're not issues, they're just thoughts. Some people say, it's very interesting, a lot of people just don't want to tear up their thoughts.

You're not trying to get rid of them, because there's trillions of thoughts. You're just separating, it's just an exercise. But people get attached to their thoughts, right? They're just thoughts. So if you want to spend time analyzing these thoughts, where's your attention? It's on the thoughts? So I have lots of metaphors. I just got to sneak one more in.

Meagen Gibson

Yeah.

Dr David Hanscom

So, again, there's two parts to healing and they're separate skill sets, but they're linked. And you can't use one to deal with the other. So anxiety and anger, or activated threat physiology, are these massive, powerful survival responses that are gifts. Anxiety and anger are gifts.

They keep us alive. We would not be alive without anxiety and anger. So they're necessary. They're powerful. You can't control them, and you can learn how to process them. And that's a learned skill set. So the way you lower anxiety, you simply lower your threat physiology.

So then the real healing occurs. I call it moving into joy. Good food, good wine, good friends, play, spending time with your kids and family, just relaxing.

But if you're using things and activities in life to distract you from the anxiety and anger, it's a million to one mismatch. So once you learn, again this happens every day, multiple times a day, it's never one and done, so you learn how to process anxiety and anger as it comes on board, which happens every day.

You become very skilled at it, and you also become skilled about nurturing joy. So there's separate energies, but you can't use the joy to counteract these massive survival circuits. So that's really the key to the whole process.

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And that's why the DOC journey is a little different in that we understand the physiology of it. We're allowing you to separate, and then as you separate, then you can move forward. And it's very exciting to see how people move forward, including me, by the way.

I mean, I'm living a life that I never thought was possible, but I'm watching it happen over and over and over again. So it's very consistent, if you engage. You can't read a book. Get a practice.

Meagen Gibson

Yeah. And I love what you said about anxiety and anger. They are key to survival. And so just acknowledging that and, in the last couple of years, I've actually developed a gratitude practice toward both those emotions of like, thank you. I get it. You're trying to protect me. You're trying to keep me safe. Thank you. I'm good. I got it. I hear you. Message received. I am not being eaten by a saber tooth tiger. Right?

But to just acknowledge those are normal human emotions that you are meant to have in order to have protection and changing that association and the meaning that you assigned to it. Step one.

Dr David Hanscom

But it also reminds me that people in the late literature still talk about how anxiety is useful to be successful. So it's necessary to stay alive and take care of yourself. It's necessary to read the cues of danger around you, but see what happens, what happened to me and got me in trouble, I used that adrenaline drive to be, quote, successful.

But that's the problem. Because you're always adrenalized. Going back to the analogy of driving a car down the freeway in second gear, you're in overdrive. That's what makes you sick. Have you read the articles I read about how anxiety is necessary and it's okay to be anxious, et cetera?

Meagen Gibson

Yeah, I've definitely seen that.

Dr David Hanscom

Well, it's not only okay, you can't avoid it, except if you're using that energy to actually be successful, that's what wears you out. So, paradoxically, as you don't wear yourself out trying to fight anxiety and anger, you have way more energy to actually do what you want to do. But, yeah, that's that nervous drive that got me to be this major spine surgeon. That's what made me sick. Really sick.

Meagen Gibson

Yeah. Absolutely. And I think a lot of people have arrived at that place eventually with anxiety, where it feels for a while like a superpower. I've got this store of energy and focus that other people don't have. But then there's a law of diminishing returns over time.

Dr David Hanscom

Yeah, very quickly.

[00:35:09] Meagen Gibson

Very quickly, yeah. And then it's not the superpower that you thought it was.

Dr David Hanscom

Right.

Meagen Gibson

Dr David Hanscom, how can people find out more about you and the DOC journey?

Dr David Hanscom

So I have a website called www.thedocjourney.com, which stands for Direct Your Own Care. So it's thedocjourney.com, and it's a monthly subscription. And, again, I urge people to maybe spend 10 to 15 minutes a day with it.

We also have the DOC journey app which is based on our workshops, which is educational and engaging. My wife's a tap dancer who put that together. So it's very entertaining, has the cup song, juggling scarves, dancing kitties, all sorts of stuff.

But it's not meant to be light and make light of your pain, because pain is horrible, but it allows your brain to shift into a sense of play, which is safety, which is a profound shift in your body's chemistry.

So the app has been very popular and very successful also. And then I have a book called *Back in Control: A Surgeon's Roadmap Out of Chronic Pain*, which is the foundational side of knowledge.

And so, yeah, those are things that have been consistent. Part of the DOC journey course, by the way, and the app, is I do offer a separate coaching session twice a week that I run myself. It's a group of 25 to 35 people. And that's been really helpful for generalized support and education.

So, yeah, I'm just doing what I can do to try to get people better. And I get emails every week from people going, jeez. How do I say this, I've watched this happen hundreds and hundreds of times. And I just had a gentleman this week, he's an attorney, who has been working with me and the coaching group for about a year.

And I started giving up. He was very adamant that there's something wrong. The surgeon wanted to do surgery. And I don't argue with people very much. I just let it run its course. But I did encourage him to stick with the course.

And just last week, he said, look, neck pain is gone, my arm pain is gone. I'm sleeping, and my anxiety is gone. He completely transformed, and I would not have given him a shot at it a year ago. So I'm always fascinated about how deeply the healing process can go. It's exciting.

Meagen Gibson

That is exciting. I'm sure you're proud of that, too.

[00:37:20] Dr David Hanscom

It's very rewarding.

Meagen Gibson

Dr David Hanscom. Thank you so much for being with us today.

Dr David Hanscom

Thank you. Enjoyed it.