

Caspar ([00:00:01](#)):

Over 20% of Americans are reportedly living with chronic pain that lowers their quality of life. And for the most, the only options available are steroids, painkillers, or surgery. Our guest today has developed extensive protocols and workshops to help treat chronic pain and inflammation by targeting the lymphatic and vascular systems. He's a chiropractic physician and master fitness trainer with over 25 years of experience in the health industry. This is the story of Stop Chasing Pain with Dr. Perry Nickelston. Dr. Perry, so nice of you to join us. How you doing today?

Dr. Perry Nickelston ([00:00:38](#)):

I'm doing wonderful. Thank you so much for having me on this show. Truly grateful, blessed, and honored to be here. Thank you.

Caspar ([00:00:44](#)):

Well, very, very grateful for to have you. And as a starting point, I always like to go to the stories of the guests themselves that led them to what they're doing to today. And, and, uh, the great work you are doing. And I understand you healed from a severe back injury, autoimmune disease. Can you talk us through what even led you into that, being a doctor and, and kind of the story that leads you up into today?

Dr. Perry Nickelston ([00:01:11](#)):

Yeah, I'd be happy to. Well, it may be a journey that's similar to others that get into healthcare, feel from your own pain and suffering from yourself. But honestly, it can be from the pain and suffering of a loved one in your life where you feel powerless at times to be able to help them. And then that's the catalyst that pushes you into something. Right. And that's the way it was for me. Initially, I got into chiropractic, uh, medicine. I graduated from chiropractic college in 1997, and my original journey for that was for unrelenting back pain that just was not going away over and over and over. And then they helped me stand up again and I said, this is pretty amazing. I would like to do this for other people. Right. And then along that journey, I just grew and expanded as a person, as a human being, as a practitioner.

Dr. Perry Nickelston ([00:02:07](#)):

And, uh, then later on in life, I developed other types of complications and issues, some autoimmune disorders, some inflammation. And people always ask me, well, what was your diagnosis? What was it? I didn't really have a diagnosis. It felt like I had everything honestly, <laugh>. And, uh, that was a really big learning experience for me because I was trying everything that I've learned up to that point to heal myself with what was coming at, at me. But it wasn't working so automatically I knew I needed to think differently. My concepts had to completely change. And the people that I was seeking help from, they weren't helping me either. Right. And then I thought, well, then I have to look at it differently than what they're looking at it <laugh>. And that's what led me onto the journey that I teach a lot now in relationship to, uh, the lymphatic system of the body.

Dr. Perry Nickelston ([00:03:12](#)):

Because that's one of the biggest things that I began to do that made a, that flipped a switch for everything, honestly. Um, so it was just one level of, um, pain or suffering after another that instilled the need for me to change. And that actually helped form my definition of what pain means for myself. And pain very often means, uh, suffering for people, right? But pain is always a protective response. Your

body's trying to protect you from something that can be far worse than where it is now. But pain is a request for change. That's the way I look at it now. And, uh, requests from whom or what? Well, you, your body and then to change what? Well, the easy answer is yes. I don't know what it is. I just know it needs to be different than what you've been doing up to this point, because obviously that's not working. And sometimes it's just a matter of changing your definition of what pain means. Like honestly, if you can change the definition of from pain to, from punishment to protection, that makes a big difference on your healing journey.

Caspar ([00:04:28](#)):

Right? And that's, that's the unique thing I think about A lot of what conventional medicine does, sees symptoms as bad things. And like you said, tries to put a diagnosis on you based off those symptoms and treat that. And it's really not a treatment. It's more of a managing or a suppression. We use painkillers to suppress the pain. Is it gone? No, it's just suppressed in a sense. And that idea that we require a diagnosis to do that, as you said, is, is a little bit of a fallacy. I remember writing once an article I published called The Death of the Diagnosis, and it off a lot of doctors. 'cause they said, without a diagnosis, you can't do anything. Right. Whereas the diagnosis, as you know, is just a description. Most people go into a set protocol for the diagnosis that's not taken into their unique factors or not taken into the, the idea of why the pain is even there.

Caspar ([00:05:18](#)):

The why is not non-factor. It's the what? It's a diagnosis and you take these drugs and if you don't get better, we go on and go on. And, you know, it, it, it is a whole new game that you're talking about. When you start to understand and change. Definitions such as pain is not punishment, it's protection. And then you have to ask, what is it protecting you from? Mm-hmm. <affirmative>. So in many cases, I, I think there's, there's always unique ways you could look at what it may be protecting you from or signaling to you that you require change. But what are some of the common patterns? 'cause everyone's gonna have a unique set that leads them into the pain. What are some of the common patterns that you are seeing?

Dr. Perry Nickelston ([00:06:02](#)):

Yeah, so that's great. I mean, it's, it, it's a great, great point that you made there. And it's, it's that con pain is contextual first, which means that it means something different for everyone is what could be pain painful for you is not painful for me. So pain in and of itself is always subjective, not objective. There's no way that you can, uh, quantify that. You know, we try to with where does this sit on a scale of one to 10, right? But my, my two could be your 10 based on my prior experience with pain. You know, maybe I'm a navy seal and I can deal with a lot of stuff. And you're not <laugh>. You know that, that makes a big difference on your outcome. Right? But then it's also important to realize that pain only tells you that you have an issue or a problem.

Dr. Perry Nickelston ([00:06:53](#)):

It doesn't tell you what it is or where it is. And that's where the stop chasing pain model came from. And I tell people, notice it doesn't say stop treating pain <laugh>. It means don't chase it. And what I mean by that is that you look, wherever somebody points, you know, my, my shoulder hurts here, my hip hurts here, my knee hurts there, right? And then first of all, I'm gonna ask, why are so many places hurting at one time? Right? But it, it, it's logical to start there, right? Because maybe a zebra is a zebra, but sometimes a zebra is an elephant, which means it's not that. But if you treat where it hurts and it

gets better, well that's awesome. That's great. That's what you want it to happen. But very often it has a tendency to do this thing, which is called coming back over and over and over again.

Dr. Perry Nickelston ([00:07:52](#)):

Then you have to figure, okay, well I'm overlooking something here, right? And then I just started to look, you know what, well let me just look everywhere else <laugh>, and then maybe I'm gonna find an area that you're not looking at that's not, uh, painful on you, but is contributing to that area of pain. So say for instance, it was your right shoulder that hurts. I'm like, well, maybe it's your neck that's contributing to that. And I'm gonna tell you right now, it is, it's always gonna be a factor in that. Or maybe it's the opposite side hip and it has to be from there as well in some way, shape, or form. 'cause every time you walk, you have to swing your opposite side hip with your opposite side shoulder. They go as a pair. Does that make sense? So it was just the first, the aha moment was, let me start where it hurts and then let me start to look everywhere else and I'll, but I was still trapped in a musculoskeletal kind of paradigm, which means that if my shoulder joint hurts, I'm gonna look at the joint, I'm gonna look at the muscle, I'm gonna look at the fascia, all those fancy words.

Dr. Perry Nickelston ([00:09:02](#)):

It just means different types of body tissue. But I realized there's a lot of other different systems of the body that can be contributing to that. One is your emotional system and your psychological system because many people are under so much chronic stress and duress and emotional, emotional turmoil and trauma that's causing the inflammation that they're dealing with and the pain. So in my viewpoint now, there's always an emotional component to pain. That's why you're not a rock, you're a human being. So you have to take that into their perspective. You know, also, like I said before, your prior, your story about your prior pain makes a difference on your current pain. But then I started to look at, well holy cow, there's a lot of other different systems in the body that I'm not paying attention to, like my immune system or my, uh, organ systems or my cardiovascular and blood flow systems and lymphatic systems.

Dr. Perry Nickelston ([00:09:58](#)):

And that's where I actually found, uh, the biggest piece of my missing puzzle is that I was just isolating things too much. That's my biggest thing that I've tried to change people in, is to expand and look at the body as one single functional unit. Because it's not parts, even though that's the way we look at it. And it's okay if you look at parts and we have to put a um, kind of a context to how you get your pain. So what I mean by that is this, uh, traumatic onset pain is usually, uh, easier to get a handle on because you have, okay, a happens where I get hit in the shoulder with the bat. Now I know why my shoulder hurts, so I'm gonna look at my shoulder and I'm gonna treat the trauma to the shoulder, which nobody does better than traditional medicine, right?

Dr. Perry Nickelston ([00:10:53](#)):

But it's that chronic pain that comes on afterwards. Or it's the person who didn't have shoulder pain yesterday and today they wake up with shoulder pain. Yeah. You have to treat that pain completely different than you did the one that got hit with the bat, right? You can start initially the same, which is treating where it hurts. And just doing that makes somebody feel better because you're showing empathy and understanding that I see what you're telling me and I'm gonna validate where your pain is. But I know without a doubt there's gonna be a contributing factor somewhere else. And that's what we have to look for. Alright, so, so my journey for stop chasing pain, honestly was quite easy. When

somebody comes in to see me and they point to an area that hurts, I know they've typically had everything that you can think of done to that region. All the X-rays, all the MRIs, all the tests and everything, every type of treatment you can think of. I just do the exact opposite. I don't do any of that because if you needed that, you wouldn't be standing in front of me asking me for help. So I'll be honest with you, I don't think that people see me for, uh, treatments Now. What they see me for is the way I think

Caspar ([00:12:15](#)):

Hmm.

Dr. Perry Nickelston ([00:12:16](#)):

How I look at the body. Because if you can figure that out, well then you'll find the right treatment you follow?

Caspar ([00:12:23](#)):

Yeah.

Dr. Perry Nickelston ([00:12:23](#)):

I mean, 'cause if you're treating the wrong spot, I don't care what you do <laugh>.

Caspar ([00:12:26](#)):

Right? And, and that's the thing. And we see it a lot at our clinic as well that is in integrative, you know, bioenergetic, all these, we see it as body, mind, spirit. Most people that come in with were their last resort. And it says you went to every specialist out there, you've had all the functional lab tests, even everything. And then, you know, you come to us and it's, well, are you going to run the same labs? It's like, well you've been doing that for how many years now? And how has that worked out? Why would we just do the same thing and expect a different outcome? We think differently. We're looking at root cause as you saw downstream effects. We're looking at upstream effects. We can match the two and show you how that works. But you know, we're, we're not just gonna keep casting the line where it's never picked up any fish before.

Caspar ([00:13:09](#)):

So it is a change, but people are, you know, creatures of habit. So they want the same thing done and done, but they're gonna usually get the same results. Now you mentioned something there that, you know, some people do get the back to the shoulder, they know why they have the pain. They may not know why it turns chronic, but they know that there was an injury, acute injury, something happened there. Sometimes sports related or physical related. But are you seeing more and more people? Because I would think more and more people are less and less active in some ways, but there's still so much pain out there. Meaning the person that just wakes up with the neck pain, that has the chronic back pain, but never actually lifted weights or did anything or was in an accident before. Is that becoming more common in your practice?

Dr. Perry Nickelston ([00:13:56](#)):

Oh, absolutely. And I think everybody would agree with that. Who's in the healthcare field. That's why we're having an explosion in, uh, chronic disease, chronic pain. Those are the more difficult ones to get a

handle on because like I said before, medicine is very good at finding, you know, one cul, one culprit, one cause you know, back to the shoulder. Well there you go. Or they're looking for something that might be, uh, you know, a bacteria or uh, infectious agent that, okay, that's it. I know exactly what to give you. We're gonna take it out. But when you're dealing with, uh, chronic pain and chronic disease, the dirty little secret, it's never one thing. Yeah, it's a culmination of it. It could be 10, 20, 30, but also the culmination of your entire life from the moment that you were born. That's why it's very, yet, it's a slippery slope when you start to treat a diagnosis because one, the patient can become the diagnosis label that you gave them.

Dr. Perry Nickelston ([00:14:57](#)):

Yes. And that becomes their quicksand, sinkhole that they never get out of. Mm-hmm. <affirmative>. And then two, you treat all the people the same way. Most often. Well here's the protocol that you do for X, Y, z. You know, here's the protocol for like a leaky gut for instance. Or say, well, yeah, everybody's body parts are different, right? Because a different person is carrying them around, they're gonna respond, they're not gonna respond the same way to the program. So that's why people say, I did this, this, this, and it didn't work. Well, that's where you have to go. More of the individualized medicine and the way that you practice individualized medicine is, I have a novel idea. How about you talk to the individual in front of you and you go through their history and you do a really great hands-on manual assessment, which is one of the biggest missing components in medicine today, is that we test, test, test, test.

Dr. Perry Nickelston ([00:16:01](#)):

And we never talk and we never touch. And you will never find things on a test that you can find when I talk to you. And even more so when I get my hands up on the body. So there's, that's the, there's an art and a science to medicine. And that art has to come from getting your fingers in the paint, you understand? Yeah. And laying down some canvas. 'cause I, for instance, I have people that say, okay, well uh, you know, I don't have, uh, any issue here. 'cause nothing showed up on, uh, let's say your abdomen, right? First of all, they're gonna say, why are you looking at my abdomen and my shoulder hurts? I'm like, well, because it sits in the middle of your shoulders and your hips. That's why. And uh, they said, I didn't see any problem there. There's no issue 'cause I don't have any symptoms. Right. But then you get 'em down on a table and you just place your hands lightly on the abdomen and you can actually visibly see a person's nervous system go into a fight or flight response that shows that the system is getting very anxious because you're getting close to something. And then when you push in just with a little bit of pressure, they go, ow.

Dr. Perry Nickelston ([00:17:18](#)):

And then my point is, it's not supposed to be an owl when I press into your abdomen and I'm gonna contend till the day I die, that that owl is gonna be one of the contributing factors to the pain you keep pointing to. But nobody knew it was there 'cause nobody took the time to stick their fingers there to find out. Right. And then that's how you find inflammation. 'cause in, in my world, chronic disease is inflammation and then inflammation is gonna cause pain somewhere. It doesn't mean this is where you gotta hang on for. It doesn't mean that the pain is necessarily where the inflammation is or you know, you're allowed to have more than one side of inflammation, <laugh>, and you're allowed to have more than one problem. And then you have to, so what I look for are all the areas of inflammation and pain that you don't know about, that you haven't been pointing to. Yeah. And if I go after those very often, you start to feel a little bit better in what you're doing. Yeah.

Caspar ([00:18:23](#)):

And most people, I believe, think that inflammation is due to some injury, infection, something that that is a, you know, a physical thing. Whereas we understand that it could go much deeper. Inflammation could be caused by toxicity, it could be caused by emotional trauma. It could be caused by many, many, uh, different things. Even nutritional deficiencies can lead into that as well. But you know, a big part of what you talk about is something that, that we love to talk about as well, just in disease overall is lymphatic drainage is this, you know, overlooked side. I think of everything that is detox and organs of elimination. Everyone knows the liver when you drink, your liver gets uh, impacted and your kidneys 'cause you're excreting things. You're gi in some ways because of course you're excreting. But you know that that unsung hero is the lymphatic uh, system. And a big part of what you do with stop chasing pain is look at the lymphatic system in lymphatic drainage. What led you to that realization? Meaning you went past the, the biochemical kind of physical look of pain and you started looking at many different systems. It's all intertwined, it's all together. But what was it that brought you to the lymphatic system

Dr. Perry Nickelston ([00:19:34](#)):

Almost dying and wanting to kill myself. And I'm not kidding you. Hmm. I reached a, a form of rock bottom where I was in the abyss. I was below the abyss where I just couldn't get out and I needed to find a different way of looking at my body and looking at the healing and then really stopping and asking, okay, what in the world is my body trying to tell me here with what's going on? Right? And a big part of that was inflammation. Right. And I think before I get into my story, it's really important for people to understand that you need inflammation. Like if you didn't have inflammation, you would die way sooner. Trust me. Uh, because that kills stuff that's trying to kill you. But unfortunately sometimes that inflammation switch turns on and it doesn't get turned off or turned down and then everything becomes an inflamed hot mess because uh, inflammation is an immune system response, not a musculoskeletal one.

Dr. Perry Nickelston ([00:20:33](#)):

So that's a big one that people need to understand. So when you get a boobo or your, your knee hurts, it's not musculoskeletal inflammation. That's immune system. So that was a big one for me of like, oh, you know, I've been looking at the musculoskeletal system and I've been looking at the nervous system. Let me look a little bit more at the immune system. And then you realize, holy cow, they all talk to each other, right? Yeah. And so I said, I've got all this inflammation in the body, so why is my body having a hard time getting rid of it? And why is it going and overproducing the inflammation? First of all, the answer is protection. Mm-hmm. <affirmative>, right? And then I said, okay, well what's part of inflammation? Well, the lymphatic system, its main job is to get rid of inflammation in the body and things that are trying to kill you.

Dr. Perry Nickelston ([00:21:26](#)):

But I never looked at the lymphatic system in my journey, uh, up to that point because I didn't think, well, you know, I don't have cancer. Why do I need to look at the lymphatic system? 'cause that's usually when you'll hear about the lymph system because cancer can spread through the lymphatic system and people have had lymph nodes removed, especially when they've had breast cancer. That's a big part of what they do. But you also need to, when you learn that the lymphatic system kills cancer cells every day, so you don't get cancer, that's a big part of its job. Right. And then I don't have lymphedema and lymphedema is where you have a problem with your lymphatic system where it doesn't work as well or

as compromised and then body parts become abnormally swollen compared to another one where you have a leg that really swells up.

Dr. Perry Nickelston ([00:22:17](#)):

But I don't have any of those. I'm like, I don't have a lymph problem. Right? Unbeknownst to me, I mean that was one of the biggest things that I was dealing with, but I didn't realize it at the time until I went back to basics of, okay, let me just try to understand inflammation and uh, lymphatic system. And I was starting to study, let me go back to fundamentals of what cells need in order to heal, recover and generate. I said, I'm gonna wipe the slate clean. Forget all this muck that's been instilled in my brain from education and start from Sesame Street level. Okay? Like C spot run. I have a cell here. Uh, let, if I can figure out how one cell works, I could probably figure out how the other trillion work. 'cause it's the same basic mechanism. And I say, okay, well cells need uh, nutrients and oxygen, a lot of it, right?

Dr. Perry Nickelston ([00:23:12](#)):

So you get that through breathing and you get that through food that you eat. I'm like, okay, well once you have the food and once you have the oxygen, how does it get to the cell? Well that's blood flow, right? So blood flow is a huge thing for me. 'cause if, if stuff doesn't get to the cell, you're not getting better hard stop period. That's it. And then, okay, if it gets to the cell, 'cause I get good blood flow, the cell uses the nutrients and the oxygen and that is, that creates energy. So it can heal itself or it can make new, more resilient, stronger cells that adapt to the stress of life. So you become more of a hashtag beast mode, monster human being. Right? But when you make energy, what do you make? You make waste. Right? And then how does the waste get out of your body?

Dr. Perry Nickelston ([00:24:12](#)):

What was the next question? Well, it gets out through the bloodstream again, just a different part of it through the veins. So blood flow once again. But then it's the lymphatic system. The lymphatic system is the primary system that gets rid of waste in the body and it kills a lot of stuff that gets into the body that's trying to kill you. It kills viruses, bacteria, parasites, toxins, cancer cells and it, you pretty much name it, right? And its main job is to get rid of excess proteins in the body. 'cause you don't want proteins floating around in the body because that's gonna make you an inflamed hot mess. And it's gonna get rid of metabolic cellular waste, which is basically cell poop and long chain fatty acids is word of those. And so that's getting that toxic stuff out. So it takes it out.

Dr. Perry Nickelston ([00:25:11](#)):

Here's kind of cool, it takes it out and puts it into the vascular system. Into the veins. So then it can go out into the other arteries again. So it can go to your liver or it can go to your lungs. So it can go to your colon. So you can breathe it out. You can sweat it out, you can pee it out, you can poop it out. So all these things, I realized that most of your organs are designed to get rid of muck. What's I call muck waste. I said, oh my goodness. What would happen if something happened to the waste management system of your body and it was compromised and couldn't get out? If it can't get out, you're gonna die within two days, period. But what if it is maybe working at only 50% capacity? You might not feel it right away, but you'll feel it after five, 10 years.

Dr. Perry Nickelston ([00:26:05](#)):

Right? 'cause it hits an overload and overburden. And then why are you gonna get inflammation? Well, because you're living in your own toxicity of waste, right? And then if they can't get out, then your

body's gonna say, that stuff's not supposed to be here, we gotta kill it. And what's the number one way it tries to kill it? It starts with eye N and ends with inflammation. Inflammation, right? So then you become inflamed because you can't get rid of things. And it's just this vicious cycle that happens. And I realized for me, and for most people, I was busy trying to put all this nutrients in and the oxygen in. And that's the diet, that's the breathing exercises, all the stuff on the front end. But if you don't clear the back end first, you're not gonna, you're gonna make yourself worse. You're not gonna get better.

Dr. Perry Nickelston ([00:27:05](#)):

Because I realized that hey, you know, even good food also turns into waste. Yep. Just like bad food. I mean, I'd rather eat good food than bad food. That's a, that's a good step up the ladder of healing. But it all goes to the same place. And I realized, holy cow, that's my issue. And all these areas that I was touching on in my body, I was just working fascia and muscle. I never thought to myself, I wonder how this is influencing my lymphatic system and my blood flow system. I was not thinking that. Even though, here's the thing. Even though I was already influencing them, I didn't realize to what extent, if at all until I had somebody say, I think I know what your problem is. I think you have a lymphatic system issue. I went, lymph, what are you talking about? And they subsequently checked the primary areas of my body where you have, uh, lymph nodes that gather that can swell up.

Dr. Perry Nickelston ([00:28:06](#)):

Mm-hmm. <affirmative>. And we'll get into that later. Every single one of 'em hurt just as much as the last one. Particularly the ones in my neck. And I kid you not. But within three days after that, I felt about 40 to 50% better than I did within the last three years. And I'm like, okay, this, I'm onto something here. And then that was the ticket where I knew that I, I was gonna go down this road and dedicate my life towards understanding it. And it was right there in front of me the whole time. I just didn't see it yet. And then when you see it and you understand it, you can't unsee it. Yeah. And then now it made sense. I look back, I'm like, oh my God, that makes complete sense. I look at my face and my body and I look, now that I know what to look for, I look like a big giant swollen walking lymph node everywhere.

Dr. Perry Nickelston ([00:28:59](#)):

And then I had developed about three individual cases of cellulitis. Mm-hmm. <affirmative>, very painful infection of the body. And I'm like, okay, why in the heck am I getting that? You're not supposed to get that, first of all, and you get three times. Well then I realize one of the biggest causes of cellulitis is that you have a lymphatic system that's overburdened and you're living in toxic waste. And then you get an infection. There you go. Right. And now when I, when I put those puzzle pieces together and I started to work the system, then the dominoes began to fall. And now I connect that system to all the other systems of the body. So people can see in my viewpoint here, everybody has a lymphatic system issue. They just don't know it yet.

Caspar ([00:29:49](#)):

Yeah. You know, it's interesting 'cause my father started off conventional medicine before he got into integrative medicine and he was an anesthesiologist and he worked his way up to be a chief of pain services. And after all the years of, you know, just doing the drugs, the steroids, the surgeries, he had enough and he, you know, started searching in the eighties and nineties for other things. But he looks back on that time and people ask about, what'd you take out of that? And he says, you know, if you know anything about pain, it's not what you put into the body that'll ever treat. It's what you take out. And that's not surgery. He's saying that was the toxins and the waste that was basically not able to get

out. Yeah. So you could give as much as you want in pills and everything else until you stimulate that lymphatic and especially the organs of elimination, you have a terrible biological terrain that's going to cause inflammation.

Caspar ([00:30:37](#)):

All sorts of autoimmune disorders and everything else that goes along with that as well. Rheumatoid arthritis. And it goes usually into the connective tissue and around the areas. And then you have inflammation and pain. And people say, why do you have pain? Take painkillers, do this and that when in reality you are correct. They, they should be looking at the lymphatic system and getting rid of things, taking it out of the body. So with that said, and you know, with some of the protocols I know you have and everything, what, what are some ways that, that people should be looking at to stimulate their lymphatic system?

Dr. Perry Nickelston ([00:31:09](#)):

Great question. Never reminds me of when you were saying there about a quote, I can't remember who said it, but it was, it was a medical doctor who said it. He said, it doesn't matter what your doctor calls it, it always involves toxicity.

Caspar ([00:31:21](#)):

Yes.

Dr. Perry Nickelston ([00:31:22](#)):

It's true in some way, shape, or form. Right.

Caspar ([00:31:24](#)):

It's the terrain.

Dr. Perry Nickelston ([00:31:25](#)):

So I already know when you have chronic inflammation or an autoimmune disease, your lymphatic system's a hot mess. Yeah. It doesn't mean that's the only issue, but I'm gonna contend this. If you don't do something on purpose to try to improve it and improve it, you're really gonna struggle to get well. Yes. Right. So here's the cool thing about the lymphatic system. Um, I think it's the most important system of the body because it controls the terrain that all your cells live in. Right? And you cannot get well in the same environment. You became ill within one of my favorite sayings. So if your cells are living in their own toxic poop, you're gonna struggle. Right? So phase number one is try to try to eliminate that. And you've got about 700 lymph nodes in the body. Some people will say 400, 500, 600. I just want you to know it's like more than five.

Dr. Perry Nickelston ([00:32:19](#)):

Okay? Um, and those are many toilets basically. And they act like a toilet to flush waste out of your home. And that's what they do in your body. And they gather in, uh, clusters, little communities in the body. Most of your lymphatics live in three places. One is the skin because your skin is exposed to the outside world and you, that's why you'll get a lot of skin issues when you have lymphatic issues. For instance, with me with cellulitis, right? The other one is in the neck. One third of the 600 to 700 lymph nodes are from the collarbone up.

Dr. Perry Nickelston ([00:33:08](#)):

So let's just think about the design of that. Why in the world would nature or whatever you believe in, put that much there because there's probably a super duper uber important reason to take care of in relationship to elimination of toxins and ensure blood flow to and away from something that's quite important. That's called your brain. Mm-hmm. <affirmative>, right? So people will have neuroinflammation in the brain when they have a lymphatic system issue. Uh, and the other one is your gut, by far the most of the lymphatics are in your gut. Now why is that? Because most of your immune system lives in your gut. Why? Because it's exposed the largest surface area of the body exposed to the outside world. It's not your skin, it's your gut. So if I laid out your gut, flat out open, it's about the size of tennis court because it has to, uh, come in contact with whatever you stick in your mouth, right?

Dr. Perry Nickelston ([00:34:10](#)):

So that's why it's a good idea not to put crap food in there if you can, right? But if stuff breaks through that gut lining and you have leaky gut, which most humans do because of its stress induced or poor diet or all sorts of different things, then if it breaks through the gut lining, well then your immune system has to be there to kill whatever breaks through it. And then the lymph system says, I'll do it. And so the lymphatic system automatically gets overactive. Right? That's why I go to your gut when I check for anything, right? So gut issues will cause inflammation anywhere in the body. So now that you know that you've got most of the lymph in the head and the neck and in your gut and these lymph node clusters also gather around the primary joints of your body. And the reason they do that is this, the two biggest things that keeps your lymphatic system moving 'cause you want to move that stuff out, is movement.

Dr. Perry Nickelston ([00:35:14](#)):

And people say, what type of movement? And my answer is yes. Just get your body doing something right? Right. Well walk-ins are great. One jumping up and down in place is even better. Walk up, up and down, walk, jump up and down, you'll change your life, right? So movement, because that pumps the lymphatic system through muscular contraction. And it, because of that, it puts the lymph nodes around the joints of the body that are supposed to move the most, the shoulder joint, the hip joint, the knee joint, and your abdomen. That's why walking stimulates it. So well, and the other one is breathing, but a very particular type of breathing, breathing through your diaphragm, the muscle on the lower part of your thorax here, above your abdomen. Many people may be familiar with the diaphragm. And that's a large domed muscle that whenever you breathe in, particularly through your nose, not your mouth, the diaphragm contracts, it pushes your organs down.

Dr. Perry Nickelston ([00:36:22](#)):

And then when you exhale, the diaphragm relaxes and the organs get pulled back up. So down and up, down and up, down and up. That sounds a lot like a pump. So what it does is it pumps the lymphatics everywhere because it's pressure, pressure moves, fluids. But where does most of your lymphatic system live in your gut? So when you breathe through your diaphragm, then you pump the guts and that's where the largest lymph node in the body sits about halfway between your navel and the bottom of your sternum. The largest lymph node in the body sits there. And that takes all the lymph from the organs, the pelvis, and the legs and feet right there. If that gets blocked, you're gonna have a problem everywhere in all four corners, hands, feet, brain, back, everywhere. Right? That's why you always have to clear the, uh, the abdomen first.

Dr. Perry Nickelston ([00:37:25](#)):

But if you look at the culture of today, we don't move a lot. No. We sit a lot, right? And we don't really walk anymore. And if we do walk, we don't walk with purpose, right? Mm-hmm. <affirmative>, because I, I can't walk with purpose 'cause I can't see my phone if I walk and I don't use my, you're looking down at your phone. So you're, you're locked forward and your posture changes and everything tightens up and then people don't breathe. Well, they either over breathe because they're stress breathing, so they're hyper breathers or they breathe through an open mouth and not the nose. Mm-hmm. So you just shut down the two biggest things that move fluid in your body. And then you stack that on top of all the different toxins that are coming into your body all the time through what you breathe, what goes through the skin, what goes through your mouth or what goes in through your thoughts.

Dr. Perry Nickelston ([00:38:29](#)):

And then your body's like, I'm doing the best I can with what I got in the moment I'm in, but I'm overloaded here. Like I'm, there's nothing else I can do. And then the only thing it can do is say, I'm gonna protect you the best way I can. I'm gonna try to kill this stuff for you until you listen to Dr. Perry and you figure out you should work your lymphatic system to flush those toilets. And then I don't have to inflame you so much, you always have to just kind of step back and think like your body thinks right. It doesn't oopsy daisy anything. There's no accidents in the body and inflammation is on purpose.

Caspar ([00:39:08](#)):

Yeah.

Dr. Perry Nickelston ([00:39:08](#)):

So flush your toilets first and then you start to, then the other things will begin to work a lot better. Right? And, and here's the thing that really sent home for me. I was taking a lot of supplements trying to get myself well, right? Because a lot of times you need those things 'cause you can't get what the nutrients you need from the food that we eat of today because I don't even know if people eat food anymore, right? Yeah. Or it's not just that. It's what was done to the food before it got to you. And depending on where you, you live in the world, particularly the United States, it's probably something horrific with the pesticides or the preservatives or all sorts of different things like that. But I thought to myself, you know what, I'm putting these supplements in to help my cells. First of all, can it even get to the cell? Right? If your lymphatic system is overburdened, I'm gonna tell you it's not mm-hmm. <affirmative>. And then if it does and the cells use it, well they're gonna make waste from my supplements <laugh>. So I'm right back where I started from. Right? See, the starting place is always the same. Begin to pay more attention to your lymphatic system through that. And hydrating yourself is a big one because the lymphatic system, check this out, it is 90% water. Mm-hmm. <affirmative>. And guess what else is your blood? So if you're dehydrated, nothing works.

Dr. Perry Nickelston ([00:40:43](#)):

And most humans are dehydrated.

Caspar ([00:40:48](#)):

It's, it's funny because we become kind of this arrogant race that, that sees our bodies as broken when something goes wrong. Yeah. But it's really our actions and our bodies are doing the best to make up for our stupidity and our actions. Right? It's, it's so much smarter, right? It's so much smarter than we are. We sit there and we go, oh my body's broken. It must be genetics or something. I need pills for that because I have this, this, and this. When you wanna say, your body's so much smarter than you are right

now and you're doing all these things to it that are, it's actually counteracting your stupidity in a sense to help save your life and keep you alive. And here you are talking down to it and giving it chemicals to try and subdue what it's doing to save you. So it's kind of like this, this really weird thing we have going on right now.

Caspar ([00:41:37](#)):

We've gone against nature. You're right. We're not walking properly, we're not breathing properly. We're not even drinking. If we do drink water, sometimes it's hap water that's so contaminated. It's probably more toxic than it is helpful. We've gone against so many of these things and then we have this kind of arrogant approach to, uh, you know, conventional medicine will fix it. You know, my body's just screwed up somehow. Woe is me sort of thing. Mm-hmm. <affirmative>, do you find that a lot of people need sort of this retraining when they come to you of understanding that their body is completely not broken? It's actually in an amazing, miraculous, self-healing state right now. And they need to appreciate that. Is that part, is education part of this to kind of reeducate people to realize, hey, we're not broken. That's actually a miraculous thing happening right now that your body's doing to keep you alive.

Dr. Perry Nickelston ([00:42:30](#)):

Yeah. I would say virtually a hundred percent of the time. Like 99.999% of the time. Yeah. And it's easy to get to that point honestly, because I've been there and you don't, you don't wanna have suffering and, and feel that way. And then you start to have a resentment toward your body of why aren't you working? Why can't you get better? And I'm trying all these different things. Right? And it's easy to fall into that quicksand and, and it's understandable, but I'll tell you this much. So if you stay in that mindset, you're never gonna get well because you, you just got one foot in the quicksand the, the whole time that, that re what I call a reme is important. Even the that one of pain of what that means. And like we said before, the body always does the best it can with what it's got in the moment.

Dr. Perry Nickelston ([00:43:19](#)):

It's in to heal and protect you. 'cause things could be way worse than they are. Right? It, it doesn't watch you to be suffering anymore than you, than you are. But if you're missing some of those fundamentals and basics that we overlook and listen, sometimes you need, uh, medications and medicine because without it, you're gonna be dead. Or, or maybe I going to ease your suffering. Like I had cancer 20 years ago and I removed my thyroid gland. If I don't take my thyroid medication, Perry's gonna be lights out. Mm-hmm. <affirmative>. So I take that, but it's what I want people to realize is that you can't just do that, like add the other things that we were discussing before. So you can lighten the load that your body is trying to carry every single day for you. Right. Because maybe just maybe you might not need as much of whatever you're taking at some point.

Dr. Perry Nickelston ([00:44:18](#)):

Or maybe at some point in time you might not need it at all. I don't know. Yeah. But I do know this much that if you have this overloaded lymphatic system and the ability to get rid of that metabolic cellular waste, you're always gonna struggle. But it's, it's how you frame it too. So, but also people don't know what they don't know. I've been in healthcare most of my life and I wasn't paying attention to the lymphatic system, so I can't fault somebody else for not knowing about it. And I was actually quite angry in the beginning because I was seeing multiple doctors and multiple specialists that went through surgery. Not a single fricking one of 'em ever said the word lymphatic system to me. Right? So it's just a

matter of like, once you see it, you can't unsee it. And one of the, one of the easiest ways that I try to get people to, um, learn about the lymphatics is an analogy.

Dr. Perry Nickelston ([00:45:20](#)):

If I, if I may give you this. Please. Uh, 'cause I said, okay, if it's a new concept for people, the easiest way for them to learn it is to equate it to something else that they already understand. And then it makes sense. So there's two ways that I explain it. One I've already given you of the lymph nodes basically being many toilets like you flush in your house and the toilets go from there down a pipe into a bigger pipe and out to a bigger pipe. And that's the way the lymphatic system works. From small pipes to medium pipes to bigger pipes to exit out. So you have to clear all the pipes. And if you get a backed up toilet in your house, I don't want to be anywhere near your house. And it's the same thing with your body. But my favorite one is the fish tank analogy.

Dr. Perry Nickelston ([00:46:12](#)):

So my program is called Body Aquarium lymphatic mojo. Mojo just means magic. And I mean the magic of how you'll, the body can heal itself. So you think about the fish tank, it's water in there, right? Well that's mostly, you're mostly water. Okay? And inside that tank, you've got your trillions of different cells with all these different names that humans gave them different names, but they all pretty much function the same way. Well, those are fish. Imagine having a trillion fish in that tank, right? So what you have in the tank is you feed the fish, you give them food, right? That's the nutrients in there. But you also have this little filter system up in the corner that has these little bubbles going in there. And then that's gonna keep the water moving. And that gives it what? Oxygen. Right? So they got nutrients and oxygen and the water, if you take care of the tank, looks awesome, right?

Dr. Perry Nickelston ([00:47:13](#)):

But what keeps that tank looking so great are all those things underneath the tank that you don't see 'cause they're hidden by the cabinet. And those are the pipes and the filters. And that's the lymphatic system. Mm-hmm. <affirmative>. So if that filter system went caputs, you wouldn't notice it right away, but in a couple of days you would see that water doesn't look so good, right? It's gonna start to turn green or mucky. And then things start growing on the glass. And you can call that biofilm mm-hmm. <affirmative>. 'cause that's, and then oxygen starts to go down because the water becomes stagnant 'cause it's not moving. And then when you have low oxygen in the body, you're gonna have pain somewhere. Period. And the things that wanna kill you love low oxygen bacteria, virus, cancer cells, they, that's, that's a beach day for those guys. Then stuff starts to grow on the fish, right? And then eventually you'll look at the fish and you'll see them struggling to breathe like this.

Dr. Perry Nickelston ([00:48:19](#)):

That's your cells. They can't get the oxygen in and you can keep feeding those fish. But if you keep feeding the fish, the fish are gonna keep pooping and they're living in their own poop and the food at the same time and they're gonna die. Right? And that's what happens to yourselves. 'cause nothing wants to survive in that water. So then I asked for, people said, how in the world would you fix that problem? What would you do? Well, you have, you take everything out of the tank and you need to clean the tank and then you put new water in there and you put new fish in there. Right? That's kind of what we do in medicine right now is that we just take care of what we see. And then, but if that's all you did, what would happen a week later? Same thing.

Dr. Perry Nickelston ([00:49:07](#)):

Same thing. Holy cow, they're dying again. It looks terrible. And then I'll say, well, what's the biggest thing that you forgot to do? I gotta look underneath where nobody's looking. I gotta clean your pipes out. 'cause then if you can get that, then you do the other step. Now stuff lasts. So here's the message I'm trying to send home for you. What you do first, and you always do first, is clean your filters first. Mm-hmm. <affirmative> clean your lymph first. Then you go back and you do the all, all the other stuff. And that's what I see people doing all the time, is they're doing all the great breathing techniques. They're doing all the diets, all the supplements, everything they're supposed to do. But nobody ever showed them what to do with the lymphatic system. So here's the next caveat. People say, doc, but guess what?

Dr. Perry Nickelston ([00:49:58](#)):

I'm breathing all the time. I took all the courses and I move all the time. Shouldn't my lymphatic system be super good? Well, the operative word is should. Sometimes that's not enough. Why? Because they're too overloaded, too overburdened, full of too much muck that you can't do that. So for instance, that's the toilet. That the only way you're gonna get it to unclog is to plunge it or snake it. That's it. If you keep flushing it, it's gonna overflow. Well. That's what your hands are for. That's when you do lymphatic resets. Lymphatic massages, my favorite way is by hand. Mm-hmm. <affirmative>. Right? Uh, but you can do any technique you want as long as you do it in the right order. 'cause that's really important. And hopefully you have time to discuss that because you can't just start pressing on body parts and move your limp and cross your fingers and hope everything works out.

Dr. Perry Nickelston ([00:50:58](#)):

There's a certain way that you need to do it based on how pressure moves in the body and how fluids move in the body. If not, you're gonna make yourself way worse. Hmm. Then once you understand that, you can put the puzzle piece together of anything in relationship to where you want to get blood flow in, where you want to get blood flow out and how you get lymph flow in. Because here's the dirty little secret, and then I'm gonna stop talking for a second. All the systems in the body work together. They never work alone. They never get injured alone. So when I work on these areas, I always influence blood flow in blood flow out lymph flow and nerves always. So when people say, doc, when you do these resets, which system are you impacting? My answer is, yes.

Caspar ([00:51:38](#)):

I

Dr. Perry Nickelston ([00:51:39](#)):

Just want you to do it in the order that I'm gonna show it to you. And because that's gonna be the biggest difference for you,

Caspar ([00:51:45](#)):

Right? There is no one system without the others. So you can't say that one system is only being impacted. It's impacted all of them. And a lymph system, of course, has such an impact on others and everything is interrelated and it's, it's going to be a little bit different. If your lymph system isn't working, it can impact a different organ. Maybe your heart's more impacted for you. Or maybe it's the liver or maybe it's endocrine, who knows, right? Everyone is has their predispositions, but we do know you're in a aquarium, let's put it that way. So you have to change that. Now you say the the importance the

priority is, is, is a critical factor in this. So let's go into that because I think some people just say just drain, just, you know, do whatever you do do. And that can go with even dry brushing. I've seen and you know, experts will say, no, there's not a, uh, any size fits all. You have to do it in certain ways. The body works in that way as well. So what is the, uh, significance of the steps within this that you'd recommend for lymphatic drainage?

Dr. Perry Nickelston ([00:52:50](#)):

Yeah, that's a great question. So, um, doing dry brushing and breathing and movement is great. At least you're doing something for the body, right? But would you understand how fluids move in the body? It changes everything, right? That's the biggest thing that I try to teach people and that that's based on the law of hydrodynamics. So I'm gonna go a little bit of kind of the physics of how fluids move. One of the biggest properties of fluid, and it's this, right? High pressure fluids like to flow to low pressure fluids, that's just energy efficiency. Like high naturally goes to low because it's the easiest thing to do. So imagine that you've got a water dam, okay? And then the water dam, you've got everything on one side and you've got nothing on the other side. If you open up the, uh, doorway for the dam, the water naturally goes to the low side, right?

Dr. Perry Nickelston ([00:53:57](#)):

That's the way the lymphatic system works. So the lymphatic system goes from high pressure to low pressure. So where's the lowest pressure in the body in relationship to fluid flow? It's lowest pressure for lymph flow and it's the lowest pressure for vein flow. And that's cool because the limp flows into the veins at the lowest pressure site. The lowest pressure site in the body for fluid flow is the collarbone, both sides, right? Everything wants to go there. Now, if that's the lowest point, let's extrapolate out where the highest pressure points would be. The furthest distance away from the collarbone. Mm-hmm. <affirmative> your fingers, your feet, and your head. That's why the fingers get swollen. The hands get swollen. In particular, the feet get swollen. 'cause then you have to fight more gravity going all the way up, right? And it's trying to get there. That's what I'm telling you.

Dr. Perry Nickelston ([00:55:04](#)):

It's trying to get to the low pressure side. But in order to get to that low pressure, it has to get past those lymph node clusters that we mentioned before. Now, if you have some type of obstruction or some type of blockage at your exit point where everything flows to, you're gonna have an increase in pressure at the collarbone because it all can't flow out. Imagine a big pipe that has fluid in it and I constrict the pipe 50%. Well, the fluid's gotta go somewhere. It can't go out. Where does it go? It goes backwards. So when you close the collarbone down, and that happens a lot from tightness of tension and poor posture and poor breathing, all those sorts of things. Then you backflow pressure to the furthest points. You get it in your brain, you get it in your feet and everywhere else, and then that becomes stagnant because they can't get out, right?

Dr. Perry Nickelston ([00:56:06](#)):

So when you do lymphatics, many people start dry brushing from the hands and the feet. And I don't want you to do that because if you do that, you're bringing stuff from high pressure towards low pressure that might have blocks in it where it can't get out. So if you're blocked at the collarbone and you're sending stuff to it from your feet, well it's just gonna swell up because it can't get out. So you always go from low pressure towards high pressure. And in my world it means this. You start from the collarbone with your work and you move up to the top of the head, you start from the collarbone and

move down to your hands and then down to your feet. Once you do that, then you can work your way from feet and hands and head down. But you always go low to high first before you go from high to low.

Dr. Perry Nickelston ([00:57:10](#)):

'cause it's just based on how fluids work. So remember I told you before about the, uh, clusters, right? Mm-hmm. <affirmative>. Um, so let's, let's give you an example. Let's say you've got swelling and inflammation in your right foot, or I've injured my right foot and I've got, uh, damage there because I, I sprained it. Well, you have what? Inflammation? Well, that's gonna be your immune system, that's gonna be lymphatics, right? So anything that's in that ankle that's been damaged, your, your body's gonna try to get it out. And where's it gotta ascend it to your collarbone. That's where it's gotta go, right? Particularly to the left side of your collarbone. That's where most of the lymphatics drain. But in order to get from your right foot to your collarbone, it's gotta get past the lymph nodes in your right knee, the lymph nodes in your groin, the lymph nodes in your abdomen and along your spine before it dumps into the left side of your neck.

Dr. Perry Nickelston ([00:58:10](#)):

But that's just one pathway. Now, in order to heal that ankle, I need to get blood flow and nutrients and oxygen to the ankle. And then I'm gonna ask you, where does that come from? Well, that comes from your heart, right? And then now the heart's gotta send it down to the foot. But if you're blocked in the knee and the groin, in the abdomen and in the collarbone, it can't even get there either because you're blocked both ways. So what that means in my world is you never treat the ankle first. Why? Because if stuff can't get out that I'm trying to treat it and I'm trying to dream bring stuff to it, my supply chain may be broken. So what we do is I always drain from the collarbone down to the ankle, then I treat the ankle. Does that make sense? Because that's, that's a whole different ball game right there.

Dr. Perry Nickelston ([00:59:14](#)):

Right. Because now I wanna ensure that my pipes work both ways because those nerves that sit there, nerves don't work well and they don't like it when they can't breathe and when they can't get oxygen and they can't get rid of the waste that they make from wiring and firing. So they're also the fish that sit in the toxic tank Mm. That you, uh, can irritate. Right? But the only way you're gonna know if those areas are blocked is to check 'em. And here's the cool thing. When you check 'em, you automatically clear 'em. How cool is that? Yeah. Right? And then along the way, I'm looking at your reaction to what I'm touching and what I'm clearing.

Dr. Perry Nickelston ([01:00:12](#)):

Right? Because I can, I can promise you this. If I touch you in the abdomen and you jump off the table, or you want to punch me in the face because it hurts when I push into your abdomen, I'm gonna tell you that's gonna be a deciding factor on whether your ankle gets better or not. Hmm. Because that's where the choke point is for everything to and from your ankle, right? Because your body automatically knows what it needs to do to heal itself. The question is, are you giving it the supplies it needs to do so? Yes or no? And if your blood flow is compromised in or out and your lymph flow is compromised, I'm gonna tell you it can't. And that's why stress is so important because stress, incessant stress increases tension in the body. Mm-hmm. <affirmative> and tension is tightness and tight tissue doesn't accept fluid flow.

Dr. Perry Nickelston ([01:01:06](#)):

Well, if you want to know what that feels like, make a fist for five minutes and lemme know how your hand feels. Right? That's the same thing that's happening in all these areas. From tension and stress, from your job, from your relationship, from your poor posture for how you think about yourself. All a 7 24 7, bam, bam, bam, bam, bam. Right? And then it can only take so much. And then when the body can't do it anymore, it tells you, it says, I need your help. I need you to change something. And what's the catalyst for change? I'm gonna hurt you is what I'm gonna do. Mm-hmm. <affirmative>, I'm gonna cause pain. Not to punish you, but I'm trying to help you. And the biggest lesson I'm trying to teach you is please don't look only at the site I'm sending you pain at. That's what it's trying to tell you.

Dr. Perry Nickelston ([01:01:54](#)):

That's why you clear these lymph node channels first. When I work with people, no matter what, like everybody clears these lymph channels no matter what your diagnosis is, because of, like I said before with toxicity, then we go back and we do all the other stuff, then we go back and do all the other stuff. That's my number one benchmark of lymph comes first. Always. That's why. Does that make sense? That's a big concept that I want people to understand of it's not just what you're doing, it's where you're doing it. And the order that you're doing it in will make the difference on your results.

Caspar ([01:02:40](#)):

Yeah. I mean, it, it, it absolutely makes sense, especially for someone, you know, I, I have a business background understand economics pretty well, and supply chain management means so much. If you can't get something somewhere, it doesn't matter. You know, the demand doesn't really rush it. If you don't have it, it, it just simply won't work. So in this case, if you have pain and inflammation somewhere, which is a wonderful teacher of everything, but you cannot literally get the waste out, bring the oxygen nutrients in for the proper it, you are in a losing game. So the whole idea is, is very, you know, it's simplistic on, on the essence of it in a sense because we all need to be moving things throughout the body. And the lymphatic system is that highway that does it. That seems to be, you know, like Los Angeles on, you know, during rush hour a lot of times and most of us, yeah. We are living in quite dirty aquariums.

Dr. Perry Nickelston ([01:03:35](#)):

Oh, everybody. Yeah. So, uh, um, it's not, I'm not saying that that's the only problem and when you fix that, it's unicorns and rainbows. Sometimes it is. But what I am gonna contend to you, it is such a big piece of your fundamental puzzle that if, if it's an issue and you don't take care of it, all the other things that you're doing, one might not work. Or here's the proverbial problem that everybody ends up with. Everything keeps coming back. That's something I've always wanted to know. Why in the heck am I doing all this stuff and stuff keeps coming back. Now there you're allowed to have more than one problem, but that one that I told you about, blood flow in and blood flow out and waste out, that's simple. But that's so fundamental that if it's not working right, you can't heal. Yeah.

Dr. Perry Nickelston ([01:04:28](#)):

Period. Because that's the only way your cells get anything, man, is from blood flow. How the hell do you think it gets there? So it goes into the blood, but then it leaks from the blood and goes into what the fish tank. Mm-hmm. And it goes into the fluid to get to the fish, to the cell, and then it goes back out. So it's the in and the out supply chain. Yeah. So it's not just a matter of blood flow getting to the fluid, but will the fluid allow it to cross over to get to the fish or not? And if your lymphatic system is toxic and

you're full of waste and you're full of excess protein 'cause you can't break it down 'cause you got a leaky gut, well then you're not right.

Caspar ([01:05:19](#)):

Yeah.

Dr. Perry Nickelston ([01:05:20](#)):

So you do this in conjunction with everything else. This is what I'm trying to tell people is

Dr. Perry Nickelston ([01:05:25](#)):

Do what you're already doing, but now add this to it and then I want you to strap yourself in and watch what happens next. That's what I'm trying to tell you, right. Because when I show you how to release these places, people say, the first thing they tell me is, God, there's no way. Are you kidding me? That's it. That's all you got. It can't be that simple. And then I tell people, oh, who hell ever told you that? Why can't it be that simple? Effective things don't have to be complicated, right? That's right. It's just supply chain logistics 1 0 1. Yeah. Right. It's that, here's the thing that happens. When I did my lymphatic system, I got rid of 30 pounds of swelling and inflammation and body fat in one month. Hmm. Because I got rid of the muck. Because when you're full of muck, which is my technical term for it, your body swells your container to try to dilute the muck. So you hold on to body fat, you hold onto the swelling, inflammation, and edema, and you'll like this and you can't get rid of it. Right.

Caspar ([01:06:27](#)):

Yeah. I mean, there is so much I would love to keep talking about this subject, uh, because it is such an essential one. And we could go on for hours. I know we could. But yeah. I do wanna start to wrap things up a little bit here. And listen, you have an incredible Instagram. You share so many things and you do break things down into simplicity in these analogies. But for those that are listening, what's what, what do you find is one of the most important things that you could implement in everyday life to help become better, stronger, more flexible, and just more, more healthy overall?

Dr. Perry Nickelston ([01:07:04](#)):

That's a great question. Well, I'm always about basics and fundamentals. One is to, uh, hydrate yourself, which means drink more water than you're doing right now mm-hmm. <affirmative> and try to make it good quality water. And then watch whatever else you're sticking in your mouth, in relationship to the water, which means not two cups of water, five cups of coffee. Right. Minerals and electrolytes are a huge deal that I tell people to look into because stress depletes minerals. And then most people don't absorb plain water. They need some type of cell salt or electrolytes, uh, so they can get rehydrated. And then when you do that, you'll very often find that your sleep improves. And then I tell people, uh, try to get more sleep. 'cause if you're not sleeping, nothing works. Right. And then get more movement in your life, but different types of movement.

Dr. Perry Nickelston ([01:07:55](#)):

So one is, I tell people just simply stand up and jump up and down in place for 60 seconds to two minutes as you breathe in and out through your nose. And you can change your life quick, fast in a hurry just from doing that. Right. Because what are you moving when you do that? Yes. Like everything, all your fluids moving up and down, your organs are moving up and down. Right. It's a huge deal for that. And then another one is, I'm gonna say, to try to surround yourself with, um, more positive people in

your life and not so much toxicity, because that's the one, you know, that can suck your healing energy out of you without you even realizing it. So take note of who you're surrounding yourself with during the day, uh, in person, but also where you choose to surf on the, uh, internet. Yeah. And then look in the mirror because the most toxic person might be you. Right.

Caspar ([01:08:53](#)):

It's very, uh, those

Dr. Perry Nickelston ([01:08:53](#)):

Are some simple profound ones like that. Those are catalyst for, uh, everything else. And then of course, like we mentioned before, is, uh, begin to work your lymphatic system. Yeah. That's a big one.

Caspar ([01:09:07](#)):

No, those are profound fundamental lessons we all have to take in. Yep. And I even I even posted on this one recently, you know, say, say, you know, I love you more, most importantly, to the person in mirror, I think we do kind of have a toxic relationship with ourselves. And you know, toxicity isn't just in that physical format that accumulates from the glyphosate, everything else, it's the emotional toxicity. You said the people, the energies that are toxic that can be so impactful and we often forget about those. Dr. Nickelston, I wanna wrap this up and allow you to kind of share where can people learn more about you? I think you have a book coming out, right? Stop Chasing Pain and so many other things. I'm sure you're, you're you're working on.

Dr. Perry Nickelston ([01:09:51](#)):

Yes. Thank you very much. I appreciate that. Yeah. The book is, is coming out hopefully within the next year or so, a work in progress for sure. Uh, but you can go to my website, stop chasing pain.com and then that'll be the jumpstart for all the things that we offer people and we're on, on every social media platform you can think of. And we have education for all humans, not just healthcare professionals, but everyday people that you can, there's so much to choose from. It's a rabbit hole that you can definitely go down and, and, uh, and learn a lot. And, uh, we also have our own podcast that we've had on the air for over 12 years. So we one of the first ones to come on out. And we've talked to a lot of smart people over the years and, uh, it'd be cool if you tune into that. It's called the Stop Chasing Pain Podcast. Imagine that. But <laugh>, thank you so much for having me on. I had a really good time. Oh,

Caspar ([01:10:40](#)):

This was amazing. Thank you so much for your work and, uh, wishing you all the best and everyone, please do, go check out stop chasing pain.com Dr. Nickelston, thank you so much. And as you've heard here today, aging is inevitable, but pain doesn't have to be. Check out Dr. Nickelston's website for countless resources for improving strength, flexibility and resiliency. Until next time, continue writing your own healing story.