No Pain_ GOOD! With Dr Bronwen Ackermann

SPEAKERS

Bronwen Ackermann, Clark Lovell

B Bronwen Ackermann 00:00

Unfortunately, when musicians have they're struggling with some kind of issue, whether it's physical or psychological. They feel very anxious that they're the only one who has it, or if someone else finds out, they will be regarded as inferior in some ways. Musicians hide their injuries, not just from their other musicians, but often they don't go and seek help, like from a medical person.

- Clark Lovell 00:26
- Bronwen Ackermann 00:27

Some of it's been our fault, like some of it's been a fault of health professionals not standing in the musician's shoes enough. I think it's really important for me as a physiotherapist to really understand what the musician needs. One of the things we found is that musicians play to dehydrated. Why are people playing dehydrated? And a lot of it's due to rehearsal structure. I'm quite frustrated by this. When you have mental skills, it's like a whole bunch of cards in your pocket, so that Absolutely. If life throws something at you, got another card to pull out, and you can adapt. All sorts of things can give a perception of pain. It doesn't mean that you don't have a real injury. And I think that's got to be clear. It's just that many, many things can lead to pain, like fear of pain makes pain work. I think there's a fear that if you stop, oh, if I don't practice today, you know, I'll fall behind, but you can actually really set yourself back because you didn't let these relatively minor strains heal. Musicians hate this term, and I get it. You know, there's nothing mechanistic about playing an instrument, but basically what it means is that if you have more control and more strength and don't have to work as hard when you play.

Clark Lovell 02:06

Hey, welcome back to the show everybody. Welcome back to Trust the Process is the official podcast of Musician Unchained, the newest coaching program for musicians going through injury. I'm so excited to introduce today's guest today, because she is somebody who is currently helping me through my current phase of my injury. She hails from Sydney, Australia,

and is one of the foremost authorities in musicians, health, anatomy, physiology, the whole nine yards, and also teaches at the Sydney University of Sydney and does extensive work with the Sydney Symphony. And I mean her work and her reputation precedes her, so I'll just let her start talking. But thank you for being here. Dr Bronwyn Ackerman,

Bronwen Ackermann 02:47
No problem. It's a pleasure. Clark,

Clark Lovell 02:49

We were just talking before we hit record, but while I was doing some research that you know, getting ready for the interview, you were interviewed by one of our mutual friends and colleagues, Frankie Lo Surdo, and he had mentioned in passing that you had gone through an injury as a clarinetist yourself. I'm curious on how that experience, if at all influenced, like, how your career as an anatomist and physiology or physiotherapist, if that influenced it at all?

Bronwen Ackermann 03:21

Yeah I think, it was probably an influence that I wasn't so acutely aware of at the time. When I was about 14, 15, something like this. I was madly trying to get better at playing the clarinet. I'd studied guitar beforehand, and it's a very anti social instrument when you're at school and you want to be on the band like everyone else. I mean, it's fine for school retreats and around campfires and things, but not so much for, you know, like the socializing. And I played classical guitar too, which is even more anti social, but in my stage of things. So I was madly trying to learn clarinet, and I had this really weird, coincidental experience, you know, just something that happens in life, that I was at a school, at school and they said, Oh, can you blow up these balloons for function? So I spent an hour blowing up balloons, and then I thought, I better go and practice before my lesson, and during my clarinet practice, something made this really kind of pop in the back of my nose, like it was the most bizarre thing. I thought, What on earth is that? Then I tried to keep playing, but air started coming out my nose, and I just went to my lesson and said to my teacher, I don't know what's happened. You know, I heard this pop now is coming up my nose and and he was going, "Oh, don't be ridiculous. You know, you just haven't practiced enough. " And I'm like, Well, maybe, but really, there's coming up my nose when I'm and I'm playing. So I went to see my doctor, and I showed him, and he laughed and said, Well, time to give up the clarinet. And that was. Just really all I knew about it, and since then, never could blow up balloons or anything really like always using balloon pumps, or those air mattresses and things like this, always had to use a pump. And it was only really once I got into performing arts medicine that I found out what it was. But I worked in a very high level sports clinic, and quite early in my career, and we had quite a lot of performing artists coming there because they hoped that we would apply this came the same way of thinking from sports. So I think a lot of performing artists hope that you'll treat them like a fine control musical athlete kind of thing, like, look at their instrument, try and understand what they're doing when they're playing, and come up with some kind of really, I guess, individually crafted solutions that help them get back to playing. And in that experience, I was invited on my first tour with the Sydney Symphony Orchestra. And it was interesting to me because I traveled with them for a month through Europe. My job was to keep them on stage. And what was interesting to me is how

naive they were about how to use their bodies and certainly psychological processes as well. But at this case, just talking about physical stuff. And I was like, gosh, you know, I had this injury in it, for sure. It had quite an impact on me, maybe subconscious. "I can't believe you guys aren't getting protected against these kind of things, or you don't know about these things." Like, it was phenomenal to me, coming from the world of sports. So I was so fascinated. And my idea was, at that point, why aren't we doing the same? Why aren't we really studying musicians? I mean, clearly playing music is very different to sport, but the similarities are, it's a lot of practice. It's a lot of repetition in music, yeah, I mean, it seems like sports you can have really fine skills on things like how you hold a baseball, for example, combined with all the throwing and the other big more power muscle stuff, but the concepts of using muscles the right amount and the right timing in the right way kind of holds true for music too, not just for sports. So there are ways we should be looking at it. And, yeah, so I think what my injury did was really made me sympathetic to this, thinking, wow, you know, like, how come you guys are getting protected against the kind of injuries you're getting, the things I was saying, I thought, I feel like we should be able to prevent a lot of this, if, you know, if you were given the knowledge and the tools to do it. And I had started looking for information, and couldn't find anything at that time. There was nothing written about before I went on my first tour, I thought, Oh, what do physios do with musicians? And went to, you know, whatever, referencing them in Google's around them, but libraries everything thought, okay, no idea. Just take everything, keep open minded and do my best.

Clark Lovell 08:10

You know, I'm glad, I'm glad you mentioned your, your time with the athletes. You know, I started out as an athlete, before a musician, obviously, as a practicing athlete, not a researcher, but I'm curious on what you saw. What are the main differences that you saw, or have seen, between how athletes treat injury and injury prevention injury recovery versus how musicians view it?

- Bronwen Ackermann 08:35
 Yeah
- Clark Lovell 08:35

You're kind of alluding to it, but I think we can go a little, you know, a little deeper into that, because I feel like that'll be really helpful for musicians to see.

B Bronwen Ackermann 08:41

It almost comes down to one word, and that is stigma. Unfortunately, when musicians have they're struggling with some kind of issue, whether it's physical or psychological. They feel very anxious that they're the only one who has it, or if someone else finds out they'll be regarded as inferior in some way. I mean, I've heard so many times musicians say, "Oh, they they've got an elbow problem, but I always thought they had a bad bowing technique or something like this." And I think, "Wow, guys, you know you're professional musicians. None of you are bad. Let's

face it, you just do something that's highly repetitive, and sometimes it can be in combination with everyday life." You know, we've done other activities that also work the muscles, but I would say in that sense, musicians hide their injuries, not just from their other musicians, but often they don't go and seek help, like from a medical person, some of that's been our fault, like some of it's been a fault of health professionals not standing in the musician's shoes enough. I think it's really important for me as a physiotherapist to really understand what the musician needs. It's not about me coming up with a cookie cutter. "You're a trumpeterhere, do X, Y, Z" you know, we have to really understand what the person needs. In sport, having an injury, they can still sometimes hide it, particularly if you're, you know, say, in the reserve grade and want to get into the top league or something, they can hide it. But it's much more seen as a natural consequence of pushing your body to the limits, that from time to time you will have an injury, get it managed early, get rid of it, get on with your life. So to speak with the musicians, they often hide injuries. They stay there for a long time, become quite chronic, and they get much harder to get rid of injuries. The earlier you get on to them, the quicker they'll go, as a general rule.

Clark Lovell 10:45

Yeah, just, and I've, I've had this discussion with a lot of my guests, and I just, I'm fascinated by it, because it just seems like, for some reason, we as musicians don't take a ton of stock, and just this whole idea of longevity and as a principle of of our career and our health and musicianship, and also that invest that I feel like I've seen athletes just take a little bit more stock and investment in the preventative measures and thinking, okay, so yes, injury is just kind of a nature, what they call it like an occupational hazard, right, of of what I do, so I got to take the measures to take care of my body. I mean, you think of elite athletes like Michael Phelps. I've heard of him talk about sleep probably more than any person on this planet and these other types of things that have to do with our physical, mental and social well being, you know, what have you. And I just, one of the goals I have of this podcast is kind of give people a wake up call without having to go through an injury,

- B Bronwen Ackermann 11:56
 Right.
- Clark Lovell 11:57

you know, to learn these lessons. Do you feel like you've seen a starting of a shift in your in your time being a primarily a musician's health researcher, in the the stigma behind it, or we still?

Bronwen Ackermann 12:14

Yeah, so I think it's a little bit country dependent, and I think the ball is rolling in the right direction. So when I used to talk to orchestras back here, when I was super enthusiastic and kind of really wanting to change the world in a day kind of thing, and you would see the professional musicians sitting back with their arms crossed, like, man, "what's a physio telling

us what to do for and it's not like that anymore." They come up, oh, "hey, Bronny, how are you? You You know, I just want to ask you a quick question about this new shoulder rest I've got" or whatever. And they can see that you're just wanting to help them do what they do, you know, I mean, but it stretched me in ways I never thought were possible, too, like trying to figure out these issues that musicians would have without any guidelines. I mean, being an anatomist as well has been very helpful, because from first principles, we can sort of rebuild and really analyze what's going on sometimes in these complicated issues, like, for example, embouchure. But I think that that what you were talking about before with the whole picture. One thing, because I have toured by not only with Sydney Symphony, New Zealand symphony, mostly Australian Chamber Orchestra, actually touring a lot. And these musicians are incredible. What they do, you know, they're really on the road, off the plane. You have one day, and then bang, you're into concert. Night after night. It's sort of, play a gig. Sleep, get on a bus, go somewhere else. Play a gig. Sleep, get on a bus, go somewhere else. Like often time zone changes. And, you know, remember, in Australia, we don't have a time zone that's very friendly for most.

Clark Lovell 13:52

B Bronwen Ackermann 13:54

I mean, you know. So one thing I thought that was really interesting was the problem with sleep, like you just they don't get given the time to get over. Jet bag orchestras that tour, a lot like Australian chamber orchestra are quite aware of this, so they try and sleep wherever they can in the early stages of a tour. You know, if you look around a bus or plane, everyone will be there with a neck cushion, hopefully, if I've nagged them enough, zonked out just trying to keeping up sleep hours in the bank. So sleep is crucial, also regular snacks and hydration. One thing I did a big National Orchestra study here, of all the major state symphony orchestras, opera, ballet, symphony, and one of the things we found is the musicians play to dehydrated, which was a very shocking finding for the simple reason that your blood is 70% water, and blood is what brings nutrients to your muscles to give you energy. So playing dehydrated is a big no, no. One of the issues this then led me to is, why? Why are people playing dehydrated? A lot of it's due to rehearsal structure. I'm quite

Clark Lovell 15:04 Wow.

Bronwen Ackermann 15:05

frustrated by this, because it seems a simple thing. So in universities, professional orchestras, you know, over here, it's normally an hour 40 an hour and 40 minutes for the first rehearsal, then you have a break and you come back for 40 minutes, something like this, slight tweaks

and variations, but roughly this, um, and so people don't want to have to go to the bathroom during the rehearsal, so they make sure they don't drink too much water, so they don't seriously, it was,

Clark Lovell 15:33
I could see that, yeah.

Bronwen Ackermann 15:35

Yeah. And I don't know whether it's conscious or subconscious, but I ran a trial, I guess I headed up or developed a program at our National Academy of Music, our Musicians Health and Performance Support Program. And in that I got them, and they had a few very cooperative conductors too. And I said, Look, can we just try breaking it into three practice sessions instead of this mega practice and next practice. So that we, you know, you have to calculate these things quite closely, but so that we had three shorter sessions with two shorter breaks rather than really long, longer break other practice. And it's funny, I talked to the musicians afterwards, interviewed them afterwards, because I thought, Oh, they must be feeling like they don't get as tired, because there's, there's other reasons why, like, normally, muscles are going to fatigue. You know, once you get to 60 minutes, once you go beyond that, they're going to fatigue. So it was always to me mind blowing that practice sessions were so long, just makes no sense physiologically. But I talked to the guys after we'd had these shorter sessions, thinking they'd say, and I didn't feel as tight in my muscles and things which, which, for sure, they didn't feel as tired. But the biggest thing they all said it was so great to be able to drink water and to have toilet break. I mean, this is what they talked about, like, the fact they could actually have a snack and rehydrate and I thought that was quite profound that, you know, really, this is such a fundamental thing, like athletes would never be exercising dehydrated and without adequate nutrition. And, you know, musicians often the nutrition. Some of them are really struggling financially and just not necessarily knowing how a good diet, how they can manage a good diet in an economical way. And at our national Academy, we sort of set up a menu sharing and food sharing kind of system

Clark Lovell 17:32

Bronwen Ackermann 17:32

so people could try and come up with better nutrition alternatives. You know, some, some of the kids had never been out of home, you know, didn't know how to cook. So there was all sorts of things we could do to get them to try and build in more breaks, so they could go to the bathroom and have a top up snack, and yeah, and just talk about what kind of food will fuel your muscles through the day, because it's just such a fundamental thing. It's like putting petrol in your car or electric charge maybe now, but you know, if we don't have that, it's going to run out of steam.

Clark Lovell 18:09

Totally, totally. Thank you for sharing that I hadn't. I mean, I'm thinking about hydration a lot more these days, but I hadn't realized that that there have been studies done with musicians there, so I think that'll be really valuable for for the audience. I kind of want to pivot to something that we have talked extensively about in our consultations together. So as you have spent the time with musicians, helping them rehabilitate from their injuries, from a physical standpoint, how important to their physical recovery Have you seen mental rehabilitation to be? To be, whether that's seeing like a like a psychotherapist for clinical depression or anxiety or just like that, the crap that goes on in your head when you're going through an injury, you know, how important do those things need to be, or how critical to physical rehabilitation is the mental side of the game?

Bronwen Ackermann 19:07

Oh, look, they're absolutely entwined. I mean, we have this Cartesian Dualism. You'll hear this call, this kind of tendency to separate mind and body, which, there's historical reasons why that kind of happened in medicine, there's a big swing back towards the whole person in medicine as a whole like I think this is a great sign. But I did work with, I work often with psychologists, and we did a study looking at pain sensitivity and severity of pain and musicians, and correlated that with how much music performance anxiety they had, and it was strongly correlated.

Clark Lovell 19:47 Wow.

Bronwen Ackermann 19:47

So you were much more anxious if you had more pain, and whether the pain was making you anxious or because you were so anxious you were you were developing this kind of trigger point tension in your muscles was a really interesting finding. So, yeah, we've got empirical data saying, yes, there they can very much be related. So you have to look at both sides of the person, when you're when you're dealing with with physical problems, for sure, there's often a mental component, I mean, so we know that, and that was with kind of more substantial pain problems, it was much clearer the connection. So, like, we sort of rate them out of 10, you know, like, so the more severe pain nearly always was related with a higher level of anxiety.

Clark Lovell 20:35

Interesting, what type of modalities, I don't know if you covered that in your study, but in that particular study, but what type of modalities Did you see to be most effective for that mental rehabilitation? Because we know, I know we've talked about, like, neurolinguistic programming, you know, I'm working with somebody right now that you referred me to with that, and I'm working on that for my own coaching as well. So there's like that side of things, but then there's

also, like the traditional, I guess, psychotherapeutic route. Have you seen one or the other to be more prominent or more helpful? I don't know. Musician Unchained Promo: Hey guys, I just want to interrupt the show real guick and just tell you about something I've been working on for a long time that I'm so excited to share with you. Like I've said in the past, you have the potential to make your injury become a benefit to you, an asset to you, but at the same time, I know the feeling of being lost, not knowing who to turn to, where to go, what resources to use, all sorts of things, and also how to reframe the situation, the mental skills that's needed to be able to do that. And so if you are one of those people looking for that, that resource that help, that coaching, I want to tell you about something I've been working on, and that is Musician Unchained. Musician Unchained is now the newest coaching platform for musicians going through injury. It is intended to help you view your situation in a way that benefits you and make the changes in your life that you need to to become the best version of yourself because of your injury, the injury, your injury being the impetus for that change. I would love to be able to help you in any way that I can, even if that means sending you somewhere else, to someone who can better help you. And so if you are interested in and working together one on one. Visit our website, musicianunchained.com/letshang for more details. All right, let's get back to the show.

Bronwen Ackermann 22:27

Well, in psychology, like I think, assuming we're working at the same time, so they know the injury is manageable. It just needs x, y, z, then at the same time to build up that confidence, if they need that to return to play or to actually rehabilitate trauma, they're quite different things. So when you look at psychology, you would have heard in sports/performance psychology, so this is when you give someone a whole set of mental skills to help them get through a performance. And it's sort of like, a very well known musician friend of mine said it's like, when you have mental skills, it's like a whole bunch of cards in your pocket.

- Clark Lovell 23:09
 Absolutely.
- Bronwen Ackermann 23:09

So that if life throws something at you, you've got another card to pull out, and you can adapt. So for for all musicians, they should be getting some mental skills, and you need to practice them before the moment. You know, you don't want to get

- Clark Lovell 23:22
 Absolutely. Right
- Bronwen Ackermann 23:24

Oh, that's right. I was meant to do visualization and, like, right, try it for the first time when

you're stressed. That's not going to go down so well. So practicing things like mental skills is is crucial, even if you have to do these, like, virtual reality kind of things, when you imagine you're in this upcoming concert, or you have these now, these studios where you have these artificial concert halls you can play in, and things to try and, Oh, cool. prepare for it. And, yeah, that's very cool new technology. But on the other side, you have people who've sometimes had quite sadly, trauma through their training,

Clark Lovell 23:59

Bronwen Ackermann 23:59

maybe trauma associated with playing the instrument, or that they have just had some severe episodes ofmusic performance anxiety or depression or something like that. Could be just something that they suffer from, of a genetic thing, or something like this and and it's making sure so for those sort of things, that's when psychotherapy and things like meditation, even positive self talk, all these things can come in very useful. One when you really have a problem you need to deal with. And I think if you have something and there is an associated trauma or an event that's occurred that you're really struggling to get over, whether it's personal or musical, you really need professional psychological guidance. Through that with mental skills training, it's a bit different. You're trying to get tools in your toolkit. And so there might be things like NLP, a lot of people find mindfulness quite helpful, so that you can look at your short term gains and still be constructive and positive, instead of always saying, "Oh, I'm not there yet" and kind of having this feeling of failure where you've really you're really doing well and you're improving, you just need to sort of have more realistic goal setting and things so, so there's a lot of mental skills that can be taught to musicians, and that's a different pathway, as I said, from people who've really suffered trauma. And as one, one example, with the orchestra study I was talking about before, one very interesting finding we had as we analyzed their cycle what we did this big physical and psychological survey and a physical examination of all the musicians. But with the psychological survey, what we found is that, I mean to cite, to be fair, a lot of the experienced musicians were trying to use positive self talk and meditation and some strategies like this, quite a lot, as we see across the board, we're talking about using beta blockers, and yet, very few of them had seen a doctor or psychologist or psychiatrist. From them, there seemed to be a bit of passing it around in the green room, kind of thing.

Clark Lovell 26:14 Right.

Bronwen Ackermann 26:15

And the problem with that was, What we also found was that a lot of people who thought they had anxiety, actually, if you look at all these scales, so the way you use surveys can sort of help indicate what kind of mental health issue might be affecting you, if that's there. And a lot of the people who perceived they had music performance anxiety and were taking beta blockers

actually really seem to clearly have depression problems. Interesting. And the problem is beta blockers are essentially kind of a depressant. So you're depressed and you're taking a depressant, you know, so you won't, yeah, so you won't get the outcome you're looking for there. And so I think the big thing that came out of that was saying, "Guys, you know, if you're, if you're feeling you're struggling, please don't feel alone. Go and see a professional who can really guide you in the right direction" Because it's not, it's not going to mirror, it's not always the same pathway you'll need to take.

Clark Lovell 27:07

Sure. Yeah, yeah. I mean, it's, it's, that's another through line I think I see with with athletes and and musician and musicians is, or a through line I'd like to see, I guess is, is the, you know, a lot of, at least, what I see as an emerging field in sports psychology is this, like mindset coaching, you know, the peak performance type of stuff. And I feel like we want to get there as musicians,

- Bronwen Ackermann 27:40 Yeah.
- Clark Lovell 27:41

 But it's, you know, it's taken a little bit to get that ball rolling.
- Bronwen Ackermann 27:44

But I think there's, like, three different things, in a way, like, there's the health professionals, where, if you if you have an injury, or, really, you're struggling with anxiety or other mental health problems, or, like, you've got tinnitus, you've got ringing in your ears, you know, this is the time to see a health professional just to get a clear idea of what's going wrong, and then you as the musician can make some informed choices about what you then want to do to manage it like first step is really knowing what's wrong. And you know, even if you love your music teacher and you know the guy who sits next to you in a section is the best, they still are not trained necessarily, in diagnosing what's wrong, but once you have that diagnosis, then the choice of how you manage these pathways is very helpful, because often you can do things like, there's a lot of methods in that musicians study like, you know you have Feldenkrais or Alexander technique or body mapping, Right. Or there's a whole lot of methods that musicians study. Now, they're not health training, per se. They're like movement methods or counseling, mental coaching, sort of methods that are all useful, but not then they're not about a diagnosis. They're about giving you some strategies, right? But, but you should, if you've had something that's more a substantial, lingering problem of some kind, you should really get a clarity on what it is, and then you'll feel a bit more strong in choosing the pathways you choose to get back. So I said it's kind of we have this, the multi disciplinary kind of health team. And then I have this kind of, I usually call them performance support team, you know, for one of a better word, I sort of say, you know, you have the health team, the performance support team that would be your coaches, like this kind of NLP, or whatever it is, the various kinds of fantastic sort of music coaching are starting to come through, as well as the body coaching, or teachers, like from all those body methods. And then we have the music and music teachers, your colleagues, this sort of thing, where you know what, what I've been doing with things like The Embouchure Project, and always conversations with orchestras, just saying, the stats tell us that most musicians will have an issue from time to time, so be nice to each other. I think, you know, like it's really that simple.

- Clark Lovell 30:13 Yeah. Amen, to that.
- B Bronwen Ackermann 30:14
 I think that's the important thing, because positive support during times of times that are tough makes a big difference to your recovery.
- Clark Lovell 30:23

 Absolutely. I read a study in sports psychology that said that the perceived support actually goes farther than the actual reception of support, just from a mental, you know, psychological standpoint. Keeping on this, this thing with the psychology or neurology, I guess this. This next question would be something we've also talked about quite extensively, um, and I already know the answer to this question. I'll preface it with that. But is, is pain all in our head?
- B Bronwen Ackermann 30:58
 Well, I'll tell you what. We'll do is swap now, if you hand me more your pain and show it in front of the camera, I'll show mine.
- Clark Lovell 31:06
 What's that?
- Bronwen Ackermann 31:07
 Show me your pain in front of the camera and I'll show you mine. You can't, you can't show it.
- Clark Lovell 31:13
 You can't show it, ha ha.

Bronwen Ackermann 31:14

It's, of course, it's in your head, but that's it doesn't mean it's not there. It just means the brains of powerful organ that interprets sensations and feelings and even anxiety and all sorts of things can give a perception of pain. It doesn't mean that you don't have a real injury, and I think that's got to be clear. It's just that many, many things can lead to pain, like fear of pain makes pain worse. You know, there's all sorts of really interesting things like this. A friend of mine, Lorimer Moseley, is a wonderful pain scientist, and has created a lot of resources for anyone going through pain. If you look at Lorimer Moseley, you'll see a million pages of things. But he has, they're fantastic at coming up with various acronyms, but he has this tool that he calls the Protectometer. And he calls it DIM SIMS, is the process so the Danger In Me and Safety In Me attitudes towards various aspects of your life that kind of feed into this pain system. And it's really fantastic because instead of looking at something and think, Oh, I'm worried about that, I'm not sure, and just and seeing all the danger around you, you try and identify the safety instead and start thinking, Oh, yes, I think I should be able to manage that, or I can see that that's possible for me to do. And so you try and build up the safety aspects. So I mean, one example you could give and move. And I had a singer who had a back problem, and when she came in, she was so disabled, because her whole back she was holding very rigid. She could barely move. And and really we, we worked a lot on getting her just to kind of get a bit stronger and protect the spot that she was having problems with, but move normally elsewhere. And it made a huge difference just not to be like like, to try and find the safety she had through her body and and let that kind of emerge, and if she felt she needed to protect the spot that was worrisome, well that's okay, but you don't want it to stop you doing everything. So this Protectometer, or looking at the danger in your situation, and being aware, if you look at the negatives, and, I mean, I would say practice ironically, is kind of a good example. A bad perspective often in music is you get to your end of the practice session and go, Well, that was terrible. Instead of saying, Well, you know, 95% was really good, and I did all these things, and just 5% I didn't kind of get quite what I wanted. And, you know, there's a lot of research in sports medicine, again, really interesting research on how to enhance motor skills in training. And, you know, one of the really important things is, is looking at the positives of it that should be the first thing you do is that you practice and you identify what you did well, you know, before you start looking at what didn't go so well? Because what I find astounding is that I would say to people, practice includes physical and mental skills. If that's what you need, it should be part of your allocated practice time. If that's the thing that's holding you back, put time into it. You know, you can't just hope it'll magically disappear. You have to work on it like anything else, but with your musical skills. The same thing you know, set your practice goals or whatever. We know for sure that when you practice, you should pre evaluate, do what you do, then post evaluate. And I find it's quite common for people to be doing mindless practice, like spending hours on their instrument without really doing what we call, I guess, from old studies, again, in musicians actually this deliberate practice,

- Clark Lovell 35:14 Right.
- Bronwen Ackermann 35:14

You know, this concept that you've really practiced for a reason, not just hours on the instrument.

Clark Lovell 35:21

Yeah, one of the things that I have noticed in my in my own journey, and, you know, questions that people, other people have asked me, is when it comes to identifying pain and really like, like, this is kind of the stage I'm in right now in my recovery. But identifying what pain is, the brain being hypersensitive and what pain is like, what we should be paying attention attention to is like, "Okay, this is I've gone too far." Possible damage has been done, and now this is obviously something that, like, everyone should consult their their personal physicians, about right? But also, like, what are some hallmarks of pain that's like, you know, the stuff that I'm experiencing where it's just hyperactivity of the nerves of the of the pain receptors, versus there's actual damage being done, please stop type of thing.

- Bronwen Ackermann 36:22 Sorry, I deviated a bit from your question before.
- Clark Lovell 36:24
 No, you're good. You're good.

B Bronwen Ackermann 36:27

So one thing we should see with pain, if you have played a lot the day before and the next day, you think, Oh, I'm feeling a bit sore, you might think, well, this is means that I've overloaded the muscles. There's lots of little strains in the muscles. Equate it to going for a 10k run when you haven't run in the last five years. That kind of pain is like exercise induced. And it should settle over the next day or two, you know? And that should be the end of it. And in that time, think of it like you have lots of little strains in there, and just ease off a little bit so that it recovers faster. I think there's a fear that if you stop, oh, if I don't practice today, you know, I'll fall behind, but you can actually really set yourself back because you didn't let these relatively minor strains heal. So if you can see a reason for your pain, like I played twice as much yesterday and now it feels sore, just imagine that you've got lots of little sores here and over, lots of little strains there. And it needs, it needs to you to ramp back your activity for a day or two in saying that usually with minor strains, that should be all you need. And it's start you can start to work back up after a couple of days of relatively lower behavior. It's quite a quick flip back. If you really feel something go or you think, "Oh, I was playing like you hear this. Sometimes something really felt bad." Usually it's, it sounds so simple, and it is. If it's a muscle problem, for example, you can usually stick your finger on it, so if you've done a really noticeable tear, you'll be able to say, That's it. You know, it's there. For us. We can even feel the break in the muscle tissue a little bit, if that's the case. So those pains are kind of more the muscle side of pain. When you have nerve pains, quite common in musicians, and it's much more the sharp, the burning, the pins and needles, the numb. It's kind of a very I mean, I guess in that electrical sort of sense, like nerves operate. It's sort of a shocking sort of pain in some way or another. Now these pains are, there's a number of reasons, I think, very simply, nerves don't like to be squashed or stretched. And if we're in a position where we do that, we can, we can start to get pain. Those problems should settle if we get out of the position and let the

nerve settle. Often, people don't they keep trying to play on, you know, someone will say, "Oh, yeah, I had pain." I kept playing and like, there's sort of no pain, no gain, stuff that's honestly just a bit silly. You know, some pains, as I said, like the muscle workout pain, you can get back to quickly, but, but what you should see is a reason for it, that that's clear if you're getting a nerve pain that happened, because, let's say, your muscles got tired, if we just go back to the face for a second, because one of my favorite areas, a lot of people get lip pain at the front here, and the nerve to your lip runs down like this from sort of here, basically, you've got like, a mustache nerve going down like that. If you get tired, your muscle kind of thins and spreads and, got a mouthpiece pushing in it, the nerve is going to be really, really upset then, because it's kind of getting a stretch and pressure, and then you get all this noxious stimuli, and if you don't rest, let the muscle recover, get some normal sensation back, then the nerve itself gets irritated. So nerve pain tells you that it's, as I said, it's burning, sharp, numbness, pins and needles is kind of very they're not usually dull aches and things like that. And that's we're sort of working on the brain a little bit there, like it's saying panic, panic to the brain. And what you'll do if you try to keep playing with a with a pain like that, you'll compensate. Your brain will say, "No way, danger. There's a problem there. We'll swap and use another muscle." So then you start playing differently without even knowing you did because you're protecting it.

- Clark Lovell 40:54
- Bronwen Ackermann 40:54

So you just say, think about what you did with the pain. Did you do something where you kind of deserved that, like you painted the roof the whole day before, and then you went in and played some concert where, you know, you were using the same muscles all the time. Think, right? That was a bit silly. I back off, a bit ease off. Try and do you know, in sports, we talk where people have, like these Epsom salt baths and things like this. There are some good old fashioned strategies to try and get things moving. The main thing is just to have a period of unloading, you know, just a period where you reduce the load to let the tissues heal. And I usually equate this. It's kind of a gross analogy, but you'll get it to like muscles don't have a lot of nerves in them, because otherwise, every time you'd contract, you'd be like, in screaming pain, with nerves getting squashed everywhere.

- Clark Lovell 41:46 Yeah.
- Bronwen Ackermann 41:47

So the nerve cutting goes to bundles of muscles, not every muscle fiber, but I was equated to, so when you strain lots of little muscle fibers, you can't really tell it's just like, a bit sore, a bit feels a bit funny, like, as I said before, with the long run after you haven't run for a while, I just equate it to skin. Though, when we see a scratch on the skin, right? Do we keep, like, doing things like this, and the blood keeps, you know, spreading out, the wound never heals. But this

is what a lot of people do when it's a muscle problem. I keep saying, think of it like you've got a knife, you've scratched the muscle across sleepers. Think of it like it's on your skin. Don't just kind of tug at it, let it, let it scar it up and heal, and then you can start moving it again. Because we kind of want that to happen, to get the scarring to go away. So we don't want ignoring it. But we also don't want extreme rest. People who say, Oh, my arm was also arrested for three months. I think what for? I mean, really, it's doing nothing, does nothing. So we would only, we would only have a really long rest. If you were given strong advice as to why you had to do that like you ruptured a tendon, and they've repaired it or something, and this, you know, it's very rare that you need to stop for months on end. This is very uncommon.

- Clark Lovell 43:06 Gotcha. Gotcha.
- Bronwen Ackermann 43:08

 No, it's a bit of a roundabout way. No such a seriously, a good pain and bad pain. I think people
- have fear of pain. I think think about it. Did you deserve it? Did you do a lot? Therefore it's just sore because you worked it. You can equate it to anything else. Do you do a lot?
- Clark Lovell 43:22

 It takes away the fear. Yeah, the other thing that I'm curious about along along those lines is in helping people who are recovering from an injury distinguish those types of pain. How does that help them resolve their their fear of re injury, because
- Bronwen Ackermann 43:47

be empowered to take control of it. I usually say to people, what you'll notice if you're starting to get to the point where your muscles tired like I think it's very important we recognize fatigue signs. This kind of is often a precursor to these kinds of pain. If you like that, people don't stop when they should stop. Like, I often reflect on this listening to orchestras rehearse, you think, with, especially with these hour 40 minutes, like, I'm not kidding. I think you get to, like, maybe an hour 20 and it all starts to sound worse, because everyone's tired, you know, like mentally, physically tired. And you think, why do we do this? It's like putting the tissues at risk. It's mentally your concentration span doesn't last much longer than 45-50 minutes. I mean, I think what people need to do is be aware of fatigue science of firstly, mostly this kind of 45 minutes, up to a max of 60 minutes, is about how long our endurance muscles go for. It's like face and finger muscles need a lot of oxygen to work good blood supply water to work well, but they can go a little bit longer some of our big muscles, like shoulder muscles and things, they get tired much quicker. So it will change bit according to what you're playing as to how much load you put on your muscles. And we've looked at that like in trumpet players, for example, there's at least twice the amount of stress on the lip muscles in certain pieces than others in a very simple kind of muscle maths equation. That means you can only practice half as much for that for that piece, you need more breaks, more recovery time, different, different kinds of ways the muscles work. So being aware of fatigue can help prevent strain. And I often say things like, you'll notice you start fidgeting, you know, you sort of fidgeting around, moving a little bit, starting to try and find different spots on your face to put a mouthpiece.

Clark Lovell 45:50 Yeah.

B Bronwen Ackermann 45:50

You'll sort of notice these sort of odd fidgeting things. And I think this is the time, especially if you're in practice, to reflect on, "hang on a minute, like, how am I actually feeling?" And and be attuned that your muscles and brain start to generally fade at the same time. You know you're not actually kind of as as in there with the music as you were, or, yeah, things your arms feeling heavier, or your tongues feelings less responsive, or something like this. These are, these are fatigue signs, and there's nothing. So the only reason we play to fatigue, so when we push the fatigue boundaries to get fitter, right? So if you're trying to build up your playing, you want to always play to fatigue because it kind of stimulates more muscles to respond, but you always want to just bump the edge of fatigue and then stop, rest and refuel when you fatigue. The first thing you should do is stop, change position, like unload the muscles, have some water and a snack, because your body, when your muscles burnt through all that energy. They're like bits of blotting paper. They just want more energy to absorb this. So it's such an important time to have a have a snack that can refuel them to it to get some more glycogen into your system. Yeah.

Clark Lovell 47:15

Right. Well, cool. Thank you so much for going into that part. I mean, that's one of the biggest questions I've always had since my injury. Since my injury, is like, how do I understand the whole process of navigating the pain, of coming back like the physical or psychological physical? You know all that

B Bronwen Ackermann 47:35

With pain, with pain, though, if you do the safety and then go to the edge you feel comfortable with and then stop and reflect and, you know, just sort of can kind of keep setting these benchmarks. But look at the but try and analyze it in terms of what you played, what you did, how long it was, other things might affect it. You know, you might just be tired, Right. Or might have had other things that are causing some kind of stress. But intensity based practice is often a good way to avoid like thinking about, if I'm playing something twice as hard, I probably have to practice half as long and then have a break. Don't just practice for an hour, because you book the practice room for an hour. It can be really useful to do three lots of three lots of 20 minutes or not, three three volts or 15 minutes within that hour, and have a five minute break between them where you just have a snack and water and let everything just rejuvenate a bit. Right. Right. That that rest so Gabe Radford and I were talking about that, that the importance of that rest period. I'm reading a book, actually, that he recommended, called the

talent coach, where it's talking about how that actually does a lot the rest time, does a lot for the retention of, you know, what you're what you're practicing. So it's a worthy investment, physically and mentally. You know. Right! You want to stop at the top. There's like, sorry, very Australian word, who, but "oodles" of research that says, you know, you want to stop at the top. You want to, like, be doing something really well. So when I'm doing retraining with people, I keep saying, I want your brain to imprint the good stuff, not that you do it 2000 times, because you're a high achiever, and somewhere, you know, in 10-12 it started going downhill, and what your brain's left with it 2000 is confusion. We don't want that to imprint on your brain. We want the good stuff to to go in there,

Clark Lovell 49:26

Right, right. I want to kind of transition to some things that you as an anatomist and physiotherapist can offer, the music practitioners, the public school teachers and the private studio instructors and everything. And I don't know if this is too broad of a question to try and cover all the we don't have time to cover all the different instruments and all the different cues, but for those who are public band directors, public school band directors, or whatever, from a physiological or anatomical standpoint, are there any, any sort of visual or auditory cues that they can look for in their students to be like, Oh, this kid needs to to take a break," like fit to precursors to injury type of thing. Support Group Promo: Hey guys, hope you're enjoying the show. I just wanted to jump in here real quick and tell you about something that I'm really, really excited about for a while, now, I have wanted to create even more effective resource than just the podcast the injured musicians can go to to receive the support that they need. And recently I did just that. So write this down, trust the process. Podcast, injured musician support group. I know it's a long title. We're still working on that part, but this is a place where people can go now injure musicians, and even musicians who have gone through injury in the past, and people that help musicians go through injury, where they can go to receive the support that they need, whether that be ask questions, share their victories, share their frustrations, and overall, just receive the community and The support that they need in a very proactive, intentional way. And so I just ask that you guys support these injured musicians by sharing this group with them, that they can receive the support that they need. Okay, enjoy the rest of the show."

Bronwen Ackermann 51:16

As I said before, I think if they're looking uncomfortable and fidgeting around and like, just, just looking like they're having, having trouble getting comfortable. That's a, that's a, I mean, of course, we have very active kids. That might be just fidgets, but I mean, actually looking like they're sort of adjusting everything 200 times.

Clark Lovell 51:33

Bronwen Ackermann 51:34

I think just check in on them. Sometimes, I sometimes, I honestly think music teachers are

really excellent at picking up that something's not quite right, to be honest. But I think if someone's withdrawn or not their personality, their personality is altered a little bit, that maybe something's going on that's affecting them.

Clark Lovell 51:52
Sure, yeah definitely.

Bronwen Ackermann 51:52

With mental health side, we often see that picture normally, maybe withdrawing a bit. Yeah, for me, I thinkI'm very attuned to the way people look when they play so often, like people I know quite well. I think, why are you playing like that? You know, there's some imprint memory of how how people move. So I think if they're clearly doing something different, you think us, why are they, you know, holding the trumpet like that? Or why are they suddenly doing this differently? You should also be asking, they might not be aware. They might have adapted around things without knowing, or they might be working around an injury. So something you know you can tell it doesn't look right, doesn't look like the way they normally hold it. And I would also say for music teachers and band directors like one of the really important things is that when kids come into the practice room, especially when you're at school and they're busy and they may be tired or whatever, please encourage them to, I don't know, jump up and down, run up and down the stairs, have a glass of water. Just get something in their system. Get the blood moving, and get at least some water or a snack in their system, mate, I used to give handouts to all the music teachers and like on warm ups for musicians. And just said, Just get them to swing their arms move, get their hands going. You know, have a handful of sultanas or whatever it is, just some fuel before they play, so that, you know, they're in a good state to begin with, the two separate things here, what to look out for and and to try and avoid, within your group.

Clark Lovell 51:53

No yeah definitely. No, that's the purpose of the show, is to provide resources of any kind to help prevent injury and also help in the recovery from injury.

B Bronwen Ackermann 53:36

Well, I think band directors feel this pressure to get an achievement and an outcome. And I mean, there's so much pressure in those jobs to try and get everyone to go well, but I think just to be aware that they're going to be at their best if they're ready to play, not tired and stiff and cranky and whatever else, like getting them to do some warm up things usually makes them much more responsive. In any case, right? It's not more time, Right. Right. No, exactly, exactly, 100%. With private teachers, what role does like anatomical knowledge and physiologically based conversations have in like just everyday pedagogy? Because, I mean, I've seen classes where their definition of pedagogy is more based in like performance pedagogy, or like how to play this piece, how I mean, like your traditional like, what people would think of like as master classes type of thing. But how can private teachers implement this anatomical knowledge and

physiological knowledge into their everyday teaching to help their students stay healthy? That's actually a project I'm working on right at the moment with training sound performers. So we're trying to develop a whole lot of resources for music teachers to help them do exactly what you're saying. Weinterviewed and surveyed, a lot of them from around the world, music educators, often very experienced, very people, has a lot of great stuff to give. And what they said probably pointed at me mostly is, you know, you don't have to give them an anatomy textbook worth of knowledge, but just try and explain some foundational things. So for example, with brass players like we've talked about, your orbicularis, the muscle that sort of does that is really the foundation that everything hangs off.

- Clark Lovell 55:32 Yeah.
- B Bronwen Ackermann 55:32

And if that's not engaged first, then the person can have all sorts of problems. So just some really simple things, like some some things off the instrument that I would say again, can be useful, you know, almost used in an instrument warm up, sense that get muscles activating, but you can see the the use of it in playing. So I think they need to understand some basic concepts, like, what's the core of the movement? Very often movement comes from the center out with so, you know, maybe you're trying to find solve a problem with what's happening with the fingers, but actually their shoulder or something's in the wrong position or and all, they're looking at their fingers. And we can't work from the fingers backward to the arm, like you can't have your fingers pull your arm up and down a piano keyboard or something. This is just not going to be a sustainable action. You know, your arm has to move so that your fingers can be free to produce the dynamic. So I think we see this a lot. I see this a lot that the mechanics of the movement of reverse. So the really simple thing is making sure that their posture or position is such that they can move from the center outwards.

- Clark Lovell 56:43
 Interesting. Yeah.
- B Bronwen Ackermann 56:43

It's a very foundational anatomical, kinetic, biomechanical concept. And I think this sounds strange, but the other thing I would say to teachers is, if you always have your lesson with your students standing, that they go and sit and playing in a community orchestra or something, please give them a lesson now and then in sitting as well, because often you don't realize that they don't know how to sit. I mean, this happens time and time again, with the tertiary teachers, for example, they always give their lessons in standing. And I'm looking at this student in orchestra and saying, "I think you need to give them the lesson in sitting as well."

Clark Lovell 57:24

Oh interesting.

Bronwen Ackermann 57:26

I mean, I work on them with posture, but I think it's helpful to get that reinforcement, and then both people work in them. So So I guess those are the simple things. You have to move from the center outwards. You have to really ground your posture, like think of how you're putting your feet, how your pelvis is on the seat. You don't want to be perching on the edges of chairs, because then everyone's like, super stiff and uptight from the get go.

Clark Lovell 57:51

Oh, that's a little a little controversial from what I've heard. Imagine that.

Bronwen Ackermann 57:59

No, no, because I think people, without knowing it, they think, Oh, if they perch, they'll have to be upright. But it's like, it's so unstable for the body, right? Like it just means that you're anchored in two dimensional space. Then, because if you go forward, those bones and your pelvis are going to shoot you off the edge of the stairs. So you're going to have your off the chair, sorry, so you're going to have your feet bracing your pelvis there. You know it means that you play above, like above the pelvis. So one of the problems we have is if your pelvis is not grounded properly. And usually I say to people, you sort of have to stick your bottom out as you sit down. So you imagine kind of your, I guess pubic area is like the center of an X of support. And at the back of the X, you sort of can feel the back of what a lot of people call these sits bones, or, you know, anatomically we call them, ischial tuberosities. Just doesn't seem to take off as much...

Clark Lovell 58:53

Not a bumper sticker. Yeah.

Bronwen Ackermann 58:58

But then at the front, at the front of your X so the middle parts like your perineal area, again, anatomy, but kind of your pubic hair, and then at the front is like your thighs, or your feet, or where you perceive that forward part of your movement. And if you land your pelvis this way, you can relax your back muscles. And when you move, you're moving underneath your pelvis thighs. You're sort of moving from outside of one thigh outside of another, to the front of your thighs, back to those sits bones, and you have all this movement that's actually kind of sway, if you like. So if we have balanced position where we can sway, that's kind of a free movement, not a lot of effort in swaying, and it gets us to where we need to go withoutif you're sitting perched at the edge of the chair, you're going to always be kind of pushing and straining above

because you're actually locking down to try and stop yourself sliding off the chair. And I'm veryconvinced of this after many years of working like. You can be close to the front of the edge of the chair, but you can't be on the edge.

Clark Lovell 1:00:04
On the edge.

B Bronwen Ackermann 1:00:05

It's just really unstable. And one of the problems that happens if you're that unstable and you have to use your feet to lock yourself down and anchor and as I said, you tend to not move three dimensionals. It puts so much more workload through the upper body. And one of the things it does is it tends to make people breath hold, because, so you see this all the time, and sorry, I'm going to pick on people here that, like violin, viola, piano players, where they're like, kind of breath holding, because they're moving their body, like in two halves, like the bottom half's doing goodness knows what, and the top half's over here. And this is really hard for the body to manage, rather than this kind of idea that you sway to get your arms on the keyboard, instead of being this kind of very exertional sort of C shape movement and things so, so this is a very fundamental thing. Your pelvis should be all on the chair, even if it's at the front of it. You know, sometimes it doesn't hurt to use back support. For some of the instruments like trombone and things like this, it can be helpful, but some, sometimes it's not helpful. Sometimes you need to be forward to kind of reach. But being in a position when you land your pelvis this way that you have this X of support underneath, usually means you can go back, you can go forward, you know, and it's a sway under, under your hips and legs. This is super important for every instrument. So, um, because it stops the breath, holding it takes a lot of load on the upper body. And people have a misconception that if they allow sway, or people use their feet, they'll move more, but they look like they move less because it's a very fluid movement. So it's just this bit of give in the system instead of this kind of like, always laborious thing, Yeah, so that's a kind of general hip tip. Sit on your pelvis properly.

Clark Lovell 1:01:51

Laborious thing. No. Yeah, no, seriously, that's, that's a first on Trust the Process talking about sitting, well, I think, you know. And another thing that you had said, actually, with, with Frankie on The Embouchure project podcast, which everyone needs to go see. Brass musicians. You don't have a choice. You just need to go see it. Sorry. Actually, I'm not sorry. And we just did a video where we painted his face. And we're really doing a run through of all the muscles Coming soon, coming.

Bronwen Ackermann 1:02:19
Oh really? So good, good.

Clark Lovell 1:02:30

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So with, with that, though, like the strength building exercises and like these more anatomical, physiological conscious activities. I think you had said with him that the goal is to not to be building strength so you're not using 100% of your muscle strength. Because we think, at least, I thought when I first started working with you that building up all this strength was going like, I'm going to be using 100% of it, but the goal is to build up your strength so that that same amount of energy, and I guess I don't know what to call it, but, like,

B Bronwen Ackermann 1:03:12

We call it efficiency, efficiency science, which is, yeah, musicians hate this term, and I get it. You know, there's nothing mechanistic about playing an instrument. But basically what it means is that if you have more control and more strength, and you don't have to work as hard when you play, it's as simple as that

- Clark Lovell 1:03:31
 Right, exactly.
- Bronwen Ackermann 1:03:34

There's also the type of strengthening you do, so you don't want to work muscles that you're already using all the time when you're playing in the same way. So being on many tours with orchestras and things, you know, you'll have a bus full of buzzers at the back. You know, everyone on their mouthpiece buzzing madly, and I'd say them guys, "why don't you do, you know, other face exercises off the instrument give your lips a bit of a rest from pressing a bit of brass into them, you know?" And you know, everyone's a bit scared about the concept of it. And one thing we know for sure is that cross training is a good thing. It's like so for example, with the face and fingers, these are areas where we have a lot of muscles that can do fine control activities. And ironically, often when people have problems, they're not using fine control illusion like everything in these areas where actually they should be.

- Clark Lovell 1:04:27 Yeah.
- Bronwen Ackermann 1:04:27

It's much more about dexterity in the face and the fingers, for example, and that requires you to really have a good flow of movement, you know, again, sort of from the center, but also to be to be in touch with the muscles so that you can kind of recruit just what you need for the job. So there's two things. One is sort of having your brain have a good idea of where that muscle is and how to find it. So I can do this sort of exercise, and I think right so when I'm doing something on a guitar or clarinet or whatever, I know I can move that finger, or that finger will be able to move. Freely, because my brain has a pathway to it. It's not that when you're

playing, you're thinking, "Oh, I should move my finger, like you're just, you're just creating that pathway for your brain so it can just find it when you're playing, you don't. I think people get worried about doing these things. They have to think and play. Well, no, the idea is, is that you create, you know, you create better pathways so that when you're playing, it can it can find them more automatically and quickly. And then the second thing. So one thing is fine control training of these peripheral parts, super important to get that brain very clearly, knowing which fingers which, or you know how to do that versus that, or whatever. And then you have the strength thing, where with endurance and strength to build that up off the instrument can be good. I find this, particularly with the face, where people are very vulnerable to injury if there's any increase in load, because it's only just, only just strong enough to get through the days, so to speak. So you have these, like Star Wars, or some of these, like, um, commercial pieces they're playing on. Everyone's chopped at the end of it because they don't have any reserve in the tank. They're not really, like, like, really, for a brass player, for example, coming back, and one of the problems you guys have is taking your instrument on holidays. And there's plenty of memes about this you can.

Clark Lovell 1:06:21

There are plenty of memes about it!

B Bronwen Ackermann 1:06:22

Worried about losing your chops over the break and stuff. And you think, actually, you can do facial exercises that will keep your chops in perfect shape without and just give it a bit of a pause from playing. And it takes some confidence with this, you know, like, ironically, some of the people, one of the trumpeters here, had a nerve injury and had to be off the instrument for four months, and they just couldn't put pressure on it because of the nerve injury. And um, so they did do all the off instruments, sort of face exercises, and said when they went back, they could just play. And they said, "I've never been off." They just thought they wouldn't be able to play. And so it's fine, you know, I just kept it in such good shape that actually it felt great. And you think so it's possible. Like, of course, I'm not saying everyone should take four months off playing, but, you know, sometimes we need time off. It's like, you know, you've obviously gone through this. Nerves are tricky things. We've got to try and get the strength up, desensitize, you know, so that they start to feel normal sensation again and things and that might require less playing. So in the meantime, let's get it nice and strong and get the control nice and refined, so that it actually makes everything come together more quickly in the end, Totally, totally well. Dr, Ackerman, Bronwen, thank you so much for for all your expertise and sharing all this knowledge with us today. I just so grateful for you in my own experience, and also for being willing to come on the show. No problem. Sorry for the segue. I'm a very segue artist. No, it's all, it's all incredibly valuable. Seriously, I ask a couple of questions at the end of every episode. And the first one, you know, the whole reason why I have this show is because I was connected to somebody through a podcast that that helped me get a piece of knowledge that I needed to get you know through my injury. And so if somebody were to come up to you and say that they had found you through trust the process, listening to this, this guy out here in Utah, talk to you about about injury stuff, what would be one piece of advice that you would give them, no matter what injury, or, I'm sorry, no matter what injury or instrument they play. To give them personally or about the journey that they're on?

Clark Lovell 1:08:44

Yeah, like they're saying, I'm just going through an injury. What can you tell me?

Bronwen Ackermann 1:08:50

I think one thing I've often equated this to is that it's like, what you're going to hear is a lot of different things from a lot of different people, because in music, you can hear all sorts of things, and there's people have their perceptions, and I think you need to kind of put it into a filter, like, you know, these, like flower shakers, and just, just, don't necessarily, take it on board, give it a bit of shake, and look at the fine stuff that drops out, And in the sense that you need to filter it, you need to sort of be open, because sometimes things can be surprising. What can be helpful for you, the things you might not have heard of before, experienced before, be open, but also respect, if you like that some people are well intentioned, but don't really understand your injury. So I, I think that's the point when you say, "thank you for that advice. That's really interesting. Would you like a cup of tea?"

Clark Lovell 1:09:52
Yeah ha ha.

B Bronwen Ackermann 1:09:52

You know, just like tea we drink the live team. It's very, very British, yeah, but, you know, but just, but just respect that they're coming from a place where. Hopefully they're they're well meaning, but that you don't a lot of these things will not be appropriate for you. So one of the hard things is this filtering process. But just be aware that that is, I think, don't take everything on board. Even if someone's, you know, the world's best player of your instrument, they're not living in your body and your skin. They may be. Their advice has elements to it that are useful, but, but really be prepared to filter and look after yourself that way. And if, if you need support, then again, we've talked about things like psychological support, whatever, but, but I think it's quite important when you've heard people like Gabe talk about, you know, once he sort of felt like he understood what he had to do, then he found that he could gather some useful, I guess, bits and pieces from different sources that helped him make his full recovery, but at the same time being careful about things that were not helpful. So you have to be quite a lot of self reflection, I would say, so. So be prepared to filter, be very reflective about and respect your own Bauchgefühl, as I say in German, like your own intuition.

Clark Lovell 1:10:19

Right. Definitely. The last question I'm actually going to call an audible here. But I, I'm curious. You know, in yourtenure as a musician, health researcher and anatomist and physiotherapist, where you've seen the conversation and the dissemination of information, how it's evolved, but where do you see it going? Like, how do we best get this message out there and instilled in the musician community in 2024 going to 2025 now to.

Bronwen Ackermann 1:11:55

I really honestly believe it's through us working with people like you and with the Embouchure project, guys, I think we need the musician. One of the problems I have as a health person is perhaps translating everything into like musical outcomes. So I think moving forward, musicians need to not see health as a disease. They need to see health as a great state of being and to whatever your background is, to aspire to finding this, this state of what for you is ideal performance and health status. I would say there's an interesting quy, Antonovsky, a psychologist from the like 60s, who talked about the the curve from ease to disease, like, you know, some musicians are playing with kind of physical handicaps and still making incredible music, or neurodivergent musicians making amazing music, you know. So we're all on different parts of what people perceive, you know, I know some very famous musicians playing with some quite big challenges in terms of diseases they have, but they're managing it well. And part of this thing is that, you know, you want strategies that wherever you are in the spectrum, you know, however many limbs you have, or whatever your status is, is is to have strategies that take you towards a kind of a positive sense of well being, and is in your performance capacity, if, if it's a, you know, performance capacity You want and and to sort of have strategies to help you move in that constructive direction. I don't know if that's a simple answer, but I think with that, with that process, sometimes in that process, you need the help from health professionals can say, You should do this, you shouldn't do that, but musicians might say, What can I play them? You know, and that's where you need, you know, you need. I think the culture in music really has to change from within. The more and more of you that are talking about this and saying, "Hey guys, you know, we know that most musicians will run into health problems from time to time. Why aren't we constructive and helpful and help each other through it?" And some of you doing extra training to provide the support isfantastic. So yes, moving forward, I see great possibilities. People like you, guys like you and Steve and The Embouchure Project and all these people are getting really nice, positive, constructive messages there. It's not, pain is not something to be afraid of, you know, it's not a career ending thing. It's just something that will need to be managed. And also, like some injuries are really nasty, you know, it's, it's not your fault. Sometimes things happen, and dealing with where you go to from there, you can always get a support forward and how to do it.

Clark Lovell 1:15:02

Definitely, definitely, 100% and thanks for giving the shout out. And I know Gabe and Frankie are appreciative of the shout out too. Yeah, I think that's a great place to end it. So to all of you out there in podcast land, thanks for joining us. So grateful you could be here with us. If you have any thoughts about today's episode, shoot me a text with the link below. If you feel so inclined to help the show, along with a donation that is also available to you in the show notes. And we'll be including some some of the other resources that Dr Ackerman has provided to the musician community through her research. And join our newsletter. That way you're not missing any episodes. You get sneak peeks and all that good stuff going forward with this season. And like I always say, keep on, keeping on and keep trusting the process until next time. Outro: Hey, thanks for tuning into this episode of trust the process, the official podcast of musician Unchained, the newest coaching program dedicated to helping musicians navigate and overcome injury. But before you go, I have a few quick ways you can stay connected and support our growing community. First of all, I'd love to hear from you. Shoot me a text with the link below and share your thoughts questions, or just say hi. You can also check the show out on Instagram, Facebook and Tiktok. We also would love to see you in our Facebook support

group, trust the process podcast, injured musician support group. If you found value in today's episode, consider making a donation to support our mission of empowering musicians worldwide. Every contribution helps us create more content and resources for you. So visit link number two below to support the mission. If you decide to donate, I'll send you my newest resource, the injure musician Toolkit, which is an ebook designed to give you tools to help you get through your injury. Subscribe to our newsletter to get exclusive insights, tips, sneak previews of episodes and announcements straight to your inbox. Act now and I will send you a free gift. So sign up at www.musicianunchained.com/newsletter. And if you or someone you know would like to go deeper with me in the topics of injury and mindset, head over back to musicianunchained.com and check out the "Let's hang" tab as always, I want to thank Daniel Baldwin, my audio engineer, and my sister Dana Lovell, for her help with the promotional materials. There is no podcast without them. Before I go, I want to tell you how much I deeply appreciate your time and support. You are not alone on this journey. There are musicians and educators out there who need this resource, and we need to get it to them. Together, we are breaking the chain of old habits and thought patterns that don't serve us anymore, and unchaining the potential within ourselves to face each challenge with strength and resilience. So as I always say, keep on, keeping on and keep trusting the process until next time.