

Mindfulness in MSK – Ref 310GP

Robin Lansman 18:27

Good evening and a big warm welcome from me. I'm Robyn Landsman, osteopath and allied healthcare professional. I'm the first to be Academy's guest presenters taking Stephens place for an additional hour of CPD I hope you find it useful. And I hope I'm not the last. This topic this evening is essentially a look at mindfulness and MSK. We brought the topics together, and it's in its application in particular to clinical practice. Part of our conversation this evening, we'll also address how you deal with so called HotSync patients, we've all seen them. These are the ones where you despair, but they might be a big opportunity for you to turn things around. And, you know, you desperately want to help people. I'm certainly built that way. But sometimes you find yourself under pressure to deliver and it's a complex blend of things that occur in that room with that patient that we've got to try and unpick this evening. With that in mind, my guest this evening is Karen Neal. Karen is a pharmacist and a health coach and absolute expert in mindfulness. She is in fact one of the three brains and lead author behind a briefing paper that was pulled together on health promotion and mindfulness. That's a combination that really is very strong. And this was part of the 60th anniversary of the institute of health promotion and education, an event that was at the House of Commons. We were both out just a little while ago, a few weeks ago. Karen, good evening. Thank you so much for coming along and having this conversation with me. We've been working on this and chatting for quite a while. Tell me a little bit more about you. and kind of, you know what, what interested you in this topic to come and talk about it with me?

Karen Neil 20:05

Yeah, thanks for inviting me, it's good to be here. So I've been interested in mindfulness for a long time, I think one of the most difficult things to treat and manage his pain. So it's been really interesting to look at the application of mindfulness to managing painful conditions.

Robin Lansman 20:25

Yeah, no, absolutely, we're going to be talking about lots of different things. But I think let's also just give a little bit of background. So you pharmacology pharmacy, your initial study was was in what pharmacology pharmacology pharmacy

Karen Neil 20:37

degree qualified as a pharmacist and then developed an interest in pharmacology. And the, it was quite molecular, actually, second messengers in the central nervous system. So looking at the effects of drugs in cells, and particularly when you use more than one drug, because often people are taking more than one. So we were looking at cross talk when you use to drugs or more. So it was really

interesting. But we were looking at drugs that weren't going to be out for 10 or 20 years. Okay, I felt like I was working in the future. And I do enjoy helping people are working with people. So that was why the shift then into public health research, I was interested in I atherogenic disease, and what was the cause of it and how we could prevent, for example, drug related admissions to hospital because of side effects.

Robin Lansman 21:27

No one wants to make the problem worse, getting more go to hospital, we want less people in Yeah,

Karen Neil 21:32

funny thing is that now I've been doing it for, you know, 20 plus years, and I am seeing some of those drugs from the lab coming through into clinic. So the future is here.

Robin Lansman 21:43

Well, this evening, we are going to talk about a range of topics, but some of it's going to involve motivation in the practitioner, and particularly how we can support practitioners and and the individual patients with mindfulness and a mindfulness approach. I think there's a lot on bio psychosocial behaviours, and that sort of very big at the moment, I think in musculoskeletal health and how to approach patients. There's also the biomechanical model, we've talked quite a bit when we've been preparing for today. So we're going to balance those and see where perhaps there's some ground in the middle, some common ground that we're going to explore. So and some of this is certainly about forming connections. Yeah, that's what we're going to be exploring a little bit later. So when we look at that, we're going to look at the place of medicines, because you're an expert in that as well, and how they kind of correlate and how they go together or sometimes don't. Yeah, so a little bit of the first part of sorry, we're having a slight problem with our slide. So yeah, we're going to talk about today's Well, we were both at the event at the House of Commons. Yes, recently, and go through some of the topics that you kind of felt following a little bit of the themes that were around.

Karen Neil 22:53

Well, we had the opening from the deputy chief medical officer, and talking about some, you know, key priorities won't be in prevention, wasn't it and collaboration and and then we heard from a Director of Public Health. So it was about public health, health promotion, and celebrating 60 years of health promotion, with the the institute's the IEHP.

Robin Lansman 23:17

And also, I mean, the political people were there as well, because we were sponsored by Karen Buck MP, and a lot of the things they hadn't cross correlated what they were going to speak about the various speakers and yet, it was so onpoint. Yes. Which was amazing. To see a lot of overlap, wasn't there a lot of overlap, and that was that was kind of heartening, really that that people are on similar pages.

Karen Neil 23:39

Yeah, absolutely. To say the diversity of people there, like you say from MPS, that appears the directors of public health, the Chief Medical Officer deputy, you know, pharmacists, osteopath, doctors, yeah, such a variety of people on the same page. So

Robin Lansman 23:56

really nice to see people in the same room talking the same sort of language. So if we move on now, we're going to talk a little bit about motivation. In yourself, so you mentioned a little bit about your background career, something a little bit on, you know, what, what changed you from the pharmacology and that sort of very microscopical approach to now a more mindful approach?

Karen Neil 24:18

Yeah, the shift from the lab was that feeling that I was working in the future? Yeah. And there wasn't enough contact with people. My very early motivation, which I find it helpful to go back to was actually as a child listening to my mom, who was a retired nurse, giving people advice on the phone and helping people and I wanted to be able to do that. But I was a bit squeamish and I didn't want to be a nurse and deal with blood and injections and whatever. And I was fascinated by medicines. So pharmacy was the route for me to do that.

Robin Lansman 24:51

Yeah, it's funny. I haven't said this to you before but I think it's always comes up like this. When when we were when I was when I was a kid, actually my mom what drove me to become an osteopath. My mother had a terribly bad back problem I was in on traction in hospital for weeks, and threatened with injections and all sorts of things came her way. And finally surgery was offered, but she declined. And then it took quite a while, in fact, and it's quite odd that that many patients, you know, who have been to an osteopath or a chiropractor, and they're happy with what they get. They want to try and persuade people they know, to kind of get involved and go and see someone and unfortunately, took my mother a very long time to trust and believe. And she went along to see someone who helped her immensely. And that was my introduction towards osteopathy. So I guess similar. It's a personal connection. And it seems to be with a lot of practitioners. That's what drives them in their motivation. Yeah.

Karen Neil 25:42

And it's interesting you say that about trust, because I didn't have trust even from quite young, in the medicines I was being given. I wanted to know more about them on what they were doing to my body rather than just taking them.

Robin Lansman 25:54

So not taking them blindly. Yeah. Because again, a lot of people these days do take stuff and don't ask questions for quite a while. They don't even know why. Yeah, I mean, I have patients coming to me. And we're taking medications, they don't sometimes know what they're for, which is a little frightening. Yes. So yeah, that's, that's certainly, yeah, worrying.

Karen Neil 26:13

So that's the only motivation. And then the motivation and to health promotion came working as a community pharmacy. Really, there was a lightbulb moment when I really saw the impact of stress on wellbeing. And most of the queries that were coming into the pharmacy had a stress component, either causal or exacerbating conditions. So that really got me interested in stress and mindfulness, Mindfulness Based Stress Reduction.

Robin Lansman 26:40

Well, also the way we met through the Institute of Health Promotion, we're both trustees on the board. So kind of interesting, we're both very keen to spread the word to share what we know. And I think we've connected very much so actually, and it's interesting that even preparing for today, I

think I said that earlier, but I mean, learning about each other's professional asking different questions in more depth has been an amazing we mentioned collaboration, but partnership and professionals having these detailed conversations is so so important in learning about what other people do how they think. So it's it's healthy stuff,

Karen Neil 27:13

it's really valuable, isn't it, like we saw at the House of Commons with all those different professions representing

Robin Lansman 27:17

no cross cross collaboration. So we're gonna move on, just to another topic in just a moment. And that was interesting day, because I think motivation is key. Again, going back to your pharmacy, because I think that's quite interesting. There's a few things here, perhaps, that people be interested to hear about the, you want to just tell me a little bit about what the fast mover shelf or what was on that fast mover shelf.

Karen Neil 27:39

So take, you know, go back to a newly qualified me first walking into a pharmacy discovering this fast mover shelf, which was basically close at hand with the most commonly prescribed drugs, so it was efficient so we could reach them, and then they went out quickly. So high turnover. So antidepressants was the one that really struck me, why are so many on antidepressants. So I developed an interest there in mental health. Painkillers was another one, pain being a massive issue that went into that, talking to the local GPs, and we did the research, because painkillers can cause a lot of side effects, and I actually do disease that was that link, and the other one was antihypertensive?

Robin Lansman 28:24

So a lot of stress, a lot of all sorts of things rolled in. Yes. And what was the thing you mentioned about lowest dose and shortest time I think I get that, but what what how do you relate to that? Well,

Karen Neil 28:34

we talked and we about medicines, and appropriate use, and you'll see a variety, perhaps an all or nothing. There's some people that come in taking quite a lot of medication and being really quite dependent on it. And maybe other people that don't want to take it at all. Sometimes there's extremes,

Robin Lansman 28:50

it can be a mix. I think some people have tried things, and they give up too soon. I think I think partly it's also working where you're treating people. And actually, we're not allowed as osteopath to prescribe or change medication. But obviously, we can make suggestions and recommendations. And how does that combined with the physical therapy that we're actually offering? I mean, that's the can be some useful respite from pain relief.

Karen Neil 29:14

Yeah. And in the conversation we were having, you know, I hadn't appreciated how when a muscle is contracted, that that impairs blood flow, which impacts healing and the therapy. I thought that was fascinating.

Robin Lansman 29:26

So I think it's one of those things. I mean, it's it's kind of basic, I suppose in osteopathy, but certainly that rule of the arteries Supreme is that kind of very old fashioned term. But getting things flowing, getting things moving, and if things are contracted and constricted, then obviously that that will damage healing, and it will reduce recovery as well. So yeah, no, it works. And what about the shortest time lowest dose shortest time? I mean, that's,

Karen Neil 29:49

yeah, that we make sure you know, patients are reviewed and you know, in the UK, we have medication use reviews, which were you know, that's one of the aims of that, so that people don't get missed and end up left have Tom medication but you know, if you do come across people that have been taking things long term, you know, maybe encourage them to, you know, ask if they still need it going back

Robin Lansman 30:09

to mindfulness. What's the latest thing with pharmacists? Because I did hear something from the pharmacy organisations, there's been a change a bit more on mindfulness and actually spending a lot more time with patients, if you like in pharmacies.

Karen Neil 30:24

Yeah, not mindfulness, particularly. But there has been a consultation on the future of pharmacy because it is changing as a profession. And I think it's being recognised how much more we can do within the health service could do called to utilised. Yeah, so we've just responded to that consultation as IHP. Okay, not mindfulness yet, specifically,

Robin Lansman 30:47

no, no, but no. But you can almost tell though, when you go into a pharmacy, when you get that connection, that someone's bothering to go that little bit, not just to be extra helpful, but actually kind of understand your needs as a person. And you do see that more in some places than others. I mean, it's quite interesting how how much variety there is. But I guess, you know, even even in practice, we're going to talk a little bit about self awareness in a bit, which I think is quite quite important to bear in mind for a practitioner.

Karen Neil 31:13

Well, absolutely. Mindfulness will help pharmacists as well. And there may be some pharmacists watching.

Robin Lansman 31:18

Yeah, it could be could be Yeah. So moving on to our next slide. We're gonna just talk a little bit then directly about that combination, where clinicians can support their patients using mindfulness techniques. In the musculoskeletal, we've particularly targeted this, obviously, musculoskeletal therapy and mindfulness. How do you connect into that in terms of building that connection and mindfulness for MSK? Patients?

Karen Neil 31:46

Yeah, there's a lot of ways that mindfulness can help both the patient and the clinician. And in particular, I think, in building the relationship, because mindfulness really, you know, helps you to be

fully present in the moment with that patient. And it's going to work to its maximum effect if the patient is also being mindful that that connections there because if you, for example, if you caught up in thoughts, you know, maybe the last patient is still with you in your head, or, you know, problems that are going on that you're not thinking as clearly that mindfulness can really help you be fully present with the patients and really see a clearer picture. And also the patient can feel that presence and fully listened to, which I think is quite powerful, actually.

Robin Lansman 32:35

Totally. So I mean, it is sometimes difficult, especially having a busy day, or as you said, the previous patient has actually pulled you into we're going to talk about heart sing patients, but it's pulled you pulled your heartstrings or whatever. And actually made you really lose a little bit of track for the rest of your day. Yeah, how long does it take to recover? Because I think that's quite important. And actually, in a busy practice short lunch break, there's not much time to get over what's going on. Yeah. Okay, so maybe we are going to talk about housing patients because that was certainly I know, the expression is used quite often. I mentioned in my preamble, that sometimes your heart sing patient for one practitioner is actually a big win in one's own sphere. So how do you connect with heart sing? What's what's the whole thing patient for you?

Karen Neil 33:20

Um, I think initially, it depends what drugs are on as a pharmacist, we had HotSync drugs, but also HotSync patients. And I think it's mindfulness really gives you the tools, you know, from personal experiences as well, of being able to stay again more present with that patients and not have your buttons pressed, actually, which is it I remember when I first did an eight week course and mindfulness reading in the preamble, you will be less likely to have your buttons pressed. And I thought, Oh, great.

Robin Lansman 33:53

Yeah, no, it can be done and sometimes calling out the patient. I don't mean that in a rude way, but perhaps pointing out perhaps the way they're choosing to interact or maybe not choosing. They're not aware of it. They're not realising they're not getting the best from you.

Karen Neil 34:06

Yes. Because that can be a misunderstanding about mindfulness, that you become a doormat because you take anything. That's right. But that is a myth. It's not true, that you can still communicate, you know, if something's not okay, or this behaviour, that's not okay. But from that grounded place, you know, you can think more clearly actually, and respond more wisely. We talked about responding rather than reacting okay with mindfulness.

Robin Lansman 34:32

Yeah, well, I think also bear in mind that questions like we're doing now we're having a chat questions are showing interest and not that I actually tried to attack I know sometimes it can be it can feel under pressure perhaps from from a patient who's perhaps being very, very dramatic check came into me today had about seven or nine, nine questions right now and a piece of paper ready, and he'd been to me before. So we pulled it in during the session not to go to the very end where we had to cram in all these answers, all the answers I was trying to get boyfriends. So yeah, can be a bit of hard work something Yeah.

Karen Neil 35:02

And it's, it helps your communication as well if you know if you're wanting to challenge something and how you might want to say, Oh, I've noticed that, you know, that's really upset you, I can see that you're upset. And it's how you communicate it. And I think mindfulness helps you to communicate quite calmly. And, you know, we're more connected than we realise. And I think people can feel that. Whereas, you know, if you're feeling agitated, that spills in into your communication, and then that makes might make the client patient more likely to

Robin Lansman 35:36

react. But also, if someone's feeling very fearful, or patient is feeling fearful, or anxious, and presenting in a way that perhaps Perhaps feels quite unpleasant and sensitive to receive, you know, calling that out as well, and actually saying, you know, kind of challenging a little bit about what the behaviour is about, but actually try and find out what's behind it, I suppose. Yeah. Is that a fair thing

Karen Neil 35:55

to do? We often taught us a saying about, you know, name, the elephant in the room, you know, is really helpful. And it's how you communicate it. And, you know, with, if you speak, you know, with a kindness, which is part of the quality of mindfulness is compassionate communication, the right tone of voice, is that fair? Yeah, tone of voice. So it's helping you to stay grounded and present, right? So it then can help you communicate calmly, yes. Whereas if you're feeling some anxiety, or, you know, fear or anger, you know, someone's press your buttons that will come through in your speech, right, and then the patient might pick up on that? Well,

Robin Lansman 36:34

I have no doubt that I know what I was teaching some years ago, and taking a group of students in with a patient, the reaction different people had when you came out and said to how did that go? Well, that could have been a bit tough, or that was the hardest bit and other people would see it completely, all different people would come up with in the same room, in the same sort of clinical experience effectively had very different interpretations, diverse interpretations of the same patient experience, same interaction. So it is what you bring to the party to somebody resolutely, as well as what they're perhaps aren't thinking about, or worried about.

Karen Neil 37:06

And helpful to realise how much perceptions vary, our own and other people's.

Robin Lansman 37:11

Okay, so moving along little what we're going to do now, I understand why you haven't shown me this. And it's all kind of new for me, you're going to run a very short mindfulness exercise in three steps. Yeah. So sorry that you get on with it. Let's see what happens. Yeah,

Karen Neil 37:27

let's go into this because he doesn't know. So this is known as the the three step or three minute breathing space, which is a really helpful tool in many situations. For example, when you know, a heart thing patient is coming to see you. Or when someone has pressed you buttons afterwards, and you want to settle before the next patient. It's a really helpful tool. So the first step is a very broad, checking in with yourself and noticing what's here. And then the middle step is a more of a focused step where you find something to focus your attention on. And then the third step, we broaden back out to really helping to ground and settle to then go into the next situation.

Robin Lansman 38:15

Okay, so should we give it a go? Yeah. After we've done it, yeah. And it takes how long roughly?

Karen Neil 38:20

Well, it can be roughly three minutes, but I'll, you know, just condense. These people quite often like to do the middle bit longer, because if I need to settle, and we'll talk about that with anchoring. Yes. Okay. So you can do it at how you need to in time, but I'll just briefly take you through it. Yeah, and so people watching as well can try it if they choose to. So just inviting you to just lower your gaze, soften your gaze in front of you. Or if it feels okay, you can close your eyes. You don't have to, until step one checking in. What do you notice what's here now? Perhaps aware of contact with the chair, the floor, hands in the lap? noticing what's happening in your mind? Is it busy? Are you feeling tense or relaxed, warm, cool. And it's a kind of curious checking in with yourself what is here now. Just noticing with curiosity. And then we move to step two, which is a focused awareness. So your focus could be simply the feeling of your hands in your lap. It could be feeling the breath. So maybe feeling the movement of the chest or the belly or it could be a sound and just picking one thing to just really anchor your attention to

When you notice the mind wants to think about what we're doing or wander off, you gently return to your anchor. Feeling the hands in the lap, the movement of the breath, or a sound in the room or outside.

And then broadening to step three, we're widening back out to an awareness of the whole body sitting here breathing, grounded, feet on the floor, supported. solid, stable, mountain like strong. Noticing the impact of any of the words. Ready to get on with the rest of the day. And gently bringing your attention back and opening your eyes if you close them.

Robin Lansman 41:03

Well, I have to say, I did focus on that hard and it's a bit odd being watched by other people on camera. But nevertheless, I think, a very useful exercise of deep focus. And I think fairly quick, I wasn't timing it, obviously. But it's interesting just to be able to address those feelings and those kind of what arises as well a little bit but actually become not too focused on that. But actually move into other areas that can you can put your mind onto instead, calming I mean, to do this in the middle of me doing this, which was a little stressful doing this, thinking all the things what's going to think about but it was quite nice to have a pause. Yeah, in that. Yeah. So maybe other people. I've got a question actually just come up with this. Okay, from Chris. One of the first things we are taught at mctimoney. Cairo college is to tune in to the patient you are with and be fully in the moment with them. Absolutely. Yeah. So that's an interesting, well, that's come from a practitioner who got that in the early days of their career before you start worrying about you know, what's wrong. Yeah. It's more about tuning in and allowing yourself to calm and to connect. Yeah.

Karen Neil 42:07

Mindfulness. Yeah, that's really interesting. And it's in the Yeah, training. Yeah, no,

Robin Lansman 42:12

it's and also to say it's a skill without having to worry about all the other complicated stuff you're having to study at the time and what you've got to get covered. It's more about making the connection, as we said earlier, yeah. Yeah. Thank you very much. Right. So we will have a little look at what you mentioned that you're doing. That was about anchors. I've got another question actually

connected. Yes. Yeah. So Sarah says, Are there different types of mindfulness? Do we need to know which courses are good?

Karen Neil 42:40

Oh, that's a very good question. Do we know is this UK based? Or?

Robin Lansman 42:44

I don't know. No. But obviously, you don't have to give a brand of a course. But is there something for you think that makes just in

Karen Neil 42:50

the UK, we have an organisation that has held a register of mindfulness teachers, okay. So I think you'd really want to find out where the mindfulness teacher did the training, and that there's ongoing CPD and supervision which is required for this UK registration. There is one type of mindfulness when you you know, when it's fully defined, but you know, there is good and bad practice out there is there is for any profession,

Robin Lansman 43:20

is it you want to mention the organisation? can do

Karen Neil 43:23

it's called Bamba.

Robin Lansman 43:25

Ba MBA? Yes. Okay. Yes. And,

Karen Neil 43:27

you know, anyone can access that website, and it tells you a lot more in the school practice guidelines, which is applicable to anyone really,

Robin Lansman 43:34

yeah, that sounds good. And also, I think, what we found that the House of Commons event was about the mindfulness initiative, as an organisation, which I have only just learned about, okay. And obviously, they're looking at all aspects of how mindfulness can relate into health in general, not just MSK. I mean, it's

Karen Neil 43:52

time for the all party parliamentary group focuses on us in the UK. And they look actually across all policy areas. So Well, four main areas that and so they look at the evidence and make recommendations. So workplace schools, health and criminal justice systems are quite broad.

Robin Lansman 44:10

Yeah. But applying and getting really sort of starting to get the concept put into lots of different sectors.

Karen Neil 44:16

Yeah. And then they have leads for each one. So you know, I worked with the health policy lead on the health promotion and mindfulness briefing.

Robin Lansman 44:23

Okay, and got a question from James. Do you ever use music and I know you're a musician? So that might be something to mention. But do you ever use music when you're doing mindfulness practising mindfulness?

Karen Neil 44:33

I've been asked this before I haven't done but it's it's some people do. And it's something that I probably will do in the future, but I haven't so far.

Robin Lansman 44:42

Mind you. Chats we've had Yeah, about your playing instrument. I mean, there's a massive benefit to your mental health and well being just by being in

Karen Neil 44:51

Iowa. I certainly use it in my own music. You know, when I had performance anxiety, until I started doing mindfulness and If I wasn't able to play my bass clarinet, because you can't hide on a bass clarinet,

Robin Lansman 45:04

he will now an APM. Never, ever,

Karen Neil 45:07

ever have been sitting here without this practice?

Robin Lansman 45:10

Well, I'm glad you've got a question from Simon. This technique reminds me of what I was taught to do when I was suffering from panic attacks is that

Karen Neil 45:20

it's really helpful in anxiety, because that's part of my personal experience and come into mindfulness is anxiety. Right? And, you know, if you'd have told me 20 years ago, I just been sitting here doing this, I would never have believed you.

Robin Lansman 45:31

Yeah. It's obviously really helped some good.

Karen Neil 45:35

And there is evidence there for anxiety as well.

Robin Lansman 45:38

Good. No. And in fact, I was very impressed that the mindfulness initiative, I mean, the level of background study and evidence base is getting stronger and stronger. In fact, you pulled together quite a bit for the paper that was published. And that was thrown through the trustees of the Board of Health Promotion, also who have ratified all all the was in place. interesting discussion. It did, it did. Yeah.

Karen Neil 46:05

Because they it's all evidence based. And obviously, it has to be recommended through into the all party parliamentary group and advising policy, which we did make recommendations for policy, at the end of the paper based on the evidence. Yeah, it's strong for pain. Mindfulness for pain, very effective, and mental health.

Robin Lansman 46:25

Okay, we've got another question. Yeah. From Keith. I think it is. A really good free mindfulness courses on the app calm, how to meditate in 31 days, how would you rate it? You know,

Karen Neil 46:38

I haven't used calm, but I know a lot of people find it very helpful. Okay. Yeah.

Robin Lansman 46:42

It's a good foundation, campus headspace as well. Headspace. Okay. Yeah. Because people will have a look at those. I think we've talked it, though, at the institute quite a bit about issue of health promotion, quite a lot about apps and how they can be a little bit misleading and a little bit need to be used with circumspection, because there's quite a lot of

Karen Neil 47:04

where the evidence is up to apps as well. I mean, that, you know, that strongly me as a pharmacist that everything we do is evidence based?

Robin Lansman 47:12

Yeah, well, I think the thing is that things are starting to move at a pace and something that was seen as very alternative, or very, very sort of left field, or whatever you call it is now becoming clearly a mainstream way of thinking in health. I know talking to people at all across health sectors, this way of even staff, we've mentioned people working collaboratively, and so on at the beginning, but that benefit of that sort of approach of mindful connection. And that kindness, you mentioned kindness.

Karen Neil 47:36

Yeah. Yeah, I think where mindfulness isn't mindfulness is where there isn't the heart connection, right. And if it's simply talked about, if it becomes about focus, you know, if people are trying to improve efficiency, which it does, but to get the full benefit, and for it to be truly mindful, that has to be the heart connection.

Robin Lansman 47:57

And we are coming on to that topic. So awareness of self that's starting to move in that sort of frame.

Karen Neil 48:03

Yes. And really helpful to connect, check in with your heart in just noticing, you know, am I open hearted today? Am I close? My heart is it's closed? You know, that really impacts the connection.

Robin Lansman 48:19

The only trouble is, if you're going into work, and you've got a clinic day, yes. And you're not in the mood. Your heart isn't in it. What are you going to do about it? It's quite a toughy.

Karen Neil 48:28

Yeah, there are practices that can really help you settle and a really helpful one for that. And really building the heart connection is loving kindness practice, which is often taught on mindfulness courses

Robin Lansman 48:38
is getting up earlier.

Karen Neil 48:41
Yes, but people tell me often is that the benefits for spilling over into the rest of the day and reducing stress. And you know, the joy that you get when you really connect with people, that that extra

Robin Lansman 48:56
that feeds it a little bit as well. Yeah,

Karen Neil 48:59
you know, so what you're in the 20 minutes or whatever, is well worth it because of the impact on the rest of the day. Right. But first thing in the morning, isn't it doesn't work for everybody. Okay. I'm not a first thing in the morning practitioner myself. So yeah, it's it's, I think it's helpful to tailor it to the individual and you know, what's helpful for you?

Robin Lansman 49:21
We're doing it. It's really weird, because I used two years ago, I don't do Saturdays anymore. But yeah, I'll be honest, Saturday, people are in a different place. Yeah. In terms of their mood and attitude, because they're on the weekend. And I guess I used to think, Gosh, that's a bit tough on me. But actually, because they were just a bit lighter about everything. We're in such a rush. They used to come into the practice, yes, in pain and needing help. But they, they weren't in the same mind space as they were rushing around during the week. So there's actually many reflecting on that now as we've said it, but it's interesting. Sometimes that choice when they don't think would be the best day for you to work. But actually, sometimes that gets you a different personal, different style of person. Yeah,

Karen Neil 49:56
that's interesting. That's exactly what mindfulness is. helps you to notice these things and see more clearly.

Robin Lansman 50:03
Yeah, no helps all the time. Yeah. Okay, moving along, we've got connecting and active listening, which we're trying to do here as we're chatting. Yeah. So what's that all about? For practitioners?

Karen Neil 50:16
Yeah. So mindfulness, it really helps with the human connection of being fully present with somebody, you know. So we talked before about if you become caught up in thought, then you're not fully with somebody, you know, you would someone else you might be with the previous patient or the next patient in your head. And I think it really benefits that relationship that, you know, people say, you know, the they really feel heard and how powerful that is to really feel heard.

Robin Lansman 50:45

But you can also get the idea when they're answering you with a case history taking that they're just, you're not making the connection enough. And then you can turn that sometimes just to become a little bit of a different angle, you're taking in a different focus, and then suddenly, things start to connect again.

Karen Neil 51:03

And if you notice that and you really stay grounded, and stay connected, and just trust your, you know, whatever your profession is, and then tools that you've got, because, you know, they may need a little bit of time to learn to come to trust you. So it's just giving it time and trusting actually, that that presence and really fully listening will work and have a

Robin Lansman 51:27

deep connection. Yeah. So got a question from Kate, do you find mindfulness works with groups as well as one to one?

Karen Neil 51:34

What a great question. Thank you. Yes, thank you. It can be more powerful for groups, because people really learn from each other. And you get a really powerful sense of a shared humanity. And you know, that everyone's suffering just with different stories, and that people go away, oh, it's not just me, the support of the group well managed can be very, very powerful. I think the difference with one to one, I think, if somebody is quite complex in their needs, and difficulty, one to one can be helpful, because you can tailor it to their needs,

Robin Lansman 52:08

but they're also gonna have that kindness to allow you to share your input with a bigger group. They've got to be willing.

Karen Neil 52:14

Yeah, I mean, it's a it's a whole hour on its own talking about the group and managing groups and creating a safe space. Yeah, creating that safe space and containers, one word that we use, but I think I do recommend, ideally, learn mindfulness in a group, unless you have got complex needs, or, you know, you're anxious in a group and it's not for you,

Robin Lansman 52:35

you could mix and match perhaps. Yeah, I don't know, depending on where you're at.

Karen Neil 52:40

You know, but some people do it. I mean, generally, there are eight week courses we offer. And people do it, you know, more than once, right? So you could start doing it one to one, which I did, actually, I lent it myself in a one to one situation.

Robin Lansman 52:54

Okay, I've got a couple of new questions coming in. So we've got one from Simon again, isn't there a danger of adding mindfulness to what could be a tick box of things to do in a day? So the room ready, check and the patient records ready? And then to do three minutes of mindfulness check? Yeah. Is that Is that another great question? Yeah. Practicality really? Yeah.

Karen Neil 53:15

Well, I hear is an utterly for myself, when I think back to first learning is that it can feel like something on the to do list of work and effort when you first start. Yeah. But as you start to really experience the benefits, it becomes something that you miss, if you don't do it

Robin Lansman 53:32

would you know it's funny, you should say it's interesting, these things are coming up for me, because I used to have a receptionist in who always wanted to stay through lunch at her desk. And then she wanted to chat. And I needed that downtime to kind of reconnect with myself and let things come not to do work. But just to literally allow things to sort of ebb away or have become more mindful, perhaps as well without perhaps knowingly knowing that. So those things, you know, you need to make that space somehow.

Karen Neil 53:57

So you were being mindful.

Robin Lansman 53:58

I mean, this is the thing. She wasn't too happy when I said, Look, do you mind because I just needed that self awareness and said, Yeah, well, I guess I could have gone out. Yeah, well, that's a good question. So I've got a couple more questions. I'm a qualified This is Sarah, I'm a qualified person and SI, P. Sorry, CBT. Would you recommend doing both? Do they go together? Or conflicting?

Karen Neil 54:24

I think they go together very well. Because, you know, one of the eight week courses, it's very similar to mindfulness based stress reduction is mindfulness based cognitive therapy. So it does because the, the researchers that develop that were based in Oxford, and they were psychologists, and really interested in how mindfulness could help mental health and depression, which so the strong evidence pot, you know, as a result of that team, and they go together incredibly well, I'd say yeah.

Robin Lansman 54:51

Okay. And we've got another question. Thank you, sir. For that one. Lesley. How do you manage difficult situations? Not Lesley feel not Leslie and as he says, How do you make these difficult situations, patients bring up at the end of a session. I mentioned actually my patient getting the stuff that they brought up, maybe not difficult, but questions earlier in the session. That's my technique. But my emotional patients seem to get me in those last few minutes. That's kind of what I'm saying. But yeah, what how do we cover that? How do we improve on that? So by that conundrum, yeah, last minute,

Karen Neil 55:22

using the practice to help you stay grounded and presence. And again, you know, use the word powerful again, you know, people come back to me and report how powerful it is. Because if you start to feel stress, which can transfer from the patient to you, then that does actually impair cognitive executive functioning, because it becomes harder to think clearly. So if you can stay grounded and stay present, keep your sympathetic nervous system actually

Robin Lansman 55:52

starting to feel though you're being triggered, I think you'd use the word Yeah. And that might be happening with that person who's Yeah, at the very end of the session, even more emotional, and

perhaps even trying to extend that I say, extend the session to overstay their session length, which then becomes hard to handle. Yeah, and stressful.

Karen Neil 56:09

So that's a good moment, you can bring in a three step breathing space, right? have just done on the spot that you can do it anywhere. And just literally feel your feet on the floor. Just connect briefly with your anchor very quick. Just ground yourself settle, notice what works best for you in terms of for some people, its feet on the floor, some people it's the hands, some people at sound, just for the briefest, just bringing you back can just help you respond

Robin Lansman 56:36

right away, perhaps of getting that patient building the code for collaboration, starting off the process of talking about the tough stuff earlier, because you know, it's coming where you can feel it, maybe, or maybe not. Yeah, I guess

Karen Neil 56:46

that's the I would think you might know more than me on this. But it's just

Robin Lansman 56:51

been an osteopath for a long time exactly. Start to detect something might end up getting into a bit of a minefield or difficult to handle it might be start talking about it as early as possible in the session. So you've got the whole session while you're treating or while you're examining, to chat through.

Karen Neil 57:06

Do you have questions ready that, you know, that might open them into bringing in the difficulty? Or well, I

Robin Lansman 57:13

think sometimes they subtly give it away? Yeah. Or you can tell even the speed they're talking out? Yeah, you know, if they rushed, or they're trying to get it all out on in their anxiety. And I said, we got to slow this down. And I do try. I mean, maybe there are some techniques I could learn to improve that. But I realised that I'm not going to be able to process what they're telling me quick enough, in the way it's coming out. And it might be because of the frustration and maybe put a few words together to say, are you feeling perhaps a little stressed at the moment? And they'll tell you the whole thing will this morning was a nightmare because it kind of helps just to let them calm sometimes. But

Karen Neil 57:47

well, it can happen without saying anything in terms of if you practice mindfulness and develop your practice. And this is a really important part of it. Yeah. But you know, not wait for that moment. But it strengthens and actually, you know, the neuroscience is fascinating, showing changes in the brain through neuroplasticity, that it becomes a stronger skill, that you're better able to transfer your calm presence and calm the patient without saying anything. Right.

Robin Lansman 58:15

Okay. Well, that's something I need to work on. Thank you. So that was a very helpful question. Thank you, Lizzie. I think that was so got Perry. I wear jeans in clinic on Saturdays. It just gives that

slightly more relaxed weekend feel. And sometimes patients are more open as a result. I like them. Yeah, I mean, I think keeping that clinical separate that that the difficulty is being a clinician and keeping a connection. And being separate as a professional. There's a there's a sort of difficulty, a boundary line sometimes. Yeah,

Karen Neil 58:44

yeah. And thinking about what you know, there's mindfulness there as well in the noticing, you know, that's what it comes down to. It's a human trait. It's not something you know, and it's we don't always call it mindfulness that, you know, he's he's noticing

Robin Lansman 58:58

something that the genius. Yeah, no, it sounds a good suggestion. And Bridget asks, I'm a qualified, I'm qualified in solution focused hypnotherapy. And there are huge beneficial overlaps, especially using the miracle question in various disguises. What's been good? Interesting. Yeah. Do you want to expand on that? Because I'm not sure.

Karen Neil 59:19

Exactly angles? Well, that puts me in mind of, you know, quite often in the practice will introduce a question. And I think important key questions is what is here so people notice, and what does this need? Two questions we use a lot in mindfulness. But I think in I mean, negativity bias has come up in the past that you know, we are wired towards focusing on the on the negative of negative

Robin Lansman 59:47

gratitude, or am I missing something is that not? Well, yeah, gratitude is one of the

Karen Neil 59:51

practices that we can use to help shift the negativity bias and actually build wellbeing and increase happiness,

Robin Lansman 59:59

but choose Doing the words very carefully. not to offend.

Karen Neil 1:00:06

Words are interesting. Like when I was guiding, I invited people to notice the impact of the words. So it's helpful for people to notice which words are helpful for them and what they connect with. Okay. But I think that that question is, you know, a really helpful, broad general question that's going to shift people's focus from the negative to the golden their life, right, which is also

Robin Lansman 1:00:29

even if perhaps at that moment, they're a little bit on a low ebb. Yeah. Because

Karen Neil 1:00:33

that can bring the focus very narrow. And what mindfulness practice helps is to broaden that sight. And I find this fascinating, and I've encountered this on a course, recently, excuse me, that it always felt like those difficult things were mutually exclusive. It's a good things. But if you broaden your awareness, that you can see the good things happening in life at the same time as the difficulties, the difficulties, yeah, I think because of this negativity bias, we need to work out being able to

broaden around and actually direct our attention to the good things, you know, because difficulty can be so kind of sticky for our attention.

Robin Lansman 1:01:14

Okay, let's just move on a little bit, because we're just, we're just on to our next slide, hopefully. And we're now looking at forming healthy connections. We've got another question. But let's just quickly cover this forming healthy connection. So obviously, here, we've got our little picture of that surfboard picture, I remember my swimming days when letting go was so hard. Tell me a little bit about that in relation to mindfulness, or this

Karen Neil 1:01:43

is again, awareness of the relationship with the patients and noticing, you know, perhaps of a patient is becoming very dependence, or having, you know, a big impact on you. So thinking about boundaries. And I think, again, that mindfulness helps you to really respond and be quite quite firm.

Robin Lansman 1:02:07

Maintaining the boundary, yes, but remain with an open heart and open heart and kindness. Yeah. And sometimes that is a difficulty for people, because it almost comes across as a bit harsh to be have a boundary. But

Karen Neil 1:02:18

yeah, so I think, you know, bringing in that that kindness element can be really helpful in maybe saying difficult things. And that, you know, kind of walking alongside, you know, as a clinician, and empowering the patient and their word empower. care, health promotion. Yeah,

Robin Lansman 1:02:37

right. Yeah. And obviously, the NHS and all sorts of people need a lot more self care, to look over themselves. Got a quick question from ash. Before going to sleep, I encourage myself to bring to mind five things to be grateful of in that day. So that's, that's a good, lovely thing to do. Isn't it very helpful,

Karen Neil 1:02:53

neuroscience backed tool for wellbeing as regular gratitude.

Robin Lansman 1:03:00

And also just before you go to sleep, and that's really good, because you're going to sleep better if you think of five good things.

Karen Neil 1:03:04

Yeah, does a quick one I can share that I invite people to do is to note down their eggs. And the first one is something you've enjoyed in the day, something that you're grateful for something that's made you giggle because we need to laugh. And the S is something that's given you a sense of satisfaction or mastery, which is really helpful for procrastination.

Robin Lansman 1:03:28

To achieve, you feel like you've achieved something, yeah.

Karen Neil 1:03:30

But it's really, you know, noticing that and writing it down. So it really connects you with the feeling afterwards. You know, be it you've put off doing your tax return and

Robin Lansman 1:03:40

well, your exercises for your remedial exercise. Yeah, I think that's something Yeah, it's quite hard to motivate people. And that's sometimes finding a motivator.

Karen Neil 1:03:48

Okay, so it'd be really be connecting them with the benefit and moving their attention towards the benefits. Yeah. So it's like with the mindfulness, you know, when you start to experience the benefits, you want to do it

Robin Lansman 1:04:00

more than you wanted it more. Yeah. So you need to get that feeling coming fairly quickly. Yeah,

Karen Neil 1:04:04

get that focus away from the pain or difficulty to the benefit afterwards.

Robin Lansman 1:04:08

Yeah. Okay. And Simon's asked, as to dealing with the tough stuff coming. I always ask patients, if there's anything else that's on their mind, other than what they are primarily visiting before. That's a good,

Karen Neil 1:04:19

yeah. And it's collecting these questions that are helpful.

Robin Lansman 1:04:22

Yeah, because it's a little bit of a little bit of a, again, coming from slightly left field, the unexpected. Yeah. And it puts the patient in a completely different frame of mind about the obvious. And they share something really useful quite often I find. So that's a nice technique. It's almost like the little techniques to learn a list of

Karen Neil 1:04:39

Yeah, the questions that are helpful. Yeah, extract what you want it to from the patient.

Robin Lansman 1:04:43

Yeah, unexpected as well, perhaps. Yeah.

Karen Neil 1:04:47

In mindfulness, we often say, I've noticed that. So you know, if it's someone you know, quite well, so I'd say I've noticed you talking quite fast, right? Yes, yes, yes, yes. No. And it's very

Robin Lansman 1:05:01

slow down. Yeah, yeah. Yes, yes, yes. Yes. Yes. That's a more positive way of handling it. Yeah. Yeah. Thank you. Yeah, that's a good I'm very mind a lot of. So just a couple of things on Integrity, Authenticity, professionalism. I mean, I kind of brought this up as a topic, mostly because sometimes when you find it really tough in yourself, or perhaps very challenging with the patient, is to kind of go into your professional mindset, not to be distant, but just to be very detailed in asking certain types

of questions that are very much what you perhaps think the patient would probably want you to integrate with, which is probably about their pain and why they're suffering. Because that, that means you've understood them.

Karen Neil 1:05:48

So that's interesting. I was gonna say, so what do you understand as a professional mindset, but I'm guessing that it becomes quite cognitive, in, you know, going through the condition and the techniques, and,

Robin Lansman 1:06:03

well, a little bit of that, but it's also kind of letting go on the hoof because that isn't taking a pause to be mindful, that is kind of being in the in the moment, being mindful, whilst you're dealing with other stuff that is medically important that you want to kind of discover from the patient.

Karen Neil 1:06:18

It sounds to me that it's going more head based, so you could lose a bit of your presence and connection. There is the risk and intuition. Actually, I think the intuitive and insights tend to come up when you when you're fully present, rather than just caught up in thinking because it uses different parts of the brain. Other

Robin Lansman 1:06:39

things if you are struggling, yeah, you got to do something. Three step breathing, three step breathing feet on the floor, settle, okay. Okay, forever. And regularly, sometimes, every day, what, three times a day. Okay, three times? Well, that's

Karen Neil 1:06:55

what we recommend on the course for that one. But okay, you know, you make it your own.

Robin Lansman 1:07:00

By doing it more regularly, then you're sort of stopping these kinds of occasions happening. Yeah, retreating into professionalism. As in, you know, looking,

Karen Neil 1:07:10

I mean, you still professional when you, you know, fully pay. And still, I think you have more control over the thinking. And I just think it's broader. Because, yeah, not time to go into it all. But default mode network is where a lot of right around the midline, and the brain is where a lot of that kind of thinking happens. And when you're fully present and aware of the whole body, using more of your brain, actually, it's really fascinating.

Robin Lansman 1:07:39

Wow, does that work for music? Yes. Because that's what I sort of thought that when you say,

Karen Neil 1:07:44

I mean, there's books about mindfulness and creativity, you know, when you're in that space, it does open out. Creativity, yeah, big picture thinking. Because just being stuck in your head is can get quite narrow.

Robin Lansman 1:08:00

Very much so. So kind of building that integrity, and authenticity. And when I put that in, because I suppose coming across as genuine and not false, that you having to try and be genuine, but you are being genuine really are and connecting. So that kind of connects me. I think what you were saying?

Karen Neil 1:08:17

Yeah, and I think, you know, the self awareness and connection with the motivation for what you do as well. I think that brings authenticity into all relationships, actually, that you are there as you

Robin Lansman 1:08:32

of course, everything. Yeah. Personal relationships, professional relationships, colleagues ever. Yeah, that's interesting. aged children. Yes. Yes. So we've got a couple more things to discuss a little bit about clarity and intention setting. What's that all about? Well, I suppose clarity

Karen Neil 1:08:50

is kind of a, you know, almost a summary that that mindfulness can help you see more clearly, and see situations more clearly. And that opens up choice, the word choice is used a lot in mindfulness, and intention setting. For me, that's really about being in touch with the kind of in a compass and direction of travel, you know, so if you're going out for the day, you would look at the map and not just get in the car, generally, you know, so have some plan as to where you want to go. So this is almost like an internal plan. You know, setting the intention. I want to do the three step breathing space a couple of times a day. And so it just really sets that direction of travel, if you like, and repeating, perhaps on a daily basis, that intention can help sustain the change.

Robin Lansman 1:09:42

Right. So it's kind of making a plan and sticking with it. Yeah. Is that what it is? Yeah.

Karen Neil 1:09:48

And I think it's quite helpful to start small and you know, one thing at a time, say, you know, three step breathing space for three months, and then something else, you know, to make it achievable.

Robin Lansman 1:09:58

It's funny with patients You know, they come in and for example, they they want clarity, they want explanation, but sometimes, you know, they want seven different exercises and say, Well, look, let's just do these couple. Yeah, let's get them right, let's see some improvement. And then we can add other things or take things in and out, rather than give you everything at once today. I don't know is that do you

Karen Neil 1:10:16

find that it's easier than for people to? Well, it can make them

Robin Lansman 1:10:20

frustration a bit like going back to your false movie shelf? Probably, you know, taking more than tablets is not really gonna make you better, quicker. That's the

Karen Neil 1:10:29

perception they've come with. Yeah, but you can help set you know, invite them to it. We'll try it this way. And see if this helps, rather than giving yourself too much, you may get benefit from these three.

Robin Lansman 1:10:39

Yeah. And also, you do also find that people. Even though you've explained things, well think that pulling harder doing them more often the exercises must be better. Because if this is the cure, this is the answer, apparently, as they want to think it is, then let me do more of it. You know, it's an actually they end up hurting themselves more. So it's that oldness, even though you think you've been clear, the intention, perhaps has not been fully understands where mindfulness

Karen Neil 1:11:03

on their part can be helpful, right? It can really help you be aware of your limits, right? And really exploring closely. So that you don't get I totally changed my routine at the gym. When I've done a mindfulness course, I push myself less, because I was more tuned in. Right, and it can go the other way as well. You know, if you tend towards the lazy side and give up.

Robin Lansman 1:11:25

You're gonna have a so a conversation going on inside? Yeah, do some sort of dialogue. Let's call it that.

Karen Neil 1:11:34

Yeah, not always, but sometimes. Yeah. And it's very much kind of cause and effect. If, if I do this, this happens if I do that, and that happens. So with that noticing and awareness,

Robin Lansman 1:11:43

well, that thing you know, we're going to the gym today don't feel like it. And the less you feel like the bigger the benefit, we can actually decide to go.

Karen Neil 1:11:50

This is a procrastination thing again. Yeah, really, you know, noticing the benefit afterwards

Robin Lansman 1:11:57

will telling you benefit that you will have the benefit and keep persuading yourself to make sure you do it. Yeah, that's that's so yes.

Karen Neil 1:12:02

It's helpful to be quite playful with all of this as well. Yeah. You know, and I think humour and laughing hence the giggle annex. Yeah, of, you know, come on. Yeah. And I know that you're gonna benefit from this and stop me and stop being miserable about it and just go for.

Robin Lansman 1:12:19

Somebody mentioned here, I'm not quite sure. For any gamers out there. It says here. There's a brilliant game that teaches mindfulness and develops mindfulness practices with heart through a game in which you grow a world through meditation. It might be useful for younger gaming clients. It was certainly helped some young gamers who, especially during COVID, developed social anxiety. And it's called plain PL a y n e, and is downloadable through the Steam platform. It's a not for profit game. And the developers have now released another game, which helps people understand sufferers of outside was called Mayer's world. My world. Yeah. So there you go. Yeah, no, I mean, I think perhaps sometimes the indirect approach to learning about these things is quite useful.

Karen Neil 1:13:06

And it's how you reach younger people as well, because mindfulness isn't very trendy. And I think sometimes the word can get in the way, actually, sexually with younger people. So it's finding a way to make it accessible, appealing

Robin Lansman 1:13:17

and get in early get in. Yeah, absolutely. The number of people

Karen Neil 1:13:21

that have said to me, I wish I'd learned this when I was younger, and myself included.

Robin Lansman 1:13:25

Okay. So Well, thank you for that comment. So just rounding up, actually, at this end, timing and hope about looking at when are you really ready for this interaction? And how real are you going to be as a practitioner, I think that's where we're headed with this in terms of exploring and explaining what's going on. For real,

Karen Neil 1:13:44

we're talking about patients that may be not engaging or you know, that are a bit challenging in that way and open the importance of open leaving the door open and acknowledging this might not be the right time, but keeping the door open for them to come back.

Robin Lansman 1:13:58

And be honest about that. Yeah,

Karen Neil 1:14:01

yeah. Yeah. Rather than you know, just thinking. Oh, that's it, I can't help them. It can be helpful to open the door because it needs to be the right time for them to engage.

Robin Lansman 1:14:10

They may well come back if you're honest and open. Yeah, exactly. Three months. If you need me. Yeah. I mean, my mother's example of not seeing the Osteopath that someone was persuading or persuading her to go to just wasn't working till she was ready. Yeah. So there is that moment when it works, and it's not going to happen before that

Karen Neil 1:14:25

No, needs to be the right time. And we talked about I think, how to communicate, you know, difficult information, you know, if you know, somebody you can't do a lot for and that you know, that you just want to help them live the best quality of life that they can, but being able to give that not give false hope. And say, you know, yeah, you have got this problem with your spine, for example. But let's see how we can get your quality of life the best we can.

Robin Lansman 1:14:55

Yeah. Karen, listen, it's been really really, really interesting exploring stuff. And actually we've explored stuff as we've been chatting that we hadn't talked about before. Yeah. And even when we're preparing for this, so So things go in different directions when you're here and doing it in front of people. So I hope people have found it really interesting. We're nearly out of time. I understand. I'm being signalled. So I just want to say, I mean, Steven did warn me that it goes fast. And it does.

Yeah, it has done. But it's been really great pleasure to chat and learn more about mindfulness and MSK. So, so I hope that's been useful to the audience. I really do. And I hope it's reassuring that mindfulness is being taken seriously by policymakers, you know, it's actually going in new directions that it never did before. So now, I'm not allowed to tell you what's coming up over the next few weeks. But it has been a pleasure being here, I must say, and thank you for the opportunity. So let me thank Karen again for sharing her knowledge and thanks to APM team, who in the background have been doing wonderful work to keep the show on the road. And I'll say good night.

DRAFT TRANSCRIPT