How To Balance The Vagus Nerve

Guest: Dr Eva Detko

Alex Howard: So welcome everyone to this session where I'm really happy to be talking to my friend, Dr. Eva Detko, Eva thank you for joining me.

Dr. Eva Detko: Thank you so much for having me. Very excited to be here.

Alex Howard: So in this session, we are going to be talking about the vagus nerve, which is, I think, a topic that some people will have heard of, some perhaps even through Eva's events, which has happened a few weeks previous to our event. And I think it's somewhat at the forefront of really understanding the relationship between what's happening in the mind, the emotions and the nervous system, and impacting upon the body. And we're going to come to, towards the end of the session, a very practical technique that you guys can use at home as a way of having a direct experience of working with this.

Just to give people Eva's professional bio. Dr. Eva Detko is a natural health care practitioner, author and speaker. She has studied natural medicine and the human mind for over 20 years. Dr. Eva successfully recovered from chronic fatigue and fibromyalgia and reversed Hashimoto's Thyroiditis.

She now helps others recover their health and Dr. Eva has extensive knowledge and experience in the field of human physiology, biochemistry, nutritional sciences and bioenergetics. She also uses a wide range of mind transforming modalities, including Havening techniques, which we're going to come to later, brain working recursive therapy, psychoanalysis, hypnotherapy, mindfulness, NLP and applied psychoneuroimmunology.

So Eva, I think a good starting point would just be to touch a little bit on your own health journey, which I mentioned in your professional bio. Because I think that played an important role in forming the place from which you're coming from working professionally. So just a little bit about how that started for you.

Dr. Eva Detko: Certainly we're talking about trauma in this summit and ready when it comes to trauma, I've probably had it all or near enough. And it started for me right in my mother's womb actually. We cannot underestimate how much pregnancy and birth and trauma during those very important times can impact a person's life, and how really long term. My mother's sister died when she was three months pregnant with me and my twin. And really it was the trauma of losing her sister and this is the interesting thing. That her consultant at the time, 45 years ago thought and was in fact, that's what he said, that "the outcome of the pregnancy," which was toxemia, and as a result, she lost the other baby and she nearly died at birth, I nearly died at birth, it was really quite awful and traumatic altogether.

But he was convinced back then, even though there was no talk about trauma. Imagine that 45 years ago on mainstream medicine talking about trauma, that just wasn't there. And yet he suggests that the outcome of the pregnancy was absolutely related to my mother's grief and what she went through as a result of losing her sister. So I was then born slightly prematurely as well, which didn't help, and I was quite weak emotionally and physically.

So I was already compromised because of that experience. I already had abandonment issues, which was interesting because I only got to that through my self-development and therapy work much, much later in my life. But when I was doing my development and trauma work. It actually did take me all the way to the womb.

Alex Howard: Wow.

Dr. Eva Detko: And the fact that my twin, I just felt that I had been abandoned by my twin it was really, really a strange hypnotherapy session I have to say. But all of this just kind of winds up what happens next, because as we know, if you are exposed to early life stress and any life trauma, then your nervous system gets rewired at that point. And then you actually are predisposed to subsequent trauma and you are a lot, lot less resilient to stress.

So of course, we will talk specifically how the vagus nerve plays a role in this mind body connection. The vagus nerve really is the mind body connection and so it's not really that surprising that I had this knock on effect on my physical health. But I did obviously have other trauma as a child. I had abuse in my past. I had bullying and all sorts of things like that. There was a lot more and in fact I'll tell you I've got this emotional toxicity questionnaire on my website that I incorporated, the original ACEs questionnaire, the adverse childhood experiences questionnaire that you may have talked about already.

But I have expanded that, and I think I've got about 45 questions on this questionnaire. And I was one of those people who initially would have ticked a lot of boxes. I would have answered yes to a lot of those questions. And so I sometimes get emails from people who do the questionnaire saying "I am just so overwhelmed by how many yes-es I've had." But I tell you, I was one of those people and my message here is that this absolutely can be healed. And obviously, this is the message that we want to put out throughout this summit, and there are many, many ways in which to do this.

But, yes, that did have a knock on effect on my physical health and really, not surprisingly. But again, by healing the resulting autonomic nervous system dysfunction that resulted from accumulation of all this trauma and stress, in my, sort of right at the beginning of my life and then through early years and then even my teenage years.

Through healing that dysfunction and that imbalance I recovered my health and I am doing a lot better than many people who never had any of those sort of experiences, in terms of my physical health. So we do have to hold on to this hope that things can be healed, that that is really, really important. I don't want people to look at some of the things that happened to them, reflect on them, and then feel really hopeless about it. It's possible to heal it.

Alex Howard: Yes. And I know that you healed from many different modalities. But I think part of what is important for people to hear here is that there were real physical conditions that had been impacted by psycho emotional stress.

And those physical conditions were in part healed by resolving and transforming that psycho emotional stress and trauma.

Dr. Eva Detko: Absolutely, because as we know, even when the issue begins in the mind, which for me it most certainly did. Eventually, it will break down your biochemistry and it becomes a real problem; it's not just some sort of imaginary problem.

So we then obviously have to address the body at that level, but we do have to go back to the original root cause. And for me, I know that changing my diet and eating really well, it just wasn't going to be enough. It was never going to be enough. And it wasn't, it wasn't until I really tapped into the trauma work and really started doing some major transformational work at the time with wonderful people that just came into my life at the right time, that really is what shifted me.

That was what shifted me, actually it wasn't eating better or cutting out gluten or whatever. Even though for some of those issues that people may have, they still have to do that I'm not saying they don't. Taking supplements and so on and so on, but that really wasn't what got me ultimately out of it.

Alex Howard: Yes, that makes sense. That really makes sense. And I guess this is a good place to open up this relationship between what's happening in our minds and our emotions and trauma, and how that impacts upon the physical body.

And as you mentioned, the vagus nerve really is the connection between the mind and the body. Can you say a bit more about what the vagus nerve is, where one finds it in the body and its role and just open that piece up a little bit?

Dr. Eva Detko: Sure. I think it helps, actually, to just take a little step back and do a quick overview of the nervous system. Because people hear, vagus nerve, vagus nerve, well where does this fit in with everything else in terms of our anatomy and physiology.

So our nervous system is divided into the central nervous system, which is your brain and your spinal cord and then we've got the peripheral nervous system. The peripheral really has two branches again, where we have voluntary control, so say your muscles. And then we've got your autonomic nervous system, so that involuntary all the automated processes that go on in the body that we don't have to think about.

And so the autonomic nervous system really takes care of that. And then when we look at the autonomic nervous system, that's when we branch into the sympathetic and the parasympathetic. And people may want to think about those two branches of the nervous system as the gas and the brakes pedal on the car, respectively. But obviously, there is more to it in terms of the vagus nerve. Vagus nerve is really the parasympathetic branch of the nervous system you could say. I mean, there's a lot going on in that mind body connection in the gut brain axis and it's complex. But we could, for the sake of what we're doing here,

simplifying, say that the parasympathetic nervous system is the vagus nerve. And it's the 10th cranial nerve, so it originates in the brain stem and it innovates pretty much all of the internal organs.

So we've got a connection to the lungs, to the heart, spleen, pancreas, gut and liver, gallbladder, all of that. And so just even by thinking about that, you're thinking, oh, okay, that is one nerve doing all of those different things. And you're thinking, well, that's a lot for one nerve to do, which is true. But that also makes you realize, hang on a minute. So that obviously means that if something goes wrong with this nerve, there's going to be a lot of things going wrong in all these different parts of the body. And you'd be absolutely right in thinking that.

So when we're looking at the vagus nerve, it's actually not just one nerve, so again we simplify it and we just describe it as such. And what I want to actually emphasize more in this particular event, because it's going to be important for what we're talking about later. Is the fact that we kind of have this old vagus and the new vagus.

I'll give an example, because we've got this kind of three level response system within the autonomic nervous system. And I think that's actually easier for people to get their heads around. So when everything is nice and peachy and we're just feeling generally okay, and we are not seeing any threats around us, or at least we're not perceiving any threats. Then what actually happens is, this is the new vagus, the ventral vagus complex is activated at that point and that ventral vagus is also known as our social nervous system.

So I'm referring here to the Polyvagal Theory by Stephen Proges. If your ventral vagus is healthy, which is obviously what we want. Then you find it easier to connect with the world, connect with the people around you. But not just that you actually are much better than some other people who's vagus nerve doesn't work well at judging danger appropriately and assessing facial expressions for instance. Assessing whether people are actually posing a threat to you or maybe they're not, you're actually much better at it, if your ventral vagus works well. If it doesn't, which is unfortunately an issue with a lot of people. Then you sort of lose that edge, you lose that ability to assess those things properly, so that's obviously part of the issue. And we've got this big thing in terms of safety.

So you need to feel safe in order for that social nervous system to activate and that's really important, so we're gonna go back to that little bit later as well. So then what happens, so suddenly a threat comes along and it could be anything. It could actually be a real threat or it could be perceived and I keep emphasizing that. Because a lot of the time when it comes to autonomic dysfunction, it's not so much the real threat and danger that people are in, it's the perceived stuff. But if we think that being in traffic is some sort of thing that can wind us up and immediately you get tight and or angry, or frustrated, or fearful that you're going to be late for work or whatever else might be going on. Then thinking about it, is this a real threat? Probably not, but you're nervous already, oh yeah, it activates right at that point. And if we are faced with a threat, what happens is, we're now switching to the sympathetic nervous system response and we've got the fight or flight to choose from. We can run away, we can fight it. And if we are successful at either of those things, then great. What should happen next? Okay, we thought the enemy or what we perceived to be the enemy, or we ran away from this danger, threat. Great.

So now immediately we should go back to being calm and relaxed, I'm safe again, everything is wonderful. And that is another issue, because when people have a dysregulated autonomic nervous system it's not so easy. That kind of switching between, back and forth between those two is not actually, it doesn't do it so readily and it should be. It should be okay threats gone, I'm back relaxed and whatever.

How many people would go for some sort of annoying experience and then they would dwell on it for days, sometimes weeks, and they still go back and talk about it. That's what I'm talking about, you keep activating your fight or flight. That is no longer a threat. That happened weeks ago. So when those things kind of happen over and over and over again, then we again, we slowly start to lose this ability to switch back and forth appropriately at the appropriate time.

Think about it like when you go to the gym and you work just one muscle group, let's say it's your biceps or your quads. If you know anything about fitness training you know that muscles have their opposing muscle groups, right? So if we're working biceps or working quads, we need to also work hamstrings and we need to work triceps to balance things out.

So the situation I described, if somebody just goes into this fight or flight almost constantly and can't quite get out of it. Because they keep going back to what happened or then maybe there's another perceived threat, or something that comes along and they activate again, and again, and again, and again.

It's like doing a million bicep curls and then doing nothing for your triceps. So then what is going to happen effectively, you really losing the tone in your triceps, you're losing the strength of that. So now you're in trouble because if you're going to have to do a tricep pushup, something that really requires that tricep strength, how good are you going to be at doing that? Not very.

And that's really how it works. That vagal tone, as we call it, gets worse and worse and worse. And then it activates less and less readily. And so when we really need it, it becomes a real struggle and you'll see that in people who really struggle to shake off being upset about something, which is a lot of people these days. Or shaking off any chronic negative states of fear, or anger, or even guilt, shame, stuff like that and they're constantly stewing in those states.

Alex Howard: It's like the nervous system gets locked in an on position, right?

Dr. Eva Detko: Exactly like the gas pedal, like somebody jammed this gas pedal and it's permanently on. I mean, you don't have to have a great imagination to realize that that is not a good situation to be in. And so what we also obviously should mention is that because we talked about this complete relax state. And by the way, when we're talking about this social engagement, we're talking about this nice, relaxed state of the nervous system.

This is the same as the rest, digesting, detoxifying and healing response. This is the time where the body regenerates, repairs when all the detox pathways are working, everything is working nicely and then the body can actually do and perform its functions, so that we actually stay healthy.

When we enter fight or flight, that's no longer a priority, the priority is now to get away from that danger, or to fight the dangers so the danger goes away. And then I also mentioned there is that other side to the vagus nerve and that's the old vagus, and that's the dorsal vagus complex, and that's to do with hypo metabolic states such as freeze or hibernation in animals.

And I remember we actually talked about it when we did an interview for my summit. That actually a lot of the time people who, for instance, suffer with chronic fatigue won't necessarily relate to having their foot on the gas pedal the whole time. They feel more like the body's basically shut down.

Alex Howard: Right.

Dr. Eva Detko: Yeah. And that's the analogy for any kind of chronic illness state, because it's not necessarily always that the fight or flight is being constantly activated. We may have gone past that and if we have gone past that, that's it, shut down mode, right?

Alex Howard: And I think that's often the thing that people don't realize is that they feel like, I'm so exhausted, I don't resonate with this fight or flight, I haven't got the energy for it.

And what they don't realize, as you've just said, is that it's the consequence of having been so much in that state the system can't do it anymore.

Dr. Eva Detko: Exactly, it's that other level. We've got that sort of nice and relaxed first, if danger comes, fight or flight, that should go straight away and we should go back to relaxation. Because we are designed and our nervous system is designed by evolution to be in that relaxed rest, digest, detoxify, heal mode most all the time. But obviously that is certainly not the case in the western world, that is just, who does that?

I mean, people are most of the time really activated or they're in shutdown mode, which is also not good, obviously. And so we've got that first level, which is nice and relaxed, then we've got to fight or flight. And then when that's taken too far, it's a complete overload like we're short circuiting, like bang, shut down. So that's basically how this happens. And just to stress the point of what impact that has on your physical health.

Alex Howard: That was my next question.

Dr. Eva Detko: I mean, because of the vagus nerve having so many jobs and innovating so many organs, we're talking about anything from chronic inflammation, dysregulation of heart rate and blood pressure, obviously inability to actually relax. Because when people activate, like we said, they just lose the ability to relax altogether.

Even things like glucose homeostasis because as we said, the vagus nerve supplies the pancreas as well. Liver, so we're going to have an impact on detoxification and the vagus nerve is a big component of the gut brain axis, of course. So now we're looking at anything to do with digestive issues, including things like SIBO, IBS, inflammatory bowel disease.

Both IBS, inflammatory bowel disease have been shown to improve when they use vagus nerve stimulation. So we know there's definitely involvement there and even, you know, because sometimes people will ask. So how do I know if my vagus nerve is weak or strong, how do I tell? Clue number one, if you're chronically stressed or if you've had any traumas earlier in life, early exposure to stress. And now you have issues with chronic anxieties, chronic fears, chronic guilt, chronic shame, poor relationship with yourself, toxic relationships.

If you've got all of that going on, which is what I collectively call emotional toxicity, then yes, your vagus nerve will be affected. Any of the issues that I've just mentioned, issues with liver, glucose regulation and heart problems, any sort of lung disease, the same thing and any problems with the gut, or chronic inflammation is one of the key ones.

If you have chronic inflammation that you can't shift no matter what you do, and you go from protocol to protocol, from practitioner to practitioner, you're taking all these supplements, you're putting so much effort into your dietary prescription and you're so controlled about it. And, you're really trying so hard and your chronic inflammation is not shifting.

You need to start looking at this, because the pathway, it's called the cholinergic anti-inflammatory pathway and that pathway is what's supposed to switch the inflammation off when it's no longer needed. Because obviously not all inflammation is bad.

Alex Howard: And I think what people often really fail to realize, I think that what you're so importantly pointing to here is for the body to heal, the body has to be in a healing state. And when there's that constant message that's being sent down that we're under threat, that we're in danger.

That all of these bodily functions and systems then just can't work the way that they need to.

Dr. Eva Detko: No, absolutely they can't. And obviously, chronic inflammation, as we know, is at the root of pretty much every chronic disease on this planet, right? So really, and that's the main, main component of this pathway is the vagus nerve. And if the vagus nerve works well, it will switch the inflammation off when it is no longer needed. And great, we're moving onto something else to some other processes that the body must carry out. But when he gets stuck in this chronic inflammation state, there's most definitely, that's one of the key, key signs there's a problem with the vagus nerve. A

nd may I say, a lot of practitioners still absolutely underestimate that. But another thing that I wanted to say, when people are thinking, well okay, what else could be telling me that my vagal tone is low. Vagus nerve also supplies, because it goes sort of right down from here.

So when it comes to things like difficulty swallowing, modulation of voice. So if somebody can't quite project their voice and the voice is always monotone, we know that's a vagus nerve issue. So many people say, I can't swallow very well, I choke very easily, I can't swallow big pills, I can't swallow supplements, stuff like that. That's a vagus nerve issue as well. And anything to do with depression and anxiety because it didn't stress that enough of a thought.

If you have those chronic anxiety issues, you need to be looking at improving your vagal tone because it could be making a massive, massive difference to your everyday experiences if you do that.

Alex Howard: And of course, in addition to stress, anxiety, depression, those sorts of things. Also, of course, any sort of trauma with a big T like big traumatic events, but also micro traumas like those lots of subtle small things that keep creating that sense that the nervous system needs to be on edge. That's having the same impact right?

Dr. Eva Detko: Yeah, absolutely. And you know what? What is interesting is that this is so prevalent. It's so prevalent that I often quote Dr. Dietrich Klinghardt who people may know. He specifically deals with vagus nerve toxicity, which is one of the things that can go wrong with the vagus nerve.

But he actually finds a compromised vagus nerve function in, now pay attention to people, over 95 percent of his chronically ill patients. So okay he deals mainly with chronically ill people granted. But that is the prevalence of what you see in people with chronic illness or what he sees. And I would tend to agree from my observations as well. And essentially, because we're talking about again, we're talking about autonomic nervous system dysregulation, that really, really is what we're talking about when we're talking about low vagal tone.

Alex Howard: Yes.

Dr. Eva Detko: And so, yeah. So it happens a lot.

Alex Howard: So we're going to come in a little bit to a specific technique. Havening. A way of calming this response and sort of resetting what's happening in the vagus nerve. But you've just done a big online Summit with a lot of different experts talking about different ways of impacting the vagus nerve and its function. What are some of the key lessons or top tips or pointers that you would give people from that?

Dr. Eva Detko: I think the biggest, because obviously I have been researching the vagus nerve for a while before I did the event. But really the biggest maybe surprise, if you will, to me, again, that "oh" I kind of knew that, but it's really still unbelievable. Is how many actually things can go wrong with the vagus nerve.

Alex Howard: Okay that reassuring Eva. Thank you for that.

Dr. Eva Detko: Yeah, but I will come on to good stuff as well. But really, this is why people need to understand that this is one of the reasons why the prevalence is so high.

Because it's such a busy nerve and there is a lot that can go wrong with it, and we've got things like dysfunctional breathing. You know, we were talking about earlier when we started, that when you have exposure to early stress or early trauma, your whole nervous system just gets rewired. And your nervous system goes okay, you survived this trauma, but now we need to make sure that this never, ever happens again.

So we enter that state of hypervigilance where we know the human brain scans for threats all the time anyway. That's what the reptilian brain, the brainstem does anyway. But this is like a hundred fold, it's like now we're really scanning. I mean, scanning everything, whether it's necessary or not. And so when you're in that state, when you're in that stressed state that fight or flight. What actually happens to your breathing is obviously as we know, it gets shallow. You start breathing through your mouth and what actually happens to people who have a lot of stress in their lives is that they kind of get stuck on that pattern of breathing again.

And when they get stuck on that pattern of breathing, guess what, sometimes they may be thinking, well actually, I don't really think that my life is so stressful at the moment. But guess what? Now, they already have this fixed pattern of dysfunctional breathing whereby they breathe up from up here only and they breathe through the mouth a lot.

So every time you do that, you send a message to your brain that something's off. It's not quite right because that is the way we breathe in stressful situations. So even stuff like that, even without any of the emotional toxicity that I was talking about earlier, just purely by having that dysfunctionality that has developed over time, and you know, different things can contribute. And I had that, my gymnastic teacher telling me to suck my stomach in and all of that sort of stuff.

Obviously, it may have contributed, that western craziness of don't letting your belly out and all that. But generally speaking when you have that pattern of breathing, unless you change it, which of course can be changed. You will always activate your nervous system just because of how you breathe. So isn't that surprising? Because people just don't think about that.

Alex Howard: But it's also very empowering because it's something that people can address relatively easily. And it's an accessible thing and that's where things like, we've obviously known for many years that things like restorative yoga, for example, and practices like that.

Where one learns to physically move their body differently and breathe differently and calm their system. I guess in some ways what it does is shows us things that we know were a bit more about why they were, but also points towards new discoveries and also new ways of influencing this.

Dr. Eva Detko: Yeah, absolutely, and I tell you something else. The issue with the dysfunctional breathing is that, of course, people breathe like that when they sleep.

And we just had the Sleep Summit, right? I mean, how many people have some sort of sleep dysfunction? And again, how much of it is because your body, when you're sleeping, thinks you're actually running away from danger because of how you're breathing?

I mean, that is definitely one of the factors there's obviously loads of reasons why people are not sleeping well, but that is one of the factors. And what people are reporting works really well to change that pattern is mouth taping. A lot of people say that works really brilliantly.

Alex Howard: Yeah.

Dr. Eva Detko: So if you guys are watching and you think, this might be me? Maybe it's worth a try. First of all, be extra aware of your breathing pattern and check that you're not restricted when you're trying to breathe deeply. How many people will say, "oh, okay I know I need to do deep breathing exercises'' and then they try and do it and they go, "but I can't" because everything is like, all the intercostals, the muscles, diaphragm, everything's so tight.

That they actually have to really work at it to get to a point where they can breathe easily and deeply. Because at the beginning they will feel like they're trying to take that deep breath in but it's just not happening. But again, this is just something that we need to be aware of and we need to work on. Because that could be such an absolute transformational thing to do for your mind and your body, of course, because of all these connections we're describing.

But I'll tell you another thing that was surprising to me. I interviewed Dr. Dwight Jennings and he was talking about jaw misalignments. And I had some idea that that can contribute to all sorts of issues in the body, but I didn't have a clue that it could be that impactful.

So again, something that it's not necessarily to do with mind body techniques, but, if this is something that is your problem, then potentially needs a separate look together. And of course, the different things that can go wrong that we already talked about, chronic information, dysfunctional sleep of course, and dysfunctional digestion.

But the good stuff. The good news is of course, we can do this. In fact, we can pretty much reverse dysfunctional breathing patterns. We can definitely heal trauma, we know that. And I actually had some really nice stories, people telling me when we were recording interviews. And one of them was from Misa Hopkins, who's a sound healer, an excellent sound healer. And she had a vagus nerve infection, which paralyzed her face.

Alex Howard: Wow.

Dr. Eva Detko: She initially thought that she was having a stroke. But actually what happened was, it was a vagus nerve infection. And she used her own sound healing method to heal the vagus nerve and in a few weeks it was as good as new. And yet I actually saw pictures she shared during the interview. Her face was completely sort of collapsing on one side like you would expect in a stroke patient.

So the good news with this is that even when the vagus nerve is compromised, it can heal. We can heal our nerves and the vagus nerve is no different to other nerves in that respect, even if it's affected by toxicity because obviously toxins, high affinity for nerve tissue.

Alex Howard: Yes.

Dr. Eva Detko: We know that they go together very well, or things like infections. Because there is this infection hypothesis that specifically talks about vagus nerve infection and the knock on effects for fatigue, chronic fatigue, Lyme disease and stuff like that.

So we know we can heal that. And another thing was, that even a traumatic experience can actually damage the vagus nerve and that was the experience of one of my speakers.

She was talking about, she was on a flight and she was pretty much thinking that the flight was going to crash. It was really, really a case of turbulence but it had such a traumatic impact on her that she then went home and everything in her body suddenly started going wrong. And so then eventually she figured out it was not that she needed to fix all of those separate things. It was the vagus nerve messing up with the different functions of the body.

And again she used, I think like a three, four week program where she really, really focused on vagus nerve stimulation and bringing the vagus nerve back online and bang, she fully recovered from that. So we know that it can happen and it can happen reasonably quickly. You can improve that function reasonably quickly, it's not going to take years. So I think that's the good message from what I've learned.

Alex Howard: I think that is an important message and I think also sometimes people can over complicate what they think as much as you were saying, there's many things that can go wrong. There are also some very simple fundamentals of things that can impact upon this.

I'm mindful of time, but there's a technique called Havening that maybe you want to say a little bit about and I think you may give a little bit of a flavor, an experience of working with it.

Dr. Eva Detko: Sure, absolutely. And just to close on what you just said, when people have detox issues, gut issues, inflammatory issues, this issue, that issue, heart issue. Don't try and go after all of those things separately. How about we work on this central line that goes through the body that directs, it's like an orchestra and it actually really impacts all of those organs.

How do you think about it slightly differently? Take a step back and go, what's going to happen to all these issues that I have when I fix the vagus nerve. So one of the beautiful tools that we have that definitely stimulates the vagus nerve is Havening techniques. So what is it? It's a psychosensory technique, neuroscientifically sort of driven if you will, a therapeutic modality that can definitely permanently heal trauma, anxiety, fears, phobias, things like that. But it does also have other uses and I actually like to use it with clients as well.

I obviously work with complex trauma, I use it in combination with all sorts of other tools that you mentioned at the beginning. But you can also use this technique to plant positive suggestions and ideas in your mind, which we call Affirmational Havening. And if anybody's ever done affirmations, it takes a long time to get that solidified in your mind. With this, it's gonna be so much faster if you combine the two things together.

So that's one way that you can use it for belief change, self-worth work, so when we're talking about attachment trauma with other people, excellent tools for that because we can really nurture ourselves using this technique. So I want to demonstrate this because obviously affirmational work, one thing.

But if you're struggling with fears, anxieties, you use it when you feel activated and within a couple of minutes it goes away. So it's very powerful. You can obviously work with trauma, but you can actually use it as a very, very simple self-help tool as well as then take it further and work with complex stuff with practitioners. I would say that if you have lots of complexity to your trauma, then please just at least at the beginning before you have a little bit more understanding and knowledge. Because I do believe people can do a lot of their own work, but we do need to obviously guide at the beginning with complex trauma. So how does it go and what does it do?

So the three fundamentally, three sites that we use and what we do is we call this Havening touch. We stimulate receptors on the skin to get right into the brain and that impact on the nervous system is obviously not isolated. This happens in conjunction with the release of a bunch of hormones and neurotransmitters, and it all comes beautifully together.

The brain activity lowers when you do this. So I didn't say this, but when we're talking about trauma, particularly when you're going through a severely traumatic experience, your brain wave activity shoots up and it can go as high as a 100 hertz. That's the highest activity of the brain that we can have. With this technique we're going the other way, calming the nervous system down and what that does, it actually brings the brainwave activity all the way down to delta waves, which is about 0.5 to 2 hertz, which is the same activity that you get during deep sleep.

So that's your regenerational sleep, restful deep sleep. So you can now, even if you're not sleeping well, thinking I can use this during the day to actually encourage my nervous system to calm and encourage this regeneration repair of the body to happen, even if I'm temporarily having sleep issues and having to work through this.

So here is what we do.

So three sites I said, so the first one is the face and we're stroking the face like this. Okay, or even down here is fine. You don't need to press hard or anything like that, this is just very light sort of stroking. The second one is the hands and we go like this.
It's not quite handwashing it's more like hand sweeping and then the third one is stroking your arms. Ordinarily, you hold your arms by your side but I'm going to raise my arm so you can actually see this. So we're going from top of the shoulder sweeping down to the elbow, then we pick hands up and we're sweeping back down again. So always in the downward direction, through one layer of clothing it works fine. You don't need to do it on bare arms but obviously not too many layers of clothing because you still need to be able to stimulate the receptors, like I said. So we have those three sides of stimulating the receptors, as we said.

Now, the important thing for me to say is that there is no sequence to this. So you can just do your face, or your arms, or your hands, or you can switch between them. You don't need to do it for any number of times just when you get activated, because that would be one of the times that I would really recommend that you try this. Because for example, if you have a feeling of anxiety coming up or fear or anger or anything like that, you start Havening then.

You start applying Havening touch and you just apply it continuously until the feeling subsides, which usually it doesn't take long at all, sometimes within a couple of minutes, it will be gone. Now, the one thing I want to say is that if you have a feeling that is associated with some old trauma, some complex stuff that has layers, and layers, and layers.

You may find that the feeling goes away but then maybe next week or next day, that feeling comes back. So obviously, you always need to get to your emotional root cause. But when you do that, this method definitely permanently erases any of those sorts of issues and it's a really beautiful healing modality. I've got loads of tools on my sleeve, but this is my number one go to and then I pin other things onto it. And I just sort of build it up into this rather beautiful tool incorporating all those different methods and techniques. But in this very simple version that I've shown you, it's already going to do a lot for you. If you want to read up more on this, the science of this, go to havening.org and that's going to be whitepapers and various things that you can look at there.

Alex Howard: And even if what someone's doing is, I think sometimes people can have sort of unrealistic expectations of any technique at any one moment. And if someone's like at, an 8 out of 10 of anxiety and panic, if all they do is go from 8 to 5, for example, that's still having a big impact on calming the vagus nerve and settling the system.

Dr. Eva Detko: Absolutely. And I wanted to set the expectation not for it to be an excuse, because I don't need to do that, because the technique is solid and it's absolutely wonderful, it's amazing what you can do with it.

But you are absolutely right. We do need to consider that sometimes things are complex and sometimes the circumstances are tricky. And yes, if we can make any difference and bring any calm in, even if it's not down to zero, it's still a win. Completely agree.

Alex Howard: Yeah, great. I think it's really helpful for people to have a practical tool to play with. So thank you. And for people that want to find out more about you and your work, what's the best way to do that?

Dr. Eva Detko: So the best way is through my website. I've got all sorts of resources there including the questionnaire I mentioned at the beginning if people are interested to see where they are with all this and what their score is. So it's Dr-Eva.com I am not huge on social media for the reasons that I will not be going into, but freedom of speech is sort of a key issue here. So my website is definitely the best way to connect.

Alex Howard: Awesome. Dr. Eva Detko. Thank you so much for sharing so much. I really appreciate it.

Dr. Eva Detko: Thank you so much for having me and I hope people find it useful.

Alex Howard: Thank you.